**Nominator Customer Satisfaction Survey**

Form Approved

OMB No. 0935-0179

Exp. Date XX/XX/20XX

*Number: 20/year*

*Target: nominating organization*

*Interviewee: primary liaison for nominating organization (only organization name will be recorded, not any PII from interviewee)*

*Method: Telephone interview by TOO for the project*

*Timing: After acceptance of final report*

1. Dissemination and impact of AHRQ EPC report findings:
	1. How has/will the EPC report findings been/be used? (e.g. meeting presentation, research agenda, coverage decision, manuscript, etc.)
	2. What do you expect the impact will be?
	3. Do you plan to measure the impact and if so, how?
2. Meeting your needs:
	1. Did the EPC report meet your needs?
		1. If no, please share why not.
	2. What about the EPC report was most useful regarding meeting your needs?
3. Confidence in the EPC report’s findings:
	1. Using any number 1 to 10 where 1 is the worst possible and 10 is the best possible, what number would you use to rate your confidence in the EPC report’s findings?
	2. Any comments?
4. Process for creating the EPC report:
	1. Using any number 1 to 10 where 1 is the worst possible and 10 is the best possible, what number would you use to rate the process for making the EPC report?
	2. Any comments?
5. Format of the EPC report:
	1. What about the EPC report format, including the evidence tables, was most helpful?
	2. What about the EPC report format, including the evidence tables, was most challenging?
	3. What modifications would you recommend?
6. Timeline of the EPC report:
	1. Did the timeline meet your needs?
	2. If not, what modifications would have been helpful?

Public reporting burden for this collection of information is estimated to average 60 minutes per response, the estimated time required to complete the survey. An agency many 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: AHRQ Reports Clearance Officer Attention: PRA, Paperwork Reduction Project (0935-0179) AHRQ, 5600 Fishers Lane, Mail Stop 07W41A, Rockville, MD 20857.

1. Involvement with the EPC report:
	1. Were you satisfied with your level of involvement? (Yes, fully; yes, partially; No)
	2. What opportunities for involvement with the EPC report were the most valuable to you?
2. Potential future collaborations:
	1. Do you have any plans for updates or other follow-on products for the current EPC report?
	2. Do you have any plans for future activities for which a new EPC report could be helpful?
3. Decision to use an AHRQ EPC report:
	1. What lead you to choose the AHRQ EPC Program to produce your report?
	2. Would you recommend using and/or commissioning AHRQ EPC reports to other federal colleagues?