Form approved
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**The Community Guide Web Survey of STLT Email Subscribers**

# Consent

Welcome! Thank you for agreeing to share your opinions about The Community Guide website and products. CDC is trying to understand your needs related to The Community Guide. The survey should take approximately 6 to 8 minutes to complete.

This survey will gather information about usefulness and satisfaction with the website from eligible subscribers such as you; satisfaction with Community Guide products; how products have been used; and recommendations for improving the website and Community Guide products. We will use your feedback to make improvements to The Community Guide website and products and to make the Guide more useful.

Your privacy is very important to us. Your responses to all questions will be kept secure as permitted by law. No personal identifiers will be recorded. All information will be used for evaluation purposes only, and CDC will share only aggregated data. Your participation is completely voluntary.

Once you begin the survey, you may save your responses return to the survey at a later time to complete. You must however, complete the survey before the survey close date of [INSERT DATE]. To proceed through the survey, select your answer for each question and click [“Next”]

Thank you.

1. I have read and understand this information and agree to participate
* Yes
* No. I do not want to participate at this time. [THANK AND END]

**Public reporting burden of this collection of information is estimated to average 6 to 8 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 (0920-0879)**

#  Screener and Demographic Questions

**Please tell us a little about yourself and the organization you work for.**

1. What is your primary work location? (Select One)
	* State, tribal, local or territorial public health department
	* Non-governmental organization (such as NACCHO, ASTHO, state-based health organizations, community-based organizations) [IF SELECTED END]
	* Academic institution [IF SELECTED END]
	* Hospital or medical center [IF SELECTED END]
	* Other private health-related business (such as a health plan, physician's office, pharmaceutical company) [IF SELECTED END]
	* Other, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [IF SELECTED END]
2. What public health organization do you work for? (e.g. Hudson County Health Department) [OPEN-ENDED]
3. Which specific U.S. state, territory, Pacific Island, or the District of Columbia do you work in? (e.g., Georgia, etc.) [DROP-DOWN LIST]
* Other, please describe (e.g., Navajo Nation) :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
1. Please choose the occupational category that **best describes** your role or function in your current position:
* Division or Bureau health or Division Deputy Director
* Department Head
* Administrative or Clerical Staff
* Behavioral Health Professional
* Emergency Preparedness Coordinator or Staff
* Environmental Health Coordinator, Sanitarian, Specialist, or Scientist
* Epidemiologist
* Evaluator
* Fiscal Officer or Accountant
* Health Communicator
* Health Educator
* Health Scientist
* Information Technology Specialist
* Laboratorian
* Lawyer or Policy Advisor
* Nurse
* Nutritionist
* Physician
* Program manager, administrator, or coordinator
* Program planner
* Public Information Officer
* Researcher
* Other, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
1. How long have you worked for this health department?
* 1 year or less
* 2 – 5 years
* 6 – 10 years
* More than 10 years
1. How long have you been in in your current position?
* 1 year or less
* 2 – 5 years
* 6 – 10 years
* More than 10 years
1. How long have you been involved in public health overall?
* 1 year or less
* 2 – 5 years
* 6 – 10 years
* More than 10 years
1. What is the size of your agency?
* Less than 50 employees
* 51-100 employees
* 101-250 employees
* 251-500 employees
* >500 employees
1. Which degrees do you hold **(Check all that apply)**?
	* AA (associate’s degree), BA, or BS
	* RN or other Nursing degree
	* MS, MSc, MPH or other health-related master’s degree
	* Other master’s degree
	* PA or NP
	* MD of DO
	* PhD, DrPH, ScD or other health-related doctorate degree
	* Other doctorate degree
	* Other (please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) [OPEN-ENDED]
2. Which of the following **best describes** your areas of subject matter expertise **(Check all that apply)**?
	* Chronic Conditions (e.g., cancer, diabetes, heart disease, asthma)
	* Infectious Diseases (e.g., HIV/AIDS, influenza)
	* Aging and disability
	* Immunizations
	* Maternal and child health
	* Mental health
	* Tobacco and substance abuse
	* Emergency Preparedness and Response
	* Oral health
	* Physical activity and nutrition
	* Injury, Violence prevention, and Safety
	* Environmental Health (e.g., food safety, inspections, licensing)
	* Workplace Safety and Health
	* Data and Statistics (e.g., vital statistics, surveillance)
	* Other (please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

# Use of and Satisfaction with The Community Guide Website

**Please tell us about your experiences using The Community Guide Website.**

1. How often do you use The Community Guide website for work-related purposes?
* Daily
* Weekly
* Monthly
* A few times per year
* Never
1. Please rate your level of agreement with the following statements about the **Design and Layout** The Community Guide website:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Disagree**  | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agree** |
| “Look and feel” of the site is pleasing  |  |  |  |  |  |
| Web pages are well organized |  |  |  |  |  |
| The terminology and language on the site is clear |  |  |  |  |  |

1. Please rate your level of agreement with the following statements about the **Utility and Navigation** of The Community Guide website:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Disagree**  | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agree** |
| Overall, The Community Guide website is easy to use |  |  |  |  |  |
| Information on The Community Guide website is easy to find |  |  |  |  |  |
| I use the site as my primary source for information about what works in public health |  |  |  |  |  |

1. Please rate your level of agreement with the following statements about the **Content** of The Community Guide website:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Disagree**  | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agree** |
| 22. The site contains useful information  |  |  |  |  |  |
| 23. Information on the site is current |  |  |  |  |  |
| 24. I would recommend this site to others |  |  |  |  |  |
| 25. Overall, I am very satisfied with The Community Guide website |  |  |  |  |  |

