Page 1

Local Health Department Survey: FY2017

	Slightly familiar	Somewhat familiar	Moderately familiar	Extremely familiar
0	0	0	0	0
How familiar are you with the NI	OSH Health Hazard Evaluation	(HHE) Program?		
Not at all familiar	Slightly familiar	Somewhat familiar	Moderately familiar	Extremely familiar
0	0	0	0	0
Health Hazard Evaluation Progra No Yes I'm not sure.		Local Health Departm NIOSH Health Haz Program: Worl Program: Worl Seasonal rehability and storage for the control of the cont	ard Evaluation king Together	

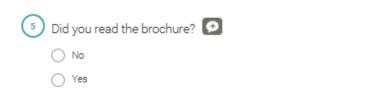
Public reporting burden of this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may 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 Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0940).

Local Health Department Survey: FY2017

4	If ye	es, how did you receive the brochure? 🖸		
	0	I received a paper copy in the mail.		
	0	I received a digital copy via email.		
	0	I did not receive a copy/I'm not sure.		
	0	Other (please specify):		
			Prev	Next

Page 3

Local Health Department Survey: FY2017





Page 4

NOTE: Participants will only see page 4 if they've answered "no" or "I'm not sure" to Questions 3, 4, or 5.

Local Health Department Survey: FY2017

- 6 Please read the brochure before answering the following questions. You can access the web version of the brochure here: Local Health Departments and the NIOSH Health Hazard Evaluation Program: Working Together
 - Select this option when you have read the brochure and are ready to proceed.





Page 5

Local Health Department Survey: FY2017

 \bigcirc Please check whether the following statements about the HHE Program are true or false. \bigcirc

	True	raise
The HHE Program has authority to investigate state and local agency workplaces.	0	0
The HHE Program always has authority to investigate a workplace when asked to do so by a local health official.	0	0
The HHE Program shares its reports with the Occupational Safety and Health Administration.	0	0
New reports on the HHE Program website do not include the name of the workplace that was investigated.	0	0
NIOSH must tell an employer the name of the employees who submit HHE requests.	0	0
The HHE Program can issue a citation if an employer does not follow its recommendations.	0	0
The HHE Program has the ability to interact with employers and employees who do not speak English.	0	0
The HHF program will likely do a field investigation when the request concerns mold in a school or office building	0	





Page 6

Local Health Department Survey: FY2017

•	Please rate your agreement with the fo	ollowing statements on a sc	ale from 1- strongly disagree to 7- st	trongly agree.			
	The HHE Program provides services the	at are relevant to my work. 🕻	9				
	Strongly disagree	Disagree	Somewhat disagree	Neither agree or disagree	Somewhat agree	Agree	Strongly agree
	0	0	0	0	0	0	0
•	The HHE Program is a credible source f	or occupational health and s	afety information.				
	Strongly disagree	Disagree	Somewhat disagree	Neither agree or disagree	Somewhat agree	Agree	Strongly agree
	0	0	0	0	0	0	0
10	The HHE Program has experts from a r						
	Strongly disagree	Disagree	Somewhat disagree	Neither agree or disagree	Somewhat agree	Agree	Strongly agree
	0	0	0	0	0	0	0
(1)	The HHE Program can investigate a var	iety of hazards in the workpli	ace. O				
	Strongly disagree	Disagres	Somewhat disagree	Neither agree or disagree	Somewhat agree	Agree	Strongly agree
	0	0	0	0	0	0	0
12	The HHE Program is a valuable resource						
	Strongly disagree	Disagres	Somewhat disagree	Neither agree or disagree	Somewhat agree	Agree	Strongly agree
	0	0	0	0	0	0	0
13	I would read HHE reports about evaluat						
	Strongly disagree	Disagree	Somewhat disagree	Neither agree or disagree	Somewhat agree	Agree	Strongly agree
	0	0	0	0	0	0	0
(14) I plan to share information about the HHE Program with my (ies. 👂				
	Strongly disagree	Disagres	Somewhat disagree	Neither agree or disagree	Somewhat agree	Agree	Strongly agree
	0	0	0	0	0	0	0
13	I would contact the HHE program if I needed assistance with an occupational health issue.						
	Strongly disagree	Disagree	Somewhat disagree	Neither agree or disagree	Somewhat agree	Agree	Strongly agree
	0	0	0	0	0	0	0
18 I would refer someone to the HHE Program if the situation warranted it.							
	Strongly disagree	Disagree	Somewhat disagree	Neither agree or disagree	Somewhat agree	Agree	Strongly agree
	0	0	0	0	0	0	0
17	I plan to search for HHE reports that are relevant to my work in the future.						
	Strongly disagree	Disagree	Somewhat disagree	Neither agree or disagree	Somewhat agree	Agree	Strongly agree
	0	0	0	0	0	0	0





Local Health Department Survey: FY2017

18	Would you be interested in receiving more information from the HHE Program?
	○ Yes
	○ No
19	If yes, how do you prefer to receive that information?
	○ Mail
	○ Email
	Other (please specify)
20	Please list, if any, other resources you would be interested in receiving and how often you wish to receive them.
21	After reading the brochure, did you have any unanswered questions? If yes, please list them here.
	Prev Next

Page 8

Local Health Department Survey: FY2017

Thank you for participating.



