

## Measure What Matters 101 Survey (2024)

The MWM Survey is designed to provide you with an accessible resource to help you consider your sustainability practices and goals, and to help us provide the resources you need to achieve them. By taking the MWM 101 survey, which is not a certification, you will be able to review your practices in six sections and discover insights to enhance your efforts. You will get a copy of the aggregate White Paper as soon as the results are compiled and analyzed. The survey is also used to recognize high achievers in each category at our annual NHBSR Sustainability Awards in March.

The survey attempts to channel you through the most relevant questions to your organization, based on your responses.

If you are interested in learning more about the related programming available through our MWM program or would like a list of the questions included in the following survey, we encourage you to visit www.nhbsr.org/mwm

The MWM Committee thanks you for taking this survey!

Note: For International and National organizations with multiple locations and facilities, you might wish to focus your answers on one geographic location. You might also consider taking this survey for multiple facility locations to compare their performance results.



Co	mpany Information
* Youi	r Name
* Ema	ail Address
* Title	e/ Position
* Orga	anization
* Indu	ustry
$\bigcirc$	Construction
$\bigcirc$	Consumer Goods and Services
$\bigcirc$	Education
$\bigcirc$	Energy & Resource Management
$\bigcirc$	Finance and Insurance
$\bigcirc$	Government and Public Administration
$\bigcirc$	HealthCare



Hospitality, Travel, & Tourism

Manufacturing

$\bigcirc$	Media and Communications				
$\bigcirc$	Nonprofit				
$\bigcirc$	Professional Services				
$\bigcirc$	Retail				
$\bigcirc$	Software, Technology, Information and Data Services				
$\bigcirc$	Transportation				
$\bigcirc$	Utilities				
$\bigcirc$	Wholesale and Distribution				
$\bigcirc$	Other				
	I number of employees (Worldwide) (Your answer determines which future questions in the ey are applicable to your organization)  Sole Proprietor ( you may select if you wish to take this survey as a Micro Organization with less than 5 employees, this means you will be channeled to skip some questions, for the complete survey select the accurate count)  2 - 20  21- 100  101 - 500				
Total number of employees in New Hampshire  Total number of employees in New England					



Gross Profit (Gross Income) for the fiscal year					
Total Revenue Growth for the fiscal year					
O% (no growth on a net basis)					
O 1-24%					
25-50%					
50%+					
*Type of Facilities: What kind of facilities does your business primarily operate in?  We understand that some of the workforce may be remote/hybrid, the question refers to facilities and buildings your business operations utilize.  (Your answer determine which future questions in the survey are applicable to your organization)  Company-owned space  Company-owned AND leased facilities/ properties  Leased space with control over the building and enhancements  Leased space with little/no control on building enhancements  No facilities: Entirely Virtual or home offices					
Climate and Energy					
For sole proprietors, in the past year, have you used (check all that apply):  Conducted an energy audit  Energy efficient devices					



	Tools to measure the carbon emissions of remote/ office work
	Environmentally and climate friendly vendors, office supplies, and technology solutions
	Lighting: such as natural light, LED bulbs, daylight dimmers, task lighting, etc.
	HVAC smart or efficiency systems: such as programmable thermostat, timers, occupancy sensors, shade sun-exposed walls
	Heat pump
	None of the above
	Other (please specify)
	t measures does your company employ to promote environmental responsibility among loyees in the management of your <b>virtual or home-based offices and/or remote workers</b> ?
	Our organization shares resources (like ButtonUp Webinars from NHSaves) with employees for energy efficiency opportunities.
	Establish policies and incentives that support energy-saving behavior at work and let employees know what actions they can take to help meet efficiency goals.
	We provide employees with energy-efficient devices, environmentally preferred office supply vendors, and technology solutions.
	We use tools to measure the carbon emissions of remote work.
	Exploring options
	We do not provide resources for employees yet
	Other (please specify)
such	e you worked with your landlord to implement or maintain energy efficiency improvements, as improving property value and reducing operating expenses through sustainable design and struction and/or efficient operations?
	Yes

