

OMB Clearance

CDC Web site Usability Surveys (OMB NO. 0920-0735)

This document shows

1. Requested New Questions / Verbiage
2. General Requests

REQUESTED EDITS THROUGHOUT PACKAGE

Request approval to edit [Bracketed Text] as needed:

- Need to customize [SITE], [TIME], [INFO], [ACTION], and other bracketed text in the Welcome Messages, Instructions, and Questions.

Request approval to edit Question responses as needed:

- May need to edit text of multiple choice responses.
- May need to remove multiple choice responses
- May need to remove "Other: _____" from a list of multiple choice responses
- May need to make multiple choice questions freeform or rating

Consent Forms

****Note: Option 1, Option 3, or Option 4 will be used. Option 2 and/or Option 5 and/or Option 6 will be used, if relevant.***

Option 1: Online Welcome Message and Consent Form

Welcome! Thank you for agreeing to help the Centers for Disease Control and Prevention (CDC) evaluate [SITE]. Your feedback is extremely important. We anticipate that it will take approximately [TIME] to complete [these questions](#).

We are not testing your abilities in any way; we are only testing the [SITE] to see how well it works. Please use the [SITE] in whatever manner is comfortable and normal for you.

[\[In some cases, we will collect keyboard responses, mouse clicks, audio and video data.\]](#) Your responses to all questions will be kept in a secure manner. No personal identifiers will be recorded. All information is used for evaluation purposes only, and CDC does not plan to share the data with anyone outside CDC.

To proceed through the survey, select your answer for each question and click [\[BUTTON\]](#).

Option 2: Audiotape and Videotape Consent Form

****Note: If used, this consent form will be present in conjunction with Option 1 or Option 3.****

Purpose: The purpose of this document is to obtain your consent to audiotape and videotape today's usability testing session. We want record the session in order to analyze the information collected today, in depth, at a later time.

The tape will be used internally within CDC, and CDC does not plan to share the tape with anyone outside CDC. It will not be broadcast or used for any other purpose. No personal identifiers will be linked to the data and your signed consent form will be stored separately from the recording.

If you agree with this, please sign where indicated.

Print Name: _____

Signature: _____

Date: _____

Option 3: Talent and Consent Waiver

****Note: If used, this consent form will be present in conjunction with Option 1 or Option 4.****

DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
CENTERS FOR DISEASE CONTROL AND PREVENTION
ATLANTA, GEORGIA 30333

TALENT AND CONSENT WAIVER

TO WHOM IT MAY CONCERN:

I hereby grant full permission to the Department of Health and Human Services, Public Health Service, Centers for Disease Control and Prevention (CDC), to use, reproduce, publish, distribute, and exhibit my name, picture, portrait, likeness or voice or any or all of them in or in connection with the production of a television tape or film recording, sound track recording, motion picture film, filmstrip, still photograph, or intranet/extranet posting, in any manner for training and other purposes. I understand that portrait shots and other pictures of me will initially be posted on the CDC intranet and extranet site and that those pictures may be used in CDC's internal and external written materials, including ultimately on CDC's Internet site.

Without limitation as to time, I hereby waive all rights for compensation in connection with the use of my name, picture, portrait, likeness or voice, or any or all of them, or in connection with said television tape or film recording, sound track recording, motion picture film, filmstrip, still photograph, CDC internal and/or external written materials, or intranet/extranet/Internet posting, in whole or in edited form and any use to which the same or any material therein may be put, applied or adapted by the United States Government and others in the health field.

IN WITNESS WHEREOF I have hereunto set my hand and seal this _____
day of _____ A.D. 20____.

NAME: _____
(PRINT)

ADDRESS: _____

SIGNATURE: _____

WITNESS: _____

DATE: _____

PROJECT NAME OR NO. _____

TITLE: _____

Source: CDC 0.1286 (E), 8/2001, CDC Adobe Acrobat 5.0 Electronic Version, 9/2003

Option 4: Participation Consent Form

We have revised [SITE] and would like you to "try out" the new Web site. We want to know what works well for you and what does not, so that we can further improve [SITE].

During this session, we'll

1. Ask you about your background
2. Ask you to perform a series of tasks to find information on the Web site
3. Ask you to give us feedback on the new homepage

We will keep track of your interactions with the Web site, so that we can find ways to improve the system. The information that is captured only will be used to make changes to [SITE]. The whole exercise will take approximately [TIME] to complete.

When analyzing and reporting the results, no personal identifiers will be linked to the data and your signed consent form will be stored separately.

To consent to the use and release of this information, please sign your name below.

Name _____

Date: _____

Option 5: Short Participant Consent Form

Welcome! Thank you for agreeing to help the Centers for Disease Control and Prevention (CDC) evaluate [SITE]. Your feedback is extremely important. We anticipate that it will take approximately [TIME] to complete these questions.

Your responses to all questions will be kept in a secure manner. All information is used for evaluation purposes only, and CDC does not plan to share the data with anyone outside CDC.

To proceed through the survey, select your answer for each question and click [BUTTON].

Option 6: Card Sort Instructions

Introduction:

[We are conducting research that will help us gain a better understanding of how [SITE] should be organized to make it easier to use.]

Instructions:

NOTE: Will customize instructions depending on card sort software/tool used.

[Begin by reviewing the items in the left column. These items represent content on [SITE].

Start by placing all of the items that belong together into the same group. Drag the items that belong in the same category from the left column over to the right column. When you are finished adding items to a category, click the yellow box in the middle column to name each group.

If an item is unfamiliar, you may create a category called "Miscellaneous".

There is no correct number of groups, but make sure that you think about how the items relate to each other. If you have a group with a large amount of items, consider splitting it up.

You must do the exercise in one sitting. Please do not leave the browser to go to another task - you will not be able to return.

Thank you for taking the time to participate. We appreciate your help!]

Demographic Questions

****Note: Up to 6 questions will be used from this section. All questions will be either radio button, freeform, or rating scale.****

What is your gender?

- Male
- Female

How old are you?

- 18-39 years old
- 40-59 years old
- 60-75 years old
- Over 75 years old

What is your ethnicity?

- Hispanic or Latino
- Not Hispanic or Latino

What is your race? Check all that apply.

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

What is your highest level of education?

- High school or less
- Some college
- College degree
- Advanced degree

Introductory Questions

Note: Up to 15 questions will be used from this section. All questions will be either radio button, freeform, or rating scale.

Which of the following best describes you?

- Federal employee (FTE: full time employee)
- Contractor or vendor
- Other: Fellow, Intern, Temporary employee, etc
- [enter audience]
- [enter audience]
- [enter audience]

What is your role at [CIO]?

- Leadership or Program-specific
- Web-related: e.g. Web site manager, developer/programmer, Web site content coordinator, Web site graphics designer, usability specialist, information architect, etc.
- other CDC employee: uses www.cdc.gov for a job that is NOT Leadership, Program-specific, or Web-related

What is your role at [CIO]?

- Administrative or building management staff
- Center, division, or branch management
- Public health professional (epidemiologist, health communicator, health education, program analyst, etc.)
- Healthcare provider – Doctor
- Healthcare provider – Nurse, Nurse practitioner, Physician's Assistant
- Researcher, scientist, or laboratorian
- Writer, editor, or library scientist
- Other: _____

Please select your organization/area:

- Coordinating Office for Global Health
- Coordinating Office for Terrorism Preparedness & Emergency Response
- Coordinating Center for Environmental Health and Injury Prevention
- Coordinating Center for Health Information and Service
- Coordinating Center for Health Promotion
- Coordinating Center for Infectious Diseases
- National Institute for Occupational Safety and Health
- Office of the Director

What Center do you work in at CDC?

What Division do you work in at CDC?

What is your role at CDC?

- Administrative or building management staff
- Center, division, or branch management
- Public health professional (epidemiologist, health communicator, health education, program analyst, etc.)
- Healthcare professional (doctor, nurse, etc)
- Researcher, scientist, or laboratorian
- Writer, editor, or library scientist
- Web or information technologist

- Other: _____

A screenreader is software typically used by visually impaired users. The software reads aloud to the user what is being displayed on the screen. Are you using a screenreader?

