

ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS

Medical Countermeasure Training Needs Assessment – Screen Shots Set 1

Question Flow for Set 1:

Does your health department participate in Medical Countermeasure (MCM) planning and operations?

YES

NO

Are you the primary person responsible for MCM planning and operations in your health department?

YES

NO

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Form Approved

OMB No. 0920-0879

Expiration Date 01/31/2021

Medical Countermeasure (MCM) Training Needs Assessment

Thank you for participating in the Medical Countermeasure (MCM) Training Needs Assessment. We are assessing the medical countermeasure (MCM) training needs of MCM officials in state, territorial, local, and tribal jurisdictions nationwide. The data will be used to inform the development and delivery of CDC-sponsored MCM trainings and create a comprehensive five-year MCM training plan based on the stated needs of respondents.

As an MCM official, you are best positioned to identify the MCM training needs of your jurisdiction. The assessment will take approximately 31 minutes (out of a range of 7 minutes to 59 minutes). All responses will be kept secure and will be shared in aggregate form and your participation is voluntary. If you have any questions or issues while taking it, please email preparedness@naccho.org.

Again, we appreciate your time and contributions to advancing MCM preparedness.

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1. Does your health department participate in Medical Countermeasure (MCM) planning and operations?

- Yes
- No

CDC estimates the average public reporting burden for this collection of information as 31 minutes per response (out of a range of 7 minutes to 59 minutes), including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information 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 burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0879).



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NACCHO

National Association of County & City Health Officials

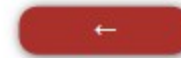
2. Are you the primary person responsible for MCM planning and operations in your health department?

Yes

No



Survey Powered By Qualtrics



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3. The CDC Public Health Emergency Preparedness (PHEP) cooperative agreement provides funding to 50 states, 4 cities, and 8 U.S. territories. Do you work directly for one of these recipients? (For a detailed list of recipients, [please click here.](#))

- Yes
- No

4. Please select your current job title.

- Medical Countermeasure Coordinator
- Public Health Preparedness Coordinator
- Preparedness Coordinator
- Medical Countermeasure Specialist
- Medical Countermeasure Planner
- Health Officer
- Administrator
- Director
- Other

5. How many years of experience do you have with MCM planning and coordination? Must be a number entry between 0-99).

6. What is the size of your jurisdiction?

- Less than 50,000 people
- 50,000 - 500,000 people
- More than 500,000 people

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7. a. In the table below, please enter an estimated number of individual staff and volunteer(s) from each category listed on the left that would be involved in response for each role listed across the top. (Must be a number entry). If you are unable to estimate for a staff or volunteer type, please leave the box blank.

	Role During Response: Distribution Workers	Role During Response: Distribution Coordinators and Planners	Role During Response: Dispensing Workers	Role During Response: Dispensing Coordinators and Planners
Your department staff	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other health department staff	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other local government officials/staff	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Community volunteers	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Corporate partnership staff	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

7. b. On a scale from 1-5, how would you rate the accuracy of your estimates, with 5 being "very accurate" and 1 being "not at all accurate"?

Not at all
accurate
(1)

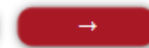
2

3

4

Very accurate
(5)

N/A



ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS

TRAINING EXPERIENCE

For the purpose of this assessment, training refers to any and all courses, conferences, and online and in-person learning experiences related to MCM preparedness and responses.

8. How well does your health department's MCM training prepare staff for MCM job responsibilities?

Training does not exist (0)
 Prepares staff very poorly (1)
 2
 3
 4
 Prepares staff very well (5)

9. For each training listed below, indicate whether you have taken the training, and if yes, rate how valuable the training was to your MCM job position.

	Have you attended this type of training?	On a scale of 1-5, indicate how valuable this training was to your MCM job position. (1=not at all valuable; 5=extremely valuable, N/A)
CDC MCM Training	<input type="text"/>	<input type="text"/>
Federal Preparedness and Emergency Response Training (e.g. NIMS, HSEEP)	<input type="text"/>	<input type="text"/>
State Level MCM Training	<input type="text"/>	<input type="text"/>
State Level Preparedness and Emergency Response Training	<input type="text"/>	<input type="text"/>
Local Level MCM Training	<input type="text"/>	<input type="text"/>
Local Level Preparedness and Emergency Response Training	<input type="text"/>	<input type="text"/>
Conferences (e.g. NACCHO Preparedness Summit).	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>

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TRAINING BARRIERS

For the purpose of this assessment, training refers to any and all courses, conferences, online and in-person learning experiences related to MCM preparedness and responses. Please answer the following questions about your training barriers.