	No
	Exploring options
	Would like to
	Other
mea	your organization used any of the following energy conservation or efficiency sures in your facilities? (Check all that apply, and select an item if any of the examples listed been used.)
	Conducted an energy audit.
	Use Energy Star appliances.
	Equipment and appliance controls: such as automatic sleep modes, after-hours timers, or of other use energy saving features. Set devices to turn off at the end of the day or shut them down manually.
	Lighting: such as natural light, LED bulbs, occupancy sensors, daylight dimmers, task lighting, etc.
	HVAC System upgrade or retrofit.
	HVAC smart or efficiency systems: such as programmable thermostat, timers, occupancy sensors, shade sun-exposed walls.
	Regularly maintain heating, ventilation and air conditioning (HVAC) systems. Ensure they're operating as intended and only as needed. Calibrate HVAC sensors semi-annually or annually.
	Increased the efficiency of the building envelope by installing double-paned windows and/or airlock doors for main entrances.
	Establish policies and incentives that support energy-saving behavior at work and let employees know what actions they can take to help meet efficiency goals.
	Electrification: Replace or convert equipment that uses fossil fuels with electrically-powered equivalents (e.g., swap a traditional gas furnace for an electric heat pump).
	Submetering (for multi units or multi floor facilities): Install submeters, which measure energy use by floor, unit, or other defined area. To allow more granular insights to maximize efficiency and identify opportunities for improvement.
	Work with the landlord on greening the building and increasing efficiency (if applicable).

	Provide Electrical Vehicle Charging Stations.
	None of the above
	Other (please specify)
	s your organization track and record its energy usage? ude electricity, propane, natural gas etc.)
$\bigcirc$	We do not currently track and record energy usage
$\bigcirc$	We track and record energy usage but have set no reduction targets related to energy usage
$\bigcirc$	We track energy usage and have set reduction targets for energy usage
$\bigcirc$	We have met specific reduction targets for the past reporting period
$\bigcirc$	Other

Examples of emission sources under each scope for your reference (Salesforce, 2023)



Does your organization track and record Greenhouse Gas (GHGs) Emissions? (Check all that apply.)



	We do not currently track and record GHGs						
	We track and record Scope 1 emissions (Emissions from fuel burned in owned or controlled assets — used in company owned facilities, company-owned non-electric fleet, and equipment (like boilers); i.e. what you burn.)						
	We track and record Scope 2 emissions (purchased electricity, steam, heat, and cooling and production processes; i.e. what you buy)						
	We track business travel						
	We track employee commuti	ng					
	We track other Scope 3 emissions beyond business travel and employee commuting ( such as: Waste generated in operations and waste disposal, purchased goods and services, distribution, etc)						
	Other						
* Has your organization worked to reduce or offset any of the following? (Check all that apply.)							
own	emissions from company- ed facilities and fleets pe 1)	Yes, reduced	Yes, offset	No	Would like to	NA	
Ener	gy usage (Scope 2)						
GHG trave	emissions from Business el						
	emissions from ribution and logistics						
* Has your organization worked on transitioning its energy sources through onsite renewable generation, Renewable Energy Credits, Power Purchase Agreements, or Clean Community Power agreements, etc.?							
$\bigcirc$	Yes						
$\bigcirc$	No						

$\bigcirc$	Exploring
$\bigcirc$	Other
	s your organization have any programs or policies in place to reduce the GHG emissions caused avel/commuting?
(Not	e for sole proprietors: the below question is phrased for multiple employees, please respond
if yo	u are doing the action the majority of the time in the past year.)
	Employees are subsidized/incentivized for use of public transportation, carpooling, or biking to work
	Facilities are designed to facilitate use of public transportation, biking, or cleaner burning vehicles (e.g., electric chargers)
	Employees are encouraged to use virtual meeting technology to reduce in person meetings
	Company has a written policy limiting corporate travel
	None of the above
	Other
Does	s your organization have specific stated goals toward reducing its GHGs?
$\bigcirc$	Yes
$\bigcirc$	No
$\bigcirc$	Exploring
Plea	se share the reduction goal/s set by your organization. (Optional)
Are y	you on track to meet your goal/s?

