

Attachment 1. [Epidemic Intelligence Service] Alumni Survey

[Page 1] INTRODUCTION

Form Approved
OMB No. 0920-1078
Expiration Date: 03/31/2027

You are being asked to complete this survey because of your previous participation in the Epidemic Intelligence Service (EIS) Fellowship. The purpose of this survey is to learn about your career progression and how fellowship alumni contribute to the public health workforce.

Your participation is completely voluntary. Your individual responses will be kept secure and not shared. Only CDC Epidemiology and Laboratory Workforce Branch (including EIS program staff) and CDC Division evaluation staff will have access to your responses. Results from the survey will be reported in aggregate (e.g., 75% of alumni are employed in public health).

We estimate that it will take approximately [Year 1: 25, Year 3/5: 20] minutes to complete this survey. This survey link is unique to you, so please don't forward it to others. You will be able to return to the survey to edit or update your responses at any time prior to **the survey closing date on August 23, 2024**.

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 [Y1: 25/Y3/5: 20] 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 30329 ATT: PRA (0920-1078)**.

Post-Fellowship Education, Board Certifications, and Licenses

[Page 2] Degree completion

1. [**Year 1:** Since completing EIS, **Year 3/5:** In the last two years] have you graduated from a degree program at an academic institution?
 - a. Yes
 - b. No (**skip to Residency completion**)

[Page 3] Degrees earned

2. Specify degree(s) earned since [**Year 1:** since completing EIS, **Year 3/5:** in the last two years]. Select all that apply.
 - a. Master of Arts (MA)
 - b. Master of Business Administration (MBA)
 - c. Master of Public Health (MPH)

*=Required

! = DWD Standard Item

- d. Master of Science (MS)
- e. Master of Social Work (MSW)
- f. Doctor of Medicine (MD) or Doctor of Osteopathic Medicine (DO)
- g. Doctor of Philosophy (PhD)
- h. Doctor of Public Health (DrPH)
- i. Doctor of Veterinary Medicine (DVM)
- j. Doctor of Nursing Practice (DNP)
- k. Juris Doctor (JD)
- l. Other (please specify):

[Page 4] Residency completion

3. [**Year 1:** Since completing EIS, **Year 3/5:** In the last two years], have you completed a residency or clinical fellowship?
 - a. Yes
 - b. No (**skip to Board certifications**)

[Page 5] Residencies completed

4. What is the specialty of the residency or clinical fellowship you completed since EIS?

[Page 6] Board certifications

5. Do you currently have any active board certifications in the U.S.?
 - a. Yes
 - b. No (**skip to U.S. clinicians**)

[Page 7] Board certifications details

6. Please specify active board certifications:

[Page 8] U.S. clinicians

7. Are you currently a clinician (e.g., MD, DVM, nurse, PA) licensed to practice within the U.S.?
 - a. Yes
 - b. No

Post-Fellowship Activity

[Page 9] Employment Status

8. What is your employment status? *!
 - a. I am employed (part-time or full-time)
 - b. I am not employed (**skip to Education**)

[Page 10] Training or Fellowship Program Status

9. Are you employed in a training or fellowship program? *!
 - c. Yes, I am extending my current EIS fellowship
 - d. Yes, I am participating in a training or service program (e.g., Internship, ORISE) or a different public health fellowship program **other** than EIS (e.g., Public Health Informatics Fellowship Program)
 - e. No

*=Required

! = DWD Standard Item

[Page 11] Employer Details

Note: If you have more than one job, please provide employment information for what you consider to be your **primary** job and employer.

10. Employer name:
11. Job title:
12. Employer Country (i.e., the country where your employer is based, not the country where you primarily work from if working remotely): [drop-down list]
13. Employer State/Territory (if in the U.S.) (if you work remotely, this might be different from where you are located): [drop-down list]
14. Is your current work setting in the same CIO or division, agency, or organization as your EIS host site? *!
 - a. Yes
 - b. No
15. Which of the following best describes the **primary** focus of your current position?
 - a. **Public health (including population health and One Health)** - Select if your work focuses on protecting and promoting the health of entire populations or specific population groups; examples may include (but are not limited to) scientific, programmatic, and administrative work.
 - b. **Health care** - Select if your work focuses on diagnosing and treating individual patients; managing clinical services, hospitals, etc.
 - c. **Other** (please specify):

