

2025-26 Texas Public Health Fellowship Host Site Application

Local Health Departments

Host Site Contact Information

1. What is the name of the local health department that will host the fellow?

Fort Bend County Health and Human Services

2. What is the name of the program or office that will host the fellow?

(Examples: Epidemiology Program, Community Engagement Program)

Environmental Health

3. What is the address of the local health department that will host the Fellow?

Address: 4520 Reading Rd

Address 2: Suite A-800

City/Town: Roseberg

ZIP/Postal Code: 77471

4. Host Site Supervisor and Primary Contact Information

During the Fellowship, the Host Site must provide a supervisor to guide, manage, and support the Fellow for the duration of the Fellowship. The DSHS Office of Practice and Learning will communicate with the supervisor during and after the application and hiring process and throughout the fellowship year.

Please enter the contact information of the person planning to supervise the fellow.

Supervisor First Name: Michael

Supervisor Last Name: Schaffer

Supervisor Title: Director, Environmental Health

Supervisor Degree(s): AA- Business Administration, BA – Business Administration, MBA – Masters in Business Administration, AA – Computer Science, BA – Accounting

Supervisor Years of Public Health Experience: 14

Supervisor Email Address: michael.schaffer@fortbendcountytexas.gov

Supervisor Phone Number: 713-299-9402

5. Please share contact information for a SECONDARY CONTACT at your health department. This individual will receive the same communication as the supervisor.

Secondary Contact First Name: Crystal

Secondary Contact Last Name: Hernandez

Secondary Contact Title: Administra

Email Address: crystal.hernandez@fortbendcountytexas.gov

Phone Number: 281-238-3530

6. List any other staff and their email addresses that would like to receive communication about the Fellowship.

Dr. Letosha Gale-Lowe, MD – Health Director and Local Health Authority

letosha.gale-lowel@fortbendcountytexas.gov

Dr. Nichole Brathwaite-Dingle, MD, MPH – Deputy Medical Director

nichole.brathwaite-dingle@fortbendcountytexas.gov

Ketan Inamdar, MS, MBA – Deputy Director of Operations, Finance and Social Programs

ketan.inamdar@fortbendcountytexas.gov

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Karri Halcomb, MPH – Special Projects Coordinator

karri.halcomb@fortbendcountytexas.gov

Host Site Offerings

The 2025-26 Texas Public Health Fellowship will likely have funding for **up to 10 fellowship positions at local health departments**. Consequently, the process for selecting host sites is expected to be highly competitive. To help us determine which local health departments are most prepared and best suited to host a fellow, please respond thoughtfully to the following questions.

Your answers will be strongly considered during host site selection.

- 7. WORKPLACE CULTURE.** Provide an example of how your workplace excels in creating and maintaining a supportive and healthy work environment? How would you integrate your fellow into this culture?

Limit your responses to 100 words.

Environmental Health (EH) prides itself in promoting and maintaining a work environment that fosters comradery, encourages education and training, and provides support at both peer-to-peer and supervisor-to-peer levels. The fellow would be welcomed into our EH team, beginning with learning about our role in supporting public health within the Environmental Health arena and then migrating to contribute to our policies, procedures, analytics, workflows, and other project tasks.

- 8. FELLOW SUPPORT PART I.** The Fellowship program is designed for early career professionals. Considering this, please provide, in detail, the ways in which you will continually provide support, mentorship, and supervision to your fellow.

Limit your response to 100 words.

The fellow will report directly to the Director of Environmental Health and be assigned to different areas of the department. In addition to daily interactions, there will be scheduled one-on-ones to ensure the fellow receives guidance, feedback, and open dialogue on projects, providing clear direction and support.

- 9. FELLOW SUPPORT PART II.** If your program or office uses a hybrid work environment (staff telework part or all of the time), please describe how you will ensure their support while working remotely?

Limit your response to 100 words.

If you expect your fellow to be in the office 100% of the time, please enter n/a.

N/A

- 10. FELLOW SUPPORT PART III.** Describe a past experience supervising a fellow or early career professional. What strategies were successful in helping them achieve success?