10. Are there any MCM-related trainings that you wanted to take or conduct but were unable to?

- Yes
- No



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11. What barriers have you encountered to receiving training? Select all that apply.

- Lack of funding
- Inability to take time away from regular job duties
- Lack of support from supervisor/leadership
- Trainings not offered
- Emergency responses
- Personal commitments
- Other

- I have not encountered any barriers to receiving training

12. a. What barriers have you encountered to conducting training? Select all that apply.

- Lack of funding
- Lack of subject matter expertise
- Lack of support from supervisor/ leadership
- Inability to take time away from regular job duties
- Insufficient training/teaching skills
- Lack of other resources
- Engaged in emergency responses
- Other

- I have not encountered any barriers to conducting training
- Conducting training is not my job responsibility

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12. b. If you selected "lack of other resources," please explain why.

13. Over the past year, approximately how many total work days did you spend attending any type of training, not just MCM training? For the purpose of this question, one day refers to 8 hours.

- < ½ day
- ½ day
- 1-2 days
- 3-5 days
- 6-10 days
- > 10 days

14. Over the past year, approximately how many total work days did you spend attending MCM training? For the purpose of this question, one day refers to 8 hours.

- < ½ day
- ½ day
- 1-2 days
- 3-5 days
- 6-10 days
- > 10 days



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PLANNING AND EXERCISE EXPERIENCE

15. How would you rank your level of contribution to MCM distribution and dispensing plans?

No Contribution to Plan Development (0)	Very Minor Contribution to Plans (1)	2	3	4	Have Led the Development of Plans (5)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. Over the past year, how many MCM exercises have you participated in?

	Number of MCM Exercises				
	0	1-3	4-6	7-9	10+
Full-scale Exercises	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Functional Exercises	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Games	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tabletops	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Workshops	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seminars	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. Indicate at which site(s) you have worked during an emergency response. Select all that apply.

- Receive, Stage and Store (RSS) Site
- Regional Distribution Site (RDS) or Local Distribution Site (LDS)
- Dispensing Site
- None of the above

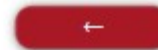
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TRAINING NEEDS

The following sections will assess your training needs on common responsibilities of MCM officials. Questions about these training needs align with CDC's MCM Coordinator Common Responsibilities and Associated Skills framework. Each common responsibility is described by a definition and a listing of six to nine associated skills.

Please read each definition and associated skill and answer the corresponding questions.



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18. Emergency Response Communication and Information Management: Identifying information and communication needs before, during, and after an emergency.

For each associated skill listed below, please indicate whether you have received training on this skill, if training (or more training) on the skill would improve your job performance, and if the skill is part of your current position.

	I have received training on this skill.	Training on this skill would improve my job performance.	This skill is part of my position.
Analyzing written resources, including technical materials, rules, regulations, instructions, reports, charts, graphs, or tables, and applying what is learned to develop program plans and public messaging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing materials that organize, compose, and present technical information in a clear and organized manner for intended audiences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developing and following jurisdictional plans that are based on the National Response Framework (NRF) and National Incident Management System (NIMS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acting within the scope of a jurisdiction's legal authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Providing written and oral communication on training, guidance and operational objectives to direct staff and volunteers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responding rapidly to changing circumstances by adapting strategies based on changing demands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identifying systems and procedures for tracking response progress and maintaining situational awareness over the course of a response	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintaining 24/7 response capacity at all times	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. List other skills in which training would improve your job performance in emergency response communication and information management.

20. Considering all associated skills from above, how confident are you in performing emergency response communication and information management?

Not at all confident
 2
 3
 4
 Extremely confident

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21. Incident Management: Applying knowledge of the strategies, tactics, technologies, principles, and processes needed to analyze, prioritize, and manage incidents.

For each associated skill listed below, please indicate whether you have received training on this skill, if training (or more training) on the skill would improve your job performance, and if the skill is part of your current position.

