

# PH WINS 2024 Final Instrument September 4, 2024

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#### Public Health Workforce Interests and Needs Survey (PH WINS)

#### **About the Survey**

You are receiving this survey because your entire organization has chosen to participate in the Public Health Workforce Interests and Needs Survey (PH WINS). The information from this survey will be used to inform future public health workforce development initiatives that support recruitment and retention, training, and diversity of the public health workforce. The survey is being conducted by the de Beaumont Foundation in partnership with the Association of State and Territorial Health Officials (ASTHO), and with support from the Big Cities Health Coalition (BCHC), National Association of City and County Health Officials (NACCHO), and the ten Regional Public Health Training Centers. The survey should take approximately 30 minutes of your time. Your participation is voluntary, and your responses will be confidential. We hope you will participate. Your feedback and unique perspective is important to improve the public health worker experience in your organization and across the nation.

### Instructions for Completing the Survey

The survey can be completed in multiple sittings, though we do recommend you complete it in one sitting. If you do need to close the survey and resume, your progress will be saved. The survey link is unique to you, please do not share it with others or delegate it. As a reminder, your responses are completely confidential. Clicking "continue" will be interpreted as your informed consent to participate and that you affirm that you are at least 18 years of age.

### Need Help?

If you have questions about the survey, please email <a href="mailto:phwins@debeaumont.org">phwins@debeaumont.org</a>. You can also speak to a member of the PH WINS team directly by visiting the <a href="mailto:PH WINS Virtual Help Center">PH WINS Virtual Help Center</a> open Wednesdays from 2:00pm-3:00pm EST, starting on Wednesday, September 11. For answers to frequently asked questions, please visit <a href="mailto:the PH WINS FAQs webpage">the PH WINS FAQs webpage</a>. If you have any questions about your rights as a participant, you may contact the WCG Institutional Review Board at 855-818-2289 or clientcare@wcgclinical.com.

#### **Defining Terms**

Throughout the survey, the terms agency, department, or organization are used interchangeably to refer to independent state or local public health agencies or a unit/division of public health within a larger agency, often referred to as an umbrella agency or super-agency. Additionally, when referring to a supervisor, manager, or executive, please use the following definitions:

- Supervisor: responsible for employees' performance appraisals and approval of their leave, but do not supervise other supervisors
- Manager: work in a management position and supervise one or more supervisors
- Executive: member of Senior Executive Service or equivalent

In this survey, we will use several terms specific to public health practice. In several questions, we have provided definitions in hover over text. You will see these terms displayed in blue. If you hover your mouse over them, the definition of that term will appear (pictured below).

☐ Injury/Violence Prevention	
☐ Non-Communicable Disease/Chronic Disease	
Communicable/Infectious Disease  HIV	Including cancer, diabetes, heart disease, obesity, etc.

Thank you, we couldn't do this work without you!

#### Section I: Workforce Characteristics

1. What is your supervisory status? O Non-supervisor: you do not supervise other employees O Supervisor: you are responsible for employees' performance appraisals and approval of their leave, but you do not supervise other supervisors Manager: you are in a management position and supervise one or more supervisors O Executive: member of Senior Executive Service or equivalent 2. Please identify the classification that best represents your current role in the organization. This question refers to the type of role you serve in. This is NOT the same as your union/civil service title. You will be asked about your program area in the next question. Some job classifications are listed differently than you'd expect. For example, contact tracer can be found under "Disease Intervention Specialist/Contact Tracer." O Animal Control Worker Attorney or Legal Counsel O Business Support - Accountant/Fiscal O Business Support services - Administrator O Clerical Personnel - Administrative Assistant O Clerical Personnel - Secretary Communications O Community Health Worker O Custodian O Customer Service/Support Professional O Data or Research Analyst O Database Manager O Disability claims/benefits examiner or adjudicator O Disease Intervention Specialist/Contact Tracer O Department/Bureau Director O Deputy Director O Economist O Emergency Medical Technician/Advanced Emergency Medical Technician/Paramedic O Emergency Preparedness/Management Worker O Engineer O Environmental Science and Protection Specialist O Environmental Science and Protection Technician O Epidemiologist Grants or Contracts Specialist O Health Educator O Health Navigator O Health Officer O Human Resources Personnel Information Systems Manager/Information Technology Specialist • Laboratory Aide or Assistant Laboratory Technician O Laboratory Quality Control Worker

Laboratory Scientist/Medical Technologist
 Licensed practical or vocational nurse
 Licensure/Regulation/Enforcement Worker
 Mental Health or Substance Abuse Counselor

	O	Medical Examiner
	$\mathbf{O}$	Medical/Vital Records Staff
	$\mathbf{O}$	Nurse Practitioner
	$\mathbf{O}$	Home Health Aide
	$\mathbf{O}$	Nutritionist or Dietitian
	$\mathbf{O}$	Other Behavioral Health Professional
	$\mathbf{O}$	Other Business Support Services
		Other Facilities or Operations Worker
		Other Health Professional/Clinical Support Staff
		Other Oral Health Professional
		Other Program Staff
		Peer Counselor
		Pharmacist
		Physician Assistant
		Physical/Occupational/Rehabilitation Therapist
		Policy Analyst
		Population Health Specialist
		Program Coordinator
		Program Director
		Program Evaluator
		Public Health Agency Director
		Public Health Dentist
		Public Health Manager or Program Manager
		Public Health/Preventive Medicine Physician
		Public Health Veterinarian
		Public Health Informatics Specialist
		Public Information Specialist
		Quality Improvement Worker
		Registered Nurse - Public Health or Community Health Nurse
		Registered Nurse - Unspecified
		Sanitarian or Inspector
		Social Worker/Social Services Professional
		Statistician
	0	Student, Professional or Scientific
	$\mathbf{O}$	Other (please specify)
[O]		111
[Show if AN	IY OI	nerj
2b. Plea	ase	specify
3. Plea	ase	specify your <u>current program area(s)</u> . Select all that apply. Some programs are listed
		tly than you'd expect. For example, WIC can be found under "Maternal and Child Health -
		f you are serving in a COVID response role, please select "COVID-19 Recovery." If you
		rtially serving in that COVID response role, please select "COVID-19 Recovery" along with
any		er program area that you are also <u>currently</u> serving in.
		Administration/Administrative Support
		Animal Control
		Children and Youth with Special Health Care Needs
		Clinical Services (excluding TB, STI, family planning)
		Communicable/Infectious Disease - HIV
		Communicable/Infectious Disease - Influenza
		Communicable/Infectious Disease - STI