O Very likely
Likely
Unlikely
O Very unlikely
Please describe a successful or innovative initiative for the mitigation of GHGs or adaptation and building resilience to climate change, that you would like to share. (Optional)
Environment
Does your organization have any of the following environmental sustainability practices in place? (Check all that apply.)
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Does your organization have any of the following environmental sustainability practices in place?  (Check all that apply.)  Formally encourage environmentally responsible behavior (e.g., reminders to turn lights off,
Does your organization have any of the following environmental sustainability practices in place?  (Check all that apply.)  Formally encourage environmentally responsible behavior (e.g., reminders to turn lights off, double-sided printing, reusable utensils & cups in break areas)
Does your organization have any of the following environmental sustainability practices in place?  (Check all that apply.)  Formally encourage environmentally responsible behavior (e.g., reminders to turn lights off, double-sided printing, reusable utensils & cups in break areas)  Have programs in place to recycle standard recyclable materials  Have programs in place to recycle/reuse waste beyond standard practices (e.g., composting,
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Double-sided printing, soy based inks.
Digital office and reduced use of paper
Recycling
Composting, etc.
Low-flow/water efficient fixtures (faucets, taps, toilets, urinals, or showerheads)
Grey-water usage for irrigation
Rainwater harvest for irrigation
Efficient use of dishwasher and other appliances (run only when full)
Natural/non-toxic cleaning products
None of the above
Other (please specify)
Other (please specify)  th of the following environmentally preferred materials and practices does your organization at your facilities? (Check all that apply.)
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ch of the following environmentally preferred materials and practices does your organization at your facilities? (Check all that apply.)  Natural/non-toxic cleaning products  Digital office with no paper products  Packaging made with post-consumer recycled content, or efficient design that reduces material
ch of the following environmentally preferred materials and practices does your organization at your facilities? (Check all that apply.)  Natural/non-toxic cleaning products  Digital office with no paper products  Packaging made with post-consumer recycled content, or efficient design that reduces material volume used
ch of the following environmentally preferred materials and practices does your organization at your facilities? (Check all that apply.)  Natural/non-toxic cleaning products  Digital office with no paper products  Packaging made with post-consumer recycled content, or efficient design that reduces material volume used  Paper products that are processed without chlorine
ch of the following environmentally preferred materials and practices does your organization at your facilities? (Check all that apply.)  Natural/non-toxic cleaning products  Digital office with no paper products  Packaging made with post-consumer recycled content, or efficient design that reduces material volume used  Paper products that are processed without chlorine  Soy-based inks or other low VOC inks in office and/or products  Recycled/environmentally preferred office supplies (paper, flip charts, binders, business cards,

None of the above							
Other (please specify)							
* Does your organization track and record the following? (Check all that apply.)							
	Yes	No	Would like to	N/A			
Generation/recycling/reduction of solid waste				$\bigcirc$			
Water usage				$\bigcirc$			
Air Emissions (non GHGs, e.g., SOx and NOx)				$\bigcirc$			
* Does your organization's propert		owned) use any of	the following wat	er conservation			
measures? (Check all that apply.	)						
Low-flow/water efficient fixture	es (faucets, tap	s, toilets, urinals, or	showerheads)				
Grey-water usage for irrigation							
Low-volume irrigation, harvest	rainwater						
Efficient and prompt fixing of a	ny water leaks						
Talk to employees about the importance of water conservation and provide prompts/reminders in kitchen and bathrooms							
Run the dishwasher only when	it's full, and us	e an energy-efficien	t model				
None of the above							
Other (please specify)							
* Has your organization worked to reduce any of the following? (Check all that apply.)							
	Yes	No	Would like to	N/A			
Solid waste (conducted waste assessments)				$\bigcirc$			
Water usage				$\bigcirc$			