- Yes
- No

Do you work for the Federal Government as an employee or contractor?

- Yes
- No

Are you an employee or contractor to the Federal government?

- Full time Employee
- Contractor

Which Federal government agency do you work for?

What is your job title or role?

- Public Health Professional: e.g. epidemiologist, health communicator, health educator, etc
- Healthcare Provider: e.g. doctor (MD, DO), nurse, nurse practitioner, physician's assistant
- General Consumer: neither a Public Health Professional nor a Healthcare Provider

What is your role?

- Public health professional (epidemiologist, health communicator, health educator, program analyst, etc.)
- Healthcare provider – Doctor
- Healthcare provider – Nurse, Nurse practitioner, Physician's Assistant
- Researcher or scientist in the fields of health or medicine
- Educator in the in the fields of health or medicine
- None of the above (General Consumer)

Who do you work for?

- Federal Government Employee - Centers for Disease Control and Prevention (CDC)
- Federal Government Employee - NOT CDC
- Contractor to the Federal Government - Centers for Disease Control and Prevention (CDC)
- Contractor to the Federal Government - NOT CDC
- Local or State government
- Not government
- International government
- Not employed

What industry do you work in?

- Business Owner or Operator
- Architecture or Engineering
- Art or Design
- Entertainment, Sports, or Media
- Attorney or other Legal Professional
- Computer or Mathematical
- [OPTION]
- [OPTION]

What is your job setting and position?

- o Mother
- o Father
- o Stay-at-home parent

- o Primary Caregiver
- o General public
- o Retired
- o Self Employed
- o Non-Health Care Related
- o Non-Health Related Business/Industry
- o Office and Administrative Support
- o Manager
- o Business Owner or Operator
- o International
- o Architecture or Engineering
- o Arts, Design, Entertainment, Sports, or Media
- o Attorney or other Legal Professional
- o Building and Grounds Cleaning and Maintenance
- o Computer and Mathematical
- o Construction
- o Mining
- o Oil/Gas Extraction
- o Correctional Institution
- o Food Preparation and Serving Related
- o Installation, Maintenance, and Repair
- o Insurance Company
- o Life, Physical, and Social Science
- o Protective Service and Safety Professional (Firefighter, EMT)
- o Sales and Related
- o Transportation and Material Moving
- o Farming, Fishing, Forestry, Ranching, or Agriculture
- o Government
 - o Law Enforcement/Criminal Justice
 - o Policy maker or their staff
 - o Military
 - o Federal Agency (not military)
 - Centers for Disease Control and Prevention (CDC)
 - o FTE
 - o Full-time Contractor
 - o Part-time Vendor
 - o Fellow
 - o Grantee
 - o Partner
 - o Program
 - o Research Grantees
 - o Local or State government agency besides health department
 - o State/Local Health Department
- o Health
 - o Nursing Home
 - o Clinic
 - o Healthcare provider (physician, nurse, physician's assistant, nurse practitioner)
 - o Healthcare Support
 - o Hospital
 - o Medical or Allied Health School or Library
 - o Medical or Scientific researcher
 - o Medicine

- o Staff at Hospital or Clinic
- o Nurse/Advanced Practice Nurse
- o Pharmacy, Physician Assistant
- o National Model [insert health topic] Center
- o Dentist
- o Laboratorian
- o Nurse/Advanced Practice Nurse/Nurse Practitioner
- o Pharmacist or Pharmacy Technician
- o Physician
- o Physician Assistant
- o Preparedness Planner
- o First Responder (EMS, police and fire personnel)
- o Psychologist or Mental Health Worker
- o State/Local Health Department
- o Veterinarian
- o Health Educator
- o Public Health
 - Epidemiologist
 - Health Communication
 - Health Education
- o Public Health
 - Epidemiologist
 - Health Communication
 - Health Education
 - Safety Professional
 - Industrial Hygienist
- o Community/Patient Advocacy
 - o Non-profit Organization
 - o Community and Social Services
 - o Community Based Organization (CBO)
 - o Homeless Shelter
- o Education
 - o Student
 - o Student (Medicine and Allied Health Professions)
 - o School District
 - o Student (non-Medicine and non-Allied Health Professions)
 - o Teacher/Educator
 - o Librarian/Information Specialist
- o News Media
- o Response Volunteer
- o [OPTION]
- o [OPTION]
- o Other: _____

Describe your work environment:

- Hospital setting
- Emergency room setting
- Clinic setting
- Office setting
- Field setting
- Academic setting
- Research setting

- Home or telecommute
- [OPTION]
- [OPTION]
- Other: _____

On average, how much time do you spend using [ELECTRONIC] each [day/week/month]?

- More than 4 hours a [day/week/month]
- 1 - 4 hours a [day/week/month]
- Less than 1 hour a [day/week/month]

Where do you use [ELECTRONIC] most often?

- At Home
- At Work
- At School
- At Friend's/Relative's
- At Library
- Other: _____

Please tell us about the environment in which you typically use [ELECTRONIC]:

- Noisy
- Quiet
- Indoor
- Climate-controlled
- Outdoor
- [health topic specific]
- [health topic specific]
- [health topic specific]
- Other: _____

How would you rate your [ELECTRONIC] experience?

- Novice – I am new to [ELECTRONIC] and/or I only use one for a specific purpose
- Low – I am somewhat new to [ELECTRONIC] and/or I am relatively comfortable with one or two [ELECTRONIC-relevant item, e.g. software applications/programs (e.g. Microsoft Word, Excel, etc.)].
- Intermediate – I am comfortable with [ELECTRONIC] and/or I have learned and use [ELECTRONIC-relevant item, e.g. between three and ten different software applications/programs].
- Expert – I know my way around [ELECTRONIC] and/or I am comfortable troubleshooting most of the problems that arise with [ELECTRONIC] and/or I have used many different [ELECTRONIC-relevant item, e.g. software applications and have some programming skills].

How would you rate your level of experience when it comes to finding [INFO] on [ELECTRONIC]?

- Novice – I am new to finding [INFO] on [ELECTRONIC] and/or I only use [ELECTRONIC] to find one specific type of [INFO]
- Low – I am somewhat new to finding [INFO] on [ELECTRONIC] and/or I am relatively comfortable with finding [INFO] on [ELECTRONIC] for [INFO amount, e.g. two or three subjects]
- Intermediate – I am comfortable with finding [INFO] on [ELECTRONIC] and/or I have used [ELECTRONIC] to find [INFO amount, e.g. between three and ten different types of information]
- Expert – I know my way around finding [INFO] on [ELECTRONIC] and/or I am comfortable troubleshooting most of the problems that arise when finding [INFO] on [ELECTRONIC] and/or I regularly find [INFO] on [ELECTRONIC] on a variety of topics

How would you rate your level of experience with [ELECTRONIC]?

- I am fairly new to [ELECTRONIC]
- I have some experience, but still have much to learn

- I have moderate (about average) experience
- I have much experience
- I use the [ELECTRONIC] a lot, understand most of the technologies involved, and I am comfortable troubleshooting all problems that arise

In general, what are the most frequent [ELECTRONIC]-related activities you do? (check all that apply)

- Email
- Internet/Intranet
- Software programs/applications. Please describe:
- Read / Research News
- Shop
- Access your bank account information
- Pay your bills
- Chat on [ELECTRONIC, e.g. blogs, social networking sites, etc]
- Read [ELECTRONIC, e.g. blogs, social networking sites, etc]
- Comment on [ELECTRONIC, e.g. blogs, social networking sites, etc]
- Write/create [ELECTRONIC, e.g. blogs, social networking sites, etc]
- [OPTION]
- [OPTION]
- [OPTION]
- [None of the above]
- Other: _____

What resolution is your monitor set to?

[Instructions to determine your resolution on a PC: 1. Minimize or close all applications; 2. Right-click on the background of your desktop, select Properties from the menu, select the Settings tab; 3. look for the Screen Area box. Resolution will be shown as “# by # pixels”]

[Instructions to determine your resolution on a Mac: 1. Click the Apple menu, select Control Panels and choose Monitors & Sound; 2. Click the Monitor icon; 3. Resolution should be displayed as “# by # pixels”]

- [1280 x 1024]
- [800 x 600]
- [OPTION]
- Don't know
- Other: _____

What percentage of your [ELECTRONIC] time do you use for the following activities?

