

Screen 1

Strategic Scholars Program End-of-Cohort Survey

Form Approved

OMB No. 0920-1050

Expiration Date: 06/30/2025

Thank you for participating in the Strategic Scholars Program! Please take a few minutes to tell us about your experience. We rely on your feedback to plan and improve the program for future cohorts.

This survey should take less than 10 minutes. Your response is voluntary, and your answers are anonymous. If you have any questions, please contact Brittany Argotsinger at 404-498-0263 or bargotsinger@cdc.gov.

To begin, please click **next**.

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Screen 2 (top)

Strategic Scholars Program End-of-Cohort Survey

About You

The following questions will help us use your feedback to improve the program for participants like you.

* What **type of organization** do you represent?

- ☐ Local public health agency
- ☐ State public health agency
- ☐ Tribal public health agency or organization
- ☐ Territorial public health agency
- ☐ Other (please specify)

* How would you describe your **role** at your agency? (Select ALL that apply)

- ☐ Administration (e.g., finance officer, HR director, grants officer/administrator)
- ☐ Performance improvement staff or manager (e.g., accreditation, quality improvement, community health improvement, or workforce development coordinator)
- ☐ Senior/executive leadership
- ☐ Another role (please specify)

Attachment B – Instrument: Web Version

Screen 2 (bottom)

* To what extent did the following items factor into your **decision to apply** to be a Strategic Scholar?

	Not a Factor	Minor Factor	Strong Factor
A desire to improve specific skills	☐	☐	☐
A desire to address a specific challenge in your agency	☐	☐	☐
A desire to strengthen relationships with colleagues in your agency	☐	☐	☐
A desire for professional certification in the subject matter	☐	☐	☐

Something else (please specify)

Prev

Next

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Screen 3 (top)

Strategic Scholars Program End-of-Cohort Survey

Overall Value

We would like to know more about the overall value of the Strategic Scholars Program to you.

* Overall, to what extent was the Strategic Scholars Program a **valuable use of your time**?

- ☐ Not at all valuable
- ☐ Minimally valuable
- ☐ Moderately valuable
- ☐ Very valuable

* How likely are you to **use resource management skills** taught in this program in your work?

- ☐ Not at all likely
- ☐ Slightly likely
- ☐ Moderately likely
- ☐ Very likely

Attachment B – Instrument: Web Version

Screen 3 (bottom)

* How confident are you that resource management skills taught in this program will help your agency **better manage funding changes**, such as new federal or state funding opportunities?

- ☐ Not at all confident
- ☐ Slightly confident
- ☐ Moderately confident
- ☐ Very confident

* To what extent do you **disagree** or **agree** with the following statements based on your experience during the Strategic Scholars Program?

	Strongly Disagree	Somewhat Disagree	Neither Disagree nor Agree	Somewhat Agree	Strongly Agree
I had enough opportunities to practice or apply resource management skills.	☐	☐	☐	☐	☐
I gained practical resources that I will use in my work.	☐	☐	☐	☐	☐
Participating as a team is an important aspect of this program.	☐	☐	☐	☐	☐
I learned a great deal from scholars on my own team .	☐	☐	☐	☐	☐
I learned a great deal from scholars on other teams in the cohort.	☐	☐	☐	☐	☐
My team's change project will benefit my agency .	☐	☐	☐	☐	☐
I would recommend this program to others in a role similar to mine.	☐	☐	☐	☐	☐

In what ways, if any, have your working relationships with your team members changed as a result of your participation in the Strategic Scholars Program?

Prev

Next

Screen 4 (top)

Strategic Scholars Program End-of-Cohort Survey

Specific Program Offerings

The Strategic Scholars Program combines several ways to learn and apply new skills. Your responses to the following questions will help us understand the value of specific program offerings.

* How satisfied are you with the online course, **Building Expertise in Administration and Management (BEAM)**?

- ☐ Not at all satisfied
- ☐ Minimally satisfied
- ☐ Moderately satisfied
- ☐ Very satisfied
- ☐ I did not complete the course

Overall, how satisfied are you with the **way group learning time was used**?

- ☐ Not at all satisfied
- ☐ Minimally satisfied
- ☐ Moderately satisfied
- ☐ Very satisfied
- ☐ I did not participate in group learning

Attachment B – Instrument: Web Version

Screen 4 (bottom)

* Based on your experience with the Strategic Scholars Program, we are interested in suggestions you may have for the **use of live group learning sessions** in the future. Which of the following activities during live group learning sessions would best help participants retain or apply new knowledge from the online course modules? (Select up to THREE)

- ☐ Facilitator review of online course concepts
- ☐ Large group discussion of online course concepts
- ☐ Breakout (small group) discussion of online course concepts
- ☐ Exercises to practice and apply online course concepts
- ☐ Presentations by scholars about their experience with online course concepts
- ☐ Interactive training on new concepts that complement the online course
- ☐ Demonstration of tools to help scholars apply training concepts
- ☐ Something else (please specify)

* Did you participate in work on your team's applied project?

