

Effectiveness Bank user survey 2014

In addition to this report the survey as presented to site users is at:

https://www.surveymonkey.com/s/EB_2014

and a current summary of responses is at:

https://www.surveymonkey.com/sr.aspx?sm=drDBYNvcyltcS7b4Y10_2bohEyBNvlt7bc9a0q_2fxTeGZk_3d

Unless indicated otherwise, %s reported here are based on the total number of respondents including those who did not answer the relevant question. Where appropriate comparable figures from the previous survey are given in brackets in italics, eg, (56%).

Summary and discussion

The surveys combine continuity in core questions plus variable questions to explore different aspects of the service without overloading respondents. Invitations to complete the surveys are sent to subscribers to the Effectiveness Bank e-mail list and other lists to which similar alerts are sent, and are featured on the web site. Below are some core figures from surveys to date.

Year	2008	2010	2011	2012	2014
Number of respondents	183	563	506	584	418
Respondent is a drug/alcohol service practitioner	79%	80%	83%	81%	80%
Service developed thinking or changed response to substance use	69%	77%	82%	78%	80%
Found the site very or extremely useful	81%	88%	91%	90%	87%

For earlier surveys see:

2008: http://findings.org.uk/PHP/dl.php?file=DAF_survey_2008_results.pdf

2010: http://findings.org.uk/PHP/dl.php?file=DAF_survey_2010_results.pdf

2011: http://findings.org.uk/PHP/dl.php?file=EB_2011.pdf

2012: http://findings.org.uk/PHP/dl.php?file=EB_2012.pdf

Responses should be interpreted in the light of the fact that respondents would tend to be those most positive about the service. Though notably this time LinkedIn groups were sent the survey invitation, the most engaged users are presumably those who have signed up to the Effectiveness Bank mailing list, and they are likely also to be the main source of survey responses. There will be others not reached by the survey who came across the service but did not want to keep in touch, and others who were reached by the survey but did not feel engaged enough to respond. At the time the mailing list numbered around 4,330. Even if all respondents were on the mailing list, they would constitute just under 1 in 10 of the list.

In line with the aim to target UK-based drug and alcohol service practitioners, about 70% of the mailing list are UK-based and for 8 in 10 survey respondents, their work involved responding to drug and alcohol use/problems.

Among respondents there is great appreciation for the service because it is seen as fulfilling an important function (making the 'what works' literature available and intelligible to people who would not have the time and resources to access it), being practically unique in serving this function, doing so rigorously and to a high standard, and achieving ease of reading without taking quality or information shortcuts. They want the service to continue

because of these qualities and because it has impacted on their thinking and work; about 8 in 10 said using the service had developed their thinking and/or changed their present or planned behaviour in respect of their response to drug and alcohol use/problems.

This year the survey focused on the drug and alcohol treatment matrices and matrix bites commentaries, the major recent additions to the service. For each drug group they organise the treatment sector in to 25 subdivisions, each of which acts as a portals to the most important research and guidance for UK treatment practitioners, managers, and commissioners. Associated with each is a 'matrix bites' commentary, intended to cumulate in to a course on addiction treatment research. Bearing in mind that some respondents are not interested in treatment, 89% of all respondents had accessed the matrices and 62% the bites. In both cases, 66% of respondents who had accessed these rated them extremely useful or the step below, interpreted as very useful. For just over half of all respondents, offering accreditation in to the matrix bites courses would or might increase their use of the matrices and the bites.

Reponses indicate that the service as a whole and the matrices and bites could benefit from usability enhancements and extensions such as videos and interviews and accreditation for the matrix bites courses, as long as the features valued by users do not suffer. Above all, typically they want the service to continue as it is.

Methodology

One of the main purposes of the survey was to assess reaction to the matrices and matrix bites courses. The first alcohol course had been completed 7 May 2014 and the last bite of the first drug course was sent to the mailing list on 3 December 2014, followed the next week by a round-up of the final row and then of the whole course on 17 December 2014.

