

AHRQ Patient Safety Network (PSNet)/WebM&M User Satisfaction Survey

Thank you for participating. This survey asks about your perceptions of the AHRQ Patient Safety Network (PSNet) and WebM&M websites. Individual survey results will be kept confidential. Survey responses will be used to inform potential improvements.

Have you visited AHRQ PSNet before? Yes/No

[Explanation: If answer is "Yes," this section will be provided for respondent to complete. If answer is "No," this entire section will be skipped and respondent will be taken to Section III (Visitor Characteristics)].

I. The following questions pertain ONLY to the AHRQ PSNet site:

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

- First time
- Daily
- Weekly
- Monthly
- Less than once a month
- Only when I receive a newsletter from AHRQ PSNet

2. How did you first learn about the AHRQ PSNet site? (Choose one)

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

3. How do you usually visit?

- Bookmarked AHRQ PSNet site
- Link from weekly AHRQ PSNet newsletter
- Link from weekly MyPSNet email alert
- Link from AHRQ WebM&M
- RSS Feed
- Search engine
- Other, please describe _____

4. Which of the following statements most closely describes your **primary** reason for visiting the AHRQ PSNet site? (Choose one)

- Keep up to date on patient safety resources (i.e., weekly updates)
- Search for patient safety resources that are most relevant to my needs

- Search for patient safety resources as references for background or research purposes
- Understand more about the activities of AHRQ
- Other, please describe _____

5. 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
- Optional [Explain]

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

- Books/reports
- Educational and Training Catalog
- Funding opportunities
- Journal articles
- Meetings/conferences
- Newspaper/magazine articles
- Press releases/announcements
- Tools/toolkits
- Other, please describe: _____

7. 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]

8. Based on your previous visits, how would you rate the following sections of the AHRQ PSNet site?

[Likert Scale: 1-Excellent; 2-Good; 3-Fair; 4-Poor; 5-Neutral or not applicable]

- What's New*
- Patient Safety Primers*
- Classics*
- Education and Training Programs*

9. 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]

- Ability to find the information you want
- Brief description given for each resource
- General appearance
- Most Popular list
- Overall content
- RSS Feed
- Search results
- Sharing buttons/email colleague features

- Site organization

10. How would you rate the usefulness/practical value of the AHRQ PSNet site to you?

- Very useful
- Somewhat useful
- Not very useful
- Not useful
- Neutral or not applicable
- Optional [Explain]

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

- Excellent
- Good
- Fair
- Poor
- Neutral or not applicable
- Optional [Explain]

12. 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
- Optional [Explain]

COMMENTS

13. Please provide any other comments or suggestions on the features, functions, and content of AHRQ PSNet:

Have you visited AHRQ WebM&M before? Yes/No

[Explanation: If answer is "Yes," this section will be provided for respondent to complete. If answer is "No," this entire section will be skipped and respondent will be taken to Section III (Visitor Characteristics)].

II. The Following questions pertain ONLY to the AHRQ WebM&M site:

1. Approximately how often do you visit AHRQ WebM&M?

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

Only when I receive a newsletter from AHRQ WebM&M

2. How did you first learn about the AHRQ WebM&M site? (Choose one)

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

3. Which of the following statements most closely describes your **primary** reason for visiting the AHRQ WebM&M site? (Choose one)

- Learn how to improve patient safety
- Learn how to prevent or mitigate medical errors
- Obtain CME, CEU, or trainee certification
- Obtain teaching materials or training information
- Submit a case
- Understand more about the activities of AHRQ
- Other, please describe _____

4. How many cases have you submitted to the AHRQ WebM&M site?

- None [FILL IN BLANK—If none, please briefly state why.]
- One
- Two
- Three
- Four
- Five or more

5. How many times have you used the AHRQ WebM&M site to obtain CME, CEU, or Trainee Certification within the last year?

- None [Optional: FILL IN BLANK—If none, please briefly state why.]
- One
- Two
- Three
- Four
- Five or more

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

- Very likely
- Somewhat likely
- Not very likely
- Not likely
- Neutral or not applicable
- Optional [Explain]