	Communicable/Infectious Disease – Tuberculosis
	Communicable/Infectious Disease - Viral Hepatitis
	Other Communicable/Infectious Disease
	Communications/Public Information
	Community Health Assessment/Planning
	COVID-19 Recovery
	Emergency Medical Services
	Emergency Preparedness, Planning, and Response
	Enforcement/Inspection/Licensing/Certification of Facilities (includes health care facilities,
_	long-term care facilities, nursing homes, and child care facilities)
	Environmental Health
	Epidemiology Surveillance
	Equity/Health Equity
	Global Health
	Health Education
	Health Promotion/Wellness
	Immunizations - clinical services
_	
	Medical Examiner
	Mental and Behavioral Health
	Non-Communicable Disease/Chronic Disease (including cancer, diabetes, heart disease,
_	obesity, etc.)
	Oral Health/Clinical Dental Services
	Policy, Legislation, and Government Affairs
	Public Health Genetics
	Public Health Laboratory
	- · · · · · · · · · · · · · · · · · · ·
	Substance Abuse, including tobacco control programs
	Training/Workforce Development
	Vital Records
	Other Program Area (specify)
_	Other Frogram Area (Specify)
[Carrvforward r	program area responses from the previous question]
	hown are those you selected in the previous question. Please estimate the % time
you cui	rently serve in each of those program areas. (Your total should add up to 100%,
regardl	ess of whether you are a full-time or part-time employee.)
	Program Area 1%
	Program Area 2%
	Program Area 3%
3	
4. Please	move the sliders to indicate how long you have been in each of the following (in
	Please round to the nearest year.
	In your current position

		With your current agency in total (in any position) In public health practice in total (in any agency, in any position) [Display if supervisory status of manager or executive is selected] In years, please indicate how long you have been in public health management in total (in any agency, in any public health Manager or Executive position)
[Show	if with cu	rrent agency is less than 1 year]
		ng did your hiring process (from submitting your application to receiving a job offer)
		2 months or less
		3 to 4 months
		5 to 6 months
	3	6+ months
6.		of the following best describes your <u>current</u> employment status?  Contractor providing third party services to the health department
		Permanent staff employed directly by the health department
		Intern employed directly by the health department
		Federal employee assigned to the health department
		Temporary staff employed directly by the health department
	0	Public Health AmeriCorps member serving at the health department
7.	-	current position a bargaining unit (union) position?
		Yes
	0	No
8.	Are vou	currently employed full-time at the public health department?
		Yes
	0	No
[Disnla	y if no:]	
	-	indicate what percent time you are working for the public health department. (e.g.,
		r half-time [.5 FTE], 100% for full-time [1.0 FTE])
		Part-time percentage
Section	ı II. Wark	volace Environment

## Section II: Workplace Environment

9. The following items relate to how you perceive your work day-to-day. Please indicate how often, if at all, you have generally felt that way about your work over the last month.

	Never	Rarely	Sometimes	Usually	Almost Always	Always
I love my job.						
I am treated fairly at work.						

I can achieve a healthy balance between my work and life outside of work.			
I am paid fairly for the job that I do.			
I am happy with how much input I have in decisions that affect my work.			
I can easily manage the demands of my job.			
I feel psychologically safe at work.			
I can voice concerns at work without getting into trouble.			

## 10. Please rate your level of agreement with the following items

	Strongly disagree	Disagree	Agree	Strongly agree
I am satisfied with my job.				
I am satisfied with my organization.				
I am satisfied with my work unit.				
I am satisfied with my supervisor.				
I am satisfied with my pay.				

I am satisfied with my benefits.				
----------------------------------	--	--	--	--

11. Please rate your level of agreement with the following items.

_	Strongly disagree	Disagree	Agree	Strongly agree
People here are treated fairly regardless of their age.				
People here are treated fairly regardless of their race.				
People here are treated fairly regardless of their <b>gender</b> .				
People here are treated fairly regardless of their sexual orientation.				

12. Please rate your level of agreement with the following items.

12. 1 10000 1000 7001 100	Strongly disagree	Disagree	Agree	Strongly agree
I feel that my supervisor is a skilled people manager.				
I feel a sense of belonging within my work unit.				
I feel a sense of belonging at my agency.				

- 13. If you wish, you may provide comments below about your workplace environment or level of job satisfaction.
- 14. In general, how would you rate your <u>mental or emotional</u> health? (No forced response)

	) )	Excellent Very good Good Fair Poor
		ut is a state of physical, mental, and emotional exhaustion caused by excessive stress, arly in the workplace. It is characterized by a range of symptoms including:  Physical symptoms: exhaustion, fatigue, or headaches  Mental symptoms: depression, excessive worrying, or frustration  Behavioral symptoms: short temper or quiet quitting
	rnou <sup>t</sup> O O	on the definition of burnout provided above, how would you describe your current level of t?  I have no symptoms of burnout I have one or more symptoms of burnout that come and go away I have one or more symptoms of burnout that won't go away I am completely burnt out, my symptoms won't go away
16. Ar		considering leaving your organization within the next year?
		Yes No
	•	
16b.	00000	es, what are you planning to do? Retire Pursue further education Take another governmental job in public health Take another governmental job not in public health Take a non-governmental job in public health Take a non-governmental job not in public health Leave the workforce
Display fo	r tha	se staying in Q6]
		select the most important reason(s) why you are staying at your organization.
17.11		Acknowledgement/recognition for your work
		Benefits (e.g., retirement contributions/pensions, health insurance)
		Exciting and challenging work
		Flexible work schedule (e.g., flex hours)  Job satisfaction
		Job stability
		Lack of stress
		Mentorship opportunities
		Opportunities for advancement
		Organizational climate/culture
		Pay Pride in the organization and its mission
		Remote work policies
		Satisfaction with your agency's leadership (e.g., Health Commissioner, Senior Deputy, etc.)
		Satisfaction with your supervisor
	_	Support from coworkers Training appartunities
		Training opportunities Unsatisfactory opportunities outside of the agency

u	Other (please specify)
[Display for tho	se leaving in Q6]
17a. Ple	ease select the most important reason(s) why you are considering leaving your
organiz	
Ĭ 🗖	Better opportunities outside of the agency
	Job instability (e.g., loss of funding, reduction in force (RIF), layoffs)
	Job satisfaction
	Lack of acknowledgement/recognition
	Lack of flexible work schedule (e.g., flex hours)
	Lack of opportunities for advancement
	Lack of support from coworkers
	Lack of training
	Leadership changeover
	Organizational climate/culture
	Pay
	Reasons unrelated to my job (e.g., family obligations, health reasons, lack of affordable
	child-care options, moving, etc.)
	Remote work policies
	Retirement
	Satisfaction with your supervisor Stress
	Weakening of benefits (e.g., retirement contributions/pensions, health insurance)
	Work overload / burnout
_	Other (Please Specify)
	Suiter (i reades epoemy)
18. I am pl	anning to retire in:
Ò	2024
•	2025
	2026
	2027
	2028
	2029
O	I am not planning to retire before 2030

## Section III. Training Needs Assessment

19.