[Page 12] Employment Type

16. Which of the following best describes your current **type of employment**?

*=Required

! = DWD Standard Item

- a. **U.S. federal government** (e.g., CDC, FDA) *NOTE: if you are part of the USPHS Commissioned Corps, select this option. (Skip to Federal government employment activity)*
- b. **U.S. State, Tribal, Local, or Territorial (STLT) government** (e.g., Georgia Department of Public Health) *(Continue to Non-federal, government employment)*
- c. **Non-U.S. government or intergovernmental agency** (e.g., French national public health agency, European Centre for Disease Prevention and Control) *(Skip to Support of Essential Public Health Services)*
- d. **Contractor** in support of a government (U.S. or non-U.S.) or intergovernmental agency (e.g., Northrup Grumman) *(Continue to Government contractor employment)*
- e. **Non-governmental** (U.S. or non-U.S.) organization *(Continue to Non-governmental employment)*

[Page 13] U.S. Federal government employer

17. Which of the following best describes your current **federal employer**? *Note: If you are a USPHS Commissioned Corps Officer, select the agency to which you are assigned*
- a. Centers for Disease Control and Prevention (CDC). I am **stationed or work primarily at CDC headquarters or other CDC domestic office**.
 - b. Centers for Disease Control and Prevention (CDC). I am **stationed domestically** in the field (e.g., state, local, or tribal health department).
 - c. Centers for Disease Control and Prevention (CDC). I am **stationed internationally** in the field (including CDC country offices).
 - d. Other (non-CDC) Department of Health and Human Services (HHS) agency *(skip to U.S. Federal government employment status)*
 - e. Other Federal government agency (e.g., State Department) *(skip to U.S. Federal government employment status)*
 - f. Other (please specify): *(skip to U.S. Federal government employment status)*

[Page 14] U.S. Federal Government Employment Activity - CDC

18. In which CIO are you located? [dropdown of CIO options]
- a. CDC Washington Office (CDC/W)
 - b. Center for Forecasting and Outbreak Analytics (CFA)
 - c. Global Health Center (GHC)
 - d. Immediate Office of the Director
 - e. National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)
 - f. National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)
 - g. National Center for Environmental Health (NCEH) / Agency for Toxic Substances and Disease Registry (ATSDR)
 - h. National Center for Health Statistics (NCHS)
 - i. National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)
 - j. National Center for Immunization and Respiratory Diseases (NCIRD)
 - k. National Center for Injury Prevention and Control (NCIPC)
 - l. National Center for State, Tribal, Local, and Territorial Public Health Infrastructure and Workforce (NCSTLTPHIW)
 - m. National Center on Birth Defects and Developmental Disabilities (NCBDDD)

*=Required

! = DWD Standard Item

- n. National Institute for Occupational Safety and Health (NIOSH)
- o. Office of Budget Policy and Appropriations (OBPA)
- p. Office of Communications (OC)
- q. Office of Equal Employment Opportunity and Workplace Equity (OEEWE)
- r. Office of Health Equity (OHE)
- s. Office of Laboratory Science and Safety (OLSS)
- t. Office of Policy, Performance, and Evaluation (OPPE)
- u. Office of Public Health Data, Surveillance, and Technology (OPHDST)
- v. Office of Readiness and Response (ORR)
- w. Office of Science (OS)
- x. Office of the Chief of Staff (OCoS)
- y. Office of the Chief Operating Officer (OCOO)
- z. Other (please specify): _____

[Page 15] U.S. Federal Government –Employment Status

19. Which of the following best describes the employment status for your position?
- a. USPHS Commissioned Corps
 - b. Civil Service, Full Time Equivalent (FTE) (e.g., Title 5, 38)
 - c. Temporary or term FTE (including Title 42 appointment or [former fellowship extension [Y1 survey only]])
 - d. Other (please specify):
20. What is your current job series?
- a. 0101- Social/Behavioral Scientist
 - b. 0110 - Economist
 - c. 0301 - Miscellaneous Administration and Program
 - d. 0343 - Management and Program Analysis
 - e. 0401- Biologist
 - f. 0403 - Microbiology
 - g. 0560- Budget Analysis
 - h. 0601 - General Health Science
 - i. 0602 - Medical Officer
 - j. 0610 - Nurse
 - k. 0660 - Pharmacist
 - l. 0685 - Public Health Program Specialist
 - m. 0701 - Veterinary Medical Science
 - n. 0801 - General Engineering
 - o. 1001 - Health Communications Specialist
 - p. 1035- Public Affairs
 - q. 1083- Technical Writing and Editing
 - r. 1102 - Contract Specialist
 - s. 1515 - Operations Research
 - t. 1529 - Mathematical Statistics

