

Supporting Statement
NATIONAL CENTER FOR COMPLEMENTARY AND ALTERNATIVE
MEDICINE

NCCAM CUSTOMER SERVICE DATA COLLECTION

Request for Revision

August 27, 2009

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Supporting Statement

Section A

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A.1.Circumstances Requiring the Collection of Data

This request for information is authorized by 42 USC 287c-21, which charges the National Center for Complementary and Alternative Medicine (NCCAM), a component of the National Institutes of Health (NIH), with "the dissemination of health information . . . with respect to identifying, investigating, and validating complementary and alternative treatment, diagnostic, and prevention modalities, disciplines, and systems." As the only entity within the Federal Government with responsibility for complementary and alternative medicine (CAM), NCCAM is committed to communicating clearly and effectively with all its constituencies. To ensure that NCCAM is serving all audiences through a variety of techniques and approaches, NCCAM is requesting clearance to continue to conduct a customer satisfaction survey for its phone service and to obtain feedback in order to improve program management. This survey helps determine if NCCAM is reaching its intended audiences through its outreach activities and if its responses to inquiries are satisfactory. The results help shape NCCAM's communications and outreach activities.

NCCAM has been conducting a telephone survey and a print newsletter survey under OMB number 0925-0520, expiration date September 30, 2009. As a result of the responses, NCCAM has been able to make important adjustments to its telephone service to be responsive to the public's needs.

In this application, clearance is requested for NCCAM to continue to collect customer service and demographic data from callers to the NCCAM toll-free telephone information service. NCCAM will discontinue the newsletter survey that was included in previous OMB packages.

Office of Communications and Public Liaison. Within NCCAM, the Office of Communications and Public Liaison (OCPL) serves as NCCAM's primary voice for communicating information about CAM to the nation.

The NCCAM Clearinghouse serves as the public's point of contact for scientifically based information on CAM and for information about NCCAM. Through its Clearinghouse, NCCAM responds to public inquiries made by telephone, e-mail, fax, Live Help, and TTY, in English and Spanish.

The NCCAM toll-free telephone information service helps serve the Center's mission as a source for scientifically based information on CAM and for information about NCCAM. In fiscal year 2008, the NCCAM Clearinghouse handled more than 10,000 inquiries.

Since NCCAM began administering the telephone survey in September 2003 through December 2008, a total of 39,531 telephone inquiries have been received, and 4,997 inquirers have responded to the survey. The gross response rate is 55 percent, and the adjusted response rate is 70 percent. (Information Specialists receive a computer-generated prompt to administer the survey for 25 percent of calls. The adjusted response rate excludes instances such as wrong

numbers and automated voice recordings, where it is inappropriate or not feasible to administer the survey.)

Data collected and analyzed through this survey have enabled the NCCAM Clearinghouse to improve customer service by fine-tuning its training of Information Specialists, tailoring its publications for appropriate audiences, and enhancing its program planning activities. For example, after finding that 70 percent of telephone service users are over age 50, NCCAM has pursued partnerships with constituent organizations and developed publications on topics such as complementary and alternative therapies for menopausal symptoms.

To ensure ongoing customer satisfaction, clearance is requested for a survey (see **Appendix A**), using methods described in Section B, of callers to the NCCAM telephone information service, to measure customer satisfaction.

A.2.Purposes and Uses of the Data

NCCAM's Approach in Assessing Customer Satisfaction. The following data are collected:

- How the customer would describe himself or herself (e.g., patient, family member, health care practitioner)
- Age
- Gender
- Education level

The data collected are used by NCCAM to provide program staff with ways to measure the impact of their communication efforts, tailor NCCAM services to the public and health care providers, measure service use among special populations, and assess the most effective media and messages to reach these audiences. A greater understanding of NCCAM's audiences and their knowledge bases and interests enables the refinement of program planning and implementation, materials development, and outreach to meet customer needs; it also permits development of targeted evaluation tools and performance measures.

The following description provides details on the purpose and use of the data collection effort included within this request. A copy of the survey instrument is included in **Appendix A**.

Telephone Survey. This survey asks approximately 25 percent of callers to the NCCAM toll-free telephone information service (1-888-644-6226) whether the respondent has taken the survey before, whether he or she has contacted NCCAM before, and about the appropriateness of information received, clarity of communication, overall satisfaction with information received, and demographic information, including the highest level of education achieved (only patients, spouses/relatives/friends of patients, and the general public are asked about education). If callers have taken the survey before, they are not asked any further questions. The telephone survey will be conducted for an additional 3 years, providing longitudinal data about NCCAM's callers, their information needs, and satisfaction with the telephone service.