Please note, skill levels are defined as follows:

- -- Unable to perform: lacking the necessary skills to perform
- -- Beginner: able to perform with assistance
- -- Proficient: able to perform independently
- -- Expert: able to assist or teach others

Considering your role, how important is this item in your work?			What	is your current s	kill level for this	item?	
Not important	Somewhat	Moderately	Very important	Unable to	Beginner	Proficient	Expert
'	important	important	, ,	perform			•

ITEMS				
TIER 1: NON-SUPERVISORS	TIER 2: SUPERVISORS AND MANAGERS	TIER 3: EXECUTIVES		
Effectively target communications to different	Communicate in a way that different	Communicate in a way that different		
audiences (e.g., the public, community	audiences (e.g., the public, community	audiences (e.g., the public, community		
organizations, external partners, the scientific	organizations, external partners, the scientific	organizations, external partners, the scientific		
community, etc.)	community, etc.) can understand	community, etc.) can understand		
Communicate in a way that persuades others	Communicate in a way that persuades others	Communicate in a way that persuades others		
to act	to act	to act		
Identify appropriate sources of data and	Identify appropriate sources of data and	Ensure the use of appropriate sources of data		
information to assess the health of a	information to assess the health of a	and information to assess the health of a		
community	community	community		
· · ·	1.1			
·				
	• •			
, <u> </u>		, -		
ethnicity, gender, age, sexual orientation)	• •	gender, age, sexual orientation)		
Support inclusion of health equity and social	,	Incorporate health equity and social justice		
, , , , , , , , , , , , , , , , , , , ,				
, , ,	` •			
Collect valid data for use in decision making Identify evidence-based approaches to address public health issues Describe the value of a diverse public health workforce (e.g., diverse in terms of race, ethnicity, gender, age, sexual orientation)  Support inclusion of health equity and social justice principles into planning for program and service delivery (e.g., include health equity in a strategic plan, promote health-in-	Use valid data to drive decision making Apply evidence-based approaches to address public health issues Support development of a diverse public health workforce (e.g., diverse in terms of race, ethnicity, gender, age, sexual orientation) Incorporate health equity and social justice principles into planning for programs and services (e.g., include health equity in a strategic plan, promote health-in-all-policies,	Use valid data to drive decision making Ensure the application of evidence-based approaches to address public health issues Develop a diverse public health workforce (e.g., diverse in terms of race, ethnicity, gender, age, sexual orientation)  Incorporate health equity and social justice principles into planning across the agency (e.g., include health equity in a strategic pla promote health-in-all-policies, engage		

all-policies, engage marginalized and under- resourced communities in decision making)	engage marginalized and under-resourced communities in decision making)	marginalized and under-resourced communities in decision making)
Deliver socially, culturally, and linguistically appropriate programs and customer service	Implement socially, culturally, and linguistically appropriate policies, programs, and services that reflect the diversity of individuals and populations in a community	Ensure the implementation of socially, culturally, and linguistically appropriate policies, programs, and services that reflect the diversity of individuals and populations in a community
Describe financial analysis methods applicable to program and service delivery	Use financial analysis methods in managing programs and services	Use financial analysis methods in making decisions about programs and services across the agency
Describe how public health funding mechanisms support agency programs and services (e.g., categorical grants, state general funds, fees, third-party reimbursement, tobacco taxes)	Identify funding mechanisms and procedures to develop sustainable funding models for programs and services (e.g., categorical grants, state general funds, fees, third-party reimbursement, tobacco taxes, value-based purchasing, budget approval process)	Leverage funding mechanisms and procedures to develop sustainable funding models for the agency (e.g., categorical grants, state general funds, fees, third-party reimbursement, tobacco taxes, value-based purchasing, budget approval process)
Describe the value of an agency business plan (e.g., tool for analyzing and planning for a product or service that will meet a community need, will generate revenue, and be sustainable)	Implement a business plan for agency programs and services (e.g., tool for analyzing and planning for a product or service that will meet a community need, will generate revenue, and be sustainable)	Design a business plan for the agency (e.g., tool for analyzing and planning for a product or service that will meet a community need, will generate revenue, and be sustainable)
Describe the influence of internal changes (e.g., personnel changes, funding cuts, internal policies, etc.) on organizational practices	Modify programmatic practices in consideration of internal and external changes (e.g., social, political, economic, scientific)	Manage organizational change in response to evolving internal and external circumstances (e.g., social, political, economic, scientific)
Assess the external drivers in your environment (e.g., physical, political, social, fiscal, etc.) that may influence your work	Assess the drivers in your environment (e.g., physical, political, social, fiscal, etc.) that may influence public health programs and services	Assess the drivers in your environment (e.g., physical, political, social, fiscal, etc.) that may influence public health programs and services across the agency
N/A	Integrate current and projected trends (e.g., physical, political, social, fiscal, etc.) into strategic planning for programs and services	Integrate current and projected trends (e.g., physical, political, social, fiscal, etc.) into organizational strategic planning
Describe how social determinants of health impact the health of individuals, families, and the overall community	Build cross-sector partnerships (e.g., agencies or organizations supporting transportation, housing, education, and law enforcement) to address social determinants of health	Influence policies external to the organization that address social determinants of health (e.g., zoning, transportation routes, etc.)
Participate in quality improvement processes (e.g., Plan-Do-Check-Act, SWOT analysis,	Apply quality improvement processes (e.g., Plan-Do-Check-Act, SWOT analysis,	Create a culture of quality improvement (e.g., an integrative process that links knowledge, structures, processes, and outcomes to

fishbone, lean, kaizen, etc.) for agency	fishbone, lean, kaizen, etc.) to improve	enhance quality throughout an
programs and services	agency programs and services	organization) at the agency or division level
Describe the value of community strategic planning that results in a community health assessment or community health	Apply findings from a community health assessment or community health improvement plan to agency programs and	Ensure health department representation in a collaborative process resulting in a community health
improvement plan	services	improvement plan.
Describe your agency's strategic priorities, mission, and vision	Implement an organizational strategic plan	Ensure the successful implementation of an organizational strategic plan
Describe the importance of engaging community members in the design and implementation of programs to improve health in a community	Engage community members in the design and implementation of programs to improve health in a community	Ensure community member engagement in the design and implementation of programs to improve health in a community
Engage community assets and resources (e.g., Boys & Girls Clubs, public libraries, hospitals, faith-based organizations, academic institutions, federal grants, fellowship programs) to improve health in a community	Identify and engage assets and resources (e.g., Boys & Girls Clubs, public libraries, hospitals, faith-based organizations, academic institutions, federal grants, fellowship programs) that can be used to improve health in a community	Negotiate with multiple partners for the use of assets and resources (e.g., Boys & Girls Clubs, public libraries, hospitals, faith-based organizations, academic institutions, federal grants, fellowship programs) to improve health in a community
Collaborate with public health personnel across the agency to improve the health of the community	Engage in collaborations within the public health system, including traditional and non-traditional partners, to improve the health of a community.	Build collaborations within the public health system among traditional and non-traditional partners to improve the health of a community
Describe your role in improving the health of the community served by the agency	Assess how agency policies, programs, and services advance population health	Advocate for needed population health services and programs
Describe the relationship between a policy and many types of public health problems.	Examine the feasibility (e.g., fiscal, social, political, legal, geographic) of a policy and its relationship to many types of public health problems.	Determine the feasibility (e.g., fiscal, social, political, legal, geographic) of a policy and its relationship to many types of public health problems.
Collect and summarize information to inform the development of policies external to the organization that affect the health of the community (e.g., transportation routes, earned sick leave, tobacco 21, affordable housing/inclusionary zoning, complete streets, healthy food procurement)	Identify and assess options for policies external to the organization that affect the health of the community (e.g., transportation routes, earned sick leave, tobacco 21, affordable housing/inclusionary zoning, complete streets, healthy food procurement)	Prioritize and influence policies external to the organization that affect the health of the community (e.g., transportation routes, earned sick leave, tobacco 21, affordable housing/inclusionary zoning, complete streets, healthy food procurement)

