

ATTACHMENT F: Data Collection Instrument – Web Version

This document contains screen shots of the follow up assessment on the usefulness of IMATS as it is laid out in Survey Monkey. The questionnaire begins with an Introduction and is followed by 26 questions. A thank you page is provided at the end.

IMATS Follow-Up Assessment

Inventory Management and Tracking System

Form approved
OMB No. 0920-0879
Expiration Date: 03/31/2014

The Countermeasure Tracking Systems (CTS) team would like to thank you for your interest in the Inventory Management and Tracking System (IMATS). As part of the final phase of the IMATS evaluation, we are gathering feedback from local and state health departments who have evaluated IMATS and/or made the decision to adopt IMATS as a primary or backup inventory management system for their jurisdiction. The purpose of this assessment is to collect valuable input from users to assess future enhancements to IMATS to manage inventory.

We would like one point of contact from your jurisdiction to answer the following questions to provide feedback on IMATS. We estimate it will take 15-20 minutes to complete the feedback follow up assessment.

Public reporting burden of this collection of information is estimated to average 15-20 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 (0920-0735)

***1. Do you represent a PHEP awardee* or local jurisdiction?**
***CDC's 62 Public Health Emergency Preparedness awardees, which include 50 states, Washington D.C., Los Angeles, New York City, Chicago and 8 island territories.**

PHEP awardee

Local jurisdiction

Other (please specify)

IMATS Follow-Up Assessment

*2. How did you hear about IMATS? (select all that apply)

- Social media (Facebook, Twitter, etc.)
- Inventory Management Insider newsletter from Division of Strategic National Stockpile (DSNS)
- CTS web pages
- DSNS Consultants (Program Service Consultants)
- State SNS Coordinator
- Communications from state official(s)
- Communication from other (planning) jurisdictions
- Other (please specify)

*3. Why did you decide to evaluate IMATS? (select all that apply)

- Current system does not meet our needs
- Positive impression of IMATS capabilities
- Cost/budgetary concerns
- Received a request to evaluate IMATS
- Other (please specify)

*4. Did you evaluate IMATS for potential adoption as a primary or backup inventory management system?

- Primary inventory management system
- Backup inventory management system
- Other (please specify)

IMATS Follow-Up Assessment

*5. Have you decided to adopt IMATS for your inventory management system?

- Yes, for primary
- Yes, for backup
- Haven't decided
- Decided not to adopt IMATS as primary or backup

*6. How would you rate the importance of the following factors in your decision to adopt IMATS? (please provide a rating for each category listed)

	1 - Not important	2	3	4	5 - Very important
Ease of use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Efficiency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suitability for an event	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Features	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. If applicable, please list any additional factors in your decision to adopt IMATS and rank their importance:

	1 - Not important	2	3	4	5 - Very important
Other factor 1 (please specify) <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other factor 2 (please specify) <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other factor 3 (please specify) <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*8. The opportunity to assess IMATS was helpful in deciding whether to adopt IMATS.

	1 - Strongly disagree	2	3	4	5 - Strongly agree
Comments (optional) <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

IMATS Follow-Up Assessment

***9. What is your PRIMARY system for tracking countermeasure inventory within your jurisdiction? If your jurisdiction is adopting IMATS, please respond based on your experience with your previous primary system.**

- Home grown
- None
- Vendor provided (please specify)

***10. If your jurisdiction has decided not to adopt IMATS as your primary system, please indicate why. If this does not apply to your jurisdiction, please select "Not applicable."**

- Satisfied with our current primary system
- Currently under contract with a vendor system
- Made substantial investments with current system
- Not applicable
- Other (please specify)

***11. If you are currently under contract with a vendor system, will you consider implementing IMATS after the contract ends?**

- Yes
- Not applicable
- No (please specify why)

IMATS Follow-Up Assessment

***12. How satisfied are you with the primary system you are currently using for tracking countermeasure inventory?**

1 - Not satisfied 2 3 4 5 - Satisfied

Comments (optional)

***13. Please indicate the BACKUP system for tracking countermeasure inventory within your jurisdiction.**

- IMATS
- Vendor provided
- Home grown
- Microsoft Excel
- Microsoft Access
- None
- Other (please specify)

***14. If your jurisdiction has decided not to adopt IMATS as your backup system, please indicate why:**

- Satisfied with our current primary system
- Currently under contract with a vendor system
- Made substantial investments with current system
- Not applicable
- Other (please specify)

IMATS Follow-Up Assessment

***15. How satisfied are you with the backup system you are currently using for tracking countermeasure inventory?**

1 - Not satisfied 2 3 4 5 - Satisfied

Comments (optional)

***16. How satisfied are you with the quality of IMATS as a system for tracking countermeasure inventory?**

1 - Not satisfied 2 3 4 5 - Satisfied

Comments (optional)

***17. How satisfied are you with the value of IMATS as a system for tracking countermeasure inventory?**

1 - Not satisfied 2 3 4 5 - Satisfied

Comments (optional)

***18. The IMATS application is easy to use.**

1 - Strongly disagree 2 3 4 5 - Strongly agree

Comments (optional)

IMATS Follow-Up Assessment

***19. IMATS meets your expectations as a system for tracking countermeasure inventory.**

1 - Strongly disagree 2 3 4 5 - Strongly agree

Comments (optional)

***20. My jurisdiction feels confident in our ability to use IMATS to support a public health event.**

1 - Strongly disagree 2 3 4 5 - Strongly agree

Comments (optional)

***21. IMATS has sufficient functionality and features to track the inventory of medical and non-medical countermeasures during a public health event.**

1 - Strongly disagree 2 3 4 5 - Strongly agree

Comments (optional)

***22. The Secure Access Management Services (SAMS) identity proofing process will impede access to IMATS during a future public health event.**

1 - Strongly disagree 2 3 4 5 - Strongly agree

Comments (optional)

IMATS Follow-Up Assessment

***23. If you could change one thing about IMATS, what would it be and why?**

***24. What feature or functionality in IMATS do you find the most useful/beneficial and why?**

***25. Please list any suggestions you have to improve IMATS functionality and use.**

26. Please provide your jurisdiction name, city and state (optional).

Jurisdiction name	<input type="text"/>
City	<input type="text"/>
State/project area	<input type="text"/>

Inventory Management and Tracking System

Thank you for taking a moment to provide your feedback to us. Again, your input will provide valuable information to assess future enhancements to IMATS and ensure this solution meets user needs, preferences and goals to manage inventory.

If you have any questions or concerns, please feel free to email CTShelp@odc.gov.

Thank you,
The CTS Team