

Attachment A

Customer Satisfaction Survey

Your participation in the survey is voluntary. The survey should take no more than ten minutes to complete. The survey is designed so that you may answer the questions anonymously, but we would like to point that answering questions eight (Which survey(s) did you use?) and nine (Who was your RDC Analyst?) may lead to identification. Answering these questions narrows down the sampling pool, however this data help us to determine if the responses are representative. In addition, Survey Monkey also collects information about IP addresses and you can be identified via the IP address. Be assured that any information you include will be managed confidentially. The Public Health Analyst and Program Support Assistant are the only people in the RDC who will have access to your individual responses. At the end of the collection period, the RDC will compile a Customer Satisfaction Report that will highlight the overall responses from the survey.

Thank you for your feedback. We wish you the best and hope that you will consider using the RDC for future research.

This survey has been approved by the Executive Office of the President Office of Management and Budget (OMB). (Form Approved OMB No. 0920-0729 Exp. Date 04/30/2014).

NOTICE - Public reporting burden of this collection of information is estimated to average less than 10 minutes per person, including the time for reviewing instructions, 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, MS D-74, Atlanta, GA 30333, ATTN: PRA (0920-0729).

Assurance of Confidentiality - All information which would permit identification of an individual, a practice, or an establishment will be held confidential, will be used for statistical purposes only by NCHS staff, contractors, and agents only when required and with necessary controls, and will not be disclosed or released to other persons without the consent of the individual or establishment in accordance with section 308(d) of the Public Health Service Act (42 USC 242m).

1. How did you find out about the RDC?

NCHS Website

- Colleague
- Conference
- Presentation at CDC
- Presentation at an academic institution
- Other (please specify)

2. What was your role on the research team? Check all that apply.

- Primary Investigator
- Co-Investigator
- Programmer
- Student Advisor

3. Please rate your level of satisfaction with the following components of your research experience. Use N/A for items that are not applicable to you.

	Very unsatisfied	Unsatisfied	Neutral	Satisfied	Very satisfied	N/A
Organization of RDC Website	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Proposal Format	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Length of Proposal Review	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Assistance provided by RDC Analyst	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disclosure Review	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communication with RDC Director	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. Please rate your level of satisfaction with the access mode(s) used when working with the RDC. Use N/A for items that are not applicable to you.

	Very unsatisfied	Unsatisfied	Neutral	Satisfied	Very satisfied	N/A
On-site at NCHS RDC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
On-site at Census RDC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staff-Assisted	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Remote Access	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. Which aspects of your experience with the RDC did you find most helpful?

[Empty text box]

6. What could have improved your experience with the RDC?

[Empty text box]

7. Would you use the RDC again or recommend using the RDC to a colleague?

- Yes
- No

Why or why not?

[Empty text box]

8. Which survey(s) did you use? Check all that apply.

- National Health and Nutrition Examination Survey (NHANES)
- NHANES Genetics
- National Health Interview Survey (NHIS)
- Linked Mortality Data
- Linked Medicare Enrollment and Claims Files Data
- Linked Medicaid Enrollment and Claims Data
- Linked Social Security Benefit History Data
- National Survey of Family Growth (NSFG)
- National Ambulatory Medical Care Survey (NAMCS)/ National Hospital Ambulatory Medical Care Survey (NHAMCS)
- National Hospital Discharge Survey (NHDS)
- Long Term Care Surveys: NNHS, NNAS, NHHAS, NHHCS, NSRCF
- State and Local Area Integrated Telephone Survey (SLAITS): NSCH, CSHCN, NSAP, NSAP-SN
- National Vital Statistics System (NVSS): Birth and Death Records
- Other (please specify)

[Empty text box]

9. Who was your RDC Analyst? Check all that apply.

- Ajay Yesupriya
- Alexandra Ehrlich
- Bob Krasowski
- Christopher Rogers
- Deborah Rose
- Elizabeth Weathersbee
- Jing Tian
- Karen Davis
- Nataliya Kravets
- Negasi Beyene
- Pat Barnes
- Stephanie Robinson

Done

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