Customer Satisfaction Survey of AHRQ PSNet Users

I. Visitor Characteristics

    A. Approximately how often do you visit the AHRQ PSNet site?

- ❑ First time
- ❑ Daily
- ❑ Weekly
- ❑ Monthly
- ❑ Less than once a month

    B. Which of the following categories best describes you?

- ❑ Administrator or Manager of Hospital, Health Plan, or Medical Group
- ❑ Federal/State Policymaker
- ❑ House Officer/Resident
- ❑ Librarian/Information Specialist
- ❑ Nurse/Nurse Practitioner
- ❑ Patient or consumer
- ❑ Patient safety officer
- ❑ Quality Improvement professional
- ❑ Risk management professional
- ❑ Pharmacist
- ❑ Physician
- ❑ Physician Assistant
- ❑ Student
- ❑ Writer/Reporter/Editor
- ❑ Other (write in) _____

    C. Which of the following best represents your **primary affiliation**?

- ❑ Academic institution, university, or medical school
- ❑ Hospital or health care system
- ❑ Ambulatory care
- ❑ Federal government agency
- ❑ Insurance company
- ❑ Quality/patient safety organization (excluding federal, state, or local government)
- ❑ State or local government agency
- ❑ Other (write in) _____

II. Interest in AHRQ PSNet

    A. How did you first learn about the AHRQ PSNet site? (choose one)

- ❑ Link from AHRQ Web site
- ❑ Link from AHRQ WebM&M
- ❑ Social media (e.g., Twitter, Facebook, etc.)
- ❑ Word of mouth from a colleague or friend
- ❑ Web search engine (e.g., Google, Yahoo, etc.)
- ❑ Link from another Web site (excludes AHRQ Web site)
- ❑ Print media (e.g., medical journals, health care publications, newspaper, etc.)
- ❑ AHRQ print media (e.g., brochure, reports, fact sheets, etc.)
- ❑ Conference
- ❑ Other, please describe _____

B. How do you usually visit?

- ❑ Have AHRQ PSNet bookmarked
- ❑ Link from the weekly AHRQ PSNet newsletter
- ❑ Link from weekly MyPSNet email alert
- ❑ Link from AHRQ WebM&M
- ❑ Other, please describe _____

C. Which of the following statements most closely describes your **_primary_** reason for visiting the AHRQ PSNet site? (Check ONE)

- ❑ Keep up to date on patient safety resources (ie, weekly updates)
- ❑ Search for patient safety resources that are most relevant to my needs
- ❑ Learn more about the activities of AHRQ
- ❑ Other, please describe

III. AHRQ PSNet SITE ASSESSMENT

A. If asked for a resource on patient safety, how likely is it that you would recommend AHRQ PSNet to a friend or colleague?

- ❑ Very likely
- ❑ Somewhat likely
- ❑ Not very likely
- ❑ Not likely
- ❑ Neutral or not applicable

B. Which type of resources are you primarily interested in when visiting AHRQ PSNet?

- ❑ Journal articles
- ❑ Web resources
- ❑ Newspaper/magazine articles
- ❑ Books/reports
- ❑ Tools/toolkits
- ❑ Meetings/conferences
- ❑ Press releases/announcements
- ❑ Other

C. How would you rate the selection of resources chosen for inclusion on AHRQ PSNet?

- ❑ Should be much narrower
- ❑ Should be slightly narrower
- ❑ Just right
- ❑ Should be slightly broader
- ❑ Should be much broader
- ❑ Neutral or not applicable
- ❑ Optional [Explain]

D. Based on your previous visits, how would you rate the following aspects of the AHRQ PSNet site?
[Likert Scale: 1-Excellent; 2-Good; 3-Fair; 4-Poor; 5-Neutral or not applicable]

- ❑ General appearance
- ❑ *Patient Safety Primers*
- ❑ *Classics* section
- ❑ Brief description given for each resource
- ❑ Site organization
- ❑ Ability to find the information you want
- ❑ Search results

- ❑ *Education and Training Programs* section
- ❑ Most Popular list
- ❑ RSS Feed
- ❑ Email a Colleague feature
- ❑ Sharing buttons

E. How would you rate the **<u>usefulness/practical value</u>** of the AHRQ PSNet site to you?

- ❑ Very useful
- ❑ Somewhat useful
- ❑ Not very useful
- ❑ Not useful
- ❑ Neutral or not applicable

F. When you **Browse the Collection**, either by resource type or subject, how would you rate the results?

- ❑ Excellent
- ❑ Good
- ❑ Fair
- ❑ Poor
- ❑ Neutral or not applicable
- ❑ If Fair or Poor, please briefly explain why (fill in blank)

G. If you are registered for *My PSNet,* how would you rate this feature in providing you with up-to-date information related to your specific interests?

- ❑ Excellent
- ❑ Good
- ❑ Fair
- ❑ Poor
- ❑ Neutral or not applicable
- ❑ If Fair or Poor, please briefly explain why (fill in blank)

IV. FINAL COMMENTS

1. Please provide any other comments or suggestions on the features/functions/content of AHRQ PSNet: