

All proposed questions may be modified to indicate the program specific products/services offered.

A specific NOAA office name and/or location may be identified, as appropriate.

Some questions are specific to internal NOAA surveys that may be directed to federal employees, contractors, or affiliates.

QUANTITATIVE QUESTIONS

Please select the number that indicates your degree of satisfaction or dissatisfaction. If the statement does not apply to you, please select N/A. [Questions will be modified to identify specific product(s) or service(s).]

	Extremely Dissatisfied	Dissatisfied	Neither Satisfied nor Dissatisfied	Satisfied	Extremely satisfied	Not applicable
1. Quality of product/service received	1	2	3	4	5	N/A
2. Quality of data or information received	1	2	3	4	5	N/A
3. Relevance of product/service received	1	2	3	4	5	N/A
4. Relevance of data or information received	1	2	3	4	5	N/A
5. Timeliness of response to request	1	2	3	4	5	N/A
6. Cost of product/service received	1	2	3	4	5	N/A
7. Courtesy of staff with whom you worked	1	2	3	4	5	N/A
8. Expertise of staff in handling with your needs	1	2	3	4	5	N/A
9. Degree that product/service met your needs	1	2	3	4	5	N/A
10. Clarity and accuracy of responses from staff to your questions prior to sale	1	2	3	4	5	N/A
11. Clarity and accuracy of responses from staff to your questions after sale	1	2	3	4	5	N/A
12. Ease in reaching correct NOAA office to handle your request	1	2	3	4	5	N/A
13. Format of data or information received	1	2	3	4	5	N/A
14. Documentation of data or information received	1	2	3	4	5	N/A
15. Description of data or information in catalogs and directories	1	2	3	4	5	N/A

16. Ease of finding the data or information	1	2	3	4	5	N/A
17. Accessibility of data or information desired	1	2	3	4	5	N/A
18. Ease of understanding how to use the data or information	1	2	3	4	5	N/A
19. Ease of applying the data or information to your decision-making or work	1	2	3	4	5	N/A
20. Relatability of the information to issues in your community	1	2	3	4	5	N/A
21. Overall satisfaction with service received	1	2	3	4	5	N/A
22. Overall satisfaction compared with services/data or information obtained from the private sector	1	2	3	4	5	N/A
23. Overall satisfaction compared with services/data or information obtained from other Federal agencies	1	2	3	4	5	N/A
24. How satisfied are you with your level of engagement with NOAA?	1	2	3	4	5	N/A
25. How satisfied are you with your wireless internet access at your primary on-site work location at NOAA?	1	2	3	4	5	N/A
26. How satisfied are you with your wireless internet access connectivity at your primary on-site work location at NOAA?	1	2	3	4	5	N/A
27. How satisfied are you with your NOAA provisioned desktop and/or laptop?	1	2	3	4	5	N/A
28. How satisfied are you with your NOAA Virtual Private Network (VPN) speed and connectivity when you telework?	1	2	3	4	5	N/A

Please indicate the degree to which you agree or disagree with the statements below. If the statement does not apply to your product/service, please select N/A. [Proposed new or modified product or service will be explained prior to these instructions.]

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Not applicable
1. The proposed new [or modified] product/service would be an improvement over what is currently provided	1	2	3	4	5	N/A
2. Compared to the current product/service,	1	2	3	4	5	N/A

	the proposed new [or modified] product/service would more clearly communicate the data or information.						
3.	Compared to the current product/service, the proposed new [or modified] product/service provides new or improved information that would enable you to make a more informed decision.	1	2	3	4	5	N/A
4.	Compared to the current products/service, the proposed new [or modified] product/service would provide better guidance on any necessary actions.	1	2	3	4	5	N/A
5.	The Product/Service Description Document provides me with adequate information and instructions to understand and use the product/service.	1	2	3	4	5	N/A
6.	NOAA should move forward with this proposed new [or modified] product/service.	1	2	3	4	5	N/A
7.	NOAA does not need to provide this product/service because alternative sources offer comparable or better data or information that meet my needs.	1	2	3	4	5	N/A
8.	NOAA should move forward with termination of this product/service.	1	2	3	4	5	N/A
9.	Termination of this product/service would negatively affect your operations and/or decision-making.	1	2	3	4	5	N/A
10.	Within the context of the entire Weather, Water, and Climate Enterprise (Government, Academia, Private Sector), I believe it is appropriate for NOAA to make this product/service available.	1	2	3	4	5	N/A
11.	I will be using this data or information to help with decision-making.	1	2	3	4	5	N/A
12.	This information is of value to me.	1	2	3	4	5	N/A
13.	I would like additional assistance in using this data or information to meet my needs.	1	2	3	4	5	N/A
14.	The NOAA staff was on time.	1	2	3	4	5	N/A