20. For your programmatic area (e.g., Maternal Child Health, Environmental Health), please rate the following items in terms of importance to your current position and your current skill level.

## ITEMS

TIER 1: NON-SUPERVISORS	TIER 2: SUPERVISORS AND MANAGERS	TIER 3: EXECUTIVES
Content knowledge specific to my	Content knowledge specific to my	Content knowledge specific to my
programmatic area	programmatic area	programmatic area
Technical skills specific to my programmatic	Technical skills specific to my programmatic	Technical skills specific to my programmatic
area	area	area

[Populated with items from training need assessment deemed "Very Important" by the respondent]

- 21. Items shown are those you identified as "Very Important" to your current position from the last three pages. Select the most important item you would seek training on given your current responsibilities.
- 22. Please rate your level of agreement with the following statements:

	Strongly disagree	Disagree	Agree	Strongly agree
My agency provides me with time to address my training needs.				
My agency provides me with resources to address my training needs.				

## Section IV: Workplace Infrastructure

- 23. Which of the following best describes your **<u>current</u>** work situation?
  - O Completely in-person
  - O Mostly in-person, with some remote work
  - O Mostly remote, with some in-person work
  - O Completely remote
- 24. Considering your role, which of the following best describes your preferred work situation?

O Mostly remote, with so Completely remote  25. Please rate your level of agree				
	Strongly disagree	Disagree	Agree	Strongly agree
I feel comfortable using my paid time off.				

O Completely in-person

employees).

wellbeing.

I am able to complete my work within my normal working hours (e.g., 40 hours/week for full time

I have to take on responsibilities outside of my job description.

My agency implements policies and practices that support my mental

O Mostly in-person, with some remote work

26. Below is a list of non-traditional employee benefits that may or may not be currently offered at your agency. Please rate how important you feel it is that your agency provides each benefit to employees.

	Not important	Somewhat important	Moderately important	Very important
Flextime (flexibility in arrival, departure, and/or lunch times)				
Ad-hoc remote work (a portion of work hours are completed offsite on an ad hoc basis e.g., ability to work from home when your child is sick or you have an appointment)				
Onsite childcare				
Back-up childcare options				
Childcare stipend	·			
Lactation facilities				
Professional development funds				
Tuition assistance				
Student loan repayment/forgiveness				

27. Please rate your level of agreement with the following items related to **health equity**. Health equity means all people, regardless of who they are, where they came from, how they identify, where they live, or the color of their skin, have a fair and just opportunity to live their healthiest possible lives - in body, mind, and community. Achieving health equity requires removing social, economic, contextual, and

systemic barriers to health, and a continuous and explicit commitment to prioritize those affected by historical and contemporary disadvantages. (CityHealth)

	Strongly disagree	Disagree	Agree	Strongly agree
My agency's leaders are clearly committed to advancing health equity.				
My agency ensures that I can advance health equity as part of my daily work.				
My agency allocates resources based on communities' needs and priorities with the aim of addressing past and present inequities.				
My agency ensures that I can prioritize under- resourced and marginalized communities in my work.				
My agency actively collaborates with community-based organizations that work to improve health equity.				
My agency regularly involves community members affected by proposed programs or policies in decision making.				
My agency prioritizes community members' input when determining health department priorities.				

## Section V: Demographics

28.		ex were you assigned at birth?
		Male
	•	Female
29.		your current gender (select all that apply)?
		Male
		Female
		Transgender
		I use a different term (if you wish, you may elaborate)
30.	Please	select the race/ethnic category or categories with which you most identify (select all that
	apply).	
	_	Asian
		Black or African American Hispanic or Latino
		Middle Eastern or North African
		Native Hawaiian or other Pacific Islander
		White
	_	
31.	What is	your age in years? Please round to the nearest whole year. [write in]
32.	Have v	ou ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard?
		Never served in the military
	O	Only on active duty for training in the Reserves or National Guard
		Now on active duty
	0	On active duty in the past, but not now
33.	-	pay based on an annual salary or hourly wage?
		Annual salary
	0	Hourly wage
[Display	if annu	al:]
33b		at is your current annual salary?
	O	Less than \$25,000
		\$25,000 - \$35,000
	$\mathbf{O}$	\$35,000.01 - \$45,000
	$\mathbf{O}$	\$45,000.01 - \$55,000
	O	\$55,000.01 - \$65,000
	O	\$65,000.01 - \$75,000
	$\mathbf{O}$	\$75,000.01 - \$85,000
		\$85,000.01 - \$95,000
		\$95,000.01 - \$105,000
		\$105,000.01 - \$115,000
		\$115,000.01 - \$125,000
		\$125,000.01 - \$135,000
	0	\$135,000.01 - \$145,000
	$\mathbf{O}$	More than \$145,000

[Display if hourly:]

	33c.	What is your current hourly wage?
		O Less than \$12.50
		O \$12.51 - \$17.50
		O \$17.51 - \$22.50
		O \$22.51 - \$27.50
		O \$27.51 - \$32.50
		O \$32.51 - \$37.50
		O \$37.51 - \$42.50
		O \$42.51 - \$47.50
		O \$47.51 - \$52.50
		O \$52.51 - \$57.50
		O \$57.51 - \$62.50
		O \$62.51 - \$67.50
		O \$67.51 - \$72.50
		O More than \$72.50
	34 Ple	ase indicate which degrees you have attained. Check all that apply.
	•	☐ High school or equivalent
		Associate's degree in nursing
		Other associate degree
		BS/BA
		□ BSN
		BSPH/BAPH  Other become a common to de grade
		Other baccalaureate degree
		□ MA/MS
		□ MBA
		MHSA
		□ MPA
		□ MPP
		□ MPH
		□ MSN
		□ MSW
		□ Other masters degree
		□ DDS/DMD
		□ DrPH
		□ PhD in Public Health
		□ ScD in Public Health
		□ Other public health doctorate
		DNP
		DVM/VMD
		□ JD
		□ MD/DO, or international equivalent
		PharmD
		PhD/ScD/other non-public health doctorate
		☐ I am currently pursuing a degree
	0.41-	
	34b.	Please indicate the year you graduated for your degree(s). [Drop down for each
	deg	gree]
		[Carry forward selections from question above]
ID:-	anlay if "	Lam ourrently nursuing a degree" is selected?
נטו		I am currently pursuing a degree" is selected]
	34c.	Please indicate which degree(s) you are currently pursuing.
		☐ High school or equivalent