On 15 December 2014 the survey link was made available on the Findings site. The next day an invitation to complete the survey was sent to subscribers to the Findings mailing list, to DS Daily, and to LinkedIn groups which had been sent alerts for new analyses and the matrix bites courses. Reminders were sent to the mailing list only on 6 and 29 January 2015.

The current survey consisted of seven top-level questions with sub-questions. Among these were three opportunities to rate elements of the service from 1 to 5 in terms of usefulness or importance. As in the previous survey these related to the site as a whole, but this time instead of the search facilities it asked about the usefulness of the matrices and matrix bites courses. Again as before, another question probed the degree to which "anything you have read on this site influenced you or your colleagues' thinking about how drug and alcohol use should be responded to". Respondents also had the opportunity enter free-text answers to explain their responses, and to "to tell us in your own words how we are doing and what how you would like us to develop our service".

This analysis is taking place after a much shorter time than previous analyses, helping account for fewer responses.

Who were the respondents?

At the time data for this analysis was harvested (16 February 2015), 418 (584) responses had been received. On that date there were 4336 (4077) subscribers to the mailing list. This is the first survey during which the list was held by MailChimp and could be analysed using its tools, so results may not be comparable with previous analyses.

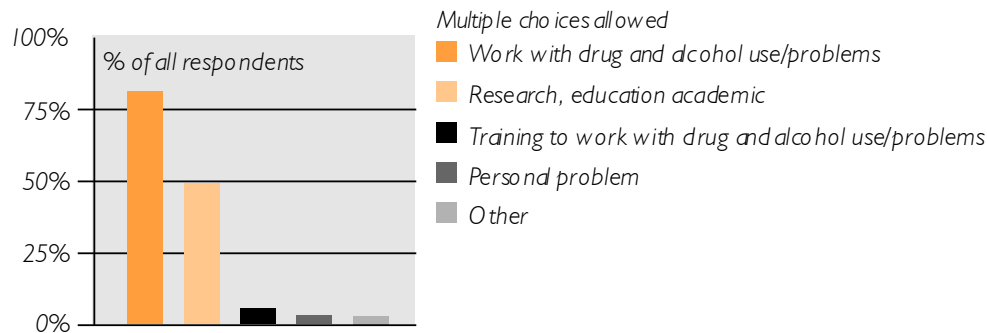
The pool of potential respondents presumably consists mainly of mailing list subscribers. Of these subscribers, 70% could be identified as probably UK in origin via .uk or .nhs.net in their email addresses. At the last survey 48% included .uk or could identified as UK by

visually inspecting a sample of non .uk subscribers. From the internet addresses of their computers, MailChimp identified 46% as operating from the UK.

108 (165) survey respondents left email addresses enabling a guess about where they worked. Of these, 42% (56%) could be identified as of UK origin by a .uk suffix or visual inspection.

Asked what led them to access the service, 80% (81%) of all respondents (only 4 (5) did not answer this question) said they visited the site because, “My work involves responding to drug and alcohol use/problems”. At 48% (49%), just under half visited as well/instead

What led you to access the Effectiveness Bank?



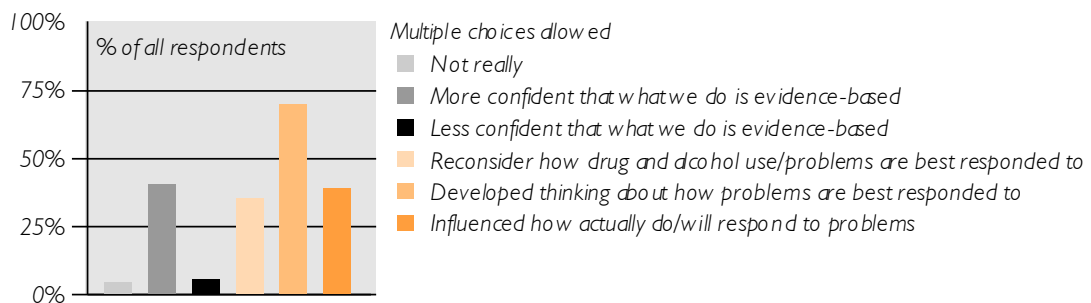
(multiple choices were possible) in the course of “Research, education or other academic” activities. Just 3% (3%) came seeking help with a personal problem.

