**Attachment C – Web-Based Assessment Instrument, Word Version**

This version contains all of the questions that will be input into Qualtrics.

Thank you for participating in this electronic assessment. This assessment collects information at an organizational perspective from state, territorial, and local health department personnel in the United States. Information collected in this assessment include organizational demographic information, ideal and current state of training/exercises, as well as associated successes and key barriers for developing public health emergency response leaders in incident management. The Institute for Public Research at CNA and Johns Hopkins University (JHU) are conducting this assessment through a project funded by the Centers for Disease Control and Prevention.

As a health department official familiar with emergency response leadership roles, you are best positioned to identify training and exercises best practices, as well as the needs of your organization. The assessment will take approximately 20 minutes (from a range of 15 minutes to 20 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 ([Assessment\_Email\_TBD@CNA.org](mailto:Assessment_Email_TBD@CNA.org)).

We appreciate your time and contributions to better preparing public health emergency response leaders.

CDC estimates the average public reporting burden for this collection of information as 20 minutes per response, 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).

**NOTICE**

The purpose of this assessment is to better understand organizational information including demographics, ideal and current state of leadership training/exercises as well as key barriers to conducting training at health departments throughout the United States. The Institute for Public Research at CNA and Johns Hopkins University (JHU) are conducting this assessment in collaboration with the Centers for Disease Control and Prevention. You are invited to participate as a public health emergency response leader.

For the purposes of this assessment, some commonly accepted definitions are provided as reference:

A **public health** **emergency response leader** is *an individual working at a public health department or agency with designated routine or event-specific oversight duties and responsibilities or jurisdiction-specific equivalent to direct, manage, and/or supervise activities in response to a public health emergency or emergencies. Some examples may include roles such as Incident Commander/Manager, Operations Chief, Medical Countermeasures Lead, Laboratory Lead, Plans Chief, and Lead Public Information Officer/ Public Communication Lead.*

A **public health emergency** is *an occurrence or imminent threat of an illness or health condition caused by bioterrorism; epidemic or pandemic disease; a novel and highly fatal infectious agent or a chemical, biological, radiological, or nuclear agent or toxin; or other significant or catastrophic event (e.g., natural disasters) that poses a substantial risk of a significant number of human fatalities or incidents or permanent or long-term disability. [[1]](#footnote-1)*

**A public health emergency response,** comprises *the action(s) and/or activity (-ies) in the management of an emergency need for public health and/or healthcare [medical] system services to respond to a public health emergency.*

**Agency support** is defined as allocation of time, funding, or other material resources directed toward specific activities.

Participation is contingent on your agreement and having the knowledge and authority to provide responses that reflect your agency’s position on topics and matters covered herein.

Your participation is strictly voluntary and you may choose not to participate. If you opt to participate, you may withdraw at any time. If you decide not to participate or should you withdraw from participation at any time, there will be no adverse consequences for doing so. Participation entails completion of an online assessment that will take approximately 15 – 20 minutes. The assessment will pertain to the topic of organizational information on emergency response leadership training/exercises.

All data are stored in a password protected secure server. Should you have any questions about the assessment, please contact us at ([Assessment\_Email\_TBD@CNA.org](mailto:Assessment_Email_TBD@CNA.org)).

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**ELECTRONIC CONSENT: Please select your choice below.  
  
Clicking on the "Agree" button below indicates that:**

* **You have read the above information.**
* **You have the authority to provide responses that reflect your agency’s position on topics and matters covered herein.**
* **You voluntarily agree to participate.**

**If you do not wish to participate in the electronic assessment, please decline participation by clicking on the "Disagree" button.**

1. Agree
2. DisagreeBottom of Form

**SECTION I – DEMOGRAPHIC QUESTIONS**

1. **What best describes your role in your primary day-to-day job? Please select one.**
2. Agency/organization director or chief executive
3. Division/department/section/unit chief or lead
4. Other, please specify
5. **What best describes the type of governance structure in your jurisdiction?**