- Data from the question on how the customer found the NCCAM telephone information service help determine which NCCAM outreach activities and communication channels are most effective.
- Asking how the caller categorizes himself or herself (patient, family, health care practitioner, etc.) helps clarify which audiences we are reaching and helps target programs and materials for various audiences.
- Knowing the race, ethnicity, and gender of callers helps to further understand what populations we are reaching or not reaching, and helps us appropriately target programs and materials.
- Combining data regarding race, ethnicity, and gender of callers with how the callers found the NCCAM telephone information service helps explain how specific audiences are being reached, and where deficiencies, if any, exist in outreach efforts.
- Asking about the caller's education level allows NCCAM to incorporate appropriate reading levels into its materials.
- Data about how the respondents rate the usefulness of information from the NCCAM telephone information service, combined with their education level, determines whether NCCAM is meeting customer needs with the use of plain language.
- Analyzing the data on customer satisfaction--in relation to data on types of callers (e.g., patient, health care practitioner) and their ages, locations, ethnicities, and races--helps NCCAM know if this service is responding appropriately and sensitively to all audiences.

Please see **Appendix B** for top-line data from the survey thus far. The data indicate that 98.5 percent of customers are overall satisfied with the service, and they offer insight into the demographic make-up of our customers. The specific data has been used to help refine standard operating procedures, standard response language, and has informed staff training.

A.3. Use of Information Technology To Reduce Burden

For the telephone survey, Information Specialists capture respondents' answers online through the use of computer-assisted telephone interview screens.

A.4. Efforts To Identify Duplication

NCCAM has been conducting a telephone survey since 2003.

The present request is to continue to conduct the telephone information service approved under OMB number 0925-0520, and to amend this approval to remove the print and online newsletter surveys as included in previous approvals.

NCCAM's approach is designed to ensure that NCCAM meets the needs of its audience with a variety of techniques and approaches.

The questions in the telephone survey are designed to collect information about members of the

public served by NCCAM. Other information providers do not currently collect this NCCAM- or CAM-related information. Unlike other health information services, NCCAM addresses all CAM modalities and practices and NCCAM-related research and news covering all health conditions and disease areas.

A.5.Small Business

This data collection is targeted to individuals or households. However, NCCAM audiences include physicians, CAM practitioners, and other health care providers. While physicians and CAM practitioners in private practice are considered small businesses (see 63 FR 13620), they are not asked to make available information from patient records; they are surveyed as individuals like other respondents.

The survey has been designed to be easy to complete and require no research on the part of the respondents. The survey primarily uses closed-ended questions and have been designed to minimize burden to the respondent.

Results from the telephone survey to date indicate that only 4 percent of callers are conventional health care providers (presumably physicians in private practice constitute an even smaller percentage) and less than 2 percent are CAM practitioners. In addition, only a 25 percent sample of callers is interviewed, further reducing the possible burden to physicians or other small businesses.

A.6.Consequences of Not Collecting the Information

Information for the telephone survey is collected once for each caller who falls into the 25 percent survey pool. If customers were surveyed less frequently, we would be unable to assess these changes.

A.7.Special Circumstances Justifying Inconsistencies with Guidelines in 5 CFR 1320.6

The data collection fully complies with all guidelines of 5 CFR 1320.5.

A.8.Consultation Outside the Agency

As required by 5 CFR 1320.8(d), comments on this information collection were solicited from the general public in a notice that appeared in the Federal Register, June 26, 2009 (Volume 74, Number 122, page 30577. No public comments were received.

The surveys were developed by NCCAM staff and contractor staff who respond to public inquiries and are similar to ones used by other NIH components. Staff from these components were consulted on recordkeeping, response rates, and reporting of data collected.

A.9. Payments or Gifts to Respondents

Respondents do not receive any payment or gift for answering the questions.

A.10. Assurance of Confidentiality

Information provided by respondents is kept confidential and private and is not disclosed to anyone besides the researchers or other persons conducting the surveys, except as required by law. This is conveyed by explanatory text contained in the surveys. Before data are collected, participants are advised of the following:

- Nature of the data collection
- Purpose and use of the data collected
- NCCAM sponsorship
- Voluntary nature of participation at all times

All respondents are assured that responses are voluntary and that they may decline to respond either to the data collection as a whole or to any particular question. As a further assurance of confidentiality, all presentations of data in reports are made in aggregate form; no links to individuals are preserved.

NCCAM staff adheres to a policy whose purpose is to guarantee caller anonymity and ensure that the privacy and/or confidentiality of the respondent is maintained. **Appendix C** presents NCCAM policy number 140-000, "Caller Anonymity."