If these figures are representative it seems the intended audience – UK drug/alcohol field practitioners – is being well targeted.

Influence on thinking and action

For a service concerned to influence practice, the ‘bottom-line’ question was, “Has anything you have read on this site influenced you or your colleagues’ thinking about how drug and alcohol use should be responded to?” Respondents could tick as many options as they liked. It was answered by all but 7 (4) respondents.

Has anything you have read on this site influenced your or your colleagues’ thinking about how drug and alcohol use should be responded to?



Just 4% (4%) had “not really” been influenced in some way or another. At the other end of the scale, 39% (40%) endorsed “Influenced how I/we actually respond to drug and alcohol use/problems or how we might respond in future”, indicating that 4 in 10 of respondents had or would alter their behaviour in response to the service’s communications.

At one step down, 69% (67%) endorsed, “Developed my/our thinking about how drug and alcohol use/problems are best responded to”. Together with those who endorsed the previous question, after eliminating overlap 80% (78%) of respondents said the service had

developed their thinking and/or changed their present or planned responses to drug and alcohol problems.

Additionally or instead, 40% (45%) felt “more confident that what we do is evidence-based”. From comments we know that an important function of the service is to give people the confidence to sustain what research shows is good practice, and to back them up in their relations with colleagues, commissioners and funders.

Reactions to the service as whole

Asked “In general terms, do/did you find the service useful?”, 52% (51%) of those who answered (3 (0) did not) endorsed the top of the scale, “Extremely useful”. Another 34% (39%) endorsed the step below, which can perhaps be interpreted as ‘very useful’, making 87% (90%) who found the site very or extremely useful.

62% (66%) of all respondents explained why. Of the 260 (384) responses, 9 (12) were unhappy or had reservations about aspects of the service (see Appendix 1). Three were about the look of the site and its usability rather than content. Generally respondents appreciated the clarity and depth of the analyses and the way they kept them up to date with the research in a way they would otherwise find impossible.

It seems from the responses that Effectiveness Bank improves productivity in three ways:

- By saving time on finding, selecting and analysing the research: “Saves me time in digesting reports”; “Collects and analyses info saving me hours and hours of time”.
- By enabling interventions to be informed by research findings in ways which would otherwise be beyond the resources of practitioners: “Puts me in touch with research I wouldn’t have time to go looking for and it is also helpful in setting out the issues, strengths weaknesses and making it digestible”.
- By adding value through the links it makes and the insight and balance of the analyses: “Easy to access key bits of research. These are clearly and concisely critically appraised and linked to other relevant research. This makes understanding the evidence base much easier”; “Easy access to research findings, comprehensive, connected and cross-referenced – clear prose, sharp analysis”.

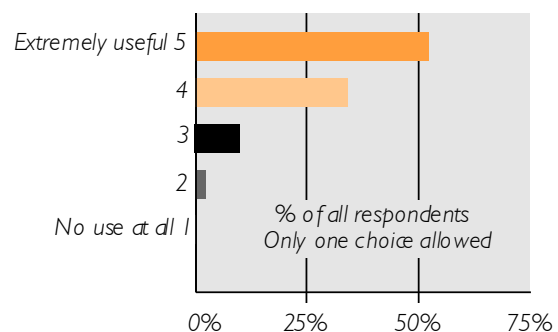
In summary, about 9 in 10 respondents found the site very or extremely useful. Overwhelmingly the site was seen as providing accessible, relevant, trustworthy, rigorous and high quality information otherwise unavailable in practice.