	I have received training on this skill.	Training on this skill would improve my job performance.	This skill is part of my position.
Understanding how federal, state, local and tribal response partners interact during an emergency response	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adhering to standardized national processes for organizing functions in an emergency response	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adhering to internal and external emergency response communication plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reporting potentially relevant incident information through the appropriate chain of command	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applying principles of crisis and risk communication to manage information related to an emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Identifying the systems and resources needed to maintain consistent interagency communications during an emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Managing multiple emergency communications systems used to communicate with health department staff and Medical Reserve Corps volunteers during emergencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coordinating regular drills to evaluate efficiency of alerting communications systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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22. List other skills in which training would improve your job performance in incident management.

23. Considering all associated skills from above, how confident are you in incident management?

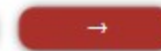
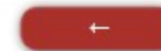
Not at all
confident

2

3

4

Extremely
confident



ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS



National Association of County & City Health Officials

24. Leveraging Partnerships: Establishing and leveraging a network of internal and external partners in order to achieve a common goal.

For each associated skill listed below, please indicate whether you have received training on this skill, if training (or more training) on the skill would improve your job performance, and if the skill is part of your current position.

	I have received training on this skill.	Training on this skill would improve my job performance.	This skill is part of my position.
Building relationships within and outside of the organization (public and private) including people from varied backgrounds, jurisdictions, and disciplines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leveraging expertise and contacts to gain knowledge, solve problems, and plan for, respond to, and recover from public health emergencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eliciting and maintaining partner collaboration to accomplish objectives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicating regularly with partners both orally and in writing to a) ensure partnerships engagement and b) review emergency response plans, roles and functions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applying the organizational structure, leadership, and authority to achieve objectives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Documenting the role of partners in response plans and determining partners' capacity and capability to assist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Serving as liaison and coordinator with other support agencies/partners for resources needed during a public health emergency response, such as contractors and emergency supplies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS

25. List other skills in which training would improve your job performance in leveraging partnerships.

26. Considering all associated skills from above, how confident are you in leveraging partnerships?

Not at all
confident



2



3



4



Extremely
confident



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National Association of County & City Health Officials

27. Program Evaluation and Technical Assistance: Expanding program capabilities through exercise, evaluation, and improvement planning and tracking. Providing technical assistance and serving as an authoritative source on job-related skills and information.

For each associated skill listed below, please indicate whether you have received training on this skill, if training (or more training) on the skill would improve your job performance, and if the skill is part of your current position.

	I have received training on this skill.	Training on this skill would improve my job performance.	This skill is part of my position.
Analyzing data and evaluation results to determine the effectiveness of programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using planning and operational elements of the MCM Operational Readiness Review (ORR) to evaluate and measure progress toward implementation status goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evaluating exercises and responses to identify capability gaps, conduct improvement planning, and follow up on necessary changes, using a Homeland Security Exercise and Evaluation (HSEEP)-based system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assessing training needs and opportunities, and coordinating the delivery of these trainings to staff, volunteers, and other partners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developing a multi-year training and exercise plan that is reflective of the most recent jurisdictional risk assessment, recent exercise findings, and other specific local, state, and federal requirements and priorities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilitating learning through formal and informal training methods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS

28. List other skills in which training would improve your job performance in program evaluation and technical assistance.

29. Considering all associated skills from above, how confident are you in program evaluation and technical assistance?

Not at all
confident



2



3



4



Extremely
confident



ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS



30. Program Planning and Operations: Formulating objectives and identifying priorities for MCM programs to inform the planning process and ensure operational readiness.

For each associated skill listed below, please indicate whether you have received training on this skill, if training (or more training) on the skill would improve your job performance, and if the skill is part of your current position.

	I have received training on this skill.	Training on this skill would improve my job performance.	This skill is part of my position.
Applying knowledge of program management policies and public health preparedness concepts to develop strategies to implement program initiatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developing program plans targeting general or specific audiences with input from internal and external partners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analyzing policy, including legislation, regulations, procedures, and administrative actions, to support decision making and recommendations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensuring the Receiving, Staging, and Storing (RSS) sites are properly staffed and can rapidly and efficiently receive and distribute MCM to PODs, treatment centers, and other locations during an emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Providing guidance for and developing POD operations plans that identify staffing requirements and desired throughput to dispense medication to the affected population during incidents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintaining an inventory management system and ensuring health department emergency response vehicles, equipment, and supplies are operationally ready for a public health emergency response	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developing and maintaining a resource management system for training, rostering, and tracking tactical and non-tactical resources when activated for an incident response	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Making recommendations on financial, technical, and staffing resources based on Public Health Emergency Preparedness (PHEP) cooperative agreement requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analyzing program management policies to support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS

31. List other associated skills in which training would improve your job performance in program planning and operations.

