Form Approved OMB No. 0920-1163 Exp. Date: 02/29/2020

Attachment B: NEPHIP Assessment Instrument Word Version

National Environmental Public Health Internship Program Outcome Assessment

Thank you for participating in this short online survey about your internship experience and satisfaction with the National Environmental Public Health Internship Program (NEPHIP). Your response will assist us with determining program impacts and identifying any areas for improvement. The survey will take about 10 minutes to complete. Please note, your responses will be used only in aggregate and individual responses will not be identifiable. Your participation in this survey is voluntary. Please contact Kayleigh Hall (mpq7@cdc.gov) with any questions regarding this survey.

1. Do you wish to opt-out of this survey and all future emails?

- o Yes
- o No

Clicking "no" will begin survey. If you do not wish to complete the survey at this time, please exit this page.

- 2. What was your experience with the National Environmental Public Health Internship Program (NEPHIP)?
 - 0 Intern (skip to question 4)
 - 0 Host Health Department (Mentor or Supervisor) (continue to question 3)

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 (0920-1163).

3. In what year(s) did your health department host a NEPHIP intern?

€ 2016 € 2017 € 2018

4. What is the population size of the jurisdiction where your health department or host health department provides services? (Those selecting "intern" in question 2 skip to question 14 after this question)

- o Less than 10,000
- o 10,000-49,999
- o 50,000-99,999
- o 100,000-499,999
- o 500,000-999,999
- o More than 1,000,000

5. At which level does your health department provide services?

- o Local
- o State
- 0 Tribal

6. When the intern you mentored in [Year] completed the internship program and graduated, did your health department... (Select one option) (This question will be shown for each year selected in question 3)

- o Hire the individual into the environmental health program (continue to question 7)
- **o** Hire the individual into another public health program (continue to question 7)
- Continue to work with the individual through a mechanism other than hiring (e.g., contracting, another fellowship, etc.) (continue to question 7)
- 0 Not hire nor work with the individual through any mechanism (skip to question 8)
- o I don't know (continue to 9)

7. Which of these are reasons why your health department has continued to work with the individual as an employee, contractor, or through another mechanism? (Check all that apply)

- € Had the knowledge and skills needed for the work
- \in Brought additional knowledge and skills that your team would not otherwise have had
- E Personal qualities (e.g., dependability, work ethic)
- Easier than recruiting a new person for the position
- Familiarity with your health department and its work
- € Other _____

8. Which of these are reasons why your health department did not hire the individual or continue to work with them through another mechanism? (Check all that apply)

€ No position available

 \in No funds available

- € Individual was not interested (e.g., accepted another position)
- \in Individual did not have the knowledge and skills needed for the work
- E Personal qualities of the individual (e.g., dependability, work ethic)
- € Other ____
- 9. Given your experience, would you recommend other health departments to participate in NEPHIP?
 - **O** Yes
 - **O** No
- 10. If given the opportunity, would you be interested in mentoring another intern in the future?
 - **O** Yes
 - **O** No
- 11. What advantages (if any) are there to hiring NEPHIP interns over other candidates? (Select all that apply)
 - \in Possess public health experience within federal, state, or local government, non-profit organizations, or academic institutions.
 - € Possess a foundation of environmental health knowledge.
 - \in Have received college education in environmental health.
 - € Familiarity with his/her contributions, skills and/or work style.
 - € He/she would require less (or no) time to train.
 - € There are no advantages to hiring NEPHIP interns over other, comparable candidates who did not participate in NEPHIP. (This option is only selectable by itself.)
 - € Other
- 12. What is the primary challenge you face in hiring NEPHIP interns? (Select all that apply)
 - € My agency does not have vacancies that are appropriate for their skill and experience level.
 - \in The salary my agency can offer cannot match the higher salaries offered by other agencies or organizations.
 - € Interns want to move away from my agency's location to live and work elsewhere.
 - € Interns want to pursue further education.
 - € Other_

13. From your perspective as an intern mentor, what is the primary benefit of your health department's participation in the internship program? [Open text field] (Skip to question 34)

14. Which of the following environmental health programs were you exposed to or gained experience in? (Please mark all that apply)

- € Animal Control
- € Body Art (Tattoo)
 € Campgrounds & RVs
 € Children's Camps
- € Collection of Unused Pharmaceuticals