		Associate's degree in nursing
		Other associate degree
		BS/BA
		BSN
		BSPH/BAPH
		Other bachelor's degree
		MA/MS
		MBA
		MHSA
		MPA
		MPP
		MPH
		MSN
		MSW
		Other masters degree
		DDS/DMD
		DrPH
		PhD in Public Health
		ScD in Public Health
		Other public health doctorate
		DNP DVAAA (AAD
		DVM/VMD
		JD MD/DO or international aguityalant
		MD/DO, or international equivalent PharmD
		PhD/ScD/other non-public health doctorate
[Show if Ot	her a	associate, BS/BA, Other bachelor's degree, MA/MS, Other master's degree, PhD, or ScD]
34d.	Wa	s the major or concentration for your [pipe in each degree] public health?
		Yes
	$\mathbf{O}$	No
Display if a	a dec	gree in Public Health for obtained or pursuing]
34e.		ase select the primary concentration(s) associated with your degrees. If your
cor		tration(s) is(are) not listed please select "None of the above."
		Aging
		Biostatistics
		Community/Population Health
		Emergency Preparedness/Disaster Response
		Environmental Health
		Epidemiology
		Food Systems/Nutrition
		Global/International Health
		Health Communication
		Health Education
		Health Equity/Social Justice/Humanitarian
		Health Leadership
		Health Policy
		Healthcare Management/Administration
		Infectious Disease
		Maternal, Child, and Adolescent Health
		Occupational Health

