



Australian Government

Comcare

EXAMPLE WORKPLACE BULLYING SURVEY: ADMINISTRATION INSTRUCTIONS

The Comcare Bullying Survey can be used as an indicator of employee awareness across six themes considered instrumental for a supportive workplace culture:

- > My workplace
- > Consultation
- > Policy and procedures
- > Training
- > Reporting
- > Injury management.

The survey assists as a pre-measure or baseline when conducting assurance auditing and as a post-measure to gauge the effectiveness of any awareness raising activities applied following audit recommendations. The survey takes less than 10 minutes to complete.

The administration of the survey is quite simple.

STEP 1: DETERMINE THE SAMPLING FRAME

Randomly select a sample of employees across levels in your organisation. A minimum of 100 employees is suggested, although you may choose to survey the entire workforce.

STEP 2: INVITE SURVEY PARTICIPATION

Establish the sample from Step 1 as an address list and send the invitation as an email to undisclosed recipients (bcc) to ensure anonymity and participation.

Use the following invitation as a guide.

Dear Colleague,

At [\[insert your organization here\]](#) our focus is about maintaining a safe and healthy workplace for all employees. Paying attention to employee wellbeing helps us individually as well as strengthening our organisation as a whole.

You have been randomly selected to participate in a survey designed to measure how effective we are in dealing with matters relating to workplace bullying.

Understanding your perception of our commitment and the supporting structures in place for the prevention of bullying at work is a critical part of this process. Importantly, the information you provide will help us identify any areas that we may need to improve on.

Please access the workplace bullying survey at:

[\[insert web address here\]](#)

The survey will take less than 10 minutes of your time. Your participation is voluntary and your responses will remain strictly confidential.

The survey will close at [\[insert time, day and date here\]](#). If you have any questions about the survey please contact [\[insert contact details here\]](#).

Thank you in anticipation for providing your feedback. Please watch for the survey results in [\[insert location here\]](#).

[\[signature block\]](#)

The following attachment can be used as a guide for the development of the internal survey instrument:

Tip: A copy of the survey will also be useful for the nominated point of contact to answer any queries relating to the survey questions that may arise.



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WORKPLACE BULLYING SURVEY

ABOUT YOU

1. What state or territory do you work in?

- New South Wales
- Victoria
- Queensland
- South Australia
- Western Australia
- Tasmania
- Northern Territory
- Australian Capital Territory

2. What group or division of your organisation do you work in?

3. What branch (if applicable) of your organisation do you work in?

4. What is your gender?

- Male
- Female
- Not disclosed

5. What year were you born?

6. Do you perform any of the following roles?

- Health and Safety Representative (HSR)
- Harassment or Employee Contact Officer (HCO)
- Both
- Neither

MY WORKPLACE

7. Please indicate how strongly you agree or disagree with the following statements about your workplace in the list below.

	Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree
I know what managers responsibilities Aare for the prevention of workplace bullying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workers understand that bullying is not tolerated in the workplace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Instances of alleged bullying are taken seriously by management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workers feel confident to speak up about inappropriate behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Managers lead by example to prevent workplace bullying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate resources are allocated to prevent workplace bullying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of bullying in my workplace is a high priority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CONSULTATIVE ARRANGEMENTS

The next few statements are about consultative arrangements in your workplace.

8. Please indicate how strongly you agree or disagree with each statement.

	Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree
Workers are involved in developing actions on bullying prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workers can have a say in the development of policies and procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workers' views are valued	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workers' views are taken into account	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

POLICY AND PROCEDURES

The next few questions are about your workplace policies and procedures in relation to bullying.

9. I am aware of our bullying policies and procedures

- Yes
 No

10. I am aware of who I can talk to in the workplace about bullying

- Yes
 No

11. I am aware of what bullying behaviours are

- Yes
 No

12. I am aware of what is not bullying

- Yes
 No

13. Bullying needs to be reported as an Occupational Health and Safety (OHS) incident

- Yes
 No

TRAINING

The next few questions are about training.

14. How I should behave in the workplace was covered during induction training.

- Yes
- No
- No induction

15. What bullying in the workplace is was covered during induction training.

- Yes
- No
- No induction

16. I have attended an awareness session on bullying prevention in the last 12 months

- Yes
- No

17. I have attended an awareness session on bullying prevention in the last 2 years

- Yes
- No

REPORTING

The next few questions are about the reporting of workplace bullying incidents.

18. I know how to report a workplace bullying incident

- Yes
 No

19. Please indicate how strongly you agree or disagree with the following statements about the reporting of workplace bullying.

	Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree
I know I would be supported at work if I reported a bullying incident	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would be reluctant to report a bullying incident because I think things might get worse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would rather find a new job than report a bullying incident	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

INJURY MANAGEMENT

The next few questions ask about injury management in your workplace.

20. I know that I have to report any injuries that arise from work

- Yes
 No

21. I know how to report workplace injuries through the OHS reporting system

- Yes
 No

THANK YOU

That is all the questions we have for you at this time. Thank you for taking the time to participate in this important survey.