	emissions (non GHGs, e.g., and NOx)				
	s your organization monitor specerial use? (e.g., Water, Waste)	ecifically stated g	oals toward redu	icing its res	ource and
$\bigcirc$	Yes				
$\bigcirc$	No				
$\bigcirc$	Exploring				
(Exa	s your organization generate ha amples of hazardous waste inclu stronic equipment, lab chemica	ude: clinical wast	e, fluorescent tub	oes, solvent	s, paints,
$\bigcirc$	Yes				
$\bigcirc$	No				
	N/A				
Can	your company verify that your	hazardous waste	is always dispose	ed of respor	nsibly?
$\bigcirc$	Yes				
$\bigcirc$	No				
Doy	ou track and record your gener	ation of hazardou	s waste?		
$\bigcirc$	Yes				
	No				
Has	your organization worked to red	duce hazardous w	aste?		
$\bigcirc$	Yes				

	No
Plea	se share the resource or waste reduction goal/s set by your organization. (Optional)
If yo	u shared a goal above, are you on track to meet your goal/s?
$\bigcirc$	Very likely
$\bigcirc$	Likely
$\bigcirc$	Unlikely
$\bigcirc$	Very unlikely
	duct Design and Stewardship  you a manufacturing or product design company?
	Yes
	No
Whe	n designing, developing, and marketing your products do you (Check all that apply.)
	Address any environmental, social or economic problem for your customers and/or their beneficiaries through the services or products you provide.
	Regularly monitor the customer's outcomes and well-being.
	Incorporate customer testing and feedback into product design.
	Consider the environmental impact of your products.
	Conduct a Life Cycle Analysis for your products.

Opt for environmentally preferred raw materials or products.
Increase efficiency in materials used and reduced waste in products.
Design products to have a longer lifespan and be repairable, upgradable, or easily recyclable at the end of their life
Consider the end of life disposal for your products
Provide information to customers about the product's environmental benefits and proper usage to promote sustainable practices.
Consider sustainable packaging for your products (e.g., made from sustainable materials, reduced packaging and waste, bulk orders with reduced packaging, etc.)
Have a traceability roadmap for high-risk raw materials (to know the origin of the elements of a product, the composition of that product, and distribution or end-use of that product)
Other (please specify)
NA
your company do any of the following to manage the impact and value created for your
your company do any of the following to manage the impact and value created for your omers or consumers?
omers or consumers?
Omers or consumers?  We offer product/service guarantees, warranties, or protection policies.
Omers or consumers?  We offer product/service guarantees, warranties, or protection policies.  We have third-party quality certifications or accreditations.
Omers or consumers?  We offer product/service guarantees, warranties, or protection policies.  We have third-party quality certifications or accreditations.  We have formal quality control mechanisms.
Omers or consumers?  We offer product/service guarantees, warranties, or protection policies.  We have third-party quality certifications or accreditations.  We have formal quality control mechanisms.  We have customer service feedback or complaint mechanisms.
Omers or consumers?  We offer product/service guarantees, warranties, or protection policies.  We have third-party quality certifications or accreditations.  We have formal quality control mechanisms.  We have customer service feedback or complaint mechanisms.  We monitor customer or consumer satisfaction.  We assess the outcomes produced for our customers through the use of our product or service
We offer product/service guarantees, warranties, or protection policies.  We have third-party quality certifications or accreditations.  We have formal quality control mechanisms.  We have customer service feedback or complaint mechanisms.  We monitor customer or consumer satisfaction.  We assess the outcomes produced for our customers through the use of our product or service and/or through feedback from customers.