	ш	Program Planning and Evaluation
		Social and Behavioral Science
		Women's and Reproductive Health
		None of the above
□ Program Planning and Evaluation □ Social and Behavioral Science □ Women's and Reproductive Health □ None of the above  35. Please indicate which current credentials you have. Check all that apply. □ Breastfeeding/Lactation Certification (CLC, CLE, CLS, or IBCLC) □ Certified Community Health Worker □ Certified Professional - Food Safety (CP-FS) and/or Certified Foodborne Outbreak Investigator □ Certified in Public Health (CPH) □ Dental Public Health - Board Certification (DPH) □ Diabetes Educator Certification (CDE) □ Infection Control Certification (CDE) □ Infection Control Certification (CIC) □ Laboratory Certification □ Licensed Clinical Social Worker (or your jurisdiction's equivalent) □ Nurse Certification □ Physician Assistant - Certified (PA-C) □ Physician Board Certification □ Preventive Medicine Physician board certification □ Registered Dicititian (RD) □ Registered Dicititian (RD) □ Registered Environmental Health Specialist/Registered Sanitarian (REHS/RS) □ Other Certification □ Not formally certified  36. Including loans for your own and others' education, about how much in student loans have you borrowed in total? This includes loans which no longer have a balance. (Dropdown) □ I did not take out any loans for my own or others' education. □ \$20,000.01 - \$10,000 □ \$10,000.01 - \$20,000 □ \$30,000.01 - \$40,000 □ \$40,000.01 - \$40,000 □ \$80,000.01 - \$40,000 □ \$80,000.01 - \$70,000 □ \$70,000.01 - \$110,000 □ \$110,000.01 - \$110,000 □ \$110,000.01 - \$110,000 □ \$110,000.01 - \$110,000 □ \$110,000.01 - \$150,000 □ \$110,000.01 - \$150,000 □ \$110,000.01 - \$150,000 □ \$110,000.01 - \$150,000 □ \$110,000.01 - \$150,000 □ \$160,000.01 - \$150,000 □ \$160,000.01 - \$150,000 □ \$160,000.01 - \$150,000 □ \$160,000.01 - \$150,000 □ \$160,000.01 - \$150,000 □ \$160,000.01 - \$150,000 □ \$160,000.01 - \$150,000 □ \$160,000.01 - \$150,000 □ \$160,000.01 - \$150,000		
35. Plea		· · · · · · · · · · · · · · · · · · ·
		·
	Ш	
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		·
		Not formally certified
36 Incl	udir	ng loans for your own and others' education, about how much in student loans have you
	row	ed in total? This includes loans which no longer have a balance. (Dropdown)
	owor	ed in total? This includes loans which no longer have a balance. (Dropdown) I did not take out any loans for my own or others' education.
	rowe O O	ed in total? This includes loans which no longer have a balance. (Dropdown) I did not take out any loans for my own or others' education. \$0.01 - \$10,000
	owor O O	ed in total? This includes loans which no longer have a balance. (Dropdown) I did not take out any loans for my own or others' education. \$0.01 - \$10,000 \$10,000.01 - \$20,000
	rowe	ed in total? This includes loans which no longer have a balance. (Dropdown) I did not take out any loans for my own or others' education. \$0.01 - \$10,000 \$10,000.01 - \$20,000 \$20,000.01 - \$30,000
	rower	ed in total? This includes loans which no longer have a balance. (Dropdown) I did not take out any loans for my own or others' education. \$0.01 - \$10,000 \$10,000.01 - \$20,000 \$20,000.01 - \$30,000 \$30,000.01 - \$40,000
	rower	ed in total? This includes loans which no longer have a balance. (Dropdown) I did not take out any loans for my own or others' education. \$0.01 - \$10,000 \$10,000.01 - \$20,000 \$20,000.01 - \$30,000 \$30,000.01 - \$40,000 \$40,000.01 - \$50,000
		ed in total? This includes loans which no longer have a balance. (Dropdown) I did not take out any loans for my own or others' education. \$0.01 - \$10,000 \$10,000.01 - \$20,000 \$20,000.01 - \$30,000 \$30,000.01 - \$40,000 \$40,000.01 - \$50,000 \$50,000.01 - \$60,000
		ed in total? This includes loans which no longer have a balance. (Dropdown) I did not take out any loans for my own or others' education. \$0.01 - \$10,000 \$10,000.01 - \$20,000 \$20,000.01 - \$30,000 \$30,000.01 - \$40,000 \$40,000.01 - \$50,000 \$50,000.01 - \$60,000 \$60,000.01 - \$70,000
		ed in total? This includes loans which no longer have a balance. (Dropdown) I did not take out any loans for my own or others' education. \$0.01 - \$10,000 \$10,000.01 - \$20,000 \$20,000.01 - \$30,000 \$30,000.01 - \$40,000 \$40,000.01 - \$50,000 \$50,000.01 - \$60,000 \$60,000.01 - \$70,000 \$70,000.01 - \$80,000
		ed in total? This includes loans which no longer have a balance. (Dropdown)  I did not take out any loans for my own or others' education.  \$0.01 - \$10,000  \$10,000.01 - \$20,000  \$20,000.01 - \$30,000  \$30,000.01 - \$40,000  \$40,000.01 - \$50,000  \$50,000.01 - \$70,000  \$70,000.01 - \$80,000  \$80,000.01 - \$90,000
		ed in total? This includes loans which no longer have a balance. (Dropdown)  I did not take out any loans for my own or others' education.  \$0.01 - \$10,000  \$10,000.01 - \$20,000  \$20,000.01 - \$30,000  \$30,000.01 - \$40,000  \$40,000.01 - \$50,000  \$50,000.01 - \$60,000  \$60,000.01 - \$70,000  \$70,000.01 - \$80,000  \$80,000.01 - \$90,000  \$90,000.01 - \$100,000
		ed in total? This includes loans which no longer have a balance. (Dropdown) I did not take out any loans for my own or others' education. \$0.01 - \$10,000 \$10,000.01 - \$20,000 \$20,000.01 - \$30,000 \$30,000.01 - \$40,000 \$40,000.01 - \$50,000 \$50,000.01 - \$60,000 \$60,000.01 - \$70,000 \$70,000.01 - \$80,000 \$80,000.01 - \$90,000 \$90,000.01 - \$110,000
		ed in total? This includes loans which no longer have a balance. (Dropdown)  I did not take out any loans for my own or others' education.  \$0.01 - \$10,000  \$10,000.01 - \$20,000  \$20,000.01 - \$30,000  \$30,000.01 - \$40,000  \$40,000.01 - \$50,000  \$50,000.01 - \$60,000  \$60,000.01 - \$70,000  \$70,000.01 - \$80,000  \$80,000.01 - \$90,000  \$90,000.01 - \$110,000  \$110,000.01 - \$120,000
		ed in total? This includes loans which no longer have a balance. (Dropdown) I did not take out any loans for my own or others' education.  \$0.01 - \$10,000 \$10,000.01 - \$20,000 \$20,000.01 - \$30,000 \$30,000.01 - \$40,000 \$40,000.01 - \$50,000 \$50,000.01 - \$60,000 \$60,000.01 - \$70,000 \$70,000.01 - \$80,000 \$80,000.01 - \$90,000 \$90,000.01 - \$100,000 \$100,000.01 - \$120,000 \$110,000.01 - \$130,000
		ed in total? This includes loans which no longer have a balance. (Dropdown)  I did not take out any loans for my own or others' education.  \$0.01 - \$10,000  \$10,000.01 - \$20,000  \$20,000.01 - \$30,000  \$30,000.01 - \$40,000  \$40,000.01 - \$50,000  \$50,000.01 - \$60,000  \$60,000.01 - \$70,000  \$70,000.01 - \$80,000  \$80,000.01 - \$90,000  \$90,000.01 - \$100,000  \$110,000.01 - \$110,000  \$110,000.01 - \$130,000  \$120,000.01 - \$130,000  \$130,000.01 - \$140,000
		ed in total? This includes loans which no longer have a balance. (Dropdown)  I did not take out any loans for my own or others' education.  \$0.01 - \$10,000  \$10,000.01 - \$20,000  \$20,000.01 - \$30,000  \$30,000.01 - \$40,000  \$40,000.01 - \$50,000  \$50,000.01 - \$60,000  \$60,000.01 - \$70,000  \$70,000.01 - \$80,000  \$80,000.01 - \$90,000  \$90,000.01 - \$100,000  \$110,000.01 - \$110,000  \$110,000.01 - \$120,000  \$120,000.01 - \$130,000  \$130,000.01 - \$140,000  \$140,000.01 - \$150,000
		ed in total? This includes loans which no longer have a balance. (Dropdown)  I did not take out any loans for my own or others' education.  \$0.01 - \$10,000  \$10,000.01 - \$20,000  \$20,000.01 - \$30,000  \$30,000.01 - \$40,000  \$40,000.01 - \$50,000  \$50,000.01 - \$60,000  \$60,000.01 - \$70,000  \$70,000.01 - \$80,000  \$80,000.01 - \$90,000  \$90,000.01 - \$110,000  \$110,000.01 - \$120,000  \$120,000.01 - \$130,000  \$130,000.01 - \$140,000  \$140,000.01 - \$150,000  \$150,000.01 - \$150,000
		ed in total? This includes loans which no longer have a balance. (Dropdown)  I did not take out any loans for my own or others' education.  \$0.01 - \$10,000  \$10,000.01 - \$20,000  \$20,000.01 - \$30,000  \$30,000.01 - \$40,000  \$40,000.01 - \$50,000  \$50,000.01 - \$60,000  \$60,000.01 - \$70,000  \$70,000.01 - \$80,000  \$80,000.01 - \$90,000  \$90,000.01 - \$110,000  \$110,000.01 - \$110,000  \$110,000.01 - \$120,000  \$120,000.01 - \$130,000  \$130,000.01 - \$150,000  \$140,000.01 - \$150,000  \$150,000.01 - \$150,000  \$150,000.01 - \$160,000  \$160,000.01 - \$170,000
		ed in total? This includes loans which no longer have a balance. (Dropdown)  I did not take out any loans for my own or others' education.  \$0.01 - \$10,000  \$10,000.01 - \$20,000  \$20,000.01 - \$30,000  \$30,000.01 - \$40,000  \$40,000.01 - \$50,000  \$50,000.01 - \$60,000  \$60,000.01 - \$70,000  \$70,000.01 - \$80,000  \$80,000.01 - \$90,000  \$90,000.01 - \$110,000  \$110,000.01 - \$110,000  \$110,000.01 - \$120,000  \$120,000.01 - \$130,000  \$130,000.01 - \$150,000  \$140,000.01 - \$150,000  \$150,000.01 - \$160,000  \$160,000.01 - \$170,000  \$170,000.01 - \$180,000
		ed in total? This includes loans which no longer have a balance. (Dropdown)  I did not take out any loans for my own or others' education.  \$0.01 - \$10,000  \$10,000.01 - \$20,000  \$20,000.01 - \$30,000  \$30,000.01 - \$40,000  \$40,000.01 - \$50,000  \$50,000.01 - \$60,000  \$60,000.01 - \$70,000  \$70,000.01 - \$80,000  \$80,000.01 - \$90,000  \$90,000.01 - \$100,000  \$110,000.01 - \$110,000  \$110,000.01 - \$120,000  \$120,000.01 - \$130,000  \$130,000.01 - \$150,000  \$140,000.01 - \$150,000  \$150,000.01 - \$160,000  \$160,000.01 - \$170,000  \$170,000.01 - \$180,000  \$170,000.01 - \$180,000  \$180,000.01 - \$190,000
		ed in total? This includes loans which no longer have a balance. (Dropdown)  I did not take out any loans for my own or others' education.  \$0.01 - \$10,000  \$10,000.01 - \$20,000  \$20,000.01 - \$30,000  \$30,000.01 - \$40,000  \$40,000.01 - \$50,000  \$50,000.01 - \$60,000  \$60,000.01 - \$70,000  \$70,000.01 - \$80,000  \$80,000.01 - \$90,000  \$90,000.01 - \$110,000  \$110,000.01 - \$120,000  \$110,000.01 - \$130,000  \$120,000.01 - \$130,000  \$130,000.01 - \$150,000  \$140,000.01 - \$150,000  \$150,000.01 - \$160,000  \$160,000.01 - \$170,000  \$170,000.01 - \$180,000