1) Centralized/ largely centralized

*(Definition: 75% or more of the state's population is served by local health units that are led by employees of the state, and the state retains authority over many decisions relating to the budget, public health orders, and the selection of local health officials.)*

2) Decentralized

*(Definition: 75% or more of the state's population is served by local health units that are led by employees of local governments, and the local governments retain authority over many decisions relating to the budget, public health orders, and the selection of local health officials.)*

3) Shared

*(Definition: 75% or more of the state's population is served by local health units that meet one of these criteria: 1) local health units are led by state employees, but local government has authority over many decisions relating to the budget, public health orders, and the selection of local health officials; or 2) local health units are led by local employees, but the state has authority over many decisions relating to the budget, public health orders, and the selection of local health officials.)*

1. Mixed

*(Definition: Within the state, there is a combination of centralized, shared, and/or decentralized arrangements.*

*No one arrangement predominates in the state.)*

1. **What type of agency do you work for?**
2. State – main office
3. State – local office
4. Autonomous local – city/municipal
5. Autonomous local – county
6. Autonomous local – district or sub-state regional
7. Shared local
8. Territorial
9. Other, please specify
10. **What is the size of the population served by your agency?**
11. Less than 50,000
12. 50,000 – 149,999
13. 150,000 – 249,999
14. 250,000 – 349,999
15. 350,000 – 500,000
16. More than 500,000
17. **If your agency is a local health department, which of the following characteristics apply to the geographic area served by your agency? Please mark all that apply.**
18. City Readiness Initiative Grantee
19. Urban (Metropolitan Statistical Area/MSA)
20. Predominantly suburban (Micropolitan)
21. Predominantly rural (Rural)
22. None/ Not Applicable
23. **How many employees (including full time employees, contractors, and other support staff) work at your agency across all disciplines/departments?**
24. Less than 5
25. 5 – 19
26. 20 – 99
27. 100 – 1000
28. More than 1000
29. **How many times has your agency activated an Incident Command (or Management) System (ICS/IMS) in the past five years for real-world events?**
30. Never
31. 1 – 5 times
32. 6 – 10 times
33. 11 – 15 times
34. More than 15 times
35. **How many times has your agency activated an Incident Command (or Management) System (ICS/IMS) in the past five years for exercises?**
36. Never
37. 1 – 5 times
38. 6 – 10 times
39. 11 – 15 times
40. More than 15 times
41. **Please rate the level of importance of the following criteria to your agency in selecting public health leaders for emergency responses. Please mark one response for each criterion.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Very High**  **Importance** | **High**  **Importance** | **Moderate Importance** | **Low**  **Importance** | **No**  **Importance** |
| **Cumulative public health experience** |  |  |  |  |  |
| **Domain expertise/role during non-activation** (e.g., epidemiology, laboratory, medical countermeasures, risk communication, etc.) |  |  |  |  |  |
| **Prior public health emergency response leadership experience** |  |  |  |  |  |
| **Track record of success as an emergency response leader** |  |  |  |  |  |
| **Willingness/interest in serving as a leader** |  |  |  |  |  |
| **Completion of general leadership training** |  |  |  |  |  |
| **Prior participation in emergency response leadership training** |  |  |  |  |  |
| **Other, please specify:** |  | | | | |