Limit your response to 100 words.

The fellows I had the opportunity to host left with a good understanding of the topics they worked on and a sense of pride and ownership in their final work products.

Feedback from past fellows highlighted that they were provided with the necessary tools and resources to fulfill their tasks and deliver great work products. The delivered products are integrated into normal operations, reflect current statuses, analyze read data for informed decision-making,

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and ultimately allow fellows to showcase their accomplishments at the end of the fellowship.

- 11. PROFESSIONAL DEVELOPMENT SUPPORT.** What professional development resources does your program, office, or health department plan to offer the fellow?

Limit your response to 100 words.

The fellow is provided with the necessary training along with the opportunity to ask questions, as this would be new to them. An open-door policy, guidance/access to needed information, and constant, consistent feedback will support their success in the assignments given.

- 12. RETENTION OPPORTUNITIES.** If the fellow is a great fit for your team, what is the likelihood your local health department would be able to hire the fellow after the one-year fellowship?

Limit your response to 100 words.

The answer would depend on their short and long-term goals. There may definitely be opportunities after the fellowship, and this experience would provide them with the skill set to pursue them. I can say that one fellow was hired full-time in another area. Nothing is ever guaranteed, but it is certainly possible.

Fellowship Description – Projects and Responsibilities

We will use your responses to the following questions to generate a fellowship description. Fellow applicants will use your description to understand what the fellowship with your team will be like, and what they might be doing.

Please use plain language in your responses.

- 13. Please provide a short name for your fellowship that fellow applicants can use to identify your specific fellowship position.**

Examples: Community Engagement Fellowship, Tuberculosis Control Fellowship; Zoonosis Control Fellowship.

Environmental Health Fellowship

- 14. Please describe the mission or primary goals of your local health department and the specific program or office that will host the fellow.**

Limit to 50 words.

FBC HHS' mission is to promote and protect the health and well-being of the residents of Fort Bend County. The mission of Environmental Public Health is to advance policies and programs to protect the public's health through education, outreach, monitoring and enforcement related to food safety, water safety, on-site sewage, neighborhood nuisance, solid waste, and mosquito/vector control.

- 15. Please describe the project or projects the fellow will work on during a fellowship with your team.**

Please limit to 100 words.

Projects will relate to our Food Safety Program, Vector Control Program, Pool Program, and other various assignments in Environmental Health.

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16. Please list planned project deliverables for your fellow.

Limit to 50 words.

- Policies
- Standard Operating Procedures
- Key Performance Indicators
- Outreach Material based on research and evidence findings
- Data Analysis and Trending Reports
- Workflows

17. Please describe responsibilities your fellow will have and tasks or skills they will learn to do during a fellowship with your team.

Limit to 200 words.

- Food Safety Program related education, training and hands on activities that would include:
 - Basic Food Law both local regulations and state statutes, specifically the Texas Food Establishment Rules. Familiarity with the 2017 FDA food code.
 - How to conduct an Inspection and look for Foodborne Illness related violations.
 - Report Issues & Observations
 - Collecting Surveillance Data
 - Beginning and Expanding Investigations
 - Conducting Food Hazard and Illness Reviews that would ensure collaboration between Environmental Health and Epidemiology
 - Foodborne Illness
 - Epidemiological Statistics
 - Research, Presentations and Report writing
- Mosquito and Vector education, training and hands on activities that would include:
 - Understanding Zoonotic diseases, specifically vectorborne diseases
 - Research, understand and add value to our Insecticide Resistant Management Plan
 - Contributing towards sustaining effective communication, advice, and support of activities that may reduce risk of infection of arboviruses
 - May assist with monitoring state and federal alerts related to existing or emerging arboviruses
 - Review, research and make recommendations to current planning documents
 - Assist with strategies to educate and conduct outreach to the public regarding safety precautions
- Pool
 - Understanding waterborne illnesses and the impacts on our community as well as relay findings for publications.

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18. What are the sub-disciplines or subject matter areas that best describe your fellowship?

Please select **up to two**.