Satisfaction with research analyses

Research analyses are the service’s main final product. They summarise, comment on and critique individual studies and reviews.

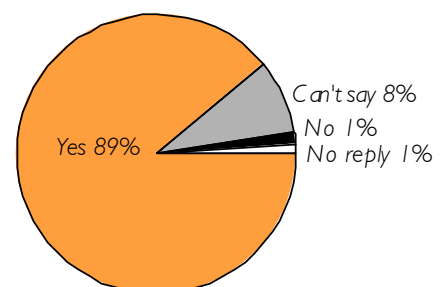
About these, the survey asked, “When you click the links we send out usually you see one of our Effectiveness Bank analyses. Do these generally give you the information you want in the way you want it?”

In general terms, do/did you find the service useful?



Research analyses generally give me the information I want in the way I want it

% of all respondents. Only one choice allowed.



Of all respondents (5 (10) skipped this question), 89% (92%) said, yes, they did generally satisfy in these respects, 1% (2%) that they did not, and 8% (5%) were unable to say.

Matrices and matrix bites

Launched in 2013, the alcohol and drug treatment matrices are portals to what the project judges to be the most important research and guidance for UK treatment practitioners, managers, and commissioners. Each matrix consists of a 5x5 table forming 25 cells, segmenting treatment in to the major practical divisions relevant to its effectiveness and delivery. Within each cell are the main seminal and contemporary research studies and reviews on these different aspects of treatment, guidance based on this research, and an option to search for other related documents in the Effectiveness Bank. Leading up to the current survey, for over a year an online ‘matrix bites’ course was built on the matrices, taking the form of a weekly commentary on each of the 25 cells in the two matrices. For more see: <http://findings.org.uk/matrices.php>.

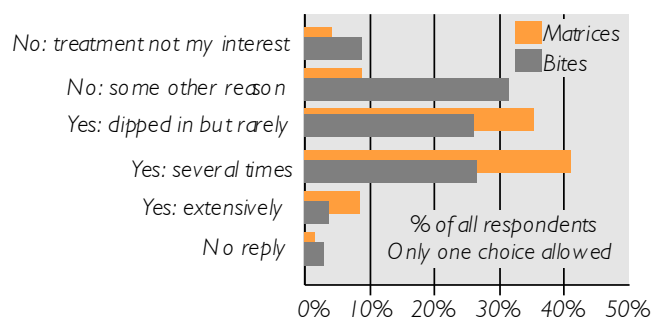
Several questions assessed reactions to these innovations and to the first round of the matrix bites courses. The results will be used to inform development of the matrices and second round of bites courses. Responses should be seen in the context of the matrices being designed to segment treatment in to topics (represented by the cells) of interest to different sectors of the workforce. Selective use is expected unless subscribers have an academic or occupational interest which spans treatment, harm reduction and criminal justice treatment interventions across drugs and alcohol. The same applies to the bites associated with each cell.

The survey introduced these resources and then asked, “Did you use either or both of the matrices since they were developed in mid-2013?” and “Did you access any of the weekly matrix bites commentaries – the online courses we ran during 2014?” Since the resources were mainly about treatment, respondents could indicate that they had not accessed them because not interested in treatment. Remaining respondents could indicate non-use for other reasons or use levels ranging up to extensive. Then respondents who had said they had used the matrices and/or the bites were asked to rate their usefulness.

