| Attribute | Value |
|-------------------------------------|-----------------------|
| AllIbule | Value |
| Channel | Web |
| Touchpoint Name | Browse |
| Hierarchy | No |
| Model Type | Desktop Informational |
| Journey Phase | Consideration |
| Touchpoint Type | Standard |
| Partner Involved | No |
| Replay | No |
| Version Number of Model Template | 17.2.G |

Welcome and Thank You Text

The text you see here will appear at the top and bottom of your survey. Default text is included and you may modify this text as needed.

Model Questions

As discussed during the kick-off call, the model questions are part of the ForeSee methodology. For consistency wit the model, these questions are standardized and have been tested and validated. Standardization of model questio allows benchmarking across companies/industries, and these questions are used in calculating scores and impacts.

Focus on the future behaviors; I've started with some that I believe are a good fit but we can certainly make adjustments. These are desired customer outcomes that are impacted by customer satisfaction.

Custom Questions

When reviewing the custom questions tab, keep in mind these questions are used for segmentation analysis of the model data. It is suggested that you add, delete or change custom questions over time, as your needs or business objectives change.

| Focus Area #1: Achieving Actionable Data - Know what changes are being made based on the intelligence | Why |
|---|-----------|
| - Change Custom Questions so that stakeholders see a clear "must do" | Analys |
| Focus Area #2: Aligning Data to Business Strategies | 🔲 Top-Pri |
| Update your Custom Questions as business cycles change Integrate Executive Level questions to evaluate initiatives | 🔲 Open-e |
| Focus Area #3: Strategic and Tactical Value | 🗖 Shift w |
| - Influence Board Room Decisions | 🛛 Inform |
| - Change Operational Approaches - Mature Your Research | 🖵 Evalua |
| | |

pdate Your Custom Questions?

ncovered new questions to ask ty areas influence resource use s for quantifiable recommendations Seasonal Needs Re-launch or Re-design Marketing Initiatives



The text you see here will appear at the top and bottom of your survey, examples below. Default text is included and you may modify this text as needed.

| Welcome and | Thank You Text |
|---|----------------|
| Welcome Text Thank you for visiting nccih.nih.gov. You've been randomly chosen to take part in a brief survey to let us know what we're doing well and where we can improve. Please take a few minutes to share your opinions, which are essential in helping us provide the best online experience possible. Thank You Text Thank you for taking our survey - and for helping us serve you better. Please note you will not receive a response from us based on your survey comments. If you would like us to contact you about your feedback, please visit the Contact Us section of our website. | |
| Example Desktop FORESEE Customer Satisfaction Survey Thank you for visiting our site. You've been randomly chosen to take part in a brief survey to let us know what we're doing well and where | |
| we can improve. Please take a few minutes to share your opinions, which are essential in helping us provide the best online experience possible. Required questions are denoted by an * Thank you for taking our survey - and for helping us serve you better. Please note you will not receive a response from us based on your survey comments. If you would like us to contact you about your feedback, please visit the Contact Us section of our web site. Cancel Submit | |
| | |

| Model Name | NIH-NCCIH Desktop Browse | Red & Strike-Through: Delete | |
|---------------|--------------------------|-----------------------------------|---------|
| Model ID | | Underlined & Italicized: Re-order | FORESEE |
| Partitioned | Yes - 2MQ | Pink: Addition | |
| Date | | Blue: Reword | |
| Model Version | 17.2.G | | |
| | | | |

| Label | Element Questions | Label | Satisfaction Questions | | Label | Future Behaviors |
|--------------------------------------|---|--------------------------------|---|----|----------------------|---|
| Look and Feel - Appeal | Look and Feel (1=Poor, 10=Excellent, Don't Know) Please rate the visual appeal of this site. | Satisfaction - Overall | Satisfaction What is your overall satisfaction with this site? (1=Very Dissatisfied, 10=Very Satisfied) | 22 | Trust-Level | Trust (1=Not at all Trustworthy, 10=Very Trustworthy) Please rate your level of trust in this company. |
| Look and Feel - Balance | Please rate the balance of graphics and text on this site. | Satisfaction - Expectations | How well does this site meet your expectations ? (1=Falls Short, 10=Exceeds) | | | Return (1=Very Unlikely, 10=Very Likely) |
| Look and Feel - Readability | Please rate the readability of the pages on this site. | Satisfaction - Ideal | How does this site compare to an ideal website ? (1=Not Very Close, 10=Very Close) | 23 | Return | How likely are you to return to nccih.nih.gov in the future? |
| | Site Performance (1=Poor, 10=Excellent, Don't Know) | | | | | Recommend Company (1=Very Unlikely, 10=Very Likely) |
| Site Performance - Loading | Please rate how quickly pages load on this site. | | | | Recommend Company | How likely are you to recommend NIH - NCCIH to someone else |
| | Please rate the consistency of speed from page to page on this site. | | | | | |
| Site Performance - Completeness | Please rate how completely the page content loads on this site. | | | | | |
| | Navigation (1=Poor, 10=Excellent, Don't Know) Please rate how well this site is organized. | | | | | |
| Ŭ | Please rate the options available for navigating this site. | | | | | |
| Navigation - Layout | Please rate how well the site layout helps you find what you need. | | | | | |
| Information | Information Browsing (1=Poor, 10=Excellent, Don't Know) Please rate the ability to sort information by criteria that are important to you on this site. | | | | | |
| | Please rate the ability to narrow choices to find the information you are looking for on this site. | | | | | |
| | Please rate how well the features on the site help you find the information you need. | | | | | |
| Site Information - | Site Information (1=Poor, 10=Excellent, Don't Know) | | | | | |
| Thoroughness | Please rate the thoroughness of information provided on this site. | | | | | |
| Site Information - Understandable | Please rate how understandable this site's information is. | | | | | |
| | Please rate how well the site's information provides answers to your questions. | | | | | |
| | | | | | | |
| | | | | | | |



