



**GENSER DUBOW
GENSER & CONA LLP**
— ELDER LAW COUNSELORS —
225 BROADHOLLOW ROAD, SUITE 200, MELVILLE, NY 11747
631.390.5000 ♦ WWW.GENSERLAW.COM

**GDGC's Elder Care Employee Benefit Program
TAWC: Tools and Advice for Working Caregivers
Human Resources Survey**

Name _____ E-Mail _____ Phone _____

1. What is your job title/position at your organization? _____

2. How long have you been employed in your current position? _____

3. The organization is: (circle one) a. Private Company b. Public Company c. Non-Profit

4. How many people are employed in your organization currently? _____

5. In the past year how many employees have come to you with an issue involving an aging or disabled loved one? _____

6. Of those employees, please circle the issue(s) involved. (You may circle more than one.)

a. Aging (or disabled) loved one in a hospital

b. Aging loved one in a nursing home

c. Aging loved one in need of home health care

d. Emergency elder caregiving responsibilities (ex. Home health aide late or absent, emergency doctor appointment, transportation needs, etc.)

e. Coordination of elder care services (hiring/coordinating home health aides, elder law, financial services, geriatric care management, etc)

f. Housing issues (home maintenance, moving, transition to assisted living, etc.)

g. Other _____

Over →

7. How has caring for an elderly or disabled loved one impacted your employees the most? (Circle all that apply.)
- a. Lateness
 - b. Absenteeism
 - c. Presenteeism (physically at work but mind on other things)
 - d. Extensive personal telephone calls
 - e. Decreased productivity
 - f. Use of unpaid time off
 - g. Overuse/abuse of vacation time
 - h. Schedule/work hours adjustments
 - i. Termination and turnover
 - j. Other _____
8. Please describe your assessment of employees' comfort level in discussing these issues with you?
- a. Very comfortable
 - b. Somewhat comfortable
 - c. Uncomfortable
 - d. Very Uncomfortable
 - e. Other _____
9. Based on your experience, please circle any of the following items that have affected employees due to elder caregiving responsibilities:
- | | | |
|---------------------------------------------------------|-----|----|
| a. Working reduced hours | Yes | No |
| b. Quitting the job | Yes | No |
| c. Choosing a position that provides more flexibility | Yes | No |
| d. Refusing to relocate | Yes | No |
| e. Refusing or deciding not to work towards a promotion | Yes | No |
| f. Refusing or limiting required travel | Yes | No |
| g. Participating in a support group | Yes | No |
| h. Other _____ | | |

It's time to TAWC about it!