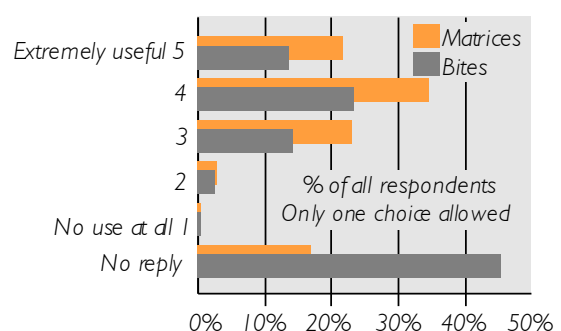
The chart to the right is based on all respondents. To supplement it, the following figures are based on all respondents who did *not* signify they had not used the resource because they had no interest in treatment – of 418 respondents in all, 400 for the matrices and 381 for the matrix bites. They can be interpreted as the respondents for whom the matrices and bites might have been of interest. Of these, 89% said they had accessed the matrices to some degree, but rarely extensively. “Several times” was the modal answer, given by 43%. With regard to the matrix bites, 62% had accessed them to some degree, again, rarely extensively.

Only respondents who indicated they had used these resources were asked to rate how useful they had found them. Though the chart to the right is based on all respondents, the following

Did you use either or both of the matrices or the weekly matrix bites?



If you answered 'Yes' above (ie, used these resources), how useful did you find the matrices/matrix bites?



analysis of usefulness ratings for the matrices and the bites is mainly based on respondents who said they had used the resources to some degree – of 418 respondents in all, 356 for the matrices and 236 for the bites.

Matrices

For the matrices, 66% who had used these rated them extremely useful or the step below, which can perhaps be interpreted as ‘very useful’. Just two respondents had apparently looked at them but found them no use at all, and one of these indicated that they had *not* looked at them because they had no interest in treatment.

Respondents were given the opportunity to explain their usefulness ratings. Of the 14 who found the matrices least useful (scores 1 and 2), three referred to time pressures or the time needed to get to grips with this way of presenting information; two found them confusing. At the other end of the scale, 35 of the 91 who found the matrices extremely useful explained why. Themes here were that the matrices provided a comprehensive overview of key research on treatment yet compartmentalised this overview in a way which made it easy to access and digest. Among the 71 comments from the 242 in-between respondents who scored usefulness at 3 or 4, both themes were in evidence – not feeling that one had enough time to make use of the matrices, and feeling that they saved time: “Evidence at one’s fingertips!”; “Pulls together a lot of information in a small space – saves time”; “A good spread of info and allows a rapid entry into topics that are highly relevant”. Reading between the lines, if what they matrices are offering (an overview of seminal and key treatment research generally or on a particular sub-topic) is what you are seeking, they are seen as a valuable, timesaving shortcut – they do their intended job. If this is not your current priority, then you do not invest the time to understand and make use of this unfamiliar way of presenting information.

Bites

Compared to the matrices themselves, the bites commentaries were accessed by fewer respondents (62% versus 89%) but those who did access them found them just as useful. As for the matrices, for the bites 66% of respondents who had accessed them rated them extremely useful or the step below, interpreted as ‘very useful’. Two respondents had found the bites no use at all, but both indicated they had not looked at them. The matrices consist of lists of research titles linked to sources and brief descriptions which require little effort. The bites are intended to be read through and to provoke in-depth reflection and discussion; they demand more work, but once undertaken, this is generally found rewarding.

Respondents were given the opportunity to explain their usefulness ratings. Of the 13 respondents who found the bites least useful (scores 1 and 2), two explained why: “I would like to explore this however I am quite time poor”; “I know a lot of this already, and don’t have the time to study them”. At the other end of the scale, 11 of the 57 who found the bites extremely useful explained why. From their comments it is clear they are used – and found very useful – in professional education and training: “... as a reference source when providing information and consultancy to other workers or agencies in the field and for providing advice to policy makers”; “Readily adaptable as resource material for staff education and service development”; “Will be recommending to course conveners”.

Among the 27 comments from the 158 in-between respondents who scored usefulness at 3 or 4 were some reminiscent of the comments on the matrices. A few respondents said they did not have the time to get to grips with the bites and found them too much, others found them accessible timesavers: “I like the fact that you break down the topic in to an easily manageable slice of information”; “Quick snap shots”; “Makes skills development very

accessible – love the fact that they are truly bite-sized when compared to most other info circulated elsewhere”.