- Email: _____
- Web Surfing: _____
- Shopping: _____
- Instant Messaging: _____
- Research topics: _____
- Blogs: _____
- Social networks: _____
- Image/video sharing: _____
- Other: _____

What type of Internet connectivity do you have?

- Dial-up
- Cable modem
- [T1]
- Wireless
- DSL (Digital Subscriber Line)
- ISDN (Integrated Services Digital Network)
- I don't know

- Other: _____

What type of Internet connectivity do you have?

- Dial-up
- High-speed (e.g., cable, DSL, T1)
- I don't know

How much time do you spend using [ELECTRONIC] per week, including office and personal use?

- Less than 1 hour
- 1 - 5 hours
- 6 - 10 hours
- 11 - 15 hours
- More than 15 hours

How much time do you spend using [ELECTRONIC] per week, including office and personal use?

- Less than 1 hour
- 1 - 10 hours
- 11 - 20 hours
- 21 or more hours per week

How many years have you used the [ELECTRONIC] for things other than [ELECTRONIC-related activity, e.g. other than email]?

- Less than 1 year
- 1 to 4 years
- 5 to 9 years
- 10 years or more

Which of the following, if any, do you do most frequently on the Internet?

- Read / Research News
- Shop
- Access your bank account information
- Pay your bills
- Rate on [ELECTRONIC, e.g. blogs, social networking sites, etc]
- Read a [ELECTRONIC, e.g. blogs, social networking sites, etc]
- Comment on [ELECTRONIC, e.g. blogs, social networking sites, etc]
- Write/create a [ELECTRONIC, e.g. blogs, social networking sites, etc]
- Post on [ELECTRONIC, e.g. blogs, social networking sites, etc]
- [OPTION]
- [OPTION]
- [OPTION]
- None of the above
- Other: _____

Which activities have you performed [ELECTRONIC, e.g. online]?

- Ordered a product/service from a business, government or educational entity by filling out a form on the Web
- Made a purchase online for more than \$100
- Created a Web page
- Customized a Web page for yourself (e.g. MyYahoo, CNN Custom News)
- Changed your browser's "startup" or "home" page
- Changed your "cookie" preferences
- Participated in an online chat or discussion (not including email)
- Participated in a social networking Web site, such as MySpace, Friendster, etc
- Listened to a radio broadcast online
- Made a telephone call online
- Used a nationwide online directory to find an address or telephone number

- Taken a seminar or class about the Web or Internet
- Bought a book to learn more about the Web or Internet
- Used Online Help
- Download audio / video files
- Subscribe to email alerts when content changes
- Participate in message boards / chats / blogs
- Attend online training seminars
- Personalize / customize web pages
- Download podcasts
- Subscribe to RSS feeds
- Text message others
- [OPTION]
- [OPTION]
- Other: _____

On the Internet, do you:

- Contribute to wikis
- Maintain a blog
- Participate in online communities / discussion forums / social networks
- Read blogs
- Subscribe to RSS feeds
- Receive newsletters / listservs
- Use personalized pages (like MyYahoo!)
- Watch videos, look at photo galleries, view slide shows
- Use mobile devices to browse the web (cellphones, pda etc...)
- [OPTION]
- [OPTION]
- Other: _____

What does [SITE] do well?

What keeps you coming back to [SITE]?

What was it about [SITE] that attracted you?

What could [SITE] do better?

Tell me about yourself professionally or personally in [TIME].

When you hear the words ["infectious diseases"] what first comes to mind? What else? Explain.

What do you do to avoid [infectious diseases]?

Tell me several things about each of [these diseases: Tuberculosis (TB), Human Papillomavirus (HPV), Chlamydia, and Syphilis].

What are some online credible sources of information about [these diseases]? Explain.

What makes a source [DESCRIPTOR, e.g. credible]? Explain.

Would you describe yourself as someone who [ACTION; e.g. reads blogs or customer ratings/reviews]?

- Yes
- No

Would you describe yourself as someone who [ACTION; e.g. publishes blogs, uploads videos you created, or writes articles or stories and posts them]?

- Yes
- No

How would you like to interact with [SITE]?

- Listserv/RSS Feeds to receive up-to-date news on MHS-related matters
- Making comments to blog entries
- Making general comments/suggestions in a forum-style manner
- Podcasts or Other Audio/Video presentations
- [OPTION]
- [OPTION]
- Other: _____

Have you heard of the [ELECTRONIC, e.g. Podcast]?

- Yes
- No
- Don't know, not sure

In your own words, how would you explain the term [ELECTRONIC, e.g. Podcast] to a friend?

Are there other words you might use that have similar meaning to [ELECTRONIC, e.g. Podcast]?

Do you have a [ELECTRONIC, e.g. Podcast player]?

What do you call your [ELECTRONIC, e.g. Podcast player]? If you don't have one, what word or words would you use to describe [ELECTRONIC] like this?

Have you ever listened to audio or music on a Web site, or downloaded audio to a device?

- Yes, on a Web site
- Yes, on a Device
- Yes, both
- No, neither

Can you give some examples of [ELECTRONIC, e.g. Podcasts] you have listened to?

- Site: _____ [ELECTRONIC content]: _____ Type: Web / Device / Both
- Site: _____ [ELECTRONIC content]: _____ Type: Web / Device / Both
- Site: _____ [ELECTRONIC content]: _____ Type: Web / Device / Both

Have you ever watched [ELECTRONIC content] on a Web site, or [ELECTRONIC content] on a device?

- Yes, on a Web site
- Yes, on a Device
- Yes, both
- No, neither

Can you give some examples of [ELECTRONIC content] you have watched?

- Site: _____ [ELECTRONIC content]: _____ Type: Web / Device / Both
- Site: _____ [ELECTRONIC content]: _____ Type: Web / Device / Both
- Site: _____ [ELECTRONIC content]: _____ Type: Web / Device / Both

How often do you access music, other audio, or video from the internet?

- Several times per day
- Once every few days
- Once per week

- Once per month
- Other: _____

How often do you access [ELECTRONIC content] on the internet?

- Several times per day
- Once every few days
- Once per week
- Once per month
- Other: _____

In the last three months, have you done any one of the following? (Check all that apply)

Can you show me how you use your favorite [ELECTRONIC content] Web site?

What do you think about getting information to improve your health through [ELECTRONIC content]?

If you wanted to find [ELECTRONIC content] about [TOPIC] on the internet, what would you do?

What search words would you use?

In the last three months, have you done any of the following?

- Use personalized web pages (such as My Yahoo! or iGoogle)
- Add a widget or gadget to your personalized web page
- Bookmark or tag websites (using social bookmarking sites as Digg or Del.icio.us)
- Read blogs or Wikis
- Write a blog or contribute to Wikis
- Post comments, ratings or reviews on a Web site
- Send an e-card
- Browse through photo galleries
- Listen to podcasts or audio on a Web site
- Participate in online social networks (such as MySpace, Facebook, etc.)
- Watch videos on a Web site
- Upload videos to a Web site (such as YouTube)
- Browse Web sites using my mobile phone / device
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- Other: _____

What Web sites have you used to send or receive [ELECTRONIC content]? Which did you like and dislike?

Web site: _____, _____ liked _____ disliked, _____ sent _____ receive

Web site: _____, _____ liked _____ disliked, _____ sent _____ received

Web site: _____, _____ liked _____ disliked, _____ sent _____ received

How much [ELECTRONIC content] have you sent or received?

	Sent	Received
A few	_____	_____
Some	_____	_____
Many	_____	_____

When is the last time you sent or received [ELECTRONIC content]?

- _____ sent within last 30 days
- _____ received within last 30 days
- _____ sent within last 6 months
- _____ received within last 6 months
- _____ sent within last year
- _____ received within last year

Have you ever received [ELECTRONIC content]?