*=Required

! = DWD Standard Item

- u. 1530 - Statistics
- v. 1550 - Computer Science
- w. 1560 - Data Science
- x. Other (please specify):

21. What is your current pay grade?

- a. GS-5 (or equivalent pay)
- b. GS-6 (or equivalent pay)
- c. GS-7 (or equivalent pay)
- d. GS-8 (or equivalent pay)
- e. GS-9 (or equivalent pay)
- f. GS-10 (or equivalent pay)
- g. GS-11 (or equivalent pay)
- h. GS-12 (or equivalent pay)
- i. GS-13 (or equivalent pay)
- j. GS-14 (or equivalent pay)
- k. GS-15 (or equivalent pay)
- l. Senior Executive Service (SES)
- m. USPHS Commissioned Corps O-3
- n. USPHS Commissioned Corps O-4
- o. USPHS Commissioned Corps O-5
- p. USPHS Commissioned Corps O-6
- q. USPHS Commissioned Corps O-7
- r. USPHS Commissioned Corps O-8
- s. USPHS Commissioned Corps O-9
- t. USPHS Commissioned Corps O-10
- u. Other (please specify):

(skip to Support of Essential Public Health Services)

[Page 16] U.S. Non-federal, government employment

22. Which of the following best describes your current **employer**?

- a. City or county government agency or laboratory
- b. State government agency or laboratory
- c. U.S. territorial or freely associated state government agency or laboratory
- d. Tribal government equivalent organization/coalition agency or laboratory
- e. College or University
- a. Other (please specify):

(skip to Support of Essential Public Health Services)

[Page 17] Government contractor employment

23. Which of the following best describes the **setting** in which you work?

- a. Centers for Disease Control and Prevention (CDC).
- b. Department of Health and Human Services (HHS) or other HHS agency (not CDC).

*=Required

! = DWD Standard Item

- c. Other U.S. federal government agency (e.g., State Department).
- d. U.S. city or county government agency.
- e. U.S. state government agency or public health laboratory.
- f. U.S. territorial or freely associated state agency.
- g. Tribal governmental equivalent organization/coalition within the U.S.
- h. Non-U.S. government or intergovernmental agency.
- i. Other (please specify):

(skip to Support of Essential Public Health Services)

[Page 18] Non-government employment

24. Which of the following best describes your current **employer**?
- a. College or university
 - b. For-profit, Industry (e.g., pharmaceutical company, non-clinical business)
 - c. Clinical (hospital or other clinical care)
 - d. Non-profit, U.S. focused
 - e.
 - f. Non-profit, non-U.S. focused
 - g. Other (please specify):

[Page 19] Support of Essential Public Health Services

25. Which of the following describe your work activities in your current job? Select all that apply.
- a) Assess and monitor population health
 - b) Investigate, diagnose, and address or treat health problems and hazards
 - c) Communicate effectively to inform and educate
 - d) Strengthen, support, and mobilize communities and partnerships
 - e) Create, champion, and implement policies, plans, and laws
 - f) Utilize legal and regulatory actions
 - g) Enable access to services and care
 - h) Build and support a skilled workforce
 - i) Improve and innovate through ongoing evaluation, research, and continuous quality improvement.
 - j) Build and maintain a strong organizational infrastructure for public health
 - k) Award or administer grants
 - l) I don't work on public health topics
 - m) Other (please specify):

[Page 20] Program Focus Area(s)

26. Please specify your current program area(s). Select all that apply.

Note: Some programs are listed differently than you would expect. For example, WIC can be found under "Maternal and Child Health – WIC."

- a. Administration/Administrative Support

*=Required

! = DWD Standard Item

- b. Biomedical Lab Sciences
- c. Children and Youth with Special Health Care Needs
- d. Clinical Services (excluding TB, STD, family planning)
- e. Communicable Disease (including, HIV, Influenza, STD, Tuberculosis, Viral Hepatitis)
- f. Community Health Assessment/Planning
- g. Emergency Preparedness
- h. Environmental Health
- i. Global Health
- j. Health Education/Behavioral Science
- k. Health Promotion/Wellness
- l. Immunizations
- m. Informatics/ Information Technology Services/ Data Science
- n. Injury/Violence Prevention
- o. Maternal and Child Health/ WIC
- p. Mental and Behavioral Health
- q. Minority Health/Health Disparities
- r. Non-Communicable Disease/Chronic Disease (including cancer, diabetes, heart disease, obesity, etc.)
- s. Policy and Legislation
- t. Program Evaluation
- u. Public Health Genetics
- v. Public health Laboratory
- w. Public Health Research (including disease-specific research, clinical trials, etc.)
- x. School Health
- y. Substance Abuse (including tobacco control programs)
- z. Surveillance Systems/ Epidemiology Surveillance
- aa. Training/Workforce Development
- bb. Vital Records
- cc. I don't work on public health topics
- dd. Other Program Area (specify):

