

THE 4 BARRIERS TO QUALITY® Survey

To _____

Date _____

Directions: Write down the number that best describes your employer's present behavior in relation to the following statements:

1. Your interaction with your *boss or department*.

2. The overall condition of the *employer*

(5) Always (4) Usually (3) Fairly often (2) Occasionally (1) Rarely (0) Never

Please turn in to: _____ by _____

	1) Boss or department	2) Employer
1. My department/employer attacks the problem not the messenger.	_____	_____
2. I feel free to resolve problems on the spot.	_____	_____
3. I feel comfortable in speaking up when being asked a question.	_____	_____
4. My department/employer has a real "open door policy".	_____	_____
5. During meetings, there is no fear of speaking up.	_____	_____
6. Most of our communications are in written form.	_____	_____
7. I helped write the procedures for my job.	_____	_____
8. My job procedures are in written form.	_____	_____
9. My jobs procedures are updated regularly.	_____	_____
10. My department/employer has ongoing training programs.	_____	_____
11. I have input on what training is needed.	_____	_____
12. Our department/employer has a training budget and schedule.	_____	_____
Total	_____	_____

If your score falls between

48-60 Congratulations!!! Your employer has broken through The 4 Barriers To Quality®

24-47 You're close: Pick up the training

0-23 Don't worry. You can still formalize your training program.

Name _____ (optional)

Employer _____ Phone _____

Job Title _____ Not sure? ☐ Fax _____

email _____

Are you management? (*Please check one*) 1. Yes 2. No 3. Not Sure.