□ N/A
Sustainability Reporting
Do you regularly provide reports on your company's environmental impact and sustainability efforts?
Yes
O No
Exploring
Other
Please describe a successful or innovative initiative for reducing resource use that you would like to share. (Optional)
Workplace
What % of your workforce are full-time employees?
Do you have a policy to promote from within, including part-time employees?
O Yes
O No
Exploring

	oner
emplo	is the employee turnover rate at your organization? (One way to calculate byee turnover is to divide the number of employees who leave each year by the average er of employees on the payroll and then multiply by 100.)
* Is turr	over higher at entry level and low tenure positions than middle and upper management?
O Y	'es
	No
	lot sure
	Other
* Does y	our organization have an employee handbook?
O Y	ves
	No
living wage:	percentage of your organization's employees are paid a wage that is equal to or exceeds a Find information on NH Living Wage visit, https://livingwage.mit.edu/states/33/locations.urposes of this survey, assume single adult.)
O 1	-25%
O 2	5-50%
O 5	0-75%
O 7	<b>'6-</b> 100%

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$\bigcirc$	Other
Wha	t percentage of your employees are paid a minimum wage?
$\bigcirc$	0% (no employee is paid a minimum wage, they all receive wages above minimum wage)
$\bigcirc$	1-25%
$\bigcirc$	25-50%
$\bigcirc$	50-75%
$\bigcirc$	76-100%
$\bigcirc$	Other (please specify)
	ge ratio refers to <b>the ratio of the top salaries in an organization to the bottom salaries</b> . What is
Does	wage ratio at your organization (Optional) s your organization provide any of the following benefits to employees? (check
Does	wage ratio at your organization (Optional)
Does	wage ratio at your organization (Optional) s your organization provide any of the following benefits to employees? (check
Does	wage ratio at your organization (Optional)  s your organization provide any of the following benefits to employees? (check hat apply, even if you do not fully fund these benefits)
Does	wage ratio at your organization (Optional)  s your organization provide any of the following benefits to employees? (check hat apply, even if you do not fully fund these benefits)  Health insurance
Does	wage ratio at your organization (Optional)  s your organization provide any of the following benefits to employees? (check hat apply, even if you do not fully fund these benefits)  Health insurance  Dental insurance
Does	wage ratio at your organization (Optional)  s your organization provide any of the following benefits to employees? (check hat apply, even if you do not fully fund these benefits)  Health insurance  Dental insurance  Short-term disability
Does	syour organization provide any of the following benefits to employees? (check that apply, even if you do not fully fund these benefits)  Health insurance  Dental insurance  Short-term disability  Long-term disability
Does	wage ratio at your organization (Optional)  s your organization provide any of the following benefits to employees? (check hat apply, even if you do not fully fund these benefits)  Health insurance  Dental insurance  Short-term disability  Long-term disability  Structured account for qualified medical expenses (e.g., HSA, HRA, FSA)

Annual cost of living adjustments
Bonus or profit-sharing
Stock options or ownership in company
Employee retirement plan
Work from home or remote work options
Flexible work schedule
Financial assistance towards childcare costs.
Emergency childcare or eldercare options.
Lactation spaces: Facilities and accommodations for nursing mothers.
Onsite childcare facilities.
Bring your baby to work options for new parents.
None of the above
Other (please specify)
s your organization provide any of the following health & wellness benefits? ck all that apply.)
Incentives for employees to participate in health & wellness activities (e.g., subsidized gym membership, on-site exercise area, employer-paid fund for exercise equipment, etc.)
Policies and programs to prevent ergonomic-related injuries
Access to behavioral health counseling services, web resources, or Employee Assistance Programs
Mental health and/or recovery-friendly policy removing stigma and recognizing addiction and mental health issues as any other health issue
None of the above
Other

address the financial needs of employees? (Check all that apply. Check also if offered on a as- needed basis.)		
	Financial management tools or coaching	
	Emergency or short-term savings programs	
	Low-interest or interest-free loans	
	Debt management, refinancing, or loan payment contributions	
	Employer match for deposits into savings accounts	
	Paychecks issued off-schedule on a need basis	
	Tax preparation services	
	None of the above	
	Other (please specify)	
What is the annual minimum number of paid days off (including holidays) for full-time employees?		
Do y	ou provide paid family and medical leave?	
$\bigcirc$	Partial pay through insurance and/or company	
$\bigcirc$	Full pay through insurance and/or company	
$\bigcirc$	Provided on an a need basis	
$\bigcirc$	No paid leave offered	

