

Attachment A: Needs Assessment Survey

Emergency Risk Communication Network Needs Assessment -- Member Feedback for Project Management and Development --

Public reporting burden of this collection of information is estimated to average 12 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333: ATTN: PRA (0920-0798).

INTRODUCTION AND INSTRUCTIONS FOR COMPLETING SURVEY:

To provide better service and management of the Emergency Risk Communication Network, the Emergency Risk Communication Branch (ERCB) of the Centers for Disease Control and Prevention (CDC) requests your feedback concerning *The Risk Communicator*. We value your insights and experiences, and will use your input and suggestions to update the newsletter and provide the best networking activities possible.

The form contains questions with several response options and areas for your comments. All responses will be grouped for reporting; your individual survey results are confidential.

Section I: Demographics:

1. Today's Date: _____

2. Your highest Level of education:
 - ___ High School Diploma
 - ___ A.A. Degree
 - ___ B.A. / B.S. Degree
 - ___ M.A. / M.S. Degree
 - ___ PhD / MD Degree
 - ___ Other – please specify: _____

3. Discipline of Study / Expertise (please select one):

Health Communication

Health Education

Healthcare / MD / RN

Epidemiology

Other – please specify: _____

4. Your affiliation (please check the most representative selection):

Local health department

State health department

Nonprofit organization

College or university

Federal organization

Faith-based organization

Private sector organization

Other – please specify: _____

5. Your Role/Profession: (please check the most representative selection):

Communication Specialist

Public Information Officer

Health Educator

Epidemiologist

Emergency Response Coordinator

Medical Professional

Other – please specify: _____

6. How long have you been working in Public Health Communication? ___ years

Section II: Experience with *The Risk Communicator* (RC)

7. Which issues of *The Risk Communicator* (RC) have you seen? (Check all that apply)

None (skip to Question 19)

Issue One

Issue Two

Issue Three

8. Where did you get *The Risk Communicator*?

I'm on the membership list to receive the newsletter

I received it from a colleague

Through an Internet search

Don't remember

Other – please describe: _____

9. Did you read *The Risk Communicator* online or in printed format?

Online

Print (Skip to Question 11)

10. How many of the links did you follow for more in-depth information?

none

a few

several

many

all

11. What was your overall impression of *The Risk Communicator* newsletter?

Completely dissatisfied

Somewhat dissatisfied

Neutral

Somewhat satisfied

Completely satisfied

12. Please rate the format of the newsletter in terms of:

	Poor	Acceptable	Good	Excellent	NA
a. Organization of materials/structure					
b. Accessibility					
c. Overall "look" (aesthetics)					
d. Ease of navigation (if read online)					
e. Length					

13. Please use the following scale to rate the extent to which

1 – Not At All 2 – A Little 3 – Somewhat 4–Very Much NA – Not Applicable

	1	2	3	4	NA
a. Topics were of interest / concern					
b. Topics were relevant and useful					
c. Topics were clearly presented					
d. The information was accurate / reflects your experience					
e. The information was practical					
f. The information was timely					
g. The information was clearly presented					
h. You are interested in seeing future issues of the newsletter					
Comments:					

14. Have you used any of the information?

___ No

___ Yes – please describe what information you have used and how you have used it: _____

15. Do you have plans to use any of the information in the future?

No

Yes – please describe what material you plan to use and how you will use it:

16. Did you disagree with any of the information?

No

Yes – please describe the information you disagree with and explain why:

17. Is the presentation style appropriate for the audience?

Yes;

No If no, how could it be improved? _____

18. Have you shared the newsletters or any part of them with others?

No

Yes – please describe the information you have shared:

19. What content or information would you like to see covered in future newsletters?

20. What tools or other resources would you like to see provided in future newsletters?

21. Please use the following scale to rate the extent to which you would use the following presentation formats if they were created and hosted by CDC?

1 – Not At All – Don't Know 2 – A Little 3 – Somewhat 4–Very Much DK

	1	2	3	4	DK
a. Facebook					
B, Twitter					
c. RSS Feeds					
d. Other – please describe					
e. Other – please describe					
f. Other – please describe					
Comments:					

22. The original intent of the Risk Communication Network was for an interactive partnership (i.e. an exchange of risk communication ideas, experiences, and successful practices)

a. To what extent are you interested in a more interactive approach?

- Not at all
- A little
- Somewhat
- Very Much

b. Do you have material you would like to share through the newsletter?

- No
- Yes – please describe the information or type of information you would like to share: _____
- _____
- _____

c. To what extent would you like to be involved in future network activities?

Not at all

A little

Somewhat

Very Much

If Somewhat or Very Much, please describe how you would like to participate: _____

23. How should CDC advertise *The Risk Communicator* newsletter?

24. Do you know others who might be interested in participating in the network?

No

Yes – How may we contact them?

Thank you for completing this form.