32. Considering all associated skills from above, how confident are you in program planning and operations?

Not at all
confident



2



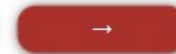
3



4



Extremely
confident



ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS



33. Grants Management and Administration: Ensuring MCM-related activities are conducted and reported appropriately.

For each associated skill listed below, please indicate whether you have received training on this skill, if training (or more training) on the skill would improve your job performance, and if the skill is part of your current position.

	I have received training on this skill.	Training on this skill would improve my job performance.	This skill is part of my position.
Coordinating emergency preparedness related grant activities, including grant opportunity identification, preparation, submission, oversight, reporting, and spend-down activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assessing and interpreting grant guidelines to ensure all proposed grant expenditures meet the requirements for federal, state, and local grants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seeking and writing service provider solicitations (e.g., requests for proposals (RFPs) and requests for information (RFIs))	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advising on selection of vendors/contractors and monitoring contracts to ensure compliance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performing budget preparations, justifications, and submissions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conducting budget projections, reviews, and reconciliations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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34. List other associated skills in which training would improve your job performance in grants management and administration.

35. Considering all associated skills from above, how confident are you in grants management and administration?

Not at all
confident



2



3



4



Extremely
Confident



ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS

Each topic listed below aligns with the Disaster Medicine and Public Health competencies as published in the American Medical Association’s journal of Disaster Medicine and Public Health Preparedness.

36. Disaster Medical and Public Health Knowledge: For each public health or medical topic listed below, please select all that apply to indicate whether you have received training on the topic, if training (or more training) on the topic would improve your job performance, and if knowledge of the topic is important to your position.

	I have received training on this skill.	Training on this skill would improve my job performance.	This skill is important to my position.
Personal and family preparedness for disasters and public health emergencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Expected role in organizational and community response plans activated during a disaster or public health emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thorough situational awareness of actual/potential health hazards before, during, and after a disaster or public health emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effective communication with others in a disaster or public health emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal safety measures that can be implemented in a disaster or public health emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Surge capacity assets, consistent with your role in organizational, agency, and/or community response plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Principles and practices for the clinical management of all ages and populations affected by disasters and public health emergencies, in accordance with professional scope of practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public health principles and practice for the management of all ages and populations affected by disasters and public health emergencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ethical principles to protect the health and safety of all ages, populations and communities affected by a disaster or public health emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal principles to protect the health and safety of all ages, populations, and communities affected by a disaster or public health emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Short and long-term considerations for recovery of all ages, populations, and communities affected by a disaster or public health emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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37. List other public health or medical topics in which training would improve your job performance in disaster medicine and public health preparedness.

38. Considering all public health and medical topics from above, how confident are you in disaster medicine and public health preparedness?

Not at all
confident

2

3

4

Extremely
Confident



ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS



Thank you for taking the MCM Training Needs Online Assessment. If you have any questions or comments for CDC's Division of State and Local Readiness Applied Learning and Development Team, contact them at: dslrtraining@cdc.gov. Please click "Submit" below to complete the online assessment and submit your response.

Please include any final comments for CDC's Division of State and Local Readiness Applied Learning and Development Team here:



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Dear Participant,

Thank you for your participation in the MCM Training Needs Assessment. Based on your responses to the questions we would like to invite you to join us in discussing some additional questions about MCM training needs.

We are hosting a series of virtual group interviews in [insert date range] in order to learn more detailed information about your jurisdiction's MCM training needs. We value your voice in this assessment and would appreciate your continued voluntary participation. To keep your responses to the MCM Training Needs Assessment secure, we ask that you click on the link below to complete a brief poll about your interest and availability for participating in a group interview.