[Page 21] Supervision and Leadership

27. Select the response that **best describes** the supervisory status of your position. *!

- a. **Non-supervisor:** I do not officially supervise/manage other employees.
- b. **Supervisor:** I am responsible for employee's performance appraisals and approval of their leave, but I do not supervise other supervisors.
- c. **Manager:** I supervise/manage one or more supervisors/managers.

28. In my current position, I have *!

	Yes	No
Influence on the operations or administration of my work unit (e.g., program department or branch)		

*=Required

! = DWD Standard Item

Formal decision-making authority for my work unit		
Opportunities to represent my organization in external settings		
Opportunities to participate in cross-sector or interdisciplinary collaboration		
Technical responsibility (e.g., subject matter expertise)		
Fiscal responsibility (e.g., budget management)		
Operational responsibility (e.g., general management of and/or operational oversight in your work unit or agency)		

[Page 22] Career Progression

Year 1: We are interested in learning about your career advancement over the past year. Select the best option for the statements below.

Year 3/5: We are interested in learning about your career advancement over the past two years. Select the best option for the statements below.

29. [**Year 1:** Over the past year, **Year 3/5:** Over the past two years] have you received a higher level of responsibility in your job?
 - a. Yes
 - b. No
30. [**Year 1:** Over the past year, **Year 3/5:** Over the past two years] have you received a promotion (e.g., higher position or grade level)?
 - a. Yes
 - b. No
31. [**Year 1:** Since completing EIS, **Years 3/5:** In the last two years], which of the following activities have you conducted (in your current position or elsewhere)? Check all that apply.
 - a. Contributed to the development of new or revised policies, guidelines, recommendations, or standards (includes public health, healthcare, and other work settings)
 - b. Led or played a key role in an emergency response or outbreak investigation
 - c. Developed, enhanced, or led public health programs or interventions
 - d. Led research project(s) (e.g., principal investigator for study)

*=Required

! = DWD Standard Item

- e. Obtained new funding for your organization (e.g., via contracts, grants, or other mechanisms)
- f. Authored or co-authored scientific publications or reports (e.g., peer-reviewed, non-peer-reviewed)
- g. Presented at conferences (e.g., oral presentations, posters)
- h. Increased public awareness of public health problems either locally or nationally
- i. Developed training or technical assistance materials (e.g., curricula, job aids)
- j. Improved public health surveillance
- k. Developed or strengthened partnerships
- l. Served on an expert panel or advisory board
- m. Served in an officially recognized leadership role (e.g., executive board) in a professional organization
- n. Other (please specify)

Education

[Page 23] Education

32. Are you currently in a degree program? *!
- a) Yes [continue to Education Focus]
 - b) No [skip to Preparedness for Post-Fellowship-Position]

[Page 24] Education focus

33. Which of the following best describes the **primary** focus of your current education? *!
- a. **Public health (including population health and One Health)** - *Select if your education focuses on protecting and promoting the health of entire populations or specific population groups; examples may include (but are not limited to) scientific, programmatic, and administrative work.*
 - b. **Health care** - *Select if your education focuses on diagnosing and treating individual patients; managing clinical services, hospitals; etc.*

Preparedness for Post-Fellowship Position [Year 1 only]

[Page 25] Preparedness for Post-Fellowship Position (all)

34. Overall, to what extent did your fellowship experience prepare you for your current position/role?
- a. Not at all prepared
 - b. Slightly prepared
 - c. Very much prepared
 - d. Extremely prepared
35. How influential has EIS been to your career path? *!
- a. Not at all influential
 - b. Slightly influential
 - c. Somewhat influential
 - d. Very influential

*=Required

! = DWD Standard Item

e. Extremely influential

36. I consider myself to be a public health ambassador (i.e., a champion or promoter of public health). *!

- a) Strongly disagree
- b) Disagree
- c) Neither agree nor disagree
- d) Agree
- e) Strongly agree

[Page 26] Use of Competencies/Skills [Year 1 only]

37. [Year 1 only] How relevant are the following skill sets to your current position?