Cosmetology Businesses
Day Care/Early Child Development Facilities
Emergency Preparedness and Response
Food Safety and Protection
Hazardous Waste Disposal
Hazmat Response
Health Related Facilities
Healthy Homes
Hotels/Motels
Indoor Air Quality
Injury Prevention
Land Use Planning
Lead Prevention
Milk Processing
Mobile Homes
Noise Pollution
Occupational Health
Outdoor Air Quality
Poison Control
Pollution Prevention
Pivate or Onsite Drinking Water
Public Swimming Pools
Radiation Control
Radon Control
Radon Control
Other Recreational Water (e.g., beaches)
Schools
Sinoke-Free Ordinances
Solid Waste
Special Events/Mass Gatherings
Tokacco Retailers
Toxicology
Vector Control
Other______ € Cosmetology Businesses $\tilde{\mathbf{\epsilon}}$ Other_

15. Is there a topic/area of environmental health you wanted to gain experience in but did not get to? If so, please tell us which topic/area.

- € Animal Control
- Finitial Control
 Body Art (Tattoo)
 Campgrounds & RVs
 Children's Camps
- € Collection of Unused Pharmaceuticals
- € Cosmetology Businesses

- € Day Care/Early Child Development Facilities Other Recreational Water (e.g., beaches) Onsite Wastewater (e.g., Septic Systems) € Vector Control € Other_
- 16. Which of the following activities were you exposed to or gained experience in? (Select all that apply)
 - \in Conduct research or in-depth studies
 - € Develop and establish policies
 - € Disease or hazard surveillance
 - € Educating the public
 - \in Engage in partnerships with the community, stakeholders, or other agencies
 - € Investigate disease outbreaks or respond to emergencies
 - € Issue permits or licenses
 - € Maintain databases or electronic information systems for environmental health data
 - € Perform inspections

- € Provide training (e.g., food handler's courses)
- € Respond to complaints
- \in Other (Please specify).
- 17. Did you engage in the following activities? (Select all that apply)
 - \in Decision-making that influences program planning
 - € Problem solving and critical thinking

 - € Collecting and analyzing data € Communicating risk to the public
 - Evaluating the effectiveness of services and activities
 - € Collaborating with other governmental agencies and staff
 - € Participating in community-based initiatives or events
 - € None of the above (cannot be selected with any other choice)
- 18. Were you assigned an independent project to complete over the duration of the internship?
 - 0 Yes
 - No (skip to question 22) 0
- 19. Please provide a brief description of the project(s) you were assigned. [Open text field]
- 20. How would you rate your independent project?
 - Excellent (skip to question 22) 0
 - Good (skip to question 22) 0
 - Fair (skip to question 22) 0
 - 0 Poor
- 21. Please provide more details. [Open text field]
- 22. What was your student status when you participated in the internship program?
 - Sophomore 0
 - 0 Junior
 - 0 Senior
 - Graduate Student 0

23. In what year did you participate in the internship program?

- o 2016
- 0 2017
- 2018 0

24. Do you still communicate with the mentor you were assigned when you participated in the internship program?

0 Yes

o No

25. Were you offered a part-time or fulltime position with the host health department (or other nearby health department)?

- 0 Yes
- o No

26. Comments [Open text field]

- 27. Did the internship make you more or less likely to pursue a position in the field of environmental health?
 - 0 More Likely
 - o Somewhat more likely
 - 0 Neither more nor less likely
 - 0 Somewhat less likely
 - 0 Less likely

28. Did the internship make you more or less likely to pursue a position with a public health department?

- 0 More Likely
- o Somewhat more likely
- 0 Neither more nor less likely
- o Somewhat less likely
- 0 Less likely

29. Overall, to what extent did your internship prepare you to perform your first job after your internship?

- Not at all Not relevant or did not prepare you
- o A little Had a small role in preparing you (e.g., introduced relevant topics or skills)
- Somewhat Had a moderate role in preparing you (e.g., developed skills, but you required additional training)
- Very much Had a large role in preparing you (e.g., little or no additional training needed)
- 0 Not applicable Not yet employed
- 30. Are you currently working in the field of environmental health?
 - o Yes
 - 0 No (skip to question 33)

31. What is your current job title? This should be the title that you regularly use, regardless of your official HR classification. [Open text field]

32. What is your primary work affiliation in your current position (i.e., the place where you work on a day-to-day basis)?

Federal agency

- State health department/government
- Local health department/government
- o Tribal health department/government
- o Territorial health department/government
- 0 International health agency/ government

- o Military
- Other government ____
- 0 Foundation/association/non-governmental organization
- Private hospital/clinic
- **o** Government hospital/clinic
- Private corporation/industry
- Other employer_

33. What are the primary reasons you do not work in environmental health? [Open text field]

34. Is there anything else you would like to tell us about your experience with the internship program? [Open text field]