- _____ Yes
- _____ No

Was the topic of the [ELECTRONIC content] you received Health-related?

- _____ Yes
- _____ No
- _____ Don't know / not sure

Do you use a personalized Web page, like MyYahoo or iGoogle?

- * Yes
- * No
- * I'm not sure

Can you tell me a little about what you think [ELECTRONIC content] is?

Have you ever used [ELECTRONIC content] on a personal Web page or Web site?

- * Yes
- * No
- * I'm not sure

What kinds of [ELECTRONIC content, e.g. Widgets] have you used before? (Check all that apply)

- * Weather
- * Health Information
- * Pictures
- * Games
- * Email
- * Clock
- * Calendar
- * To Do List
- * [OPTION]
- * [OPTION]
- * [OPTION]
- * [OPTION]
- * Other: _____

Core Questions

****Note: Up to 20 questions will be used from this section. All questions will be either radio button, freeform, or rating scale.****

How did you find [SITE]?

- Search engine
- Referral or links from other sites
- Media/news story
- Received information from my doctor
- Learned about it through retail stores
- Word of mouth
- Site bookmarked
- Health e-Cards
- Widgets
- Whyville
- Second Life
- MySpace
- Podcasts
- Receiving health information via mobile phone
- Email subscriptions/RSS feeds
- Blogs
- [OPTION]
- [OPTION]
- Other: _____

How often do you visit [SITE]?

- I have never visited [SITE] before
- Less than once a month
- Several times a month
- Once a week
- Several times a week
- Once a day
- Several times a day

What specific [question or challenge] brings you to [SITE] today?

Which of the following [INFO], if any, do you typically access through [SITE]?

- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- Other: _____

What expectations do you have of [SITE]?

- Easy to access information, content, and tools
- Clear of terminology and language
- Comprehensive information
- Easy to read / scan information
- Easy of use / navigate
- Fast loading pages
- Appealing color scheme
- High quality photos / images
- Organized layout
- I have no expectations of [SITE]
- [OPTION]
- [OPTION]
- Other: _____

What do you think of [SITE]?

How often do you use [SITE] for work-related purposes?

- Daily
- Weekly
- Monthly
- A few times year
- Never

How would you rate your overall satisfaction with [SITE]?

- Very satisfied
- Satisfied
- Dissatisfied
- Very dissatisfied

What can we do to improve your satisfaction with [SITE]?

In my job, I use [SITE] to primarily look for information on:

- Birth defects
- Diseases and conditions
- Symptoms
- Treatment
- Disease prevention
- Healthy lifestyles
- Health promotion
- Injury prevention
- Environmental health
- Workplace safety and health
- Travelers' health
- Vaccines / immunizations
- Natural disasters
- Emergency preparedness
- [OPTION]
- [OPTION]
- [OPTION]
- Other: _____

What is the #1 reason you usually visit [SITE] for work-related purposes?

How do you usually find information on [SITE]?

- I go to the [SITE home page]
- I have the information bookmarked / I know the web page address
- I use the [A-Z Index]
- I use the [search engine]
- I use another search engine (such as Google.com, etc.)
- Other: _____

Please rate your level of agreement with the following:

- Information is easy to find.
- Web pages are well organized.
- Content is useful.
- Information is current.
- Search results are useful.
- 'Look and feel' is pleasing.

What are the [SITE, e.g. top 3 other (non-CDC) Web sites] you visit to find [INFO, e.g. similar information] for work-related purposes?

What features have you seen on [SITE, e.g. these Web sites] that are helpful to you or that you would like to see incorporated into [SITE]?

Please review the following audiences. Rank these audiences in order of importance for [SITE], with "1" being the MOST important audience and "10" the LEAST important. Each audience should be given a different number.

- Citizens/consumers/general public
- Educators or teachers
- Healthcare providers
- Journalists
- Policymakers, legislators, or staff
- Public health professionals
- Scientists or researchers
- Students
- CDC employees
- CDC partners and grantees
- [OPTION]
- [OPTION]

How does your program determine the information needs of the target audiences of [SITE, e.g. your Web site(s)]?

- Informal discussions with audience members (e.g. at conferences or meetings)
- Formal needs analysis (e.g. surveys, interviews, focus groups, etc.)
- Analysis of Web site metrics (e.g. Omniture reports)
- Analysis of [SITE]'s search logs
- Analysis of requests from e-mails and phone calls to your program office
- Input from partners
- [OPTION]
- [OPTION]
- I don't know
- Other: _____

Who do you think is the main audience for [SITE]?

Briefly describe the #1 reason that [AUDIENCE] visit [SITE], in your opinion.

In your opinion, how effective is [SITE, e.g. current Web site] in meeting the needs of [AUDIENCE]?

- Very effective
- Somewhat effective
- Somewhat ineffective
- Very ineffective

Describe any improvements we could make to [SITE] to better meet the needs of [AUDIENCE].

Please list any additional audiences that [SITE] should be targeting:

Choose the top [INFO, e.g. 2 options] that you think will have the greatest impact on improving [SITE].

- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]

Describe any additional enhancements we could make to improve [SITE].

Please list any [INFO, e.g. web-related topics] that you would like training in:

Which of the following best describes your role when it comes to developing and maintaining [SITE]?

- Web site manager
- Content coordinator
- Content specialist
- Subject matter expert
- Graphic designer
- Usability specialist
- Information architect
- Programmer / technical staff
- Other: _____

What [SITE, e.g. specific Web site(s)] do you work on? Please specify the URL(s), if you know them.

How much of your time do you dedicate to working on [SITE, e.g. these Web sites]?

- 100%
- 75%
- 50%
- 25% or less
- Not sure

What are the biggest challenges you face in [ACTION, e.g. creating, designing, and developing] [SITE, e.g. Web sites at CDC]?

What are the biggest challenges you face [ACTION, e.g. maintaining and updating] [SITE, e.g. Web sites at CDC]?

What is the ONE thing that would help you the most to [ACTION, e.g. develop and maintain] [SITE, e.g. Web sites at CDC]?

- Greater access to user research
- More strategic direction in developing [SITE]
- Additional help in organizing your content / information
- Additional help in writing your content / information
- Assistance in maintaining / updating content
- Help designing the 'look and feel' of your Web pages
- Technical help in developing or programming your Web site
- Software tools
- Content management system
- HTML coding
- Improved search functionality
- Project management
- [OPTION]
- [OPTION]
- Other: _____

Is [SITE, e.g. your program's Web site] currently in the "new" CDC template?

- Yes
- No
- I don't know

Please review the list of Web-related tools and resources below. Check the tools that you (or your program) have access to or would like to have access to.

- 508 compliance tool

- ACSI-Customer satisfaction survey
- Link checking tool (e.g. to identify broken links)
- Content inventory tool
- Content management system
- Federal guidelines
- Listserv of CDC Web staff
- Sample code / html
- Search logs
- Style guide
- Usability test results
- User feedback mechanisms
- User survey data
- Web design guidelines
- Web metrics from Omniture
- Web-related training courses
- Web site templates
- [OPTION]
- [OPTION]

Are your Web site resources (staffing, budget, overall support)...

- Increasing
- Staying the same
- Decreasing

We would like to know [INFO, e.g. the top 3 tools / features] that you would like to provide on [SITE, e.g. your program's Web site]. Please review the list of [INFO, e.g. tools] below and select your top [INFO, e.g. three].

- Would like to provide on our program's Web site
- Audio / video clips
- Email alerts when content changes
- Email inquiry box or other feedback mechanism
- Message boards / chats / blogs
- Online training seminars
- Personalization / customization of web pages
- Podcasting, RSS, text messaging
- Webcasting of meetings / conference
- [OPTION]
- [OPTION]
- Other: _____

Please list any Web-related topics that you would like training on:

Additional comments about [SITE] or suggestions for improvement:

Do you think some [AUDIENCE, e.g. people] would have problems using [SITE]?

What kinds of [AUDIENCE, e.g. people] would have problems using [SITE]?

What kinds of problems would [AUDIENCE, e.g. consumers] have using [SITE]?

What is your typical purpose when searching for [INFO] on the Web? I look for...

