NPIN Products and Services User Survey Telephone Script

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Public reporting burden of this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-XXXX).

| Hello, my name is Prevention Information Network. | | and I am calling from the CDC National ork. |
|--|--|---|
| obtain feedba We val you for reporte | information about your ck you provide will hel lue your feedback, and r any additional identify | nization as a user of NPIN products and services and I am calling to organization's experience with the products and services. The p NPIN enhance its products and services to better meet your needs. your opinions and suggestions are important to us. We will not asking information. All survey responses will be confidential and air participation is completely voluntary. This survey will take on te. |
| Are yo | u willing to participate | in this data collection at this time? |
| | erviewer: If responden hank respondent for th | t says 'yes', continue with questionnaire. If respondent replies eir time and end call. |
| Your l | Expectations and Satis | faction |
| 1. | Before you started to overall quality of the power of the | oectations ions |
| 2. | Now, after having use quality? □ Excellent □ Good □ Average □ Below Average □ Poor | d NPIN products/services, how would you rate their overall |
| 3. | How satisfied are you Very satisfied Satisfied Neutral Dissatisfied Very dissatisfied | |
| 4. | products/services met | eets expectations |

NPIN Customer Service

| 5. | In the past 12 months, how often have you ordered products from NPIN? □ Daily □ Weekly □ Monthly □ Annually □ Occasionally □ Once □ Never |
|----|--|
| 6. | What methods do you use to order products from NPIN? (Select all that apply.) Mail Internet Over the phone Fax Email Live Chat Other (Specify) N/A |
| 7. | How satisfied are you with the delivery of your order(s)? □ Very Satisfied □ Satisfied □ Neutral □ Dissatisfied □ Very Dissatisfied □ N/A |
| 8. | How satisfied are you with the customer service you receive from NPIN? □ Very Satisfied □ Satisfied □ Neutral □ Dissatisfied □ Very Dissatisfied □ N/A |
| 9. | How responsive is NPIN staff to meeting your request(s)? □ Very responsive □ Responsive □ Neutral □ Somewhat responsive □ Not responsive □ N/A |

Use of NPIN Products/Services

| 10. In the p | past 12 months, how often have you used NPIN products/services? | |
|--------------|--|--|
| | Daily | |
| | , and the second | |
| | Monthly | |
| | Annually | |
| | Occasionally | |
| | Once | |
| 11. In the p | past 12 months, what types of NPIN products/services have you used? (Please | |
| mark a | ll that apply.) | |
| | Prevention/educational materials | |
| | Treatment information | |
| | Research information | |
| | Statistics (fact sheets, glossaries, surveillance reports, MMWR) | |
| | CDC information/guidelines | |
| | News/features | |
| | Conference information | |
| | Reference and referral of organizations/service providers | |
| | Funding information | |
| | Spanish language materials | |
| | Non-English language materials other than Spanish | |
| | Communication tools (e.g., listservs, mailing lists) | |
| | Other communication tools (e.g., instant messaging, chat rooms, blogs, etc.) | |
| | Downloads (PDA format, slide sets, software) | |
| | Searchable databases | |
| | Live help from NPIN information specialists | |
| | Satellite broadcast ordering information | |
| | Other (Specify) | |

| 12. Which | products/services do you use most frequently? (Please mark all that apply.) |
|-----------------|---|
| | Prevention/educational materials |
| | Treatment information |
| | Research information |
| | Statistics (fact sheets, glossaries, surveillance reports, MMWR) |
| | CDC information/guidelines |
| | News/features |
| | Conference information |
| | Reference and referral of organizations/service providers |
| | Funding information |
| | Spanish language materials |
| | Non-English language materials other than Spanish |
| | Communication tools (e.g., listservs, mailing lists) |
| | Other communication tools (e.g., instant messaging, chat rooms, blogs, etc.) |
| | Downloads (PDA format, slide sets, software) |
| | |
| | Live help from NPIN information specialists |
| | Satellite broadcast ordering information |
| | Other (Specify) |
| | cale of 1 to 5, how useful are the following NPIN products/services to your work? at all helpful, 5=very helpful; N/A=not applicable) Prevention/educational materials Treatment information Research information CDC information/guidelines News/features Conferences Reference and referral of organizations/services providers Funding information Spanish language materials Non-English language materials other than Spanish Communication tools (e.g., listservs, mailing lists) Other communication tools (e.g., instant messaging, chat rooms, blogs, etc.) Downloads (PDA format, slide sets, software) Searchable databases Live help from NPIN information specialists Satellite broadcast ordering information |
| - 14. Do voi | Statistics (fact sheets, glossaries, surveillance reports, MMWR) I find the information provided by NPIN to be current? |
| | Yes No |

