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OWCP FECA Program Customer Experience Survey

Provide Feedback on Your Experience

The FECA program is committed to improving customer experience for federal workers who have been injured on the job and need to file a claim for workers' compensation.

The collection of this information is voluntary. It is not required, and it will not be available to or used by OWCP staff during the adjudication process. This voluntary data is anonymous, confidential, and will only be accessed by non-claims staff without personal identifiable information.

Customer Experience Assessment:

1. Based on my experience filing a claim today, I trust FECA to deliver on its responsibility to Federal Employees.



If respondent selects "thumbs up" – can check multiple boxes:

- 2a. What about this interaction made the difference? (You may select more than one)

- | | |
|--|--------------------------|
| a. My need was addressed. | ☐ |
| b. It was easy to complete what I needed to do. | ☐ |
| c. It took a reasonable amount of time to do what I needed to do. | ☐ |
| d. I understood what was being asked of me throughout the process. | ☐ |

If respondent selects "thumbs down" – can check multiple boxes:

- 2b. What could have been better? (You may select more than one)

- | | |
|-------------------------------|--------------------------|
| a. My need was not addressed. | ☐ |
|-------------------------------|--------------------------|

- b. It was difficult to complete what I needed to do. ☐
- c. It took too long to do what I needed to do. ☐
- d. I did not understand what was being asked of me throughout the process. ☐

3. I am satisfied with my overall experience today.

(5 – strongly agree, 4 – agree, 3 – neutral, 2 – disagree, 1 – strongly disagree, N/A)

4. Anything else you want us to know about your experience?

(open-text field)