- Specific [INFO] for myself
- Specific [INFO] for someone else (loved one, family member, patient, client, etc.)
- Vaccination information
- Professional training/education materials

- Patient education materials
- Clinical information/resources
- Hospitals, doctors offices, or clinics located near me
- Symptoms
- Treatment
- Prevention
- Data or statistics
- Registries and Surveillance
- Fact Sheets
- Partners (e.g. Public Health collaborators, Research collaborators, etc)
- Events
- Training
- Outbreak information
- Publications
- Health Disparities
- Legislation
- Diagnostic tools/aids
- Information in other languages
- Program information
- Research activities (e.g. intramural, extramural)
- News
- Funding opportunities (e.g. grant, cooperative agreement)
- Recommendations/Guidelines
- Meeting/Conference information
- Caregiver resources
- Partner/Other Organization opportunities and resources
- Best Practices/Success Stories
- Public Health program specific resources
- General Health Information including prevention and/or treatment
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- Other : _____

Where do you typically acquire [INFO]? Which do you use most? Which do you use Least?

- Internet/Web
- Radio
- T.V.
- Journal articles
- Textbooks
- Library
- Brochures, Pamphlets
- Healthcare provider (Doctor, Nurse, etc.)
- Friend
- Family
- Online library
- Online journals
- Listservs
- Newsletters
- Magazines
- Newspapers
- Blog
- [OPTION]
- [OPTION]

- [OPTION]
- [OPTION]
- [OPTION]
- Don't consult sources
- Other: _____

Do you use search engines more often than the navigation links on [SITE, e.g. a Web site]?

How do you typically access [INFO] on the Internet/Web?

- Search engine (Examples: Google, Yahoo.)
- Specific [SITE, e.g. Web sites/pages/applications]
- Online Newsletters or Listservs
- Other: _____

What specific [SITE] do you visit for [INFO]?

Which [SITE] do you find useful for acquiring [INFO]?

- HHS (Department of Health and Human Services)
- CDC (Centers for Disease Control and Prevention)
- NIH (National Institutes of Health)
- WebMD
- Yahoo! Health
- [OPTION]
- [OPTION]
- Other: _____

How do you usually find and select Web sites - and specific pages on those Web sites - when researching [INFO]?

- o I choose specific Web sites that I am already familiar with
- o I choose Web sites that appear on search engines (e.g., Yahoo, Google)
- o I click banner ads or referring links from other Web sites
- o I use a health section on a portal Web site (e.g., MSN Health, Yahoo! Health)
- o I choose Web sites recommended by friends / colleagues / family members
- o I look at general health Web sites (e.g., WebMD, MayoClinic)
- o I look at specific drug or treatment Web sites (e.g., Advair.com, Flovent.com)
- o I look at disease-specific consumer advocacy Web sites (e.g., AAFA.org)
- o I look at disease-specific medical association Web sites (e.g., aaaai.org)
- o I look at government health Web sites (e.g., CDC, NIH)
- o I look at Web sites mentioned in TV, news, or radio reports
- o I look at Web sites mentioned in publications I read
- o Other: _____

Have you ever visited [SITE] before?

- Yes
- No
- I'm not sure

How often do you visit [SITE]?

- Daily
- Weekly
- Monthly
- Quarterly
- Yearly
- A couple of times a year

- About once a year or less
- Never

Is there any other way you have obtained [INFO, e.g. information from CDC] besides using [SITE, e.g. their Web site]?

What information would you like to see in [2nd Life]?

- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]

Which [ELECTRONIC] do you use [daily]?

- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]

What do you use it for [daily]?

- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]

Is the [amount] of information in [ELECTRONIC, e.g. 2nd Life] good?

- Yes
- No
- Other: _____

Is the [quality] of information in [ELECTRONIC, e.g. 2nd Life] good?

- Yes
- No
- Other: _____

Is the [level of detail] of information in [ELECTRONIC, e.g. 2nd Life] good?

- Yes
- No
- Other: _____

How did you get to the [SITE] today?

- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]

Which of the following best describes the type of information were you looking for today [on SITE]? OR

What was the reason you visited [SITE] today?

- Specific [INFO] for myself
- Specific [INFO] for someone else (loved one, family member, patient, client, etc.)
- Disease prevention
- Diseases and conditions

- Birth defects
- Sexually transmitted diseases (added)
- Healthy lifestyles / health promotion
- Injury or violence prevention
- Environmental health
- Workplace safety and health
- Travelers' health
- Vaccines / immunizations
- Natural disasters
- Emergency preparedness
- ~~Vaccine information~~
- Health communication campaigns
- Professional training/education materials
- Patient education materials
- Clinical information/resources
- Hospitals, doctors offices, or clinics located near me
- Symptoms
- Treatment
- Prevention
- Data or statistics
- Registries and Surveillance
- Fact Sheets
- Partners (e.g. Public Health collaborators, Research collaborators, etc)
- Conferences and Events
- Training
- Outbreak information
- Publications
- Health Disparities
- Legislation
- Diagnostic tools/aids
- Information in other languages
 - Program information
 - Research activities (e.g. intramural, extramural)
 - News
 - Funding opportunities (e.g. grant, cooperative agreement)
 - Recommendations/Guidelines
 - Meeting/Conference information
 - Caregiver resources
 - Partner/Other Organization opportunities and resources
 - Best Practices/Success Stories
- Public Health program specific resources
- General Health Information including prevention and/or treatment
- Relevant Search engine result
- Grants and Funding
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- Other: _____

Does the depth of information on [SITE] provide:

- o Too much detail
- o Just the right amount of detail
- o Not enough detail

In your own words, what is the main purpose of [SITE]?

Describe the [SITE, e.g. CDC home page].

What [INFO] do you think [SITE] contains?

- Specific [INFO] for myself
- Specific [INFO] for someone else (loved one, family member, patient, client, etc.)
- Vaccination information
- Professional training/education materials
- Patient education materials
- Clinical information/resources
- Hospitals, doctors offices, or clinics located near me
- Symptoms
- Treatment
- Prevention
- Data or statistics
- Registries and Surveillance
- Fact Sheets
- Partners (e.g. Public Health collaborators, Research collaborators, etc)
- Events
- Training
- Outbreak information
- Publications
- Health Disparities
- Legislation
- Diagnostic tools/aids
- Information in other languages
 - Program information
 - Research activities (intramural and extramural)
 - News
 - Funding opportunities
 - Meeting/Conference information
 - Caregiver resources
 - Partner/Other Organization opportunities and resources
 - Best Practices/Success Stories
 - Recommendations/Guidelines
- Public Health program specific resources
- General Health Information including prevention and/or treatment
- A means to provide questions, feedback or comments
- Press Releases
- Forms
- Other: _____

How do you generally use [INFO] from [SITE]?

- Read online
- Print for reference
- Print for hand-out
- Email to others
- Refer others to the Web site
- Other _____

I think the [SITE or INFO] is:

Credible

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

Scientific

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

Up-to-date

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

Relevant to current events

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

Research-based

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

Easy to understand

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

Useful for researching

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

Useful for making health decisions

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

Related to my profession
Strongly disagree
Disagree
Neither agree nor disagree
Agree
Strongly agree

Action-oriented
Strongly disagree
Disagree
Neither agree nor disagree
Agree
Strongly agree

Have you been affected by [INFO, e.g. insert public health emergency or health topic] in the past [TIME, e.g. 2 years]?

- Yes
- No

How have you been affected by [INFO, e.g. insert public health emergency or health topic] in the past [TIME, e.g. 2 years]?

- I had to evacuate my home.
- I had to shelter in place.
- I was physically injured.
- I was emotionally affected.
- I was emotionally affected and sought mental health counseling.
- I sustained mental trauma.
- I sustained mental trauma and sought mental health counseling.
- I was exposed to someone who was sick with [INFO, e.g. Salmonella].
- I was exposed to someone with symptoms of [INFO, e.g. ecoli].
- I became sick with [INFO, e.g. ecoli].
- I have exhibited symptoms of [INFO, e.g. ecoli].
- My home was damaged.
- I have played a role in the response to this event (in either a professional or volunteer capacity).
- I have provided shelter in my home to others affected by the event.
- I do not live in the affected area but my friends/family live in the affected area.
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- Other: _____

Which of the following, if any, do you associate with [INFO]?