- **>** \$220,000.01 \$230,000
- **>** \$230,000.01 \$240,000
- **>** \$240,000.01 \$250,000
- **3** \$250,000.01 or more

### [Show if question above is not 0]

- 36b. As of today, including loans for your own or others' education, about how much in student loans **remain**? (Dropdown)
  - O \$0
  - **O** \$0.01 \$10,000
  - **3** \$10,000.01 \$20,000
  - **9** \$20,000.01 \$30,000
  - **3** \$30,000.01 \$40,000
  - **340,000.01 \$50,000**
  - **>** \$50,000.01 \$60,000
  - **9** \$60,000.01 \$70,000
  - **>** \$70,000.01 \$80,000
  - **9** \$80.000.01 \$90.000
  - **9** \$90,000.01 \$100,000
  - **>** \$100,000.01 \$110,000
  - **O** \$110,000.01 \$120,000
  - **3** \$120,000.01 \$130,000
  - **O** \$130,000.01 \$140,000
  - **9** \$140.000.01 \$150.000
  - **3** \$150,000.01 \$160,000
  - **3** \$160,000.01 \$170,000
  - **3** \$170,000.01 \$180,000
  - **3** \$180,000.01 \$190,000
  - **3** \$190.000.01 \$200.000
  - **>** \$200,000.01 \$210,000
  - **3** \$210,000.01 \$220,000
  - \$220,000.01 \$230,000\$230,000.01 \$240,000
  - \$240,000.01 \$250,000 • \$240,000.01 - \$250,000
  - \$250.000.01 or more
- 37. Of your current student loan balance, approximately what percentage is:
  - a. From private loans (Loan from private bank, loan from school, loan from friend or family)
  - b. From Federal direct loans (Stafford federal student loan (subsidized or unsubsidized)
  - c. PLUS federal student loan for parents; Federal consolidation loan; PLUS federal student loan for graduate students)
  - d. From other Federal sources loans (Perkins federal loan; Federal Family Education Loan;
  - e. From other governmental (but non Federal) loans (e.g., State loan)
  - f. From all other loans
- 38. Please specify your setting.
  - O City/Town Health Agency
  - O County Health Agency
  - O Other Public Health Local Agency
  - Multi-city Health Agency
  - Multi-county Health Agency
  - O State Health Agency Central Office
  - O State Health Agency Local or Regional Office

0	Hospital or Primary Care Clinic Inpatient or Outpatient Clinical Setting
0	Other [please specify]
	specify your employer.  Local government
Ö	State government
O	Federal government
O	Non-governmental
40. Please respons	e Health Agency - Central Office" is NOT selected] indicate where you work by answering the following questions. As a reminder, your ses are confidential and individual responses will never be shared with your agency. tate do you work in? gency do you work in?
[ <i>Display if "Othe</i> 40b. If you	er" is selected] selected "Other" above, please specify.
-	u willing to be contacted about participating in follow-up research projects? Yes No

O Other State Agency, not Health Agency

### Section VI: Modules

## Module I: Epidemiologists

You are receiving the following questions because you indicated that your job role is an Epidemiologist or one of your program areas is Epidemiology Surveillance.

- 1. Please select the epidemiology tier that best describes you.
  - O **Foundational:** Those completing academic programs or are early in their public health career still gaining training or applied experience on the job. These individuals require supervision when performing most tasks.
  - O Intermediate: Those who administer epidemiology programs and projects often independently. These individuals may require supervision while managing larger or more complex programs or projects and other tasks.
  - O **Practiced:** Those with subject matter expertise or who manage epidemiology programs and resources which may include finances and personnel. These individuals perform their duties independently and may supervise others on a project basis or all the time.
  - O Advanced: Those who typically hold senior positions within organizations, demonstrate leadership, and are visionaries. These individuals require no supervision for their job duties but may supervise and mentor others.
  - O **Does not apply:** I work in administration and/or do not consider myself to practice epidemiology. [If selected, skip to end of section]
- [Show the corresponding skills based on response to question 1 (e.g., Foundational → Column 1)]

	What is your curren	t skill level for this item?	
Unable to perform	Beginner	Proficient	Expert

T1: 1.5.3. Participates in epidemiologic investigation (e.g., identifies population of interest, identifies investigation timeframe, considers and accounts for sources of bias and confounders)	T2: 1.5.3. Conducts epidemiologic investigation (e.g., identifies population of interest, creates case definition, identifies investigation timeframe, considers and accounts for sources of bias and confounders)	T3: 1.5.3. Leads epidemiologic investigation (e.g., identifies population of interest, creates case definition, identifies investigation timeframe, considers and accounts for sources of bias and confounders)	T4: 1.5.3. Manages epidemiologic investigation (e.g., identifies population of interest, creates case definition, identifies investigation timeframe, considers and accounts for sources of bias and confounders)
T1: 1.6.2. Describes database design principles that allow for accurate and actionable data across diverse communities	T2: 1.6.2. Manages data and databases (e.g., including data transformation, creating datasets and variables, merging and splitting databases, formatting data, documenting data transformation)	T3: 1.6.2. Designs databases suitable for epidemiologic activities (e.g., including needed variables and data dictionary, ensuring compliance with national standards for coding and variables, supporting geographic analysis)	T4: 1.6.2. Evaluates data quality, accuracy, and reliability (e.g., designs and validates data entry techniques, cleans data, corrects errors)
T1: 1.7.1. Conducts descriptive data analysis to assess public health objectives	T2: 1.7.1. Conducts descriptive epidemiology data analysis to assess public health objectives	T3: 1.7.1. Conducts analysis of data using software for data analysis and management (e.g., frequencies and descriptive statistics, adjustments, epidemiologic measures, trend analysis, measures of association, confidence intervals, statistics, multivariate analyses, regression analyses, geospatial and other graphical representations, questionnaire results, interview responses, indexing, coding, labeling, triangulation, and member checking)	T4: 1.7.1. Conducts advanced data analytics methods (e.g., forecasting, mathematical modeling, Bayesian analysis, parsing qualitative data for natural language processing)
T1: 2.3.6. Assists in coordination with informaticians and information systems resources to use, develop, and support the acquisition, maintenance, use, and dissemination of epidemiologic data	T2: 2.3.6. Coordinates with informaticians and information systems resources to use, develop, and support the acquisition, maintenance, use, and dissemination of epidemiologic data	T3: 2.3.6. Assesses program needs with informaticians and information systems resources to use, develop, and support the acquisition, maintenance, use, and dissemination of epidemiologic data	T4: 2.3.6. Advocates for collaboration with informaticians and information systems resources to use, develop, and support the acquisition, maintenance, use, and dissemination of epidemiologic data