15. The NOAA staff was engaged.	1	2	3	4	5	N/A
16. The NOAA staff's conduct was professional.	1	2	3	4	5	N/A
17. The NOAA staff understood my organization's needs.	1	2	3	4	5	N/A
18. The NOAA staff provided information that addressed the needs.	1	2	3	4	5	N/A
19. The presence of the on-site NOAA staff was valuable (if applicable).	1	2	3	4	5	N/A
20. The NOAA staff participated in planned meetings and training drills, when invited by my organization.	1	2	3	4	5	N/A
21. I would recommend NOAA provide staff to my organization in the future.	1	2	3	4	5	N/A
22. Someone at the NOAA office was available to provide Impact Decision Support Services (IDSS) to my organization.	1	2	3	4	5	N/A
23. There were barriers to obtaining the information my organization needed from NOAA.	1	2	3	4	5	N/A
24. My organization received Impact Decision Support Services (IDSS) in time to make informed decisions.	1	2	3	4	5	N/A
25. The level of service my organization received was the same at all times.	1	2	3	4	5	N/A
26. My organization received the same level of service from all NOAA staff members.	1	2	3	4	5	N/A
27. The information that was provided was easy to interpret.	1	2	3	4	5	N/A
28. The explanation of the information was difficult to understand.	1	2	3	4	5	N/A
29. Based on the information provided, my organization clearly understood the range of potential impacts.	1	2	3	4	5	N/A
30. My organization understood the range of forecast possibilities.	1	2	3	4	5	N/A
31. The information provided improved my organization's confidence to make decisions.	1	2	3	4	5	N/A
32. My NOAA office cares about my impact decision support needs and puts those	1	2	3	4	5	N/A

needs first.						
33. I trust the staff at my NOAA office so much that I always use their guidance to make my decisions.	1	2	3	4	5	N/A
34. I doubt that the staff at my NOAA office really cares about me as a person.	1	2	3	4	5	N/A
35. If the staff at my NOAA office tells me something is so, then it must be true.	1	2	3	4	5	N/A
36. In addition to NOAA impact decision support, I typically seek out an opinion from another source.	1	2	3	4	5	N/A
37. I trust the judgments from the staff at my NOAA office about high-impact events.	1	2	3	4	5	N/A
38. I feel that the staff at my NOAA office does not do everything it should to support my decision making.	1	2	3	4	5	N/A
39. I trust my NOAA office to put my needs above all other considerations when providing me with impact decision support services.	1	2	3	4	5	N/A
40. My NOAA office is well qualified to provide me with impact decision support services.	1	2	3	4	5	N/A
41. I trust the staff at my NOAA office to tell me if a mistake was made with the impact decision support services they provided.	1	2	3	4	5	N/A
42. I sometimes worry that my NOAA office may not keep the information we discuss totally private.	1	2	3	4	5	N/A
43. My inquiries were addressed and resolved in a timely manner.	1	2	3	4	5	N/A
44. The process for addressing and resolving my inquiries was straightforward and easy to understand.	1	2	3	4	5	N/A
45. The team member(s) I worked with was (were) knowledgeable about the services/products.	1	2	3	4	5	N/A
46. The services I received enhanced my progress towards my mission.	1	2	3	4	5	N/A

Please select the appropriate answer for the following questions. [Program office will provide multiple options for respondents to consider.]

1. Which option would be an improvement over what is currently provided? (show options as answer choices)
2. Which option would more clearly communicate the information? (show options as answer choices)

3. Which option would provide new or improved information that enables you to make a more informed decision? (show options as answer choices)
4. Which option would provide better guidance on any necessary actions? (show options as answer choices)
5. Which of the following options do you prefer? (a description of each option will be provided)
6. How often did you visit (_____) website over the past year?
 - a. Daily
 - b. At least once per week
 - c. At least once per month
 - d. Only during (before, during, after) severe/hazardous weather
 - e. Less than once per month
 - f. Less than 3-4 times per year
7. If you do not use (_____) products/websites, please select the main reason(s) you do not use it. (Select only X reason(s)).
 - a. I get the information from other sources like (social media, alerts). Please specify the main sources.
 - b. The information is not relevant to me
 - c. The information lacks graphical representation
 - d. I cannot find what I want on the website
 - e. The website is cumbersome and difficult to navigate
 - f. I want information pushed to my mobile device
 - g. I use a different website. Please specify the website.
 - h. I use a mobile app. Please specify the mobile app(s).
 - i. Other (please explain)
8. How much time would you estimate that the information in (_____) product/website saves you over a year?
 - a. Less than 1 hour
 - b. 1-3 hours
 - c. 4-8 hours
 - d. 9-12 hours
 - e. More than 12 hours (Specify:_____)
9. Were you able to use the information in (_____) product/website to make a decision?
 - a. Yes
 - b. No
 - c. Not Applicable
10. What decision did you make?_____
11. Would you prefer this information in a different format? (on-line, hard copy, via telephone, social media)
 - a. Yes
 - i. if yes, please describe which formats you prefer
 - b. No
12. What can we do to improve your experience with us?
13. Is wireless internet access required for you to complete your work while you are at your primary on-site location at NOAA?
 - a. Yes
 - b. No