- Credible
- Current / up-to-date information
- Easy to use
- Friendly
- Helpful
- Informative
- Insightful
- Interesting
- Relevant
- Trustworthy
- Entertaining
- Good use of my time

- Other: _____

CDC is going to launch [INFO]. Which name would you prefer for [INFO]?

Why do you prefer this name for [INFO]?

Besides [INFO, e.g. the existing Fact Sheets], what other [INFO, e.g. downloadable materials] would be interesting and useful to you and your loved ones?

- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]

Have you viewed [INFO]?

What were your first impressions of [SITE or INFO]?

What aspects of [SITE or INFO] did you find [DESCRIPTOR]?

Why did [SITE or INFO, e.g. the Salmonella Fact Sheet] have the best [INFO or DESCRIPTOR, e.g. suggestions for preventing infection]?

Why did [SITE or INFO, e.g. the Rabies Fact Sheet] have the worst [INFO or DESCRIPTOR, e.g. suggestions for treatment]?

Why do you not have a preference? What did you like / dislike about each version of [SITE or INFO]?

If [SITE] were to implement your preferred version, how much more or less likely would you be to visit [SITE] in the future?

- Significantly more likely
- Somewhat more likely
- Equally as likely
- Somewhat less likely
- Significantly less likely

Which of the following [INFO, e.g. features], if any, did you notice and/or use on [SITE]?

- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]

If [SITE] were to implement your preferred [INFO], how much more or less likely would you be to visit [SITE] in the future?

- Significantly more likely
- Somewhat more likely
- Equally as likely
- Somewhat less likely
- Significantly less likely

What drew your attention to [SITE or INFO]?

Overall, how satisfied were you with [SITE] after exploring the [SITE]'s [INFO, e.g. design, content, and features]?

- Very Satisfied
- Somewhat Satisfied
- Neutral
- Somewhat Satisfied
- Very Satisfied

How likely is it that you will still be using [SITE] [TIME] from now?

- Definitely will still be using [TIME] from now
- Probably will still be using [TIME] from now
- Might or might not be using [TIME] from now
- Probably will NOT be using [TIME] from now
- Definitely will NOT be using [TIME] from now

What [INFO], if any, would you like added to [SITE]?

Now we would like your feedback on [SITE or INFO]. Without clicking anywhere, please spend as much time as you would in real life learning about all the different [INFO] that [SITE] offers. When you have a good understanding of [INFO] that [SITE] offers, please press '[BUTTON]'

How would you rate [INFO] on [SITE]?

- Very [DESCRIPTOR]
- Somewhat [DESCRIPTOR]
- Neutral
- Somewhat [DESCRIPTOR]
- Very [DESCRIPTOR]

What content or information, if any, do feel is missing from [SITE or INFO]?

How likely are you to [ACTION]?

- Very Likely
- Somewhat Likely
- Neutral
- Somewhat Likely
- Very Likely

Which of the following best describes what you attempted to do on [SITE] today?

- Learn about [SITE]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- None of the above
- Other: _____

How [DESCRIPTOR, e.g. helpful] was the information provided about [SITE or INFO]?

Which of the following, if any, problems or frustrations did you experience while [ACTION, using] [SITE or INFO]?

- Navigating from page to page was difficult
- Pages would not load / Technical Issues
- Site was slow
- Too many categories or sections
- Too few categories or sections
- Product and service categories were not useful
- Organization of the site was confusing
- Labels / content used were unclear

- I could not find the product / service / information I was looking for
- I got lost on the site
- I did not encounter any problems or frustrations
- Other: _____

What [INFO] were you looking for that you could not find?

What [INFO] could be [DESCRIPTOR, e.g. more clear]?

How [DESCRIPTOR, e.g. easy] was it for you to [ACTION, e.g. determine] [INFO]?

- Extremely [DESCRIPTOR]
- Somewhat [DESCRIPTOR]
- Neutral
- Somewhat [opposite of DESCRIPTOR]
- Extremely [opposite of DESCRIPTOR]

What would make it easier for you to [ACTION, e.g. find] [INFO]?

How [DESCRIPTOR] did you find [INFO]?

- Extremely [DESCRIPTOR]
- Somewhat [DESCRIPTOR]
- Neutral
- Somewhat [opposite of DESCRIPTOR]
- Extremely [opposite of DESCRIPTOR]

How could the information provided about [INFO] be more [DESCRIPTOR]?

What [INFO], if any, do you feel was missing?

How would you rate the [DESCRIPTOR] of the information about [INFO]?

- Very [DESCRIPTOR]
- Somewhat [DESCRIPTOR]
- Neutral
- Somewhat [opposite of DESCRIPTOR]
- Very [opposite of DESCRIPTOR]

After reviewing [SITE], what additional questions, if any, do you still have about [SITE]?

Please indicate how likely you are, if at all, to do the following

- Definitely would [ACTION]
- Probably would [ACTION]
- Probably would not [ACTION]
- Definitely would not [ACTION]

Based on your experience today, how [DESCRIPTOR] were you with your [ACTION, e.g. ability to find] [INFO] you needed?

- Not at all [DESCRIPTOR]
- Neutral
- Extremely [DESCRIPTOR]

Based on your experience today, how [DESCRIPTOR] were you while using [SITE]?

- Not at all [DESCRIPTOR]
- Neutral
- Extremely [DESCRIPTOR]

Based on your experience, how [DESCRIPTOR] was it to use [SITE]?

- Extremely [DESCRIPTOR]
- Neutral
- Extremely [DESCRIPTOR]

Based on your experience today, how would you rate the [ASPECT, e.g. organization] of [SITE]?

- Very [ASPECT-related term, e.g. disorganized]
- Somewhat [ASPECT-related term, e.g. disorganized]
- Neutral
- Somewhat [ASPECT-related term, e.g. organized]
- Very [ASPECT-related term, e.g. organized]

Based on your experience today, how likely are you, if at all, to do any of the following in the next [TIME]?

- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]

Based on your experience today, what is your image of [SITE]?

- Completely negative
- Extremely negative
- More negative than positive
- More positive than negative
- Extremely positive
- Completely positive

Which of the following best describes how you navigate while [ACTION][SITE or INFO] online?

- I have never [ACTION][SITE or INFO] online before
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- Other: _____

Which of the following tools do you frequently use when [ACTION][SITE or INFO]?

- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]
- Other: _____

How often do you [ACTION][SITE or INFO] online?

- I have never [ACTION][SITE or INFO] online before
- Once per year or less
- A few times per year
- Once per month
- A few times per month
- Once per week or more often

How likely are you to do the following within [TIME]?

- [OPTION]

- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]

What about [SITE or INFO], made a lasting impression on you?

How would you have contacted the CDC to [ACTION, e.g. ask your question or obtain the information you were looking for]?

- Send an email
- Browse the Website
- Call CDC's 800 number
- Write a letter to CDC
- Would not have contacted CDC
- Other: _____

If you plan on following up with CDC to clarify the answer you received during this site visit, how do you intend to contact CDC?

- Send an email
- Call CDC's 800 number
- Write a letter to CDC
- Return to the Website at a later time
- Other: _____

Did you call the Call Center?

- Yes
- No

Was your problem or question resolved?

If you were dissatisfied with Call Center's resolution of your problem or question, what was the reason?

- Nothing was unsatisfactory
- On hold too long
- Took too long to receive e-mail response
- Staff was not knowledgeable about my question/problem
- Did not receive a return e-mail or follow-up call
- Problem cannot be resolved at this time
- [OPTION]
- [OPTION]
- Other: _____

How satisfied were you with the availability of on-site help?

In the last [TIME, e.g. 30 days] how many times have visited [SITE, e.g. the CDC's Web site] *instead of* calling the call center?

Please rate the degree to which the Call Center representative(s) spoke clearly?

