OTT Customer Satisfaction Survey

# Purpose

The OTT Customer Service Satisfaction Survey will provide an insight into the customer service experience that OTT provides to Tribes in a FHWA Program Agreement. It will help OTT understand how the services provided to FHWA Program Agreement Tribes are viewed and what OTT can do to improve that.

The results of the survey will identify processes and strategies that OTT can improve to enhance the overall quality of our customer service. OTT use the results to develop strategies that can be implemented in future OTT Action Plans.

# Goals

* Customer Service
  + Are Tribal Coordinator’s Communication Methods appropriate/adequate?
  + Are Tribal Coordinator respectful?
  + Are Tribal Coordinators responses to your Requests for Information/Assistance sufficient?
  + Are OTT Leadership Communication Methods appropriate/adequate?
  + Are OTT Leadership staff respectful?
  + Which OTT Online Resources do you most frequently use (PDG, OTT Website, etc)?
    - I access information from XX (once a month, a few time a year, once a year, never)
  + Suggestions for OTT to improve customer service?
* Training and Technical Assistance
  + What transportation areas are you comfortable with (check top 5)?
  + What transportation areas are you needing additional training or technical assistance (check top 5)?
  + Suggestions for OTT to improve training and technical assistance?
* Overall satisfaction with the services provided by FHWA

# Analyze the Survey Results

Closed-ended questions: Identify areas of strength and areas for improvement. Compare results to previous year’s survey.

Open-ended questions: Map out a few general categories to put each of the responses in and then create sub-categories for more detail.

# OTT Action Plan

Develop strategies that can be implemented in future OTT Action Plans to improve the customer service, technical assistance, and training experience.

# Survey Questions

Conducted through Microsoft Forms

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| **General Information** | | | | | | | | | | | |
| Tribe Name: | | | | | | | | | | | |
| Tribal Representative Name: | | | | | | | | | | | |
| BIA Region: | | | | | | | | | | | |
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| **Tribal Coordinators** | | | | | | | | | | | |
| Provide the name of your assigned **FHWA Tribal Coordinator (TC):** | | | | | | | | | | | |
| How satisfied are you with the customer service provided by your **FHWA Tribal Coordinator (TC)** in the following Areas? | | | | | | | | | | | |
| TC Responding to emails |  | Very Dissatisfied | | Dissatisfied | | | Neither satisfied or dissatisfied | | Satisfied | | Very satisfied |
| TC Returning phone calls |
| TC Answering questions |
| TC Recommending solutions |
| TC Willingness to help |
| TC Overall quality of customer service |
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| How satisfied are you with the technical assistance provided by your **FHWA Tribal Coordinator (TC)** in the following areas? | | | | | | | | | | | |
| TC Preconstruction (design) | Did not require technical assistance for this area | Very Dissatisfied | | Dissatisfied | | | Neither satisfied or dissatisfied | | Satisfied | | Very satisfied |
| TC Construction project monitoring |
| TC Construction project closeout |
| TC Road Maintenance |
| TC Overall quality of technical assistance |
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| Optional: Is there anything else you would like to share about the customer service and technical assistance provided by your **FHWA Tribal Coordinator**. | | | | | | | | | | | |
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| **Environmental Specialist** | | | | | | | | | | | |
| Have you worked on a project that required NEPA approval from FHWA? If yes, answer the following questions. If no, skip the section. | | | | | | | | | | | |
| Provide the name of the **FHWA Environmental Specialist** that you work with: | | | | | | | | | | | |
| How satisfied are you with the customer service provided by your **FHWA Environmental Specialist (ES)** in the following areas? | | | | | | | | | | | |
| ES Responding to emails |  | | Very Dissatisfied | | Dissatisfied | Neither satisfied or dissatisfied | | Satisfied | | Very satisfied | |
| ES Returning phone calls |
| ES Answering questions |
| ES Recommending solutions |
| ES Willingness to help |
| ES Overall quality of service |
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| How satisfied are you with the technical assistance provided by your **FHWA Environmental Specialist (ES)** in the following areas? | | | | | | | | | | | |
| ES Identifying needed environmental studies and permits | Did not require technical assistance for this area | | Very Dissatisfied | | Dissatisfied | Neither satisfied or dissatisfied | | Satisfied | | Very satisfied | |
| ES Identifying level of NEPA Action |
| ES Timeliness of NEPA approvals |
| ES Effectiveness in coordinating with other agencies |
| ES Overall quality of technical assistance |
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| Optional: Is there anything else you would like to share about the customer service and technical assistance provided by your **FHWA Environmental Specialist**. | | | | | | | | | | | |
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| **OTT Discretionary Grants Program Managers** | | | | | | | | | | | |
| Have you been awarded a USDOT Discretionary Grant? If yes, answer the following questions. If no, skip the section. | | | | | | | | | | | |
| Provide the name of the **OTT Discretionary Grant (DG) Program Manager** you work with: | | | | | | | | | | | |
| How satisfied are you with the customer service provided by your **OTT Discretionary Grant Program Manager** in the following areas? | | | | | | | | | | | |
| DG Responding to emails |  | | Very Dissatisfied | | Dissatisfied | Neither satisfied or dissatisfied | | Satisfied | | Very satisfied | |
| DG Returning phone calls |
| DG Answering questions |
| DG Recommending solutions |
| DG Willingness to help |
| DG Overall quality of service |
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| Optional: Is there anything else you would like to share about the customer service provided by the **OTT Discretionary Grant Program** you work with. | | | | | | | | | | | |
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| **OTT Leadership** | | | | | | | | | | | |
| Aside from the FHWA Tribal Coordinator or Environmental Specialist assigned to assist you, have you received assistance from OTT Leadership, from the FHWA Office of Tribal Transportation? | | | | | | | | | | | |
| If no was answered: | | | | | | | | | | | |
| What can we do to make OTT Leadership more available for you? | | | | | | | | | | | |
| If yes was answered: | | | | | | | | | | | |
| Provide the name of the individual. | | | | | | | | | | | |
| How satisfied are you with the customer service provided by **OTT Leadership** in the following areas? | | | | | | | | | | | |
| Leadership responding to emails |  | | Very Dissatisfied | | Dissatisfied | Neither satisfied or dissatisfied | | Satisfied | | Very satisfied | |
| Leadership returning phone calls |
| Leadership answering questions |
| Leadership recommending solutions |
| Leadership willingness to help |
| Leadership overall quality of service |
| Optional: Is there anything else you would like to share about the customer service provided by **OTT Leadership**. | | | | | | | | | | | |
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| **OTT Program Administration** | | | | | | | | | | | |
| How comfortable do you feel with the following topics? | | | | | | | | | | | |
| Developing a Long Range Transportation Plan (LRTP) | Did not have the need to perform this topic | | Very uncomfortable | | Uncomfortable | Neither uncomfortable or comfortable | | Comfortable | | Very Comfortable | |
| Developing a Tribal Transportation Improvement Program (TTIP) |
| Public Involvement Requirements |
| Submitting information for the Annual Reporting |
| National environmental Policy Act (NEPA) Process and Actions |
| Environmental Permitting |
| Transportation Safety |
| Transportation Safety Plans |
| Data Assessment, Improvement, and Analysis Activities |
| Systemic Roadway Departures Countermeasures |
| Crash Modification Factors Clearinghouse |
| Tribal Transportation Program Safety Fund Application requirements | Haven’t applied | | Very uncomfortable | | Uncomfortable | Neither uncomfortable or comfortable | | Comfortable | | Very Comfortable | |
| Tribal HPP Program Application requirements |
| Tribal Transportation Facilities Bridge Program Application requirements |
| Tribal Transportation Program Statutory Formula |
| Optional: Is there anything else you would like to mention about the customer service provided by the **OTT Program Administration** topics**.** | | | | | | | | | | | |
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| **OTT Program Overview** | | | | | | | | | | | |
| Overall satisfaction with FHWA services |  | | Very Dissatisfied | | Dissatisfied | Neither satisfied or dissatisfied | | Satisfied | | Very satisfied | |
| Are you familiar with the OTT Website? |  | | No | |  | Haven’t had the need to access/use | |  | | Yes | |
| Is the OTT Website helpful? |
| Are you familiar with the FHWA’s Tribal Transportation Program Delivery Guide (PDG)? |
| Is the PDG helpful? |
| Is there anything else about the FHWA OTT or TTP you would like to share? | | | | | | | | | | | |
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