1. Thinking of the last time you visited The Community Guide website, did you find what were you looking for?
	* Yes (Please specify what you were looking for:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[OPEN-ENDED])
	* No (Please specify what you were looking for :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[OPEN-ENDED])

# Use of Community Guide Tools and Products

**Over the past year, several products have been developed to improve the use of The Community Guide. We’d like to learn more about what you think of 3 of these products.**

1. Have you seen **The** **Community Guide “What Works: Tobacco Use”** ? [INSERT IMAGE]
* Yes [IF YES, ASK 18, 19, 20, 21]
* No
1. Where did you first see this product?
* Website
* Conference or Exhibit
* Training, Webinar, or Workshop
* Received from colleague
* Other (please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

19. The goal of the fact sheet is to provide a quick overview of specific Task Force recommendations on Community Guide topics such as tobacco use. To what extent did the fact sheet meet that goal?

* Very well
* Somewhat well
* Not at all

20. Would you recommend this product to a colleague or peer?

* Yes
* No

21. Have you shared this product with your colleagues or peers?

* Yes
* No
1. Have you seen the **Community Guide Flyer**? [INSERT IMAGE]
	* Yes [IF YES, ASK 23, 24, 25, 26]
	* No

23. Where did you first see this product?

* Website
* Conference or Exhibit
* Training, webinar, or workshop
* Received from colleague
* Other (specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

24. The goal of the flier is to promote The Community Guide and its use. To what extent did the flyer meet that goal?

* Very well
* Somewhat well
* Not at all

25. Would you recommend this product to a colleague or peer?

* Yes
* No

26. Have you shared this product with your colleagues or peers?

* Yes
* No
1. CDC developed a series of 14 **“The Community Guide in Action stories.”** **Have you seen the series?**  Titles in the series include the following:
* **Black Corals: A Gem of a Cancer Screening Program in South Carolina**;
* Blueprint for Success in Preventing Tobacco Use;
* Community-wide Effort to Make Florida Tobacco Free;
* Creating Walkable Communities in Rural North Carolina;
* An Evidence-based Approach to Montana’s Health Landscape;
* Evidence-based Recommendations Get Minnesotans in the Groove;
* A Good Shot: Reaching Immunization Targets in Duval County;
* Investing in Worksite Wellness for Employees;
* Lowering Legal Blood Alcohol Limits Saves Lives;
* **Maryland Businesses Support Worksite Wellness Effort to Combat Chronic Disease**;
* **Mobilizing Funding Support to Battle Overweight and Obesity**;
* **Planning a Strategy: Changing the Way a County Health Department Addresses Health Conditions**;
* **Rural Community Works Together to Stay “Fun and Fit”**;
* **Screening New Yorkers to Save Lives**

[INSERT IMAGE SERIES ]

* + Yes [IF YES, ASK 28, 29, 30, 31]
	+ No

28. Where did you first see this product?

* Website
* Conference or Exhibit
* Training, Webinar, or Workshop
* Received from colleague
* Other (specific\_\_\_\_\_\_\_\_\_\_)

29. The goal of the success stories is to provide examples of how The Community Guide is used in real-world settings. To what extent did they meet that goal?

* Very well
* Somewhat well
* Not at all

30. Would you recommend this product to a colleague or peer?

* + Yes
	+ No

31. Have you shared this product with your colleagues or peers?

* + Yes
	+ No
1. How can we make the products of The Community Guide more useful to you? [OPEN-ENDED]

#  Use of Task Force Findings

**The Community Preventive Services Task Force (Task Force) is an independent, nonfederal, unpaid body, appointed by the Director of the Centers for Disease Control and Prevention, to provide evidence-based recommendations about community preventive services, programs, and policies. These evidence-based recommendations and other findings are presented in The Community Guide. We’d like to learn more about your experiences using Task Force recommendations or other findings from The Community Guide Website in your work.**

1. Have you used any of the Task Force recommendations or other findings from The Community Guide website in your work?
	* Yes [IF YES: ASK 34]
	* No
2. For each item, please rate how useful you found the Task Force recommendations or other findings. If you did not use Task Force recommendations or other findings for that purpose, please select “Did not use for this purpose.”

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Did not use for this purpose | Very useful | Somewhat useful | Not at all useful |
| Foster dialogue |  |  |  |  |
| Develop policies |  |  |  |  |
| Mobilize communities |  |  |  |  |
| Inform research priorities |  |  |  |  |
| Educate |  |  |  |  |
| Evaluate |  |  |  |  |
| Support funding proposals and decisions |  |  |  |  |
| Program planning |  |  |  |  |
| Justify existing programs |  |  |  |  |
| Other (please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) |  |  |  |  |

1. What suggestions do you have for making the Task Force findings more useful? [OPEN- ENDED]
2. Do you have plans to use Task Force recommendations or other findings in the next 12 months?
	* Yes
	* No
3. Would you want to receive information about The Community Guide website through social media channels?
	* Yes [IF YES, ASK Q58]
	* No
4. From which social media sites would you prefer receiving Community Guide website updates, news, etc.?
* Twitter
* Facebook
* LinkedIn
* Other (please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)
1. Would you want an opportunity to share uses of The Community Guide website features with others?
	* Yes
	* No

Thank you for your participation in this survey. Your feedback is greatly appreciated.