Activity/Task Questions

****There will be no more than 10 activity questions relevant to the specific Web site/page/application. Respondents will be asked to click through the specific Web site/page/application to complete the activities. For each activity question, there will be a series***

of follow up questions to evaluate the participant's ease or difficulty in finding the answer to the question. An example of a task question and follow up questions is shown below. All questions will be either radio button, freeform, or rating scale.*

Instructions

Example Activity 1 of 10

If you live in an area where a hurricane is expected to make landfall in approximately 12 hours, and you have not been asked to evacuate, what steps would you take?

Example Activity 2 of 10

If you have to go outside during extremely cold weather, should you wear mittens or gloves?

[Continue with up to 9 more activity questions and follow up questions.]

FIRST-CLICK TESTING

Instructions

example 1: For the following question, please make [insert number] click(s) in an attempt to find the answer. You do not need to find the actual answer to the question.

example 2: For the following question, please visit [insert number] page(s) in an attempt to find the answer. You do not need to find the actual answer to the question.

Task

example 1: Where would you find information about _____?

Where would you find information about visiting the CDC museum?

example 2: Where would you find _____?

Where would you find a journal that CDC develops called the MMWR?

CARD SORTS

Instructions

example: We are conducting research that will help us gain a better understanding of how our Web site should be organized and make it easier to use.

Task

example:

1. Review the items in the left column. These items represent content on our current Web site.
2. Place all of the items that belong together into the same group. Drag the items that belong in the same category from the left column over to the right column. When you are finished adding items to a category, click the yellow box in the middle column to name each group.
3. If an item is unfamiliar, you may create a category called "Miscellaneous".
4. There is no correct number of groups, but make sure that you think about how the items relate to each other. If you have a group with a large amount of items, consider splitting it up.
5. You must do the exercise in one sitting. Please do not leave the browser to go to another task - you will not be able to return.

Follow up Questions

Note: Up to 15 questions will be used from this section. All questions will be either radio button, freeform, or rating scale.

What is the main purpose of [SITE]?

Did you learn anything new from visiting [SITE]?

After viewing this [SITE or INFO], do you plan to change your practices regarding [INFO]? Why or why not?

Do you plan to [ACTION] as a result of your visit to [SITE or INFO]?

- Yes
- No

Please describe the steps you plan to take [ACTION] as a result of your visit to [SITE].

If there were a/an [INFO, e.g. public health emergency], what [SITE] would you visit to find more [INFO]?

What Web site would you visit to find [INFO, e.g. Fact Sheets] specific to [INFO, e.g. Malaria]?

How well does [SITE or INFO] provide you with the amount of information you and your family need about [INFO, e.g. Hurricane clean-up]?

- It provides the right amount of information.
- It provides too much information.
- It provides too little information.

Is the information on [SITE] [DESCRIPTOR]?

- Yes
- No

Please explain your answer

Does the information on [SITE] explain who is most at risk?

- Yes
- No

Is information on [SITE] presented in an appealing format?

- Yes
- No

Would the information on [SITE] convince you to take action if you were at risk or potentially at risk?

- Yes
- No

After reading the information on [SITE], would you be able to make [an informed decision OR better decisions] during an emergency?

- Yes
- No

Would you use information on [SITE] [during OR to prepare for OR to recover from] an emergency?

- Yes
- No

Please describe any difficulties you encountered when trying to complete tasks on [SITE].

Prior to using the Web site, what is your overall impression?

What are your initial impressions of the [insert health topic] home page?

Now that you have used the Web site, how would you rate it when compared with other Web sites?

- Excellent
- Good
- About Average
- Fair
- Poor

Now that you have used the Web site, what is your overall impression?

Pick 3 words to describe [SITE]:

Pick three of the following words that best describe the look and feel of [SITE].

- Attractive
- Busy
- Clean
- Cluttered
- Modern
- Overwhelming
- Organized
- Out-of-date
- Sophisticated
- Unfriendly
- Warm (or Welcoming)
- Wordy
- [OPTION]
- [OPTION]
- [OPTION]
- [OPTION]

Overall what did you like MOST about [SITE]?

Overall what did you like LEAST about [SITE]?

How useful is the [SITE] to you as

- A repository of [INFO] information
- A tool for doing your work for the [CIO] program
- A tool for collaborating with other [CIO, e.g. Cancer] grantees
- A resource for your staff
- A resource for your partners (e.g. Public Health collaborators, Research collaborators, etc)
- A tool for school
- A way to understand [CIO, e.g. Prostate Cancer]
- A resource for your family and friends
- A resource for yourself

With which grantees do you regularly interact?

- CDC grantees
- NIH grantees

- All Federal government grantees
- [OPTION]
- [OPTION]
- Other: _____

Would you recommend [SITE] to anyone? Who? Why?

Who do you think would find this [SITE] most useful?

1. Mother
2. Father
3. Stay-at-home parent
4. Primary Caregiver
5. General public
6. Retired
7. Self Employed
8. Non-Health Care Related
9. Non-Health Related Business/Industry
10. Office and Administrative Support
11. Manager
12. Business Owner or Operator
13. International
14. Architecture or Engineering
15. Arts, Design, Entertainment, Sports, or Media
16. Attorney or other Legal Professional
17. Building and Grounds Cleaning and Maintenance
18. Computer and Mathematical
19. Construction and Extraction
20. Correctional Institution
21. Food Preparation and Serving Related
22. Installation, Maintenance, and Repair
23. Insurance Company
24. Life, Physical, and Social Science
25. Protective Service and Safety Professional (Firefighter, EMT)
26. Sales and Related
27. Transportation and Material Moving
28. Farming, Fishing, Forestry, Ranching, or Agriculture
29. Government
 - a. Law Enforcement/Criminal Justice
 - b. Policy maker or their staff
 - c. Military
 - d. Federal Agency (not military)
 1. Centers for Disease Control and Prevention (CDC)
 - a. FTE
 - b. Full-time Contractor
 - c. Part-time Vendor
 - d. Fellow
 - e. Grantee
 - f. Partner
 - g. Program
 - h. Research Grantees
 - e. Local or State government agency besides health department
 - f. State/Local Health Department
30. Health
 - a. Nursing Home
 - b. Clinic
 - c. Healthcare provider (physician, nurse, physician's assistant, nurse practitioner)

- d. Healthcare Support
 - e. Hospital
 - f. Medical or Allied Health School or Library
 - g. Medical or Scientific researcher
 - h. Medicine
 - i. Staff at Hospital or Clinic
 - j. Nurse/Advanced Practice Nurse
 - k. Pharmacy, Physician Assistant
 - l. National Model [insert health topic] Center
 - m. Public Health
 - 1. Epidemiologist
 - 2. Health Communication
 - 3. Health Education
31. Community/Patient Advocacy
- a. Non-profit Organization
 - b. Community and Social Services
 - c. Community Based Organization (CBO)
 - d. Homeless Shelter
32. Education
- a. Student
 - b. Student (Medicine and Allied Health Professions)
 - c. School District
 - d. Student (non-Medicine and non-Allied Health Professions)
 - e. Teacher/Educator
 - f. Librarian/Information Specialist
33. Other: _____

Is the information on [\[SITE\]](#) up to date?

- Yes
- No
- I don't know

What information did you expect to find on [\[SITE\]](#) but did not?

What [\[INFO\]](#) would you like to see included or highlighted on [\[SITE\]](#)?

- Specific [\[INFO\]](#) for myself
- Specific [\[INFO\]](#) for someone else (loved one, family member, patient, client, etc.)
- Vaccination information
- Professional training/education materials
- Patient education materials
- Clinical information/resources
- Hospitals, doctors offices, or clinics located near me
- Symptoms
- Treatment
- Prevention
- Data or statistics
- Registries and Surveillance
- Fact Sheets
- Partners (e.g. Public Health collaborators, Research collaborators, etc)
- Events
- Training
- Outbreak information
- Publications
- Health Disparities
- Legislation
- Diagnostic tools/aids

- Information in other languages
- Program information
- Research activities (intramural and extramural)
- News
- Funding opportunities
- Meeting/Conference information
- Caregiver resources
- Partner/Other Organization opportunities and resources
- Best Practices/Success Stories
- Recommendations/Guidelines
- Public Health program specific resources
- General Health Information including prevention and/or treatment
- Other: _____

Did the link labels on [SITE] seem [DESCRIPTOR, e.g. intuitive and appropriate]? Which ones did not?

