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Newborn Screening Quality Assurance Program (NSQAP) Annual Participant Survey

Determine the level of perceived value and Participant satisfaction with the NSQAP Program.

* Required

Demographics

1. Is your lab a United States or International Laboratory? *

- ☐ United States
- ☐ International

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* Required

NSQAP

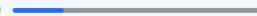
2. Which communication channels were/are you using most frequent? *

- ☐ Email
- ☐ Phone
- ☐ NSQAP Self-Service Participant Portal (<https://nbs.dynamics365portals.us/>)
- ☐ Not Applicable - Did not use any of these channels
- ☐ Other

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Help and Reference Information

3. Do you use our Frequency Ask Questions (FAQs) located on the NSQAP Participant Portal?

- ☐ Yes, I use them.
- ☐ No, I do not use them.

4. Do you use our User Guides or Instruction documents located on the NSQAP Participant Portal? *

- ☐ Yes, I use them.
- ☐ No, I do not use them.

5. Please provide any feedback, thoughts or suggestions on how we can improve the help and reference information contained on the NSQAP Participant Portal.

Enter your answer

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Customer Service

6. If registered for a NSQAP Participant Portal account, do you use our portal to submit and receive updates on help requests? *

- ☐ Yes
- ☐ No
- ☐ I did not know I could do that

7. Overall, how would you rate the quality of the customer service and problem resolution support you received? *



8. What suggestions do you have, if any, for improving our customer service?

Enter your answer

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Communication Quality

9. How often do you feel that the information you receive is clear, accurate, and timely? *

- ☐ All of the time
- ☐ Most of the time
- ☐ Not often
- ☐ Never
- ☐ Not Applicable - No communicate with NSQAP

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Data Submission

10. How satisfied are you in your ability to submit proficiency testing (PT) results using the NSQAP Participant Portal? *

0	1	2	3	4	5	6	7	8	9	10
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Very Dissatisfied

Extremely Satisfied

11. How satisfied are you with the quality control (QC) result reporting process in the NSQAP Participant Portal? *

0	1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	---	----

Very Dissatisfied

Extremely Satisfied

12. Please provide feedback on how we can improve the Data Submission process.

Enter your answer

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Program Enrollment and Modification

13. If you enrolled in the NSQAP Program in the last two years, how easy was the registration process? *

- ☐ Extremely easy
- ☐ Easy
- ☐ Not easy
- ☐ Extremely hard
- ☐ I am not currently enrolled or enrolled prior to 2 years ago

14. How easy was it to request PT and/or QC programs to be added or removed to your laboratory account? *

- ☐ Extremely easy
- ☐ Easy
- ☐ Not easy
- ☐ Extremely hard
- ☐ I have not modified our program selection.

15. Please provide feedback on how we can improve the enrollment or program modification processes.

Enter your answer

* Required

Updates and Reports

16. Do you receive timely updates and information before each proficiency testing (PT) or quality control (QC) Event? *

- ☐ Yes
- ☐ No
- ☐ I do not receive updates

17. Do you review the quarterly PT summary reports after each shipping event? *

- ☐ Yes
- ☐ No
- ☐ N/A

18. Do you review the QC summary reports after each shipping event? *

- ☐ Yes
- ☐ No
- ☐ N/A

19. Do you review the annual summary report? (https://www.cdc.gov/labstandards/nsgap_reports.html)? *

- ☐ Yes
- ☐ No
- ☐ N/A

20. How would you rate the ease of reading and interpreting proficiency test reports? *

0	1	2	3	4	5	6	7	8	9	10
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Extremely Hard

Extremely Easy

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Dried Blood Spot Materials Quality

21. How would you rate the quality of our materials?

0	1	2	3	4	5	6	7	8	9	10
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Extremely Poor Extremely High

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Overall Impression – General Feedback

22. What is your overall impression of the CDC's Newborn Screening Quality Assurance Program?

Enter your answer

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Thanks!

Thank you for sharing your feedback.