Bottom of Form

**SECTION II – DESIRED STATE OF TRAINING AND EXERCISES**

**AMONG STATE AND LOCAL HEALTH DEPARTMENTS**

1. **Please rate the level of importance to your agency of requiring the following types of technical trainings, exercises, or other professional development opportunities for staff who will serve as emergency response leaders, regardless of whether they are currently available. Trainings could be federally sponsored, (e.g., FEMA courses), state or locally sponsored, or sponsored by a third-party vendor, etc. Please mark one response for each criterion.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Types of Trainings** | **Very High**  **Importance** | **High**  **Importance** | **Moderate Importance** | **Low**  **Importance** | **No**  **Importance** |
| **Basic ICS Courses** (e.g., ICS-100, ICS-200, IS-700, IS-800) |  |  |  |  |  |
| **Advanced Emergency Management Courses** (e.g., ICS-300, ICS-400, IS-930, EO680 series) |  |  |  |  |  |
| **Public Health/Health Department Role in Emergency Response** |  |  |  |  |  |
| **Epidemiology for Emergency Response** |  |  |  |  |  |
| **Chemical, Biological, Radiation, Nuclear, Explosive (CBRNE)** |  |  |  |  |  |
| **Mass Prophylaxis/Medical Countermeasures** |  |  |  |  |  |
| **Nonpharmaceutical Interventions/ Community Mitigation** |  |  |  |  |  |
| **Isolation/Quarantine Procedures** |  |  |  |  |  |
| **Risk Communication/Public Messaging** |  |  |  |  |  |
| **Other Training(s), please specify:** |  | | | | |

1. **Please rate the level of importance to your agency of requiring the following types of role-specifictraining,** **exercises, or other professional development opportunitiesfor staff who will serve as emergency response leaders, regardless of whether they are currently available. Trainings could be federally sponsored, (e.g., FEMA courses), state or locally sponsored, or sponsored by a third-party vendor, etc. Please mark one response for each criterion.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Very High**  **Importance** | **High**  **Importance** | **Moderate Importance** | **Low**  **Importance** | **No**  **Importance** |
| **Incident Commander/Manager Training** |  |  |  |  |  |
| **Command Staff Leadership Training- Liaison Officer** |  |  |  |  |  |
| **Command Staff Leadership Training- Public Information Officer** |  |  |  |  |  |
| **Command Staff Leadership Training- Safety Officer** |  |  |  |  |  |
| **General Staff Leadership Training- Planning** |  |  |  |  |  |
| **General Staff Leadership Training- Operations** |  |  |  |  |  |
| **General Staff Leadership Training- Logistics** |  |  |  |  |  |
| **General Staff Leadership Training- Finance** |  |  |  |  |  |
| **Leadership Training on Specific Subject Matters** (e.g., Epidemiology/ Outbreak Response, Medical Countermeasures, Communications) |  |  |  |  |  |
| **Other Training(s), please specify:** |  | | | | |

1. **Please rate the level of importance to your agency of requiring the following types of leadership/management training,** **exercises, or other professional development opportunities for staff who will serve as emergency response leaders, regardless of whether they are currently available. Trainings could be federally sponsored, (e.g., FEMA courses), state or locally sponsored, or sponsored by a third-party vendor, etc. Please mark one response for each criterion.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Very High**  **Importance** | **High**  **Importance** | **Moderate Importance** | **Low**  **Important** | **No**  **Importance** |
| **Strategic Thinking** |  |  |  |  |  |
| **Creativity and Innovation** |  |  |  |  |  |
| **Adaptive Leadership** |  |  |  |  |  |
| **Conflict Resolution/Negotiation** |  |  |  |  |  |
| **Team Dynamics and Motivation/Trust Building** |  |  |  |  |  |
| **Emotional Intelligence** |  |  |  |  |  |
| **Interpersonal Communication** |  |  |  |  |  |
| **Decision Making** |  |  |  |  |  |
| **Accountability** |  |  |  |  |  |
| **Ethics** |  |  |  |  |  |
| **Problem Solving** |  |  |  |  |  |
| **Human Resource Management** |  |  |  |  |  |
| **Employing Technology** |  |  |  |  |  |
| **Team Building** |  |  |  |  |  |
| **Political Competence** |  |  |  |  |  |
| **Other Training(s), please specify:** |  | | | | |