7. How would you rate the **educational value** of the AHRQ WebM&M site's content?

- Excellent
- Good
- Fair
- Poor
- Neutral or not applicable
- Optional [Explain]

8. How would you rate the **usefulness/practical value** of the AHRQ WebM&M site to you?

- Very useful
- Somewhat useful
- Not very useful
- Not useful
- Neutral or not applicable
- Optional [Explain]

9. How would you rate the content of AHRQ WebM&M:

[Likert Scale: 1-Excellent; 2-Good; 3-Fair; 4-Poor; 5-Neutral or Not Applicable]

- Cases
- Commentaries
- "In Conversation with..." (Interviews with patient safety newsmakers)
- Perspectives on Patient Safety (Essays on patient safety topics)
- Podcasts
- CME, CEU, Trainee Certification
- Glossary
- Patient Safety Primers
- Site archive

10. Based on your previous visits, how would you rate the following aspects of the AHRQ WebM&M site?

[Likert Scale: 1-Excellent; 2-Good; 3-Fair; 4-Poor; 5-Neutral or Not Applicable]

- General appearance
- General ease of navigation
- Clarity of directions and explanations
- Search results
- Submit a case form
- Links and references

COMMENTS

11. Please provide any other comments or suggestions on the features, functions, and content of AHRQ WebM&M:

III. VISITOR CHARACTERISTICS

1. What is your age range?

- 17 years or younger
- 18-24 years
- 25-34 years

- 35-44 years
- 45-54 years
- 55-64 years
- 65 years or older

2. What is the highest educational degree you have achieved?

- None
- High School Diploma
- Associate's Degree
- Bachelor's Degree
- Master's Degree
- Juris Doctor (e.g., JD)
- Doctor of Pharmacy (e.g., PharmD)
- Doctor of Philosophy (e.g., PhD)
- Doctor of Medicine/Doctor of Osteopathic Medicine or equivalent (e.g., MD, DO, MBBS, etc.)
- Other, please describe: _____

3. Which of the following categories best describe you? (Choose one)

- Attorney
- Hospital Administrator or Manager
- Health Plan or Medical Group Administrator or Manager
- House Officer/Resident
- Librarian/Information Specialist
- Nurse/Nurse Practitioner
- Patient or consumer
- Patient safety officer
- Quality Improvement professional
- Researcher
- Risk management professional
- Pharmacist
- Physician
- Physician Assistant
- Policy analyst - Federal
- Policy analyst - Local
- Policy analyst - State
- Student
- Writer/Reporter/Editor
- Other, please describe: _____

4. If you are a provider, what is your area of specialization? (Choose one)

- Anesthesiology
- Cardiology
- Clinical Psychology
- Dermatology
- Emergency Medicine
- Endocrinology
- Family Medicine
- Geriatrics
- Internal Medicine
- Immunology
- Neurology
- Nursing

- Occupational Medicine
- Obstetrics/Gynecology
- Ophthalmology
- Optometry
- Oral health care/Dentistry
- Orthopedics
- Pathology/Lab Medicine
- Pediatrics
- Pharmacy
- Physical Therapy
- Psychiatry
- Preventive Medicine
- Radiology
- Surgery
- Urology
- Other, please describe: _____

5. Which of the following best represents your **primary organizational affiliation**? (Choose one)

- Academic institution/University (e.g., medical school, nursing school, school of public health)
- Ambulatory care - Medical Office
- Government agency - Federal
- Government agency - Local
- Government agency - State
- Home Health care
- Hospital or Health System
- Insurance Organization
- Long-term Care
- Media/News
- Clinical or Research Journal
- Palliative Care Organization
- Pharmaceutical Industry
- Pharmacy
- Quality/patient safety organization
- Other, please describe: _____

Thank you for your participation.

Public reporting burden for this collection of information is estimated to average 10 minutes per response, the estimated time required to complete the survey. 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: AHRQ Reports Clearance Officer Attention: PRA, Paperwork Reduction Project (0935-0179) AHRQ, 540 Gaither Road, Room # 5036, Rockville, MD 20850.

