## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0960-0788)

**TITLE OF INFORMATION COLLECTION:** Ticket to Work (TTW) Work Incentive Seminar Events (WISE) Satisfaction Survey

**PURPOSE:** Ticket to Work (TTW) is a Social Security Administration (SSA) program that offers adults age 18 through 64 who receive Social Security Disability Insurance (SSDI) benefits and/or Supplemental Security Income (SSI) payments greater choices for receiving employment services. Under this program, eligible persons may seek services from an entity known as an Employment Network or from their State Vocational Rehabilitation Agency to achieve their employment goals.

Work Incentive Seminar Events (WISE) are webinars that allow experts to share information about the TTW program and Social Security work incentives with audience members who include Social Security beneficiaries and their family members, community partners and EN staff. SSA plans to conduct 18 monthly WISE webinars annually, and we estimate 5,000 persons will attend. To ensure WISE events are providing effective and quality service, we need to assess the levels of understanding and awareness that participants gain from attending these events. Additionally, SSA seeks to know if different aspects of the events meet the participants’ needs.

This survey will ask participants to rate the experience provided by the WISE events as it pertains to their ability and desire to participate in the TTW program.

**DESCRIPTION OF RESPONDENTS**:

We are planning to survey approximately 5,000 SSDI beneficiaries and SSI recipients, EN employees, and community partners who attend WISE events annually. We will provide an electronic survey link for those attending these virtual meetings.

This proposed survey will be a quantitative survey. The survey responses will be strictly voluntary and anonymous. We will not provide any payments/stipend to participants.

**TYPE OF COLLECTION:** (Check one)

[ ] Customer Comment Card/Complaint Form [X] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software [ ] Small Discussion Group

[] Focus Group [ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name:\_**Faye Lipsky, Reports Clearance Officer, Social Security Administration**

To assist review, please provide answers to the following question:

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected? [ ] Yes **[X] No**
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [ ] Yes [ ] No **N/A**
3. If Applicable, has a System or Records Notice been published? [ ] Yes [ ] No

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [ ] Yes **[X ] No**

**BURDEN HOURS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent** | **No. of Respondents** | **Participation Time (minutes)** | **Burden**  **(hours)** |
| Survey respondents | 5,000 | 5 | 417 |
| **Totals** | **5,000** | 5 | **417** |

**FEDERAL COST:** The estimated annual cost to the Federal Government is $0 (no cost).

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

**The selection of your targeted respondents**

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe? **[ X] Yes** [ ] No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

**The sampling universe is all attendees who receive Social Security Disability Insurance benefits and/or SSI disability payments who attend the virtual WISE events along with attending EN staff and community partners. No sampling strategy is proposed – all attendees will be invited to participate.**

**The expected response rate is 50 percent, which is based on our prior experience in surveying this population.**

**B. Describe the procedures for the collection of information:**

We will collect responses from webinar attendees using an electronic (online) survey. We will estimate means for all respondents from each event based on the survey responses received.

There are no unusual problems requiring specialized sampling procedures.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)

[X ] Web-based or other forms of Social Media

[ ] Telephone

[ ] In-person

[ ] Mail

[ ] Other, Explain

1. Will interviewers or facilitators be used? [ ] Yes [X ] No