c. Not applicable

14. Do you have wireless internet access at your primary on-site location at NOAA?

- a. Yes
- b. No
- c. Not applicable

15. Is Virtual Private Network (VPN) access required for you to do your job when you telework?

- a. Yes
- b. No
- c. Not applicable

16. Do you have access to the Virtual Private Network (VPN) when you telework?

- a. Yes
- b. No
- c. Not applicable

17. Do you have the tools you need to easily collaborate and share files with non-NOAA partners in other agencies, states, and non-governmental organizations?

- a. Yes
- b. No
- c. Not applicable

18. Which type(s) of IT applications are most critical to the work you perform? (Check all that apply)

- (Program office may insert boxes relevant to the products/services it provides)

QUALITATIVE QUESTIONS

1. What product/service did you obtain? (Select all that apply).
 - (Program office may insert boxes relevant to the products/services it provides)
2. Please identify the type of event for which you received impact decision support from NOAA. (Select all that apply).

Severe weather (e.g., thunderstorm, tornado, high wind)
Flash Flooding
River or long duration flooding
Coastal flooding
Winter weather/cold weather
Hurricane/tropical
Excessive heat
Fire weather
Drought
Planned event
Hazmat or other non-weather emergency
Regional Fishery Management Council
Interstate Marine Fisheries Commission
Other: Please specify

3. Please select the primary way the decision support was provided to your organization.
 - a. On-site support
 - b. Remote support (email briefs/updates, phone calls/conference calls, NWS Chat Webinars, spot forecasts, NOAA Weather Radio)
4. How did you find out about the product/service?
 - (Program office may insert boxes relevant to the products/services it provides)
5. How frequently do you request products/services from (sponsoring office)?

More than once a month
More than twice a year
Once a year or less
First time user

6. Do you have suggestions as to how (sponsoring office) can improve its products, services, or proposal to [agency will describe the proposal]?
 - (Program office may insert boxes relevant to the products/services it provides)
7. What new products/services would you like to see offered? (Select all that apply).
 - (Program office may insert boxes relevant to the products/services it provides)
8. In what media/format would you like to see these data/information/product/services provided? (Select all that apply).
 - (Program office may insert boxes relevant to the products/services it provides)
9. Will you use our products/services again?
 - a. Yes
 - b. No

10. What will be the primary use of the product/service? (Select all that apply).

Scientific Research
Business
Legal
Education
Personal
Other: Please describe

11. What decision are you trying to make using NOAA information?

12. How did () product/website help you?

13. Which statement best describes the importance of this information to your work? (Select one).

- a. I could not do my work without the resources
- b. I would conduct lower quality work without the resources or with less suitable resources.
- c. I could conduct comparable work without the resources or with alternative resources.
- d. Without the resources, I could conduct comparable work by extra effort (time/cost/resources).

14. Please share any additional thoughts regarding this product/service that were not already addressed.

15. Which currently available NOAA-wide IT tools do you use for your workstation? (Check all that apply)

- (Program office may insert boxes relevant to the products/services it provides)

16. What type of IT tools would you be interested in using if they were available NOAA-wide?

17. In general, why equipment do you use when you are teleworking? (Check all that apply)

Government issued desktop and/or laptop
Government issued phone
Personal Desktop and/or laptop
Personal phone
Contracting company desktop and/or laptop
Contracting company phone

COMMUNICATIONS and OUTREACH QUESTIONS:

1. How do you currently receive news or information from NOAA regarding (*Program office may insert boxes relevant to the products/services it provides*)? (Check all that apply)

Mail
Email
Social Media (Facebook, Twitter, etc.)
Meetings
TV/Radio/Newspaper
In Person/Phone Call
Industry Groups
NOAA Website
Other: Please describe