| 15. Hov | w accurate do you consider the information provided by NPIN to be? □ Extremely Accurate |
|------------|--|
| | □ Accurate |
| | □ Neutral |
| | □ Somewhat Accurate |
| | □ Not Accurate |
| 16. Hov | w have NPIN's products/services facilitated your work? |
| | |
| | |
| Future Use | of NPIN Products and Services |
| 17. Hov | w likely are you to use NPIN products/services in the future? |
| | □ Very likely |
| | □ Likely |
| | □ Neutral |
| | □ Somewhat likely |
| | □ Not likely |
| 18. Ho | w likely are you to order products from NPIN again? |
| | □ Very likely |
| | □ Likely |
| | □ Neutral |
| | □ Somewhat likely |
| | □ Not likely |
| 19. Wo | uld you recommend NPIN products/services to a colleague or friend? |
| | □ Yes |
| | □ No |
| How to Bet | ter Meet Your Needs |
| 20. To | what extent do you rely on NPIN for products/services about the prevention and |
| trea | tment of HIV/AIDS, STDs, TB, and viral hepatitis compared to other sources of |
| sim | ilar products/services? |
| | ☐ I rely solely on NPIN. |
| | ☐ I rely heavily on NPIN. |
| | ☐ I rely moderately on NPIN. |
| | □ I rely very little on NPIN.□ I do not rely at all on NPIN. |
| | i do not rery at an on inprin. |
| | at other sources of products/services about the prevention and treatment of |
| HIV | //AIDS, STDs, TB, and viral hepatitis do you frequently use? |
| | |
| | |

| | Using the following 5-point scale, please rate how NPIN compares to products/services specified in Question #21 on the following characters. | |
|---------|--|-----------------------|
| | NIDINI: a b account | 1 |
| | NPIN is some what heater | 1 |
| | NPIN is somewhat better All the sources of information are about the same | 2 3 |
| | | |
| | NPIN is somewhat worse | 4 |
| | NPIN is worse | 5 |
| | I don't have an opinion | 6 |
| | aOrdering products/services | |
| | bUsefulness of products/services | |
| | cAccuracy of products/services | |
| | dResponsiveness to the customer | |
| | eTimeliness of product/service delivery | |
| 23. | Please list your suggestions to enhance NPIN's products/services. | |
| | | |
| | | |
| | | |
| | | |
| | What products/services would be useful to your work but are not cur | cently available from |
| | NPIN? | |
| | | |
| | | |
| | | |
| | | |
| Backgro | ound Information | |
| 25 | How did you first learn about NPIN? | |
| 20. | ☐ Internet search engine | |
| | ☐ Link from a website | |
| | | nforonco |
| | □ National Prevention Information Network booth/exhibit at co | merence |
| | ☐ Word-of-mouth from professional colleague | |
| | □ CDC source | |
| | ☐ Seeing National Prevention Information Network products | |
| | ☐ Receiving forwarded NPIN listserv | |
| | ☐ Mentions of NPIN in newsletter or magazine | |
| | ☐ Blog/wiki/podcast/RSS/XML | |
| | □ Other (Specify) | |
| 26. | For what type of organization do you work? | |
| 20. | ☐ State health department | |
| | ☐ Local/county health department | |
| | ☐ Community-based organization | |
| | ☐ Private, for profit organization | |
| | Tirvate, for profit organization | |

| | | Clinical setting (health clinic or hospital) |
|-----|---------|--|
| | | Other (Specify) |
| | | |
| | | |
| 27. | Which | of the following populations/target audiences(s) does your organization serve? |
| | (Please | mark all that apply.) |
| | | African American |
| | | Hispanic/Latino |
| | | Asian/Pacific Islander |
| | | American Indian/Alaska Native |
| | | White |
| | | Gay/Lesbian/Bisexual/transgender |
| | | Intravenous drug-user(s)/other drug/alcohol abuse |
| | | People with multiple sexual partners |
| | | Immigrant population(s) |
| | | Speakers of primary language other than English |
| | | Special communication needs, such as hearing-impaired or blind |
| | | Other (Specify) |
| | | |

Thank you for completing the survey!