The NIH Privacy Act Officer has reviewed the scope of this proposal and has determined that the Privacy Act does not apply to this data collection (**Appendix D**). Data are not retrieved by personal identifiers, and raw data that include personal information are not retained once the data have been aggregated.

This request for OMB clearance is exempt from the "Regulations for the Protection of Human Subjects," in accordance with paragraph (b)(3) of 45 CFR Sec. 26.101.

A.11. Questions of a Sensitive Nature

There are no questions of a sensitive nature. NCCAM does not collect any personal information.

A.12.Estimates of Response Burden

The respondent's burden from the telephone survey results solely from the time spent responding to the questions, estimated to average 4 minutes and 30 seconds. This estimate of burden includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Improved technology in the collection and processing of data is used to reduce respondent burden and make processing maximally efficient.

A.12.1.Number of Respondents, Frequency of Response, and Annual Hour Burden

An annualized estimate for this information collection (Table A.12-1) was prepared based on results from the telephone surveys through December 2008.

The annual reporting burden is shown in the table below. The estimate used in the calculation of total burden is 0.075 hours for the telephone survey. The annual number of respondents for the telephone survey is estimated at 983 based on survey results through December 2008.

A.12-1 Estimates of Hour Burden				
Type of Respondents	Estimated number of respondents	Estimated number of responses per respondent	Average burden hours per response	Estimated total annual burden hours requested
<i>Telephone survey</i>				
Individuals or households	919	1	0.075	69
Physicians	44	1	0.075	3
CAM/health practitioners	20	1	0.075	2

A.12.2.Hour Burden Estimates by Each Form and Aggregate Hour Burdens

An estimate of annualized cost to respondents for the hour burden for this information collection is presented in Table A.12-2. There are no direct costs to the respondents themselves. The cost to respondents may be calculated as the cost of their time spent in responding to the questions. Based on an estimate of \$18.00 per hour for individuals, \$66.00 per hour for physicians, and \$39.00 per hour for other health care practitioners and an annualized estimated total burden of 73 hours, the annualized cost to respondents for the telephone survey would be \$1,479.

A.12-2 Annualized Cost to Respondents			
Type of respondents	Number of hours	Hourly wage	Respondent cost
<i>Telephone survey</i>			
Individuals or households	69	\$18	\$1,242
Physicians	3	\$66	\$198
CAM/health practitioners	1	\$39	<u>\$39</u>
			\$1,479

A.12.3.Estimates of Annualized Cost to Respondents for the Hour Burdens

Estimates of annualized costs to respondents for the hour burdens are provided in section A.12.2.

A.13.Estimate of Total Capital and Startup Costs/Operation and Maintenance Costs to Respondents or Record Keepers

There are no capital costs to report. Operating and maintenance costs include contractor labor for system maintenance, data collection, data entry, analysis, and report writing. Total operating and maintenance costs are computed based on the following contractor labor:

- Telephone data collection and newsletter data entry
- Data collation and editing
- Monthly and annual report generation

A.14.Estimates of Costs to the Federal Government

The estimated average annual cost to the Federal Government during the 3-year period of the information collection for the telephone survey is \$10,193. Costs are based on estimated hours per labor category for each operational task shown in Table A.14-1.

A.14-1 Annual Cost to the Federal Government					
Labor	FY09	FY10	FY11	Total	Annualized
<i>Telephone survey</i>					
System maintenance	\$1,944	\$2,041	\$2,143	\$6,128	\$2,043
Data collection	\$4,821	\$5,062	\$5,313	\$15,196	\$5,065
Analysis/reporting	\$2,936	\$3,083	\$3,237	\$9,256	\$3,085
Telephone Survey Total	\$9,701	\$10,186	\$10,693	\$30,580	\$10,193

A.15.Changes in Burden

This is a revision with the total annual hours decreasing. Burden hours and the cost to the Federal Government have been adjusted based on actual results of previous surveys of these services. Burden hours are also adjusted to reflect the elimination of the previously included newsletter survey.

A.16.Plans for Publication, Analysis, and Schedule

A projected time schedule for the completion of the surveys for which OMB clearance is requested is displayed in Table A.16-1.

A.16-1 Project Time Schedule	
Activity	Time schedule
<i>Telephone survey</i>	
Data collection	Continual
Data analysis	Continual
Report on survey	Monthly

A.17.Approval to Not Display Expiration Date

There is no reason not to display the OMB control number and expiration date.

A.18.Exceptions to Item 19 of OMB Form 83-I

There are no exceptions to item 19, "Certification for Paperwork Reduction Act Submissions," of OMB 83-I.