1. **Please rate the utility to your agency of the following mode(s) of delivery in providing public health emergency response leadership training,** **exercises, or other professional development opportunities irrespective of the current modalities used by your agency. Please mark one response for each criterion.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Very High**  **Utility** | **High**  **Utility** | **Moderate Utility** | **Low**  **Utility** | **No**  **Utility** |
| **Coaching/Mentoring/Shadowing** |  |  |  |  |  |
| **Online modules/eLearning** |  |  |  |  |  |
| **Participatory Workshops** |  |  |  |  |  |
| **Just-in-time Training** |  |  |  |  |  |
| **Individualized Study Programs** |  |  |  |  |  |
| **Lecture-Based Training** |  |  |  |  |  |
| **Participatory Drills/Exercises** |  |  |  |  |  |
| **Self-Directed/Reading** |  |  |  |  |  |
| **Other Mode(s), please specify:** |  | | | | |

**SECTION III – CURRENT STATE OF TRAINING AND EXERCISES**

**AMONG STATE AND LOCAL HEALTH DEPARTMENTS**

1. **Does your agency offer or provide staff with a leadership training program or curriculum for either general leadership development or public health emergency response leadership development?**
2. General Leadership
3. Public Health Emergency Response Leadership
4. Both
5. Neither
6. **Which of the following types of technical training,** **exercises, or other professional development opportunities are currently available, offered, or supported by your agency for current emergency response leaders? Trainings could be federally-sponsored, (e.g., FEMA courses), state or locally sponsored, or sponsored by a third-party vendor, etc. Please mark one response for each criterion.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of Trainings** | **Offered by Agency** | **Offered by Third Party/Supported by Agency** | **Unsupported by Agency/ Unavailable** |
| **Basic ICS Courses** (e.g., ICS-100, ICS-200, IS-700, IS-800) |  |  |  |
| **Advanced Emergency Management Courses** (e.g., ICS-300, ICS-400, IS-930, EO680 series) |  |  |  |
| **Public Health/Health Department Role in Emergency Response** |  |  |  |
| **Epidemiology for Emergency Response** |  |  |  |
| **Chemical, Biological, Radiological, Nuclear, Explosive (CBRNE)** |  |  |  |
| **Mass Prophylaxis/Medical Countermeasures** |  |  |  |
| **Nonpharmaceutical Interventions/Community Mitigation** |  |  |  |
| **Isolation/Quarantine Procedures** |  |  |  |
| **Risk Communication/Public Messaging** |  |  |  |
| **Other Training(s), please specify:** |  | | |

1. **Which of the following types of role-specific training, exercises, or other professional development opportunities are currently available, offered, or supported by your agency for current or future emergency response leaders? Trainings could be federally-sponsored, (e.g., FEMA courses), state or locally sponsored, or sponsored by a third-party vendor, etc. Please mark one response for each criterion.**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Offered**  **by Agency** | **Offered by Third Party/Supported by Agency** | **Unsupported by Agency/ Unavailable** |
| **Incident Commander/Manager Training** |  |  |  |
| **Command Staff Leadership Training-Liaison Officer** |  |  |  |
| **Command Staff Leadership Training-Public Information Officer** |  |  |  |
| **Command Staff Leadership Training-Safety Officer** |  |  |  |
| **General Staff Leadership Training** (e.g., Planning, Operations, Logistics, Finance) |  |  |  |
| **Role-Specific Internal Communications** |  |  |  |
| **Technical Subject Matter Expertise** (e.g., Epidemiology/Outbreak Response, Medical Countermeasures, Communications) |  |  |  |
| **Other Training(s), please specify:** |  | | |

1. **Which of the following types of leadership/management training,** **exercises or other professional development opportunities are currently available, offered, or supported by your agency for current or future emergency response leaders? Trainings could be federally-sponsored, (e.g., FEMA courses), state or locally sponsored, or sponsored by a third-party vendor, etc. Please mark one response for each criterion.**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Offered by Agency** | **Offered by Third Party/Supported by Agency** | **Unsupported by Agency/Unavailable** |
| **Strategic Thinking** |  |  |  |
| **Creativity and Innovation** |  |  |  |
| **Adaptive Leadership** |  |  |  |
| **Conflict Resolution/Negotiation** |  |  |  |
| **Team Dynamics and Motivation/Trust Building** |  |  |  |
| **Emotional Intelligence** |  |  |  |
| **Interpersonal Communication** |  |  |  |
| **Decision Making** |  |  |  |
| **Accountability** |  |  |  |
| **Ethics** |  |  |  |
| **Problem Solving** |  |  |  |
| **Human Resource Management** |  |  |  |
| **Employing Technology** |  |  |  |
| **Team Building** |  |  |  |
| **Political Competence** |  |  |  |
| **Other Training(s), please specify:** |  | | |