Was [SITE] organized in a way that made it easy for you to find information?

Please rate the following statements.

- Overall, I found [SITE] was easy to use
- I found the link labels and terms used in [SITE] clear.
- The health information on [SITE] was presented in a manner that I could understand.
- It was easy to find the information I was looking for on [SITE].
- This [SITE] was aesthetically pleasing.
- The [SITE] contained useful information.
- I would use [SITE] as my primary source for [INFO].
- The organization of information within the categories [e.g. Basic Information, Data & Statistics, etc] was appropriate.
- The browsing conditions during the test were optimal.
- I trust the [INFO] I found on [SITE].

Which version of [SITE] did you prefer?

- Version 1
- Version 2
- Version 3
- Version 4
- No Preference

Which version of [SITE] was easier to use?

- Version 1
- Version 2
- Version 3
- Version 4
- No Preference

Which version of [SITE] was more visually appealing?

- Version 1
- Version 2
- Version 3
- Version 4
- No Preference

Did using [SITE] require any new skills or challenges?

- Yes
- No

Were you able to concentrate and avoid disruption while using [SITE]?

- Yes
- No

When completing the tasks did you feel in control of finding [INFO]?

- Yes
- No

Describe your experience finding [INFO].

Would you describe finding [INFO] as fast or slow?

- Fast
- Slow

Were there any factors that may have slowed down your progress?

- Small font
- Bad mouse
- Slow browser
- Confusing terminology
- Other: _____

Did you find [INFO] correct or incorrect?

- Correct
- Incorrect

Did [SITE] provide adequate on-screen help?

Did you always know where you were within [SITE]?

- Yes
- No

Did it take a long or short time to find [INFO]?

- Long
- Short

How do you prefer to navigate [SITE]?

- Search
- Menu structure
- Text links
- Combination
- Other: _____
- No preference

Did you encounter difficulties navigating [SITE], and if so, what was the primary issue?

- I did not encounter any difficulties navigating the Web site
- Could not determine the best link on most pages
- Links did not take me where I expected
- Difficulty finding related information
- Technical difficulties (e.g., broken links, error messages, etc.)
- Too many links or navigational choices
- Links/icons/labels are difficult to understand
- Navigated to the general area but could not find the specific content I needed
- Other: _____

SUS: SYSTEM USABILITY SCALE

I would recommend that others use this Web site.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree

I found the Web site unnecessarily complex.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree

I thought the Web site was easy to use.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree

I think I would need help sometimes to be able to effectively use this Web site.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree

I found that the various functions in this Web site were well integrated.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree

I thought there was too much inconsistency in this Web site.

- Strongly agree
- Agree
- Neutral
- Disagree

Strongly disagree

I would imagine that most people would learn to use this Web site very quickly.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree

I found this Web site very cumbersome to use.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree

I felt using this Web site.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree

I will need to learn a lot about this Web site before I could effectively use it.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly disagree

What is your reaction to the process of [interaction with ELECTRONIC] on your page?

What is your overall impression of this page?

What do you think about the layout of [ELECTRONIC CONTENT]?

Which title do you like best for [ELECTRONIC CONTENT]?

- * "Public Health Data & Statistics" (current heading)
- * "Health Data & Statistics"
- * "Data & Statistics"
- * Other: _____

How would you describe [ELECTRONIC CONTENT]?

Select the radio button on the scale next to the word that best describes [ELECTRONIC CONTENT].

- Attractive or Unattractive
- Boring or Interesting
- Credible or Not Credible
- Dated or Modern
- Clean or Busy
- Unimaginative or Imaginative
- Warm or Cold
- Poorly Designed or Well Designed
- Trustworthy or Not Trustworthy

Out of Date or Up to Date

Are you familiar with social networking sites like MySpace or Facebook?

Yes

No

I'm not sure

Do you have an account or use MySpace, Facebook, or some other similar site? If so, which sites do you use? (Check all that apply)

MySpace

Facebook

LinkedIn

Bebo

Friendster

[OPTION]

[OPTION]

[OPTION]

[OPTION]

I don't use a site like these

Other:

Which [ELECTRONIC] is your favorite? Why?

How often do you make use of your favorite social networking site?

Several times per day

Once every few days

Once per week

Once per month

Other:

What kinds of things do you like to do on that site? (Check all that apply)

post / view pictures

add a widget or gadget

send / receive messages

chat with friends

post / watch videos

post / read a blog or message board

play games

learn about a specific topic

network / stay in touch with friends, colleagues

Other: _____

Which of these social networking sites are you familiar with? (Check all that apply)

Daily Strength

Caring Bridge

Patients Like Me

Healia

Eons

Sermo

I am not familiar with any of the above sites

Without clicking anything on this page, what is your initial impression?

Without clicking anything on this page, who do you think this page is for? (Check all that apply)

Teenagers

College Students

Parents
Adults
Health professionals
Other: _____

Without clicking anything on this page, what types of information do you think you can find here?

Based on the information on this page, what do you think a "badge" is?

Please describe the steps you would take to add a "badge" from this page to your MySpace page to promote testing for HIV?

What other types of badges would you be interested in seeing or do you expect to see on this page?

What is your overall impression of this page?

What other types of information would you like to see on this page?

Have you ever [interaction with ELECTRONIC]?

___ Yes
___ No

Was the [interaction with ELECTRONIC] Health-related?

___ Yes
___ No
___ Don't know / not sure

Would you like to send information to improve one's health through [ELECTRONIC]?

___ would like to send [ELECTRONIC] about ANY health topic
___ would like to send [ELECTRONIC] about certain health topics only
___ would not like to send [ELECTRONIC]

Would you like to receive information to improve one's health through [ELECTRONIC]?

___ would like to receive Health eCards about ANY health topic
___ would like to recv Health eCards about certain health topics only
___ would not like to receive Health eCards

What health topics would you like to send or receive [ELECTRONIC] about?

Is [ELECTRONIC] similar or different than your previous experience(s)?

___ Similar to previous experience(s)
___ Different from previous experience(s)

In what ways is [ELECTRONIC] different from previous experiences?

Are there any health topics would you like to receive or send [ELECTRONIC] for?

Can you think of anyone who might want to use [ELECTRONIC]?

___ parent
___ sibling
___ child
___ co-worker
___ friend
___ healthcare provider
___ public health professional
___ no one

___ other:

Can you think of anyone who might want to receive [ELECTRONIC]?

- ___ parent
- ___ sibling
- ___ child
- ___ co-worker
- ___ friend
- ___ patient
- ___ no one
- ___ other:

What did you like and dislike about [ELECTRONIC]?

[OPTION]

[OPTION]

[OPTION]

[OPTION]

[OPTION]

Do you have any additional comments or final thoughts?

What is your overall impression of [ELECTRONIC]?

What do you think of the process of [interaction with ELECTRONIC] on particular topics?

What would you tell someone else about [ELECTRONIC]?

What do you think about [ELECTRONIC]s as a way to get information about health?

Any other ideas or thoughts about [ELECTRONIC]?

Please take a minute or two and read this page about [ELECTRONIC].

Now without referring back to the page, how would you describe [ELECTRONIC] to a friend?

PROBES

We plan to ask respondents “probes” like the questions below after they have completed the survey. A probe is a question largely based upon answers to the survey questions and issues that seem worth pursuing-- for example, when noticing that a respondent seems confused or spent additional time answering something.

Because the probe depends on the individual participant’s actions, it would be difficult to completely script them. We might or might not ask the exact probes listed below. The survey/investigation requires some flexibility.

Please share any additional comments you have about this Web site/page/application.

Could you tell me what the term “prevention” means to you?

Why did you answer that way?

In your own words, could you tell me what you think this question is asking?

Was this question easy or hard to answer? Why?

How sure are you about your answer?

How did you decide where to look for health information?

How difficult was it for you to figure out where to go next from this point?

Why did you search where you did?