How much paid leave and unpaid leave is provided? (Identify as # of days, using decimals to indicate partial		
days	days.)	
Wha	t can the leave be used for? (Check all that apply)	
	Paid personal illness or recovery	
	Unpaid personal illness or recovery	
	Paid leave for care of family member	
	Unpaid leave for care of family member	
	Paid parental leave for birthing parent	
	Unpaid parental leave for birthing parent	
	Paid parental leave for non-birthing parent	
	Unpaid parental leave for non-birthing parent	
	Paid leave for care of "like family" members or "chosen family" members	
	Unpaid family leave for "like family" member or "chosen family" members	
	Other	
* Wha	t are your company's policies regarding independent contractors that work for the company on	
a pa	rt-time basis for longer than a 6 month period?	
	We have a formal routine process for independent contractors to receive post-project or -contract performance feedback	
	We have a formal routine process for independent contractors to communicate post-project or post-contract feedback to the company	

	Our independent contractors are verified to either work on a time-bound basis, split their time with work for other clients, or have been offered employment
	Independent contractors are paid a living wage
	We have independent contractors, but have not engaged in any of these practices
	N/A - We haven't used independent contractors in the last year
	Other
	se describe a successful or innovative initiative that you feel benefited your cers. (Optional)
	li di
Со	mmunity
Со	mmunity
	mmunity does your organization engage with the community? (Check all that apply.)
	does your organization engage with the community? (Check all that apply.)
	does your organization engage with the community? (Check all that apply.)  Financial or in-kind charitable donations (excluding political causes)
	does your organization engage with the community? (Check all that apply.)  Financial or in-kind charitable donations (excluding political causes)  Community investments
	does your organization engage with the community? (Check all that apply.)  Financial or in-kind charitable donations (excluding political causes)  Community investments  Community service
	does your organization engage with the community? (Check all that apply.)  Financial or in-kind charitable donations (excluding political causes)  Community investments  Community service  Pro-bono service
	does your organization engage with the community? (Check all that apply.)  Financial or in-kind charitable donations (excluding political causes)  Community investments  Community service  Pro-bono service  Paid employee volunteer hours
	does your organization engage with the community? (Check all that apply.)  Financial or in-kind charitable donations (excluding political causes)  Community investments  Community service  Pro-bono service  Paid employee volunteer hours  Social and/or environmental advocacy
	does your organization engage with the community? (Check all that apply.)  Financial or in-kind charitable donations (excluding political causes)  Community investments  Community service  Pro-bono service  Paid employee volunteer hours  Social and/or environmental advocacy  Discounted products or services for underserved groups

	None of the above
If yo	u provide paid employee volunteer hours, how many hours annually do you provide?
Code	s your organization ask vendors/suppliers to sign an agreement to uphold a e of Conduct or review a Compliance Manual that addresses social and ronmental performance?
$\bigcirc$	Yes
$\bigcirc$	No
$\bigcirc$	Offer vendors the opportunity to share their environmental and social practices
$\bigcirc$	Other
	s your organization screen vendors/suppliers for any of the following practices, ative or positive?
	Child labor
	Environmental pollution
	Unsafe/unhealthy worker conditions
	Fair wages
	Sustainability practices
	Equal employment opportunities
	None of the above
	Other

\* Does your company have policies to seek out or prioritize local

ven	dors/contractors?	
$\bigcirc$	Yes	
$\bigcirc$	No	
	t are your company's practices regarding donations or community estments?	
	We have a formal statement or intended social or environmental impact for our company's philanthropy	
	We have a formal donation commitment	
	We match workers' charitable donations	
	We allow our workers or customers to select charities to receive our donations	
	We have screening practices for charitable contributions or impact measurement for our community investment	
	None of the above	
	Other	
Share a story of a community initiative that is successful or has achieved impact.  (Optional)		
Go	vernance and Transparency	
* Doe	s your organization have a formal, written mission statement?	
	Yes	
	No	