- ☐ No
- ☐ Yes

Prev

Next

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Strategic Scholars Program End-of-Cohort Survey

Specific Program Offerings (Continued)

* Which of the following **skills did you use**, at least in part, while working on your team's applied project? (Select ALL that apply)

- ☐ Identify strategies for understanding the true nature of public health problems
- ☐ Develop a program budget and narrative
- ☐ Procure services to help achieve programmatic goals
- ☐ Execute and manage contracts
- ☐ Assess the financial health of individual programs and their relevance to your agency's overall financial health
- ☐ Something else (please specify)

Prev

Next

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Screen 6 (top)

Strategic Scholars Program End-of-Cohort Survey

Specific Program Offerings (Continued)

* **Before** you began to work on your applied project, how **confident** were you in your ability to...

	Not at all confident	Minimally confident	Moderately confident	Very confident
Identify strategies for understanding the true nature of public health problems	☐	☐	☐	☐
Develop a program budget and narrative	☐	☐	☐	☐
Procure services to help achieve programmatic goals	☐	☐	☐	☐
Execute and manage contracts	☐	☐	☐	☐
Assess the financial health of individual programs and their relevance to your agency's overall financial health	☐	☐	☐	☐

* **Now**, at the end of the applied project period, how **confident** are you in your ability to...

	Not at all confident	Minimally confident	Moderately confident	Very confident
Identify strategies for understanding the true nature of public health problems	☐	☐	☐	☐
Develop a program budget and narrative	☐	☐	☐	☐
Procure services to help achieve programmatic goals	☐	☐	☐	☐
Execute and manage contracts	☐	☐	☐	☐
Assess the financial health of individual programs and their relevance to your agency's overall financial health	☐	☐	☐	☐

Attachment B – Instrument: Web Version

Screen 6 (bottom)

* To what extent do you **disagree** or **agree** with the following statements about your team's applied project?

	Strongly Disagree	Somewhat Disagree	Neither Disagree nor Agree	Somewhat Agree	Strongly Agree
Our coach provided helpful feedback when selecting our project.	☐	☐	☐	☐	☐
Our coach provided the type of support we needed to complete our project.	☐	☐	☐	☐	☐
We had enough dedicated time with our project coach.	☐	☐	☐	☐	☐
Our project was the right amount of work for the time we had to do it.	☐	☐	☐	☐	☐

* We would like to know if personalized team coaching began when it was most needed. What is your opinion of the **timing of the first coaching session**?

- ☐ Too early
- ☐ Just right
- ☐ Too late
- ☐ I don't know when my team first met with our coach

* Considering your overall experience, to what extent did each of the following components of the program **add value** to your experience as a Strategic Scholar?

	Did not add value	Added minimal value	Added moderate value	Added great value	N/A - Did not participate
Self-paced online course (BEAM)	☐	☐	☐	☐	☐
Live group learning sessions	☐	☐	☐	☐	☐
Applied team project	☐	☐	☐	☐	☐
Personalized team coaching	☐	☐	☐	☐	☐

* Outside of group learning sessions, did you communicate directly with any members from **other teams**?

- ☐ No
- ☐ Yes
- ☐ I don't recall

What, if anything, would you like to share about the level or quality of interaction **across teams**?

Screen 7

Strategic Scholars Program End-of-Cohort Survey

Additional Feedback

What else would you like us to know about your experience with the Strategic Scholars Program?

The following **optional** information is used to create an **anonymous** Scholar ID. This ID helps us learn about your experience as a Strategic Scholar at several points during the program. It allows us to link your survey responses and use your feedback more effectively **without the ability to identify you**. For items that are unknown or don't apply, please enter zero(s).

Last letter of your
middle name

Number of siblings,
alive or deceased

1st and 2nd letters of
your mother's first
name

Last digit of your birth
year

Prev

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Screen 8

Strategic Scholars Program End-of-Cohort Survey

This completes our Strategic Scholars Program survey. Thank you for taking time to share your feedback! If you have any questions or would like a summary of the findings and recommendations, please contact program evaluator, Brittany Argotsinger, at bargotsinger@cdc.gov or 404-498-0263.

Done