

**APPENDIX A**  
**NIMH Email Services Customer Satisfaction Survey**

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Public reporting burden for this collection of information is estimated to average 3 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, Maryland 20892-7974, ATTN: PRA (0925-0648). Do not return the completed form to this address.

This federal government-sponsored survey should take approximately 3 minutes to complete. Your responses will be protected to the extent allowed by law. Participation is voluntary; you may decline to answer any or all of the questions.

1. Which of the following categories best describes your role when requesting National Institute of Mental Health information? (Select only one category.)

- |  |   |
|--|---|
| <input type="radio"/> Seeking help for self                  | <input type="radio"/> Clinician: Medical doctor   |
| <input type="radio"/> Seeking help for someone else          | <input type="radio"/> Clinician: Nurse practitioner   |
| <input type="radio"/> Military service member                | <input type="radio"/> Clinician: Nurse (e.g., RN)   |
| <input type="radio"/> Prisoner/inmate/detainee               | <input type="radio"/> Clinician: Psychiatrist   |
| <input type="radio"/> Advocate or advocacy organization      | <input type="radio"/> Clinician: Psychologist   |
| <input type="radio"/> NIMH Outreach Partner                  | <input type="radio"/> Clinician: Social Worker  |
| <input type="radio"/> Health educator/information specialist | <input type="radio"/> Other clinician (e.g., paramedic/EMT, substance use counselor, physician assistant) |
| <input type="radio"/> Researcher                             | <input type="radio"/> Government employee or agency   |
| <input type="radio"/> Educator K-12                          | <input type="radio"/> Congressional Member or staff   |
| <input type="radio"/> Educator: Post-Secondary               | <input type="radio"/> Media (e.g., reporter)  |
| <input type="radio"/> Student: K-12                          | <input type="radio"/> Law enforcement/court system  |
| <input type="radio"/> Student: Post-Secondary                | <input type="radio"/> Other (please specify) _____  |

2. How easy was it for you to find the NIMH email address?
  - Very easy
  - Easy
  - Somewhat easy
  - Difficult
  - Very difficult
  
3. How timely was the response you received to your inquiry?
  - Very timely
  - Timely
  - Somewhat timely
  - Delayed
  - Very delayed
  
4. How helpful was the information or referral you received?
  - Very helpful
  - Helpful
  - Somewhat helpful
  - Not helpful
  - Not at all helpful
  
5. How satisfied were you with the services you received?
  - Very satisfied
  - Satisfied
  - Somewhat satisfied
  - Unsatisfied
  - Very unsatisfied
  
6. Do you have any suggestions for improving our e-mail services?

[Open text field]

7. How do you prefer to contact NIMH? Check all that apply. [Multiple select]

- Email
- Telephone
- Web/Live Help (online chat)
- Mail
- No preference

8. On a scale of 0 to 4, with 0 indicating least likely and 4 indicating most likely, how likely are you to recommend the National Institute of Mental Health and its publications and services to others?

Very Unlikely      Very likely

0    1    2    3    4

9. Ongoing feedback from our customers is very important to us. May we contact you in the future to get your additional feedback on our materials?

- Yes
- No

If Yes, please provide the best email to reach you: [open text field]

**Thank you for your time and participation!**

Submit