1. **Which mode(s) of delivery are currently available, offered, or supported by your agency for current or future emergency response leaders? Trainings could be federally-sponsored, (e.g., FEMA courses), state or locally sponsored, or sponsored by a third-party vendor, etc. Please mark one response for each criterion.**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Offered by Agency** | **Offered by Third Party/Supported by Agency** | **Unsupported by Agency/Unavailable** |
| **Coaching/Mentoring/Shadowing** |  |  |  |
| **Online Modules/eLearning** |  |  |  |
| **Participatory Workshops** |  |  |  |
| **Just-in-time Training** |  |  |  |
| **Individualized Study Program** |  |  |  |
| **Lecture-Based Training** |  |  |  |
| **Participatory Drills/Exercise** |  |  |  |
| **Self-Directed/Reading** |  |  |  |
| **Other Mode(s), please specify:** |  | | |

**SECTION IV – KEY BARRIERS TO TRAINING AND EXERCISE FOR**

**DEVELOPING PUBLIC HEALTH EMERGENCY RESPONSE LEADERS**

1. **To what extent does your agency agree that existing emergency management trainings such as ICS courses (e.g., ICS-100, ICS-200, etc.) adequately prepare staff to serve in leadership positions for public health emergency responses?**

1) Strongly agree

2) Moderately agree

3) Neither agree nor disagree/do not know

4) Moderately disagree

5) Strongly disagree

1. **To what extent does your agency agree that it offers or has access to emergency management/response trainings with content that impact public health practice?**

1) Strongly agree

2) Moderately agree

3) Neither agree nor disagree/do not know

4) Moderately disagree

5) Strongly disagree

Please provide examples of courses that impact public health practice: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Which factors limit the ability of your agency’s staff to participate in emergency response training, exercises, or other professional development opportunities to prepare them for leadership roles? Please mark all that apply.**
2. Lack of time to participate in training
3. Limited or no financial support (from agency) for training
4. Lack of awareness of available trainings
5. Limited number of relevant or applicable trainings offered
6. Lack of general interest in taking such courses
7. Other, please specify:
8. **Which factors limit the ability of your agency to provide emergency response leadership training, exercises, or other professional development opportunities? Please mark all that apply.**
9. Not an agency/management priority
10. Insufficient funding to provide or make training available to current or future emergency response leaders
11. Lack of qualified mentors and instructors
12. Few or no training options relevant to my organization’s needs
13. Available trainings not appropriate for all levels/types of employees who need it
14. Other, please specify:
15. **Please rate the importance to your agency in facilitating or providing public health emergency response leadership training, exercises, or other professional development opportunities. Please mark one response for each criterion.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | | **Very High**  **Importance** | **High**  **Importance** | **Moderate Importance** | **Low**  **Importance** | **No**  **Importance** | |
| **Availability of funding for training** | |  |  |  |  |  | |
| **Prioritizing general leadership training** | |  |  |  |  |  | |
| **Prioritizing public health emergency-specific leadership training** | |  |  |  |  |  | |
| **Access to mentors** | |  |  |  |  |  | |
| **Relevant training content to public health emergency response** | |  |  |  |  |  | |
| **Trainings are adaptable, customizable to state and local settings and organizational needs** | |  |  |  |  |  | |
| **Other, please specify:** |  | | | | | |

**Thank you for participating in this assessment. We appreciate you taking the time to share your knowledge!**

1. World Health Organization. *Glossary of Humanitarian Terms – ReliefWeb*, s.v. “Public health emergency,” adaptation, http://www.who.int/hac/about/definitions/en/ [↑](#footnote-ref-1)