## Page 1: Introduction and Directions

## NSSP 2017 Grantee's Meeting Feedback Survey

Form Approved
OMB No. 0920-0974
Expiration Date: 10/31/2019

Thank you for attending the NSSP Annual Grantee meeting, held on February 6-8, 2017.

To help us improve next year's meeting, please complete this survey by using the link below. It should take approximately 10 minutes to complete. To finish the survey at a later point, please click the "Finish Later" button which will bring you to a prompt asking for an email address. You will receive an email from the Epi Infor Helpdesk and it will have the name of the survey, a survey link and a passcode. Please click on the link in the email and enter the passcode to pick up where you left off.

If you have any questions or problems, please contact your project officer.

By continuing on to the next screen, you will have consented to complete this survey.

NSSP Program

The public reporting burden of this collection of information is estimated to average 10 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 (0920-0974)


Page 2:

| NSSP 2017 Grantee's Meeting Feedback Survey |  |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| 1 | 2 | 3 | 4 | 5 | 6 |  |

## General Meeting Feedback

From an overall perspective, please indicate whether this meeting met your expectations
Met expectations Did not meet expectations
O Neutral
ONA/ Did not attend

Please indicate what you liked most about the meeting.


Please indicate how the meeting, as a whole, could be improved.


Please indicate topic areas/ areas of need that you would like further guidance on from CDC and/ or other grantees.
$\square$
Powered by: (ei Version 1.4.00 Finish later Continue $\Rightarrow$ 目

| NSSP 2017 Grantee's Meeting Feedback Survey |  |
| :---: | :---: |
| (4) $123 \times 456$ | (1) Exit ${ }_{\text {Survey }}$ |

## Session Satisfaction

Please indicate your level of agreement with the following statements regarding the meeting sessions.

| I was satisfied with each of the following sessions: |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| -ESSENCE Beginner Training |  |  |  |  |  |
| Strongly agree | O Agree | O Neutral | O Disagree | Strongly disagree | ONA/ Did not attend |
| ESSENCE Intermediate/ Advanced Training |  |  |  |  |  |
| Strongly agree | $\bigcirc$ Agree | Oneutral | O Disagree | Strongly disagree | O NA/ Did not attend |
| National Syndromic Surveillance Program (NSSP) Future Steps |  |  |  |  |  |
| Strongly agree | Agree | O Neutral | Disagree | Strongly disagree | NA/ Did not attend |


| Meaningful Use Overview |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- |
| Strongly agree | Agree | Neutral | Disagree | Strongly disagree | OA/ Did not attend |


| NSSP Success Stories from the Field |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Strongly agree | $\bigcirc$ Agree | Neutral | Disagree | Strongly disagree | ONA/ Did not attend |
| State Collaboration and Partnership Strategies |  |  |  |  |  |
| Strongly agree | Agree | Neutral | $\bigcirc$ Disagree | Strongly disagree | O NA/ Did not attend |





| (4)23 4 56 |  |
| :---: | :---: |

Session Improvements

Please indicate how any of these sessions could be improved. Please include the particular session the comment is in reference to.

Please indicate topics/ issues around which you would like to see sessions/discussion organizaed in future grantee meetings


Page 6:

| NSSP 2017 Grantee's Meeting Feedback Survey |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| (4) $123 / 3 \sqrt{4} 56$ |  |  |  |  |  |
| Meeting Logistics |  |  |  |  |  |
| Please indicate your level of satisfaction with the following logistical components of the meeting. |  |  |  |  |  |
| Very Satisfied | Satisfed | Oneutral | $\bigcirc$ Unsatisfied | Very Unsatisfied |  |
| -Housing/ Accommodations |  |  |  |  |  |
| Very Satisfied | Satisfied | Oneutral | $\bigcirc$ Unsatisfied | Oery Unsatisfied |  |
| Meeting Location |  |  |  |  |  |
| Very Satisfied | Satisfied | $\bigcirc$ Neutral | $\bigcirc$ Unsatisfied | Very Unsatisfied |  |
| Learning Environments |  |  |  |  |  |
| Very Satisfied | Satisfied | Oneutral | $\bigcirc$ Unsatisfied | Very Unsatisfied |  |
| Meeting AV |  |  |  |  |  |
| $\bigcirc$ Very Satisfied | Satisfed | Oneutral | $\bigcirc$ Unsatisfied | Very Unsatisfied |  |

## Please indicate ways in which we can improve the meeting in terms of logistics.




## NSSP 2017 Grantee's Meeting Feedback Survey

Thank you again for your participation at the annual grantee's meeting and for providing feedback. We look forward to continuing to work with you!

