

COVID-19 Poll

QUESTIONS

Please answer the following questions as best you can so we can learn more about the impacts of COVID-19 (coronavirus) on your business and provide support. Your responses will be anonymous unless you choose to provide your name and contact information at the end of the poll. Results will be reported in an aggregated, summarized form with no individual information shared.

Question Title

1. How are your business's operations being impacted by COVID-19?
(check all that apply)

- We have completely closed our physical place of business
- We have adjusted our hours of operation
- Our supply chain is interrupted
- We are experiencing significant increases in consumer demand for certain items
- We are experiencing decreases in sales (or donations if you are a non-profit)
- Orders are being cancelled
- The market is causing us to draw on our line of credit
- We are starting to restrict spending because of the uncertainty
- Other (please specify):

Question Title

2. At this point in time, what level of impact do you expect this to have on your business? (choose one)

- High (this may put us out of business)
- Medium (this is going to significantly impact our financials)
- Low (this may impact us financially but we are confident we can weather the storm)
- None

Additional comments:



Question Title

3. As concerns grow over the spread of COVID-19, what is your business doing to address employee and customer concerns and mitigate risk? (check all that apply)

- Nothing – trying to keep business as usual right now
- Routinely sharing updates with employees
- Routinely sharing updates with our customers/the public
- Providing hand sanitizer for staff use
- Providing hand sanitizer for customer use
- Increasing cleaning of frequently used spaces and objects
- Restricting employee international travel
- Restricting employee domestic travel
- Restricting in-person gatherings (meetings, events, etc.) over a certain number
- Restricting all in-person gatherings regardless of size
- Encouraging employees to work from home depending on their position
- Requiring employees to work from home depending on their position
- Other (please share anything else you are doing and/or clarify any responses):



Question Title

4. How are you handling HR & Payroll issues as they relate to COVID-19? (check all that apply)

- Informing employees how insurance covers the cost of being tested
- Informing employees how to use Telemedicine and encouraging them to use it if symptoms arise

- Assisting employees that are ill for long periods of time with filing a claim if applicable (based on short term disability policies)
- Allowing employees to use all available sick and vacation paid time off if they are ill or quarantined
- Allowing usage of other types of paid time off such as bereavement, floating holiday, volunteer, etc.
- Giving employees an "advance" on wages or paid time off
- Sending non-exempt/hourly employees home without pay if they are ill and/or as adjustments to operations are made
- Closing the business for a period of time and not paying any employees during closure
- Continuing to pay wages to employees that are off work for quarantine or illness
- Other (please share anything else you are doing and/or clarify any responses):

DEMOGRAPHICS

Please share the following about your business so we can better understand needs by segment.

Question Title

6. Which of the following best describes the principal industry of your organization?

Question Title

7. What type of business are you?

- Private
- Public

Non-profit

Question Title

8. What size is your business?

Small (1-50 full-time employees)

Medium (51-500 full-time employees)

Large (over 500 full-time employees)

Question Title

9. Optional:

Name

Company

Email Address

Phone Number

Thank you for taking the time to complete this poll!