Accreditation

The final matrix/bites question asked, “Would you use the matrices and bites more if you could be accredited for satisfactorily completing all or part of the matrix bites courses?” Over half of all respondents (54%) would do so or might depending on the nature of the accreditation, including just over a quarter (26%) of all respondents who said they would try to complete the course – a major commitment which seems to show the power of accreditation, given that at the moment without accreditation just 4% of respondents said they had used the bites extensively.

Of the 115 who said it would depend on the nature of the accreditation, 45 gave explanatory comments. Commonly they said accreditation would have to be credible and either nationally valid within their country or valid for their profession/sector. In other words, as one might expect, accreditation is often not valued for itself but for the career advantage and professional prestige it could confer. Also some specified that the required process should not be too lengthy or complex.

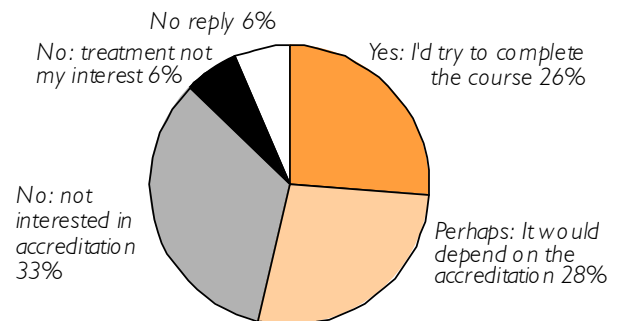
Open comments

The final substantive question gave respondents an opportunity to make a general comment not tied to any feature of the service: “Your chance to tell us in your own words how we are doing and how you would like us to develop our service”. In all 203 (315) comments were received from 49% (54%) of survey respondents. The full list is in Appendix 2.

Generally the comments indicated enthusiasm for the service and a desire for it to continue as it is, because it opens up access to research that would otherwise be unavailable to this largely practitioner group, and offers related insights and practice ideas. Its analyses are relied on and considered unbiased – the service has credibility. There was some desire for extensions to the service such as discussion forums and other media, for a more appealing, user-friendly presentation, and for versions targeted at other countries.

Would you use the matrices and bites more if you could be accredited for satisfactorily completing all or part of the matrix bites courses?

% of all respondents. Only one choice allowed



Appendix 1: Critical comments to 'Is service generally useful' question

Useful to see the research but not always confident that the data is robust enough

It takes a while to filter out the information that I am interested in from the vast amount of information that is shared.

its not always relevant and I don't find the page reader friendly.

I find the text-heavy layout and lack of clear formatting to break up paragraphs and sections on pages means that it's very difficult to read the content and extract the key facts and aspects. People scan content on web pages, and I think a new approach to the way you present information would help more people to use your excellent work more productively.

Research from other countries lacks quality. Analysis is not always the best.

topics sometimes esoteric (to me)

I like the emphasis on linking research with practice. But I find myself discouraged by the website and the format in which you present your work - clunky, unappealing, it doesn't grab my attention.

My interest is in prevention rather than treatment. Most of the interventions are individual-level rather than population-level. Would like the service to include policy-oriented research as well.

Stuck in the same time warp as much of the field - outdated simplistic or pointlessly quasi-scientific

Appendix 2. Open comments

Love the service and the snapshots it gives me. easy to followup further info if needed

Excellent, please keep the excellent work coming. It is greatly appreciated

Continue your excellent effectiveness papers!

Just continue the good work

I really appreciate the information even when it doesn't agree with my preconceptions. Especially then.

I think you provide a service validated by research and also making use of the available literature

Maybe you could expand the discussion about addiction to incorporate some of the behavioural addictions.

Extremely good information and data on drug and alcohol research and what is current in the field.