| | QUESTION META TAG | Skip From | Question Text | Answer Choices | Skip To | Required Y/N | Туре | Special Instructions | CQ Label |
|---------|----------------------|--------------|---|---|---------|-----------------|---|--|---|
| 1 Prima | Primary Reason | | What is the primary information you were looking for today? | General information about NCCIH | | Y | Radio button, one-up vertical | Skip Logic Group* | Primary Reaso |
| | | | | Specific disease or condition | Α | | | Randomize | |
| | | | | Specific herb, supplement, or health approach | В | | | | |
| | | | | Safety information | | | | | |
| | | | | Clinical guidelines | | | | | |
| | | | | Research results | | | | | |
| | | | | | | | | | |
| | | | | Research funding or grants | | | | | |
| | | | | Professional continuing education credits | | | | | |
| | | | | Find a complementary health practitioner | | | | | |
| | | | | Jobs | | | | | |
| | | | | Events | | | | | |
| | | | | Other (please specify) | С | | | Anchor Answer Choice | |
| 2 | | Α | Please specify the disease or condition. | | | Ν | Text field, <100 char | Skip Logic Group* | Primary reaso disease |
| | | В | Please specify the herb, supplement, or health approach. | | | Ν | Text field, <100 char | Skip Logic Group* | Primary reasor type of |
| | | С | Please specify the reason for your visit. | | | N | Text field, <100 char | Skip Logic Group* | Primary Reaso Other |
| 3 | Accomplish | | Did you find the information you were looking for today? | Yes | В | Y | Radio button, one-up | Skip Logic Group* | Accomplish |
| | | | | No | | | vertical | | |
| | OE_Accomplish | в | Was the information easy to find? | Yes | | Y | Radio button, one-up | Skip Logic Group* | Easy Accompl |
| | | | | No | B1 | | vertical | 1 13 1 11 | Not Easy |
| | | | | | DI | | | | Accomplish |
| | | B1 | Why was this information difficult to find? | | | N | Text area, no char limit | Skip Logic Group* | OE_Why Not Accomplish |
| 4 | Role | | What role best describes you today? | General health consumer | | Y | Radio button, one-up vertical | Skip Logic Group* | Role |
| | | | | Patient | | | | Randomize | |
| | | | | Family or friend of patient | | | | | |
| | | | | | | | | | |
| | | | | Researcher or grant applicant | | | | | |
| | | | | Journalist/media professional | | | | | |
| | | | | Health care professional | Α | | | | |
| | | | | Student | | | | | |
| | | | | Educator | | | | Anchor Answer Choice | |
| | | | | Other (please specify) | В | | | | |
| | | Α | What type of health care professional are you? | | | N | Text area, no char limit | | OE_Healthcar |
| | | | ina gpo of floater bare professional are you. | | | | | Chap Logic Croup | Role |
| | | В | Please specify your role today. | | | N | Text area, no char limit | Skip Logic Group* | OE_Role_Oth |
| 5 | Visit Frequency | 5 | How often do you visit this site? | This is my first visit | | Y | Drop down, select one | Chap Logic Croup | Visit Frequence |
| 5 | visit Frequency | | now onen uo you visit tills site? | | | 1 | Drop down, Select offe | | visit Frequent |
| | | | | Once every 6 months or less often | | | | | |
| | | | | Once every few months | | | | | |
| | | | | Monthly | | | | | |
| | | | | Weekly | | | | | |
| | | | | Daily or more often | | | | | |
| 6 | | | What sections of the site did you visit today? (Select all that apply.) | Health Information | | Y | Checkbox, one-up vertical | Skip Logic Group* | Site Sections |
| | | | | Research | | | | Randomize | |
| | | | | Grants & funding | E | | | | |
| | | | | Training | _ | | | | |
| | | | | | | | | | |
| | | | | News & Events | | | | | |
| | | | | About NCCIH | | | | | |
| | | | | Information for health care providers | | | | | |
| | | | | | | | | | |
| | | | | NCCIH research blog | | | | I | |
| | | | | | A | | | Anchor Answer Choice | |
| | | А | | NCCIH research blog Other (please specify) | A | N | Text field,<100 char | | OE Site Sect |
| | | A | Please tell us the sections of the site you visited. What type of funding information were you looking for? (Please | Other (please specify) | A | N Y | Text field, <100 char Checkbox, one-up vertical | Anchor Answer Choice Skip Logic Group* Skip Logic Group* | Specific Fund |
| | | | Please tell us the sections of the site you visited. | Other (please specify) Available funding opportunities | A | | | Skip Logic Group* | |
| | | | Please tell us the sections of the site you visited. What type of funding information were you looking for? (Please select all that apply.) | Other (please specify) Available funding opportunities Clinical trials funding | A | | Checkbox, one-up | Skip Logic Group* Skip Logic Group* | Specific Fund |
| | | | Please tell us the sections of the site you visited. What type of funding information were you looking for? (Please select all that apply.) | Other (please specify) Available funding opportunities Clinical trials funding Policies regarding funding | A | | Checkbox, one-up | Skip Logic Group* | Specific Fund |
| | | | Please tell us the sections of the site you visited. What type of funding information were you looking for? (Please select all that apply.) | Other (please specify) Available funding opportunities Clinical trials funding | A | | Checkbox, one-up | Skip Logic Group* Skip Logic Group* | Specific Fundi |
| | | | Please tell us the sections of the site you visited. What type of funding information were you looking for? (Please select all that apply.) | Other (please specify) Available funding opportunities Clinical trials funding Policies regarding funding | A | | Checkbox, one-up | Skip Logic Group* Skip Logic Group* | OE_Site Secti Specific Fundi Info |
| | | | Please tell us the sections of the site you visited. What type of funding information were you looking for? (Please select all that apply.) | Other (please specify) Available funding opportunities Clinical trials funding Policies regarding funding List of grants that have already been awarded | A | | Checkbox, one-up | Skip Logic Group* Skip Logic Group* | Specific Fundi |