Your mission statement (optional):		
Does the mission/values statement include any of the following? (Check all that apply.)		
	A general commitment to social or environmental responsibility (e.g., to conserve the environment, to respect and help people)	
	A commitment to a specific positive social impact (e.g., poverty alleviation, sustainable economic development)	
	A commitment to a specific positive environmental impact (e.g., climate change reversal, waste reduction, etc.)	
	A commitment to serve a target beneficiary group in need (e.g., low-income customers, people struggling with addiction/mental health issues, refugees, etc.)	
	None of the above	
*Has your organization done any of the following to ensure social or environmental performance as part of its decision-making over time, regardless of company ownership?		
	Signed a contract or Board resolution committing to incorporate social and environmental performance in decision-making (e.g., signed B Corp Declaration of Interdependence or other similar Board resolutions)	
	Adopted a specific governance structure to preserve mission (e.g., cooperative)	
	Become a Public Benefit Corporation	
	Unsure	
	None of the above	
	Other	

* Does	your organization engage in any of the following practices to promote accountability and
trans	sparency? (Check all that apply.)
	Hold regular (at least monthly) management or staff meetings
	Share financial performance with employees
	Have a code of ethics/anti-corruption policy
	Have a whistleblower policy
	Tie a portion of bonuses to social and/or environmental performance
	Include social and environmental commitments in job descriptions
	Have an advisory committee (external or internal) that provides advice and guidance on social and and/or environmental performance and initiatives
	Review and/or audit financials through a third party
	Have a formal board of directors
	Share data publicly about our impact on workers and community
	Work with policymakers to develop or advocate for policy changes explicitly designed to improve social or environmental outcomes
	None of the above
	Other
Chec	k any and all best practices for digital media and website use you use.
	Implement a transparent cookie consent tool that allows users to customize their cookie preferences.
	Provide a clear privacy policy detailing data collection, usage, and sharing practices.
	Collect only the necessary data for functionality and analytics, avoiding excessive user data collection to enhance privacy.
	Conduct frequent security assessments to identify and address vulnerabilities.

	Follow Web Content Accessibility Guidelines standards to ensure the site is accessible to users with disabilities.				
	Choose Green Hosting Providers: Use hosting providers that utilize renewable energy or offer carbon offsets.				
	Provide meaningful, accurate content that serves the needs of your audience.				
	Other (please specify)				
	eholder Engagement: Has internal and external sta		-		ormance?
		Internal Stakeholders	External Stakeholders	No Engagement of Stakeholders at this time	NA
inclu	nave an advisory board that udes Stakeholder esentation.				
We have a formal plan or policy that includes the identification of relevant stakeholder groups.					
gath stak	nave processes in place to er information from eholders (focus groups, eys, community meetings,				
We p	Dublicly report on eholder engagement hanisms and results.				
We h	nave no formal stakeholder agement.				
To what extent does your organization encourage employee participation in decision-making processes (e.g., through feedback sessions, town hall meetings, or suggestion platforms)?					
A great extent – employees regularly participate in decision-making.					
A moderate extent – employees are sometimes involved in decision-making.					
A little extent – employee input is rarely considered in decision-making.					