EIS only	Not at all	A little	Somewhat	Very much
Assessment and analysis (e.g., surveillance activities, public health and epidemiologic investigations, data analysis and synthesis)	0	0	0	0
Basic public health sciences (e.g., using knowledge of disease cause, laboratory resources, and informatics principles to support epidemiologic practice)	0	0	0	0
Communication (e.g., development of written and oral reports, application of risk communication principles, usage of effective communication technologies)	0	0	0	0
Community dimensions of practice (e.g., development of community partnerships, support community public health planning)	0	0	0	0
Cultural competency (e.g., considering specific socio-cultural factors and groups in investigations, analysis, and recommendations)	0	0	0	0
Operational planning and management (e.g., accomplishing program objectives through collaborative relationships and team building)	0	0	0	0
Leadership and systems thinking (e.g., ethical conduct in epidemiologic practice, preparing for emergency response)	0	0	0	0
Policy development (e.g., incorporating epidemiologic perspective in policy development and analysis)	0	0	0	0

38. [Year 1 only] Please indicate the extent to which the following fellowship activities prepared you to perform your job duties in your current position.

EIS only	Not at	A	Somewhat	Very	Did not
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	all	little		much	complete activity during my fellowship
Conduct or participate in a field investigation of a potentially serious public health problem that requires a timely response	0	0	0	0	0
Design, conduct, and interpret an epidemiologic analysis	0	0	0	0	0
Evaluate a public health surveillance system	0	0	0	0	0
Give an in-depth public health talk on your original work or in your field of study	0	0	0	0	0
Give a 5–15 minute oral presentation to a scientific audience	0	0	0	0	0
Write a scientific manuscript for a peer-reviewed journal	0	0	0	0	0
Write a concise public health update communicating timely information	0	0	0	0	0
Write a scientific abstract	0	0	0	0	0
Communicate complex scientific concepts to a lay audience	0	0	0	0	0
Provide service to the agency (health department or CDC)	0	0	0	0	0

39. [Year 1/3/5] Which skills or topic areas not addressed during your EIS fellowship would have been helpful to carry out your current work duties? [open-ended]

[Page 27] Alumni Engagement

40. [Year 1: Since completing EIS, Year 3/5: In the last two years], which groups have you supervised or mentored? Select all that apply.

- a. Current EIS officers
- b. Epidemiology Elective Program (EEP) students
- c. EIS alumni
- d. Other (please specify)

41. Please rate your level of agreement: The EIS program helped me to establish an interdisciplinary professional network.

- a. Strongly disagree
- b. Disagree
- c. Agree
- d. Strongly agree

42. How valuable has collaboration post-EIS been with the following groups?

	Not at all	A little	Moderately	Extremely	Not applicable - I
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*=Required

! = DWD Standard Item

	valuable	valuable	valuable	valuable	have not collaborated with this group post-EIS
Other EIS alumni	0	0	0	0	0
Current EIS officers	0	0	0	0	0
Lab scientists (including LLS colleagues)	0	0	0	0	0
Your former EIS supervisors/mentors	0	0	0	0	0
Current or former EIS program staff	0	0	0	0	0

[Page 28] EIS Support

43. What kind of support would be helpful to you post-fellowship?

[Page 29] General Information

The following questions on this page are optional.

44. What is your race and/or ethnicity? Select all that apply. !

☐ **American Indian or Alaska Native**

For example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.

☐ **Asian**

For example, Chinese, Asian Indian, Filipino, Vietnamese, Korean, Japanese, etc.

☐ **Black or African American**

For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.

☐ **Hispanic or Latino**

For example, Mexican, Puerto Rican, Salvadoran, Cuban, Dominican, Guatemalan, etc.

☐ **Middle Eastern or North African**

For example, Lebanese, Iranian, Egyptian, Syrian, Iraqi, Israeli, etc.

☐ **Native Hawaiian or Pacific Islander**

For example, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, Marshallese, etc.

☐ **White**

For example, English, German, Irish, Italian, Polish, Scottish, etc.

45. Are you:

- Female
- Male

*=Required

! = DWD Standard Item

Fellowship Recruitment and Promotion

[Page 30] Interest in Recruitment Activities

46. Alumni are a great way to get the word out about CDC's fellowship programs. **Are you interested in participating in any future efforts to recruit or promote your fellowship?** *If "Yes," you may be contacted by CDC Division of Workforce Development staff. Your contact information will not be shared with anyone outside of DWD.*¹
- a. Yes
 - b. No

[Page 31] Conclusion

Thank you for taking the time to complete this survey. Please contact ELWBeval@cdc.gov with any questions.