

Form Approved OMB No. 0990-0379
Expiration Date 07/31/2014

We would like to hear from you! Please help us improve Quick Health Data Online (QHDO) by sharing your opinions and suggestions.

Use of QHDO

Have you used any features of QHDO?

- Yes
- No

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-0379. The time required to complete this information collection is estimated to average 5 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 537-H, Washington D.C. 20201, Attention: PRA Reports Clearance Officer.

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[FOR THOSE RESPONDING YES; A NO RESPONSE SKIPS TO LAST ITEM]

Ease of Use

How difficult or easy did you find QHDO to use?

- 1 Very Difficult
- 2
- 3 Neither Difficult nor Easy
- 4
- 5 Very Easy

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Did you take a QHDO training?

- Yes
- No

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[FOR THOSE RESPONDING YES; A NO RESPONSE SKIPS TO ‘REPORTS’ QUESTION]

Training

How helpful was the training?

- 1 Not Helpful
- 2
- 3 Moderately Helpful
- 4
- 5 Very Helpful

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[FOR THOSE RESPONDING MODERATELY HELPFUL TO NOT HELPFUL; OTHER RESPONSES SKIP TO ‘REPORTS’ QUESTION]

What could make the training more helpful?

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Reports

How helpful was each of the reports you've used?

	Not Helpful 1	2	Moderately Helpful 3	4	Very Helpful 5	Did Not Use
Women's Health and Mortality Chartbook	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health Disparities Profile	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
WHAT Toolkit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Regional Reports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Monthly Spotlights	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Have you used the interactive system feature of QHDO?

- Yes
- No

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[FOR THOSE RESPONDING YES; A NO RESPONSE SKIPS TO 'HOW DID YOU FIRST HEAR ABOUT QHDO' QUESTION]

Thinking about the last time you used the interactive data system in QHDO, did you find the data you needed in QHDO?

- Yes
- No

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[FOR THOSE RESPONDING YES; A NO RESPONSE SKIPS TO ‘WHAT DATA WERE YOU LOOKING FOR?’ QUESTION]

Exit this survey

How difficult or easy was it to find the data you needed?

- 1 Very Difficult
- 2
- 3 Neither Difficult nor Easy
- 4
- 5 Very Easy

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[FOR THOSE RESPONDING 1, 2, OR 3; A RESPONSE OF 4 OR 5 SKIPS TO ‘SYSTEM OUTPUT’ QUESTION]

Exit this survey

How could the data be made easier to find?

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[FOR THOSE RESPONDING NO ABOVE]

Exit this survey

What data were you looking for?

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[A YES OR NO RESPONSE TO THE PRIOR LEADS TO THE FOLLOWING QUESTIONS]

Exit this survey

System Output/Data Presentation

How satisfied were you with the QHDO output features you have used?

	Not Satisfied 1	2	Moderately Satisfied 3	4	Very Satisfied 5	Not Used
Download data	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tables	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Graphs/Charts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Exit this survey

How did you first hear about QHDO?

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Type of Usage

Have you used QHDO for (select all that apply):

- Personal inquiries
- School projects
- Business/work activities

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[FOR THOSE RESPONDING ‘BUSINESS/WORK ACTIVITY’; OTHERS WILL SKIP TO ‘TELL US WHAT YOU THINK’]

[Exit this survey](#)

Do you work in a...(select all that apply):

- Academic setting
- Advocacy organization
- Area Health Education Center (AHEC)
- Community based organization (CBO)
- Faith-based organization
- Federal agency
- In-patient health facility (e.g., hospital, nursing home)
- Insurance organization
- Local/state public health agency
- Out-patient health organization (e.g., clinic, doctor's office)
- Women's health organization
- Other (specify)

Have you used QHDO for (select all that apply):

- Completing grant applications
- Research or evaluation
- General interest
- Planning a program
- Preparing a report
- Understanding a problem
- Informing a policy
- Writing an article
- Other (specify)

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[A RESPONSE OF PERSONAL, SCHOOL, OR BUSINESS LEADS TO THE FOLLOWING]

Exit this survey

Tell Us What You Think

Please provide any additional comments about QHDO

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[ALL RESPONDENTS GET TO THIS FINAL ITEM]

Contact Information

If you would like additional information and/or to offer additional comments, please contact:

Colleen Goodman
cgoodman@qrs-inc.com
(703) 352-7393

Thank you very much!

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Done