Great service, have been using it for years - long may it continue!

Thank you for the service. It is invaluable in that it does the difficult task of finding relevant articles for me.

You guys are doing very well. Please continue doing so. Congrats !

I lead a clinical service and am working hard to build a culture of reflective practice - the matrix bites and effectiveness bank offer potential as a ready and accessible means to improve our culture of practice.

Although more leaned to the GB side. The different drug aspects compiled gives a sound overview!

Good service in terms of disseminating research, but would also benefit from the research being critiqued.

Regarding item #7 below, there is no need to respond, but you are welcomed to should you wish; thank you for this service.

Don't always get to it when busy, but often useful always interesting.

Great work.

You are doing great. As i say I am concerned about the lost voice of Advocacy for this particular patient group.

hi, i'm working as a needle exchange worker and find the information re best practise etc fantastic, but i'm looking for information re; best practise in relation to information/advice given at needle exchange when giving "clean works" out. Cannot locate this information maybe you could direct me?

I work in prevention, so any info around this is great!

Overall the service suits my needs, and I am able to take from it what I need without too much difficulty.

I think you are doing well Keep it up. It is a valuable and much needed service very satisfied with service

Excellent for receiving up to date information when in a busy program.

I am impressed and go along with your current format but of course you will find you will develop your services

I am working with parents with substance misuse histories and would like research on the impact of this on pregnancy and young babies and children.

You are doing an excellent work, I am very

very helpful great to hear the same concerns from other sources

keep up the good work

For me, more medical and technical material welcome.

As previously mentioned this an excellent source for information.

i cite Findings in every course that i did. only i need to enlarge the vision on addiction in the world's large sense

my only issue is my own - making enough time to read it properly

I work in the youth AOD treatment field, so I am especially interested in evidence based resources and information and it would be great to see more information available from UK and international sources

I really like to find out that research is going on & I appreciate your commentaries/connections. I'm still often drowned in the complexities though.

I think the service is really good and allows me to be up to date on drug and alc issues. It saves me time and helps colleagues here at the University. I think more of the same

Unless I've missed certain parts/pieces, I'd like to see more data graphs w/ info broken down in parts thus not making some info so overwhelming to digest. All in all, the data and info has brought to light some areas I could be more open to, eg, Harm Reduction methodology/Ideology. Good job overall

Your doing great and I cannot think of anything to improve your service.

brilliant - how do you keep it up!

Great service

service is very useful to my practice and I wish I had known about the service sooner

I feel that if there were accreditation then many more workers in the field would be interested.

great work, please keep going as you are

As a student and then an early-stage researcher, I have found Effectiveness Bank an invaluable resource - thanks ever so much for all your hard work and dedication to improving the evidence base!

I don't access as much as I used to because my work focus has changed, but it's my first port of call when I have to respond to an AOD issues, especially when I have limited time

keep it up

i have engaged in the matrix & bites but would not have occurred to me to perceive it as a course - maybe more overt packaging of the 'course' aspect

Keep up with the literature

I think it is already a superb service and seems to be evolving in ways that suit me and my practice very well. I now have complete trust that the banks and I are philosophically on the same page

Genius!

You are doing just fine. I enjoy this service. Sometimes I wish there was an easier way to get the researcher's article but I can understand the difficulty.

Great stuff, keep it coming. I don't want to be able to do what you do, but I do want you to keep doing it for me. :)

I think you're service is fantastic but don't feel qualified to comment further.

FINDINGS is just brilliant! Keep up the excellent work.

Really like many of the research papers and email alerts. Often gives thought provoking ways to challenge current thinking or practice, although I often think that change to perhaps what I consider is more suitable models would require a dramatic shift in operational response which just wouldn't happen. Keep up the good work!!

I was recommended this service recently and have just started to use it. It has been really helpful in my work as a support worker in criminal justice social work.

Develop an designated area for a number of specific co-existing mental health and alcohol and drug problems.