2. How do you prefer to receive news or information from NOAA regarding (*Program office may insert boxes relevant to the products/services it provides*)? (Check all that apply)

Mail
Email
Social Media (Facebook, Twitter, etc.)
Meetings
TV/Radio/Newspaper
In Person/Phone Call
Industry Groups
NOAA Website
Other: Please describe

3. Which X communications outlets are least helpful to you? (Check X)

Mail
Email
Social Media (Facebook, Twitter, etc.)
Meetings
TV/Radio/Newspaper
In Person/Phone Call
Industry Groups
NOAA Website
Other: Please describe

4. How often would you like to receive news or information from NOAA regarding (*Program office may insert boxes relevant to the products/services it provides*)?

- a. Daily
- b. Weekly
- c. Monthly
- d. Quarterly
- e. Annually

5. Please select your top three NOAA informational/communication products.
• (Program office may insert boxes relevant to the products/services it provides)
6. What kind of information do you feel NOAA is not communicating clearly or in an easy to understand format? (Check all that apply)
• (Program office may insert boxes relevant to the products/services it provides)
7. Please rank how well NOAA communicates (Program office may insert boxes relevant to the products/services it provides). [Grid format will be used with the below scores as columns].
- a. Poor
 - b. Below Average
 - c. Average
 - d. Above Average
 - e. Excellent

8. How often do you use each of the following NOAA outreach products or methods? (Select one).
• (Program office may insert boxes relevant to the products/services it provides)

Many times a day
Once a day
3-4 times per week
Once a week
3-4 times a month
Once a month
3-4 times a year
Once a year
Never

9. NOAA distributes many outreach products both online and in print. For each of the following NOAA controlled outlets, please answer how you feel about the design of the product.
• (Program office may insert boxes relevant to the products/services it provides)

Well designed, attractive, and easy to navigate
Somewhat confusing in design; not always easy to navigate
Poor design, and very hard to navigate

10. Would you like to see NOAA develop content in a language other than English?
- a. Yes
 - Please specify language(s)
 - b. No

11. What kind of information would you like to receive more of from NOAA?

12. What kind of information would you like to receive less of from NOAA?

13. Is there anything else you would like to share with NOAA regarding how staff communicates with [anglers, sectors, dealers, industry representatives, other]?

DEMOGRAPHIC QUESTIONS:

1. What is your staff/line office?
2. Where are you located (drop down box of all U.S. States and Territories)?
3. What is your affiliation? (Check all that apply).

Student (K-12)
College/University Student
Teacher (K-12)
College/University faculty/staff
Other research institution
Business/industry
NOAA
Other Federal Government
State/local/tribal government
News media
Emergency Management Community
Health Sector
Utilities and Infrastructure Providers
Non-Profit
Military
Policy Maker
General Public
Other: Please specify

3. Which local NOAA office provided your decision support? (Select from dropdown)
4. Will you be using this product or service to work with an underserved (as defined in EO 13985) community?
 - a. Yes
 - b. No
 - c. Part of the time
 - d. I don't know.
5. What is your level of engagement with NOAA/program office? [The Program Office could provide a grid listing several offices and the below rankings would be columns.]
 - a. High
 - b. Med
 - c. Low
 - d. Not sure
 - e. NA
6. Do you have characteristics or barriers (physical, language, technology, policy, education) that limit your ability to interact with NOAA products and services?
 - a. Yes
 - i. If yes, please describe.
 - b. No
 - c. Prefer not to answer
7. If you need assistance in obtaining or using this information, do you know how to contact someone?

- a. Yes
- b. No
- c. NA

8. Do you have a documented disability?

- a. Yes
- b. No
- c. I prefer not to answer.

9. To ensure a human is taking this survey, please select option "C" as your answer choice

- a. A
- b. B
- c. C

Your name, address, telephone number, and email address are requested, but are not necessary for your comments to be considered.

Name: _____
Address: _____
Telephone Number: _____
E-Mail Address: _____

Paperwork Reduction Act Information: In accordance with Executive Order 12862, the National Performance Review, and good management practices, NOAA offices seek to determine whether their customers are satisfied with the services and/or products they are receiving and whether they have suggestions as to how the services/products may be improved or made more useful. The information will be used to improve NOAA's products and services. Responses to this survey are completely voluntary. No confidentiality can be provided for responses, but you need not supply your name or address. Public reporting burden for this collection of information is estimated to average ____* minutes per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Adrienne Thomas, Adrienne.thomas@noaa.gov.

Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

*The response time for a specific survey will depend upon the subset of questions selected, and will be entered before the survey's informal submission to OMB.