The Office of Practice and Learning will use this information to identify fellow candidates with interest that align with your program.

- ☐ Infectious Diseases
- ☒ Disease Surveillance
- ☐ Zoonosis Control
- ☐ Maternal Child Health
- ☐ Health Disparities
- ☐ Rural Communities
- ☐ Public Health Law
- ☐ Community Engagement
- ☐ Health Promotion
- ☒ Policy Development
- ☐ Financial Management
- ☐ Program Management
- ☐ Health Communication
- ☐ Others (please specify) [Click or tap here to enter text.](#)

19. Please select the 1 or 2 public health core disciplines that BEST describe your fellowship.

Fellow applicants may use these categories to identify fellowships that best align with their training goals and career interests. The Office of Practice and Learning will use your ranked disciplines to ensure fellow applicants are matched well with your fellowship position.

- ☐ Biostatistics
- ☒ Environmental Health Services
- ☒ Epidemiology
- ☐ Health Policy and Management
- ☐ Social and Behavioral Sciences

20. What are the main skills area(s) or competencies your fellow will develop in a fellowship with your team?

Please select **up to 3 skill areas** that **BEST** for your Fellowship position.

We recognize that there are certain skills you'd like your fellow to have to effectively perform activities and complete deliverables. Keep in mind that all fellows will be early in their careers with limited professional experience and eager to apply knowledge and skills in a real-world setting. *When answering this question, please consider the skills you'd like the Fellow to be interested in growing as opposed to their years of experience.*

These eight skill areas come from the Core Competencies for Public Health Professionals. If you'd like to learn more, please see this website: https://www.phf.org/programs/corecompetencies/Pages/Core_Competencies_Domains.aspx

- ☒ Data Analytics and Assessment Skills
- ☒ Policy Development and Program Planning Skills
- ☐ Communication Skills
- ☐ Cultural Competency Skills
- ☐ Community Partnership Skills
- ☐ Management and Finance Skills
- ☐ Leadership and Systems Thinking Skills
- ☒ Public Health Sciences

21. Please rank the core disciplines you selected in the previous question with rank 1 being the discipline that **BEST fits your fellowship position.**

Rank 1: Epidemiology

Rank 2: Environmental Health Sciences

Rank 3: Health Policy and Management

Rank 4: Biostatistics

Rank 5: Social and Behavioral Sciences

22. Please rank the skill areas you selected in the previous question with rank 1 being the skill area that **BEST fits your fellowship position.**

Rank 1: Data Analytics and Assessment Skills

Rank 2: Public Health Sciences

Rank 3: Policy Development and Program Planning Skills

Rank 4: Communication Skills

Rank 5: Management and Finance Skills

Rank 6: Cultural Competency Skills

Rank 7: Community Partnership Skills

Rank 8: Choose an item.

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Fellowship Description – Host Site Budget

If selected as a Texas Public Health Fellowship Host Site, **DSHS will establish a contract with your health department.** Your local health department is eligible to be rewarded \$80,000 per fellow for one year to cover salary, fringe, travel, equipment, and supplies. \$2,500 should be earmarked to cover travel expenses for Fellowship Programming provided by the Office of Practice and Learning (see table below). This programming includes a two-day workshop in Austin, a fellowship showcase and graduation ceremony in Austin, and attending the Texas Public Health Association Education Conference. If you need to exceed \$80,000, please provide justification.

Please describe how you plan to allocate funds awarded by DSHS for the fellow using the spaces below. Please provide the amount for each line item, a brief description of the expense, and a brief justification for each item.

Fellowship Local Health Department Budget	
Salary	\$46,800.00
Fringe	\$27,839.40
Travel	\$1,340.00
Equipment and Supplies	\$1,520.60
Indirect Costs	N/A
Fellowship Program Travel	\$2,500
TOTAL	\$80,000

23. Fellows Salary

Please enter details about the annual salary for your fellowship.

Salary Amount: \$46,800.00

Salary Description: Annual Salary at \$22.50 / hour

Salary Justification: Compensation for work effort provided to the program.