T1: 2.4.3. Identifies needs for	T2: 2.4.3. Explains needs for	T3: 2.4.3. Assesses needs for	T4: 2.4.3. Advocates for
modernization of information systems and use of the most current technology	modernization of information systems and use of the most current technology	modernization of information systems and use of the most current technology	modernization of information systems and use of the most current technology
			37

3.	Did you	u participate in any of the following programs as a fellow or trainee?
	Ţ	Applied Epidemiology Fellowship (AEF)
		Applied Public Health Informatics Fellowship (APHIF)
		ASPPH Fellowship
		EIS
		Fellowship with an affiliate organization (e.g., APHL, CSTE, SOPHE)
		,
		Leading Epidemiologists, Advancing Data (LEAD)
		ORISE Fellowship
		Public Health Associate Program (PHAP)
		Public Health AmeriCorps
		State or local health department fellowship [Specify]
		Other CDC Fellowship [Specify]
		Other [Specify]
4.	Within	the last year, have you served as a mentor and/or preceptor?
	•	Yes, I serve as a preceptor
	0	Yes, I serve as a mentor
	0	Yes, I serve as both
	O	No, I do not serve as either
5.	What m	notivated you to take a position in epidemiology? Please select all that apply.
		Primary or secondary educational experience (K-12)
		Undergraduate educational coursework
		Graduate educational coursework
		Personal experience

	ш	Professional experience
		COVID-19
		Mentor and/or personal connection
		Other, please specify
6.	When t	hinking about employees who are new to epidemiology, what skills do you think they are
	missing	g upon starting their role? Please select up to 3 responses.
		Software skills (Epi Info, SAS, SPSS, R, etc.)
		Data analytics (translating data and applying public health data)
		Persuasive communication (educating the public, communicating public health data)
		Professionalism and ability to work independently
		Critical and systems thinking
		Informatics
		Applying health equity principles to epidemiology activities
		Other (please specify)

### Module 2: Supervisors

Because you indicated that you are in a supervisory role, we are going to ask you a series of questions related to your supervisory status. For this section, a supervisor includes anyone who is responsible for employees' performance appraisals and approval of their leave, supervises one or more supervisors, or is a member of Senior Executive Service or equivalent.

- 1. How many years of supervisory experience did you have before entering your current role? Please round to the nearest year.
- 2. Please rate your level of agreement with the following items:

	Strongly disagree	Disagree	Agree	Strongly agree
When I began my current position as a supervisor, my agency provided leadership training (covering topics such as effective communication, conflict resolution, mentoring, etc.).				
When I began my current position as a supervisor, my agency provided training on organizational policies and practices (covering topics such as budgeting protocols, meeting norms, employee handbook, etc.).				
My agency provides ongoing leadership training opportunities for supervisors.				
My agency provides ongoing support for supervisors (e.g., Provides guidance when experiencing personnel challenges, hosts opportunities for peer managers to connect, etc.).				•

3.	Do you have the number of staff you need to perform the necessary functions of you	ır work
	unit?	
	O Yes	
	O No	
4.	Do you have the funding you need to perform the necessary functions of your work	unit?
	O Yes	
	O No	

5. Please rate your level of agreement with the following statements.

	Strongly disagree	Disagree	Agree	Strongly agree
I share the desired results that I expect from those whom I supervise.				
I am responsible for the success of those whom I supervise.				
I am responsible for the overall success of the team/department/division that I supervise.				
I take time to connect with those whom I supervise beyond their work.				
I prioritize establishing trust with those whom I supervise.				
I look for ways to empower those whom I supervise.				
I am responsible for developing the next cadre of leaders.				
I give those whom I supervise assignments that stretch them beyond their current capacities.				

The previous section focused on individual and internal agency factors related to being a supervisor. Now we are going to ask you about ways that you and those whom you supervise partner with other external organizations and sectors.

6. To what extent does your work unit collaborate with the following organizations/sectors? Collaborations can include both formal partnerships requiring a memorandum of understanding (MOU) and informal partnerships like asking for feedback on a report.

	Not at all	Very little	Some	A lot
Advocacy organizations				
Businesses				
Community-based non-profit organizations				
Elected & appointed officials				
Faith-based organizations				
Healthcare systems				
Law enforcement & justice agencies				
Planning & zoning agencies				

Public housing agencies		
Transportation and public transit agencies		
Research institutions (e.g., colleges and universities, think tanks, etc.)		
Schools (i.e., Pre-K, K-12 schools)		
Social services agencies		



## Module 3: Under 35

0 0	were you doing 6 months before you worked for your current employer?  Working a different job  Completing a fellowship, internship, volunteer program, or other time-limited service program  In school  Not in the workforce for an extended period of time  Other, please specify
[Show if "working	ng a different job"]
0	select which best describes your previous job. Governmental job in public health Governmental job not in public health Non-governmental job in public health Non-governmental job not in public health
	select which reasons you left your previous job (check all that apply).  Lack of acknowledgement/recognition Job satisfaction Lack of opportunities for advancement Lack of training Leadership changeover Better opportunities outside of the agency Pay Retirement Satisfaction with your supervisor Stress Lack of flexibility (flex hours/telework/hybrid work schedule) Weakening of benefits (e.g., retirement contributions/pensions, health insurance) Work overload / burnout Organizational climate/culture Lack of support from coworkers Job instability (e.g., loss of funding, RIF, layoffs) Reasons unrelated to my job (e.g., family obligations, health reasons, lack of affordable child-care options, moving, etc.) Other (Please Specify)
[Show if "comp	leting a fellowship"]
	participate in any of the following fellowships? Fellowship with an affiliate organization (e.g., APHL, CSTE, SOPHE) ASPPH Fellowship EIS Fellowship ORISE Fellowship Public Health Associate Program (PHAP) Other CDC Fellowship [Specify] Public Health Americorps State or local health department fellowship [Specify] Other [Specify]

5.	While receiving your education, did you participate in an internship at a governmental public health agency?  O Yes, at my current agency O Yes, at a different agency O No
6.	Please select the factors that attracted you to a career in governmental public health. Select all that apply.    Salary
7.	In your current job, do you believe employees have a path to develop towards other roles and responsibilities if they want that?  O Yes O No O Not sure
8.	How long do you intend to stay in governmental public health as a career?  Until I retire  For a long period of time, but not all the way to retirement  For some amount of time, but not the long-term  Do not intend to stay long  Not sure at this point
9.	Is there someone at work who encourages your development?  O Yes O No

## [Show if yes]

10.	Who at	work encourages your development? Please select all that apply.
		A mentor at work
		A supervisor
		A colleague
		Someone outside of my agency
		Other please describe