Sign-up here: http://naccho.co1.qualtrics.com/jfe/form/SV_3qpwJki2Vv83737



ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS

Medical Countermeasure Training Needs Assessment – Screen Shots Set 2

Question Flow for Set 2:

Does your health department participate in Medical Countermeasure (MCM) planning and operations?

YES

NO

Are you the primary person responsible for MCM planning and operations in your health department?

YES

NO

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OMB No. 0920-0879

Expiration Date 01/31/2021

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Again, we appreciate your time and contributions to advancing MCM preparedness.

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1. Does your health department participate in Medical Countermeasure (MCM) planning and operations?

- Yes
- No

CDC estimates the average public reporting burden for this collection of information as 31 minutes per response (out of a range of 7 minutes to 59 minutes), including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information 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 burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0879).



ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS



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2. Are you the primary person responsible for MCM planning and operations in your health department?

Yes

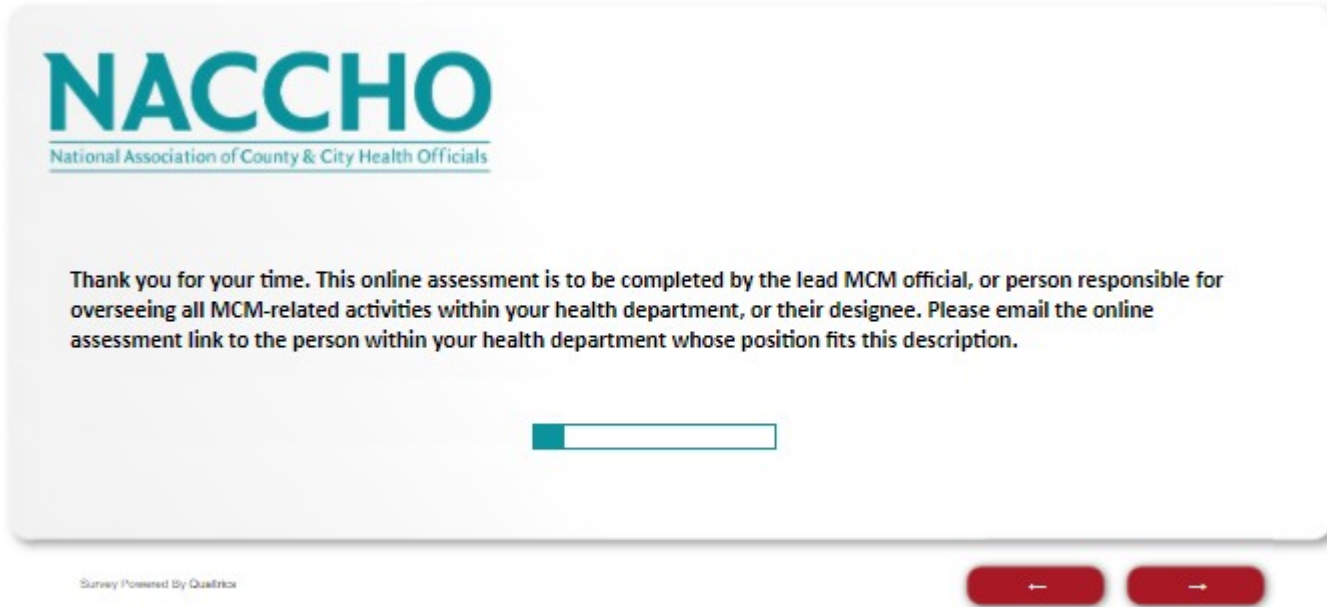
No

Survey Powered By Qualtrics

← →

The screenshot shows a survey question with two radio button options. The 'No' option is selected. Below the question is a progress bar with a teal segment on the left. At the bottom of the survey area, there are two red buttons with white arrows pointing left and right. The text 'Survey Powered By Qualtrics' is visible in the bottom left corner of the survey area.

ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS



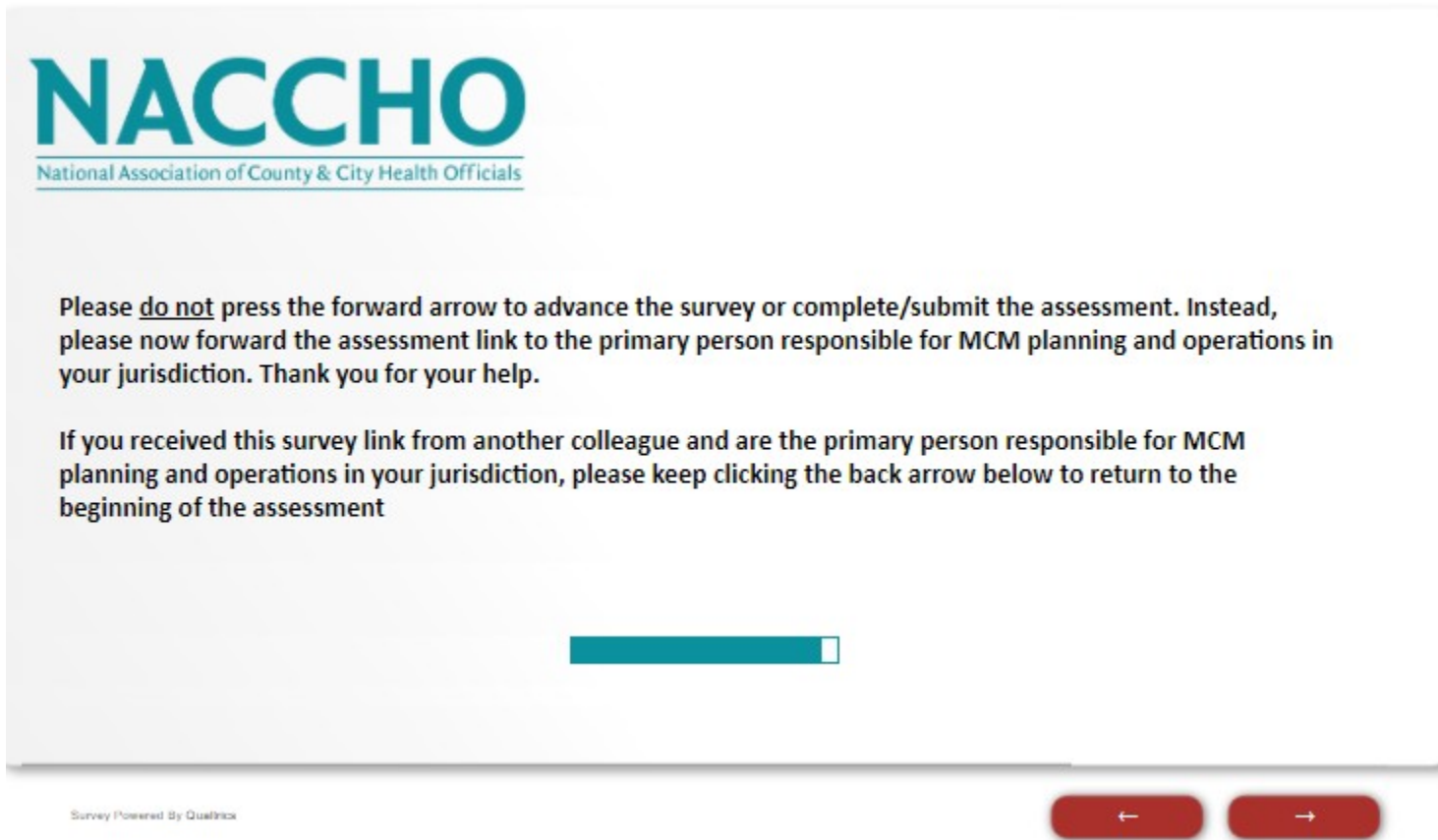
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Thank you for your time. This online assessment is to be completed by the lead MCM official, or person responsible for overseeing all MCM-related activities within your health department, or their designee. Please email the online assessment link to the person within your health department whose position fits this description.

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Please **do not** press the forward arrow to advance the survey or complete/submit the assessment. Instead, please now forward the assessment link to the primary person responsible for MCM planning and operations in your jurisdiction. Thank you for your help.

If you received this survey link from another colleague and are the primary person responsible for MCM planning and operations in your jurisdiction, please keep clicking the back arrow below to return to the beginning of the assessment

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ATTACHMENT E – TRAINING NEEDS ASSESSMENT, WEB VERSION SCREENSHOTS



We thank you for your time spent taking this survey.
Your response has been recorded.