People of People with LGBTQ groups	O Not at all – decisions are ma	ade solely b	by upper m	anagement.				
Diversity and Inclusion  This next section will ask about your organization's inclusion of and support for people from underrepresented or disadvantaged populations. Those populations cainclude one or more of the following: women, people of color, immigrants, people with disabilities, members of the LGBTQ community, and/or military veterans.  Does your organization have representation from or make a special effort to include people from the following disadvantaged populations or underrepresented groups?  Within your organization's Ownership (in whole or in part) Owner	Other							
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people from the following disadvantaged populations or underrepresented groups?    Members of   None of   groups	, , , , , , , , , , , , , , , , , , , ,					,		
Women Color Immigrants Disabilities Community Veterans represent within your organization's ownership (in whole or in part)  Within your board of directors	Does your organization have re	epresenta	tion from	or make a	special e	ffort to inc	lude	
Women Color Immigrants Disabilities Community Veterans represent within your organization's ownership (in whole or in part)  Within your board of directors  Within your senior leadership team  Within your middle	people from the following disa	advantage	ed popula	tions or ur	nderrepres	sented gro	ups?	
Women Color Immigrants Disabilities Community Veterans representation's ownership (in whole or in part)  Within your board of directors  Within your senior leadership team  Within your middle			Dooploof		Doonlo with			None of the
ownership (in whole or in part)  Within your board of directors  Within your senior leadership team  Within your middle		Women		Immigrants			Veterans	groups represented
Within your senior leadership team  Within your middle								
team Within your middle	Within your board of directors							
Within your middle								
	Within your middle							

	is designated as an equal-opportunity employer by the department of labor.
	has an official statement of non-discrimination in its employee manual, bylaws, or written policies and procedures.
	has officially stated Diversity Equity and Inclusion goals (internally and/or externally published).
	maintains Diversity Equity and Inclusion metrics and tracks performance in areas of demographics and representation.
	tracks metrics or collects surveys for employee satisfaction and inclusion.
	tracks and monitors data for diversity in advancement opportunities and promotions.
	assesses pay equity.
	has Employee Resource Groups that are active and well attended.
	completed an accessibility audit.
	recognizes all types of cultural holidays.
	accommodates the needs and equipment requests for employees with disabilities.
	provides gender neutral bathrooms.
	None of the above.
	Other
und	s your organization have programs that promote the advancement or support of people from errepresented or disadvantaged populations? If so, what types of programs does your nization have? (Check all that apply.)
	Workplace training on diversity, inclusion, bias, discrimination, or similar topic
	Affinity or support groups for people from underrepresented or disadvantaged populations
	Scholarships or tuition reimbursement for educational and/or career advancement
	Diversity positive hiring or career advancement
	Second Chance hiring

	Post job opportunities on sites specifically aimed toward underrepresented groups and/or participate in job fairs targeting underrepresented group
	None of the above
Daar	
	s your company have policies that prioritize doing business with vendors that
are i	minority, underrepresented, or disadvantaged business enterprises?
$\bigcirc$	Yes
$\bigcirc$	No
Does	s your organization offer diversity training to employees?
$\bigcirc$	Yes, required of all employees
$\bigcirc$	Yes, offered
$\bigcirc$	No
$\bigcirc$	Exploring
$\bigcirc$	Other
	ne past year, have you attended a training or workshop on diversity, inclusion, bias, and rimination?
$\bigcirc$	Yes
$\bigcirc$	No
$\bigcirc$	Other
Wha	t percentage of your employees (approximately) participate in diversity training?
$\bigcirc$	0-15%
$\bigcirc$	15-25%

$\bigcirc$	25-50%
$\bigcirc$	50-75%
$\bigcirc$	75-100%
$\bigcirc$	Diversity training is required for all employees
Does	s your organization offer harassment training to promote a safe work environment?
	Yes
	No
$\bigcirc$	Exploring
$\bigcirc$	Other
	your organization hired an outside DE&I consultant to help identify gaps in internal operations ording inclusion?  Yes  No  Exploring
regard O	Yes No
regard O	Yes  No  Exploring  s your organization have a designated employee or committee dedicated to the advancement
regard O	Yes  No  Exploring  s your organization have a designated employee or committee dedicated to the advancement E&I?

Please describe a successful or innovative initiative that helped foster diversity, equity, and	
inclusion in your workplace. (Optional)	
	/.
Thank you	

The aggregate White Paper will be released to all survey takers as soon as data is compiled. Customized reporting with performance comparison and recommendations is prepared by request only. Customized reports are \$500 for members and \$750 for nonmembers. Would you like a report prepared for your organization's performance? (for more information email: zeina@nhbsr.org)

Yes (we will contact you to confirm)

Not at this time