24. Fringe

Please enter details for fringe you'll need for your fellowship.

Fringe Amount: \$27,839.40

Fringe Description: Payroll Taxes @ 7.65% of Salary, Pension Contribution @ 13.10% of Salary, Workers Compensation and Unemployment @ 1% of Salary, Property and Casualty @ 2.8% of Salary, Health Insurance @16,350 per FTE/year

Fringe Justification: Payroll Taxes and Benefits applicable to a full-time employee.

25. Travel

Please enter details for travel associated with host site activities or fellow professional development. *This among SHOULD NOT include the \$2,500 for travel for Fellowship programming events.*

Travel Amount: \$1,340.00

Travel Description: Current mileage reimbursement rate @ \$0.67 / mile @ 2,000 miles

Travel Justification: Reimbursement for travel between program sites to accomplish tasks.

26. Equipment and Supplied

Please enter details for the equipment and supplies you'll need to support your fellow.

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Equipment and Supplies Amount: \$1,520.60

Equipment and Supplies Description: Laptop, cell phone, etc.

Equipment and Supplies Justification: Provide fellow with essential equipment for daily operations/tasks.

27. Indirect Costs

Please enter details for indirect costs you'll need to support your fellow.

Indirect Amount: \$0

Indirect Description: N/A

Indirect Justification: N/A

Fellowship Description – Workplace Setting and % Travel

28. What will the workplace setting be for the fellow? Please consider the physical space needed to accommodate the fellow at your office that will be available during the Fellowship year (June 1, 2025 – May 31, 2026).

- ☐ 100% Remote/ Telework
- ☒ 100% Onsite/ In-person
- ☐ A combination of Onsite and Remote/ Telework

29. Please describe the telework/remote work practices for your office or program. This information is for the benefit of the fellow applicant, so they can decide which Fellowship position are the best fit for them.

N/A

30. What percent travel will your Fellow have?

Please write a number between 0 – 100%

>5%

31. Please describe the travel. What will the Fellow be doing while traveling? What are the general destinations for travel? Will the travel be local, regional? Enter n/a if there is no travel expected for your fellow.

Travel within the County

32. Does your fellowship position ABSOLUTELY require a license or certification? For example, the Fellow MUST be a Registered Nurse to do the Fellowship, no exceptions?

- ☐ Yes
- ☒ No

Fellowship Description – Required Certifications or Licenses

33. What license or certification is necessary?

- ☐ Registered Nurse (RN)
- ☐ Licensed Master Social Worker (LMSW)
- ☐ Licensed Clinical Social Worker (LCSW)
- ☐ Community Health Worker (CHW)

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- ☐ Community Health Education Specialist (CHES)
- ☐ Registered Sanitarian (RS)
- ☒ Other (please specify) No licenses required

Fellowship Description – Preferred Skills

34. What is the preferred LEVEL of education you'd like your Fellow to have completed by the start of the Fellowship?

- ☐ Highschool diploma or GED
- ☐ Associates degree
- ☐ Bachelors degree
- ☒ Masters degree
- ☐ Doctorate – PhD, DrPH
- ☐ Doctorate – MD, DO

35. Please list any training, education, or interest you prefer the fellow have. For example, for a fellowship with an epidemiology group, it may be important that the fellow have completed at least an introductory epidemiology court or be interested in pursuing a career as an epidemiologists. Leave blank if you do not have any preferred training, education, or interests.

Training/Coursework 1: Coursework in Epidemiology

Training/Coursework 2: Coursework in Public Health

Training/Coursework 3: [Click or tap here to enter text.](#)

Training/Coursework 4: [Click or tap here to enter text.](#)

36. Other than statistical software, please list any specialized software you'd prefer the fellow have familiarity with or an interest in learning. Leave blank if you have not preferred software familiarity.

Software 1: [Click or tap here to enter text.](#)

Software 2: [Click or tap here to enter text.](#)

Software 3: [Click or tap here to enter text.](#)

Preferred Skills – Language Ability

37. Does your fellowship position require that the fellow be able to communicate in a language other than English? Please select the appropriate response below.