ForeSee Results - Confidential and Proprietary



| QID | QUESTION META TAG | Skip From | Question Text | Answer Choices | Skip To | Required Y/N | Туре | Special Instructions | CQ Label | | |
|-----|--------------------------|--------------|---|--|---------|-----------------|----------------------------------|--|--------------------------|-----------|----------------|
| 7 | | | Did you use the search feature during your visit today? | Yes | Y | Y | Radio button, one-up vertical | Skip Logic Group* | Search Use | | |
| | | | | No | | | | | | | |
| | | | | Don't recall | | | | | | | |
| | | Y | Please tell us about your experience with the site's search feature today. (Select all that apply.) | Results were not relevant/not what I wanted | | Y | Checkbox, one-up vertical | Checkbox, one-up vertical | | Randomize | Search Experie |
| | | | | Too many results/I needed to refine my search | | | | Skip Logic Group* | | | |
| | | | | Not enough results | | | | | | | |
| | | | | Returned NO results | | | | | | | |
| | | | | Received error message(s) | | | | | | | |
| | | | | Search speed was too slow | | | | | | | |
| | | | | Other (please specify) | Α | | | Anchor Answer Choice Mutually Exclusive | | | |
| | | | | I had no difficulty with search/results were helpful | | | | | | | |
| | | Α | Please specify what you experienced. | | | N | Text area, no char limit | Skip Logic Group* | Search Issue | | |
| 10 | 10 | | What issues, if any, did you experience while reviewing information? (Please select all that apply.) | Information was not up to date | | Y | Checkbox, one-up vertical | Skip Logic Group* | Information Iss | | |
| | | | | Information did not answer my questions | В | | | | | | |
| | | | | Information was not presented in a concise format | | | | | | | |
| | | | | Wording was not clear | | (| | | | | |
| | | | | Text was difficult to read | | | | | | | |
| | | | | Other (please specify) | Α | | | | | | |
| | | | | I had no issues while reviewing information. | | | | Mutually Exclusive | | | |
| | | Α | Please describe the issue you experienced while reviewing information. | | | N | Text area, no char limit | Skip Logic Group* | Other Informa | | |
| | | В | What questions were not answered? | | | N | Text area, no char limit | Skip Logic Group* | Information questions | | |
| 11 | Demographics: Age | | Which category includes your age? | Under 18 | | N | Radio button, one-up vertical | | Demos: Age | | |
| | rige | | | 18 - 24 | - | | Vertical | | | | |
| | | | | 25 - 34 | _ | | | | | | |
| | | | | 25 - 34 35 - 44 | | | | | | | |
| | | | | 45 - 54 | - | | | | | | |
| | | | | 45 - 54 55 - 64 | _ | | | | | | |
| | | | | | _ | | | | | | |
| | | | | 65 or older | | | | | | | |
| | | | | Prefer not to respond | | | | | | | |
| 12 | | | What is your primary language? | English | | N | Radio button, one-up vertical | Skip Logic Group* | Demos: Langu | | |
| | | | | Spanish | | | | | | | |
| | | | | Other (please specify) | Α | | | | | | |
| | | | | Prefer not to respond | | | | | | | |
| | | Α | Please specify your primary language. | | | N | Text area, no char limit | Skip Logic Group* | OE_Languag | | |
| 13 | OE_Improve Experience | | What else would you like to share with us to help improve your online experience with nccih.nih.gov? | | | Ν | Text area, no char limit | | Improve | | |