OMB#: 0925-0648 ExpDate: 3/31/18

Public reporting burden for this collection of information is estimated to average 5 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: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0648). Do not return the completed form to this address.

Instructions BLPB Retiree Customer Satisfaction Survey

Greetings,

We appreciate any feedback you might have about your experience working with the NIH Office of Human Resources. This brief survey should take less than 5 minutes to complete, and individual responses will remain confidential. Results will be compiled by the Survey Team in the HR Systems Analytics and Information Division, and summary reports will be provided to BPLB. Your responses will provide valuable insights that can help BPLB improve its customer service.

If you have questions concerning this survey, please contact <u>AskBPLB@od.nih.gov</u> at the National Institutes of Health Office of Human Resources.

If you encounter technical difficulties with the survey, please contact http://intrahr.od.nih.gov/helpdeskform.htm.

NOTE: Text in purple box are survey logic and will not be visible to survey takers.

Questions

- 1. What area in BPLB did you request assistance?
 - Benefits
 - Retirement
 - Processing Unit
 - Leave Bank
 - Pavroll
 - Workers' Compensation
- 2. Who assisted you with your issue?
 - a. Cheryl Baker
 - b. Thomas Brown
 - c. Nneka Caldwell
 - d. I do not know
 - e. Not listed

3. Please provide the name of the individual who assisted you:

Logic: Show Question if: Question 2 is "Not Listed".

- a. Open ended
- 4. Please rate your overall satisfaction with the customer service you received.
 - a. Very Dissatisfied
 - b. Dissatisfied
 - c. Neutral
 - d. Satisfied
 - e. Very Satisfied
- 5. Please list the month and year of contact or service requested. .
 - a. Month [drop down menu]
 - b. Year [drop down menu]

6. Please rate your level of agreement with the following statements.

	Strongly	Disagree	Neither	Agree	Strongly
	Disagree		Agree nor		Agree
			Disagree		
My benefits action was					
completed in a timely					
fashion.					
The assistance I received was					
accurate.					
My Human Resources					
Specialist was courteous.					
My Human Resource					
Specialist or liaison was					
knowledgeable about the					
topic I needed assistance					
with.					

7. What would help improve your experience in the future? Please describe below: (Open text)

Logic: Show Question if: Question 6 is "Disagree" or "Strongly Disagree".

8. Please provide any feedback or suggestions on how BPLB can improve customer service: (Open text)