

# CFI/FCG OMB CLEARANCE SURVEY MAP

Survey: VA MOVE! Patient Experience Survey

IA#: 20321 A0

Date: 9/27/18

SURVEY TYPE: Relationship (tab 4)

Survey Q#	Type#	Type Topic
Q1	Custom	Respondent Background/Experience
Q2	Custom	Respondent Background/Experience
Q3	Custom	Respondent Background/Experience
Q4	Custom	Respondent Background/Experience
Q5	Custom	Respondent Background/Experience
Q6	Custom	Respondent Background/Experience
Q7	Custom	Respondent Background/Experience
Q8	3	Website
Q9	Custom	Respondent Background/Experience
Q10	5	Product/Information/Service Provided
Q11	5	Product/Information/Service Provided
Q12	5	Product/Information/Service Provided
Q13	5	Product/Information/Service Provided
Q14	Custom	Respondent Background/Experience
Q15	5	Product/Information/Service Provided
Q16	Custom	Product/Information/Service Provided
Q17	5	Product/Information/Service Provided
Q18	5	Product/Information/Service Provided
Q19	5	Product/Information/Service Provided
Q20	Custom	Respondent Background/Experience
Q21	2	Customer Service
Q22	2	Customer Service
Q23	2	Customer Service
Q24	2	Customer Service
Q25	2	Customer Service
Q26	2	Customer Service
Q27	5	Product/Information/Service Provided
Q28	5	Product/Information/Service Provided
Q29	5	Product/Information/Service Provided
Q30	5	Product/Information/Service Provided
Q31	5	Product/Information/Service Provided
Q32	5	Product/Information/Service Provided
Q33	5	Product/Information/Service Provided
Q34	5	Product/Information/Service Provided
Q35	Custom	Customer Service
Q36	Custom	Customer Service
Q37	7	Satisfaction (ACSI Index)
Q38	7	Satisfaction (ACSI Index)
Q39	7	Satisfaction (ACSI Index)
Q40	8	Future Behaviors
Q41	8	Future Behaviors
Q42	Custom	Product/Information/Service Provided
Q43	Custom	Product/Information/Service Provided
Q44	Custom	Suggested Improvements
Q45	Custom	Demographics
Q46	Custom	Demographics
Q47	Custom	Demographics
Q48	Custom	Demographics
Q49	Custom	Demographics
Q50	Custom	Demographics