I feel you are good at sharing the information that is working in other areas that others can access and try, great knowledge of the fields.

I think the layout of the site and graphics lets the site down a bit. It feels old and you lose a bit of faith in something when it doesn't look fresh in this world of fancy websites. I also think that some of the analysis can be narrow in areas where there is less large scale research however there may be other theoretical models that support some of the current practice in that area. It may be helpful to discuss that to give more context to the topic without however diluting the nature of the site (ie. evidence based). Overall a great site, I would say get the course accredited but as well as being stand alone try and align it to or make it part of a larger already known course such as FDAP, DANNOS, Skills Consortium package or a technical learning part of an NVQ in care and it would be very helpful. If it was stand alone you would have to be clear what your market was (I am sure you already are) and how this would add value. In my view it has the makings of becoming a fundamental part of the field and if it can become accredited and recognised in its own right that would be good. The CQC are major drivers for services these days so any accreditation should be inline with what they will see as valuable for a staff member to have. Excellent site overall and I do think you are doing a great job, a slightly slicker site, accredited learning that means something and is recognised and it would be even better. Also if there was some way to add another level discussing the subject more broadly that would be helpful for me but having said that you may lose the point of the site in doing so. Thanks for the work you have done it is a great resource.

all good

I appreciate the interesting tidbits of information.

there has been marked steps forward in the last couple of years - well done

very useful service thank you

Keeping going, some more comment from people working in the field, perhaps from different opposing viewpoints

Great, really appreciate access to the link.

Your service makes access to D&A relevant research easy

doing very well keep up your good work

Thank you :)

Last week I visited Herbert Marcuse (famous German sociologist) grave in Berlin. On his gravestone you find the inscription "weitermachen" = continue. So: Please continue. Great job, you do! Thanks so much.

Well

Please more evidence on impact on children as per
SUBSTANCEMISUSEANDCHILDWELFARE@JISCMAIL.AC.UK

It is useful. I get good sense of research evidence base, grouping research into topics really helpful

More international stats and resources and training would be the ultimate improvement or better yet a Canadian specific Effectiveness Bank.

Don't try mending something that isn't broken

useful and time saving in terms of surfing all the relevant literature for pertinent articles of interest.

I find the matrices and bites very beneficial and provides me with an overview of the information on drug and alcohol use in a very easy and readable fashion

As I said I find your website very useful as a way of supplying information to library users. I also think that my local public health staff do use it themselves.

Doing great, excellent source of a broad range of information

It is a great service and a resource I have passed on to others.

very well, keep it up

is there a searchable database of what's available from a "home page"?

I would like to see some local forums come out of this service; the needs in Scotland, especially in the NW remote and rural areas do differ from needs in other parts of UK (I have worked across the UK in my career) and local forums would help services get together and develop initiatives relevant to their geography / social systems

D&AF has an extensive range of information to access. Its easily available and provides me with the information and evidence I need to put together cases for change and continual development/improvement of our services. Keep up the good work and I would happily contribute in any way I could to help D&AF develop. Thanks

Sometimes the font and layout is too busy, it can be hard to navigate.

Please keep doing what you're doing, it's great!

Keep up the great work

Excellent resource - I hope it continues to be available to us

Excellent information and helpful when reflecting on practice

Continues to improve

Please also provide a Power Point presentation format the Summary of the findings to save time or make the downloads available in Microsoft Word Version.

Useful service

I would like to read more on this and come back to the survey and have a better answer and understanding.

Your service is invaluable - please keep up the good work.

I appreciate the information and sharing.

Thank you for so consistently provided such a high quality service.

great service, thank you!

no comments at this stage. However I am very grateful to receive such useful knowledge on almost a daily basis and I think that your "product" is very professional. Thank you.

you're doing great. i value your service. If it ain't broke, don't fix it

I am very grateful for such an excellent resource.

very useful service - thanks