# OMB No. 2900-0770Estimated Burden: 15 minutes

# Expiration Date: 08/31/2017

**DEPARTMENT OF VETERANS AFAIRS**

**VA 2016-2017
Acquisition 360 Survey**



**The Paperwork Reduction Act of 1995:** This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Accordingly, we may not conduct or sponsor and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who complete this survey will average 15 minutes. This includes the time it will take to follow instructions, gather the necessary facts and respond to questions asked. Customer satisfaction is used to gauge customer perceptions of VA services as well as customer expectations and desires. The results of this in-person survey will lead to improvements in the quality of service delivery by helping to achieve improved admission processes and services. Participation in this survey is voluntary and failure to respond will have no impact on benefits to which you may be entitled.

***What is the award number (PIID) for the procurement being surveyed?*** No dashes or spaces please.  Please enter the award number (PIID) as provided to you by the contracting officer.

***What is the predominate Product Service Code (PSC) associated with this award?*** Please enter the four (4) character PSC associated with this award in FPDS or as provided to you by the contracting officer.

***What is the Activity Address Code (AAC or DoDAAC) for the office issuing this contract?*** Please enter the AAC (or DoDAAC) as provided to you without dashes or spaces.

Which one of the following roles did you play in the acquisition?

* Vendor Who Submitted A Proposal/Bid
* Government Contracting Office
* Government Program Office (Customer)

***Attachment A – “Rate the Agency” Survey***

**Pre-Award & Debriefing Satisfaction Survey**

Please provide us with your feedback on the acquisition process. Your answers will help us assess our performance and identify our strengths and weaknesses. The survey should take no more than 10 minutes to complete. **The survey will be issued after any and all debriefings have been conducted and therefore cannot impact the award decision in any way**. **The results from the survey will not be published or made publicly available**.

Please submit your response within the next thirty days to: [insert agency contact information here].

Please rate your level of satisfaction on a scale of 1 to 5, with 5 being “Very Satisfied” and 1 being “Very Dissatisfied”

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Very Satisfied** |  | **Very Dissatisfied** |  |
| **Requirements Development Process - *How satisfied were you*:** |
| 1. With the agency’s vendor engagement methods (e.g., RFIs, draft RFP, pre-award conferences) in fostering early communication and exchange before receipt of proposals?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. That the exchange offered by any industry day(s) offered valuable information that improved your understanding of the agency’s requirements?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the agency’s understanding of your firm’s marketplace?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the clarity of the final requirements?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| **Solicitation Phase - *How satisfied were you*:** |
| 1. That the agency kept vendors informed about any delays in the solicitation process (considering both the initial release and any subsequent delays)?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. That the solicitation included clear proposal submission instructions that sufficiently guided offerors or respondents in preparing proposals or responses to requests for information?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. That the government chose an appropriate contract type?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. That the government chose an appropriate source selection methodology?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. That the agency answered questions regarding the solicitation in such a way that it helped you to prepare the proposal?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the opportunity to propose unique and innovative solutions (i.e., the solicitation promoted innovation)?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the clarity of the solicitation’s evaluation criteria?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the amount of time the agency gave to submit a proposal?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. That the solicitation’s evaluation criteria allowed for the best selection among competing proposals?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| **Award Execution and Debriefings- *How satisfied were you*:** |
| 1. With the agency’s resolution of issues/concerns related to the contracting process?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the robustness of the agency’s debriefing (i.e., it allowed you to understand how to improve on similar efforts in the future)?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. How satisfied were you with your overall experience on this acquisition?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. Please provide any additional comments:
 |  |
| 1. Are you a small business?
 | Yes | No |

[Insert agency PRA notice here.]

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***Attachment B – Evaluation of the Contracting Operation***

As you recently worked with the \_\_\_\_\_\_\_ procurement office on solicitation #\_\_\_\_\_\_\_\_\_\_\_\_ in making an award, please evaluate your experience.

Please rate your level of satisfaction on a scale of 1 to 5, with 5 being “Very Satisfied” and 1 being “Very Dissatisfied”

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Very Satisfied** |  | **Very Dissatisfied** |  |
| **Planning - *How satisfied were you*:** |
| 1. With the acquisition milestone schedule?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the procurement office’s ability to keep you informed of any changes to the acquisition milestone schedule?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the procurement office’s assistance in the Acquisition Plan process, which allowed you to better understand and participate in the procurement?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the procurement office’s engagement with industry early in the acquisition process?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| **Communication - *How satisfied were you*:** |
| 1. With the procurement office’s responsiveness to your questions (communicating in a clear, courteous, timely, and professional manner)?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the procurement office’s effectiveness in resolving any issues or delays encountered during the acquisition process?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With your understanding on how - and to whom – you should elevate problems for resolution?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With early communications describing the roles and responsibilities of the procurement office and of your office (program office)?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. How satisfied were you with the overall support provided by the procurement office in the acquisition process?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. Please provide any additional comments:
 |  |
| 1. Were you part of an IPT (Integrated Procurement Team)?
 | Yes | No |
| Reminder: After one year, or completion of performance, work with your Contracting Officer (CO) to evaluate the contract awardee’s performance in CPARS |

***Attachment C – Evaluation of the Program Office’s Participation in the Procurement***

As you recently worked with \_\_\_\_\_\_\_\_ program office on solicitation #\_\_\_\_\_\_\_\_\_\_\_\_, please evaluate your experience.

Please rate your level of satisfaction on a scale of 1 to 5, with 5 being “Very Satisfied” and 1 being “Very Dissatisfied”

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Very Satisfied** |  | **Very Dissatisfied** | N/A |
| **Planning - *How satisfied were you*:** |
| 1. That the program office conducted meaningful market research?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the program office’s ability to provide any necessary documents allowing for the timely completion of the acquisition package?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. That the program office allotted adequate time for a successful procurement?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. That the program office allotted adequate resources to allow for a successful procurement?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| **Communication - *How satisfied were you*:** |
| 1. With the clarity and effectiveness of the program office’s communication of their needs and time constraints?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the program office’s responsiveness to your questions (communicating in a clear, courteous, timely, and professional manner)?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With my understanding on how - and to whom – you should elevate problems for resolution in the program office?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. With the program office’s technical expertise in evaluating proposals?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. How satisfied were you with the overall support provided by the program office in the acquisition process?
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. Please provide any additional comments:
 |  |
| Reminder: After one year, or completion of performance, work with your Contracting Officer’s Representative (COR) to evaluate the contract awardee’s performance in CPARS. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***For awards made using Government-wide Acquisition Contracts (GWACs) or GSA Schedules*** | Very Satisfied |  | Very Dissatisfied | N/A |
| 1. Please rate your overall satisfaction with the contract vehicle based upon the outcomes you have experienced so far
 | 5 | 4 | 3 | 2 | 1 | N/A |
| 1. Which of the following criteria played a role in your selection of this contract vehicle (check all that apply):
 | * Saves Time
* Flexibility
* Ease of Use
* Familiarity
* Vendor Access
* Ability to meet small business goals
* Ability to meet sustainability goals
* Complies with agency policy
 |