- ☐ Yes, the fellow needs to be able to communicate in Spanish.
- ☒ No, the fellow does not need to be able to communicate in a language other than English.
- ☐ Yes, the fellow needs to be able to communicate in the following language:

Please specify the language: [Click or tap here to enter text.](#)

Fellowship Description – Language Proficiency

38. What level of proficiency in **SPEAKING** in the language you specified would you prefer your fellow have?

- ☒ **Native/Functionally Native:** Fellow can converse easily and accurately in all types of situations. Native speakers, including the highly educated, may think the Fellow is a native speaker, too.
- ☐ **Advanced:** Fellow can speak very accurately, and understands other speakers very accurately. Native speakers have no problem understanding the Fellow, but they probably perceive that they are not a native speaker.
- ☒ **Good:** Fellow can speak well enough to participate in most conversations. Native speakers notice some errors in the Fellow's speech or understanding, but the errors rarely cause misunderstanding.
- ☐ **Fair:** Fellow can speak and understand well enough to have extended conversations about current events, work, family, or personal life. Native speakers notice many errors in the Fellow's speech or understanding.
- ☐ **Basic:** Fellow can speak the language imperfectly and only to a limited degree and in limited situations. The Fellow will have difficulty in or understanding extended conversations.

39. What level of proficiency in **WRITING** in the language you specified would you prefer your fellow have?

- ☐ **Native/Functionally Native:** Fellow can write easily and accurately in all types of situations.
- ☒ **Advance:** Fellow can write very accurately. Native speakers can understand Fellow's writing.
- ☐ **Good:** Fellow can write well enough to communicate most information. Fellow may make some errors, but these errors rarely cause misunderstanding.
- ☐ **Fair:** Fellow can write and understand written language well enough to communicate about current events, work, family, or personal life.
- ☐ **Basic:** Fellow can write the language imperfectly and only to a limited degree and in limited situations.

Fellowship Description – Data Analysis

40. Does your fellowship position require that the Fellow be able to do data analysis?

- ☒ Yes
- ☐ No

Fellowship Description – Data Analysis Proficiency

41. To what level of proficiency would you prefer your fellow be able to analyze data?

- ☐ **Basic Skills:** Fellow has some awareness or knowledge of data analysis
- ☒ **Somewhat Skilled:** Has done data analysis in coursework, but has not applied data analysis skills in the real world
- ☐ **Skilled:** Comfortable with their knowledge or ability to apply data analysis skills
- ☐ **Proficient:** Very comfortable applying data analysis skills, is an expert, or could teach data analysis skills to others.

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42. Does the Fellow need to be able to use or develop skills in a specific type of statistical software (SAS, SPSS, etc.)? If yes, please name the software.

- ☒ No
☐ Yes. Please name the software(s). [Click or tap here to enter text.](#)

43. What degree of proficiency would you prefer the fellow to be able to use this statistical software at the start of the Fellowship?

- ☒ **Limited proficiency:** Has knowledge and interest in learning more, but little experience using the software
☐ **Somewhat proficient:** Has some experience using the software, but needs guidance or more training
☐ **Proficient:** Has ability to use software effectively with some support
☐ **Very Proficient:** Has broad skills in using the software and can use it independently

Host Site Agreement

44. As a Texas Public Health Fellowship Host Site, I understand that I have a responsibility to...

- Gain necessary approvals from my local health department's leadership.
- Support and supervise the fellow for the duration of the Fellowship (June 1, 2025 – May 31, 2026).
- Design and plan fellow's responsibilities, activities, and deliverables.
- Provide professional development and mentoring to fellow.
- Allow fellow to participate in professional development programming provided by the DSHS Office of Practice and Learning.
- Participate in various Host Site meetings and evaluation surveys.

Do you agree to complete the above list of items?

- ☒ Yes. I will be able to complete all items on the list.
☐ No. I will not be able to complete all of the items mentioned above.

45. Are you ready to submit your application? Once you select yes, the Office of Practice and Learning will begin reviewing your application.

- ☒ Yes. I will be able to complete all items on the list.