

Attachment 2. 2025 LLS Supervisor Survey Screenshots



2025 LLS Supervisor Survey

Introduction

Form Approved
OMB No. 0920-1163
Expiration Date: 02/28/2026

Thank you for serving as a supervisor for the Laboratory Leadership Service (LLS) 2024 Fellowship Class! The purpose of this survey is to identify ways to improve the supervisor and host site experience.

Your participation is voluntary but highly encouraged. Individual responses will be accessible only to CDC's Epidemiology and Laboratory Workforce Branch (including LLS program) and DWD evaluation staff. Results from the survey will be reported in aggregate (e.g., 75% of host site supervisors were satisfied with the program).

We estimate that it will take approximately **7 minutes** to complete this survey. This survey link is unique to you, so please don't forward it to others.

Please contact ELWBEval@cdc.gov if you have any questions regarding this survey.

Notice: By continuing to the next screen, you consent to complete this survey.

The public reporting burden of this collection of information is estimated to average 7 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 Reports Clearance Officer; 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30333 ATT: PRA (0920-1163)

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2025 LLS Supervisor Survey

Feedback on LLS Program Support

* 1. Thinking about your experience hosting and supervising an LLS Fellow, please indicate the extent to which you found each of the following program support resources to be useful.

	Not at all useful	Not very useful	Somewhat useful	Very useful	N/A
LLS handbook	☐	☐	☐	☐	☐
Supervisor orientation	☐	☐	☐	☐	☐
Supervisor meetings	☐	☐	☐	☐	☐
Administrative support provided to fellows (e.g., onboarding)	☐	☐	☐	☐	☐

2. If you selected, "not at all useful" or "not very useful" please explain.

* 3. Please rate your level of satisfaction with the following statements.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	N/A
When I have a question or issue to discuss with the LLS program, the question or issue is resolved in a timely manner.	☐	☐	☐	☐	☐	☐
I am satisfied with the support I receive from the LLS program.	☐	☐	☐	☐	☐	☐
I am satisfied with my communication with LLS program staff.	☐	☐	☐	☐	☐	☐

4. If you selected "disagree" or "strongly disagree" please explain.

* 5. Please indicate the level of support you would like to receive in the future from the LLS program for the following processes:

	Less support	The same level of support	More support	No support needed	N/A
Ensuring the LLS Fellow completes CALs (Core Activities of Learning)	☐	☐	☐	☐	☐
Planning projects for the LLS Fellow	☐	☐	☐	☐	☐
Mentoring the LLS Fellow	☐	☐	☐	☐	☐
Administrative support (e.g., leave, travel)	☐	☐	☐	☐	☐

6. If you selected, "less support" or "more support" please explain.

* 7. Reflecting back on your experience as a supervisor for the past year, please identify any support services that you did not receive from the LLS program that would have been beneficial or that you'd wished you had.

Feedback on Fellow Training

* 8. What additional training or experiences would be helpful for LLS Fellows to receive during first year Summer Course, Fall Course, and second year Summer Course? Please include your thoughts below and indicate the respective course.

Fellow Contributions

* 9. Thinking about the LLS Fellow you supervise, please indicate to what extent you agree or disagree with the following statements.

	Strongly disagree	Disagree	Agree	Strongly agree
Your LLS Fellow serves as an active member of the laboratory team.	☐	☐	☐	☐
Your LLS Fellow contributes toward advancing laboratory assessments, protocols, or procedures.	☐	☐	☐	☐
Your LLS Fellow supports the development of laboratory safety in the laboratory.	☐	☐	☐	☐
Your LLS Fellow supports the development of laboratory quality in the laboratory.	☐	☐	☐	☐
Your LLS Fellow contributes to the advancement of applied health research in the laboratory.	☐	☐	☐	☐
My team values the LLS Fellow's contributions.	☐	☐	☐	☐
My team has gained knowledge or skills as a result of participating in the LLS Program.	☐	☐	☐	☐
Hosting my LLS Fellow has changed the way I or team members approach laboratory safety.	☐	☐	☐	☐
Hosting my LLS Fellow has changed the way I or team members approach laboratory quality.	☐	☐	☐	☐
LLS Fellow has changed the way I or team members approach laboratory management.	☐	☐	☐	☐

10. Please share some examples to support your responses to the question above.

Additional Feedback

* 11. Overall, how satisfied have you been with:

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
Your LLS Fellow	☐	☐	☐	☐	☐
The LLS Program	☐	☐	☐	☐	☐

* 12. Would you be willing to host another LLS fellow?

- ☐ Yes
- ☐ No
- ☐ Undecided

13. If you selected, "no" or "undecided" please explain.

* 14. Given your experience with LLS, would you recommend others serve as a host site?

- ☐ I would highly recommend that others serve as a host site
- ☐ I would recommend that others serve as a host site, but with some minor changes to LLS
- ☐ I would recommend that others serve as a host site, but only with major changes to LLS
- ☐ I would not recommend that others serve as a host site
- ☐ I don't know

* 15. Please explain your response to the previous question.

Conclusion

You have reached the end of the survey. Please click "Done" to submit your responses. Thank you for taking the time to provide your feedback. We value your feedback. Please contact elwbeval@cdc.gov with any questions regarding this survey.

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