

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 2900-0571)

TITLE OF INFORMATION COLLECTION: NATIONAL CEMETERY ADMINISTRATION (NCA) SATISFACTION SURVEYS

PURPOSE:

In keeping with its vision to be the model of excellence for burial and memorials for our Nation's Veterans and their families, the National Cemetery Administration (NCA) added a new survey instrument to its collection titled, State Veterans Cemetery Customer Satisfaction Survey.

In addition, NCA made the following changes to existing collections:

- NCA National Customer Satisfaction Survey (Next of Kin and Funeral Directors)
- NCA Headstone and Marker/PMC Survey (Next of Kin and Funeral Directors)

The survey changes implemented below do not present an additional burden on the respondents. These non-substantive changes will not have a significant impact on the respondent or increase burden hours.

2013 Customer Satisfaction Survey

Questions for Next of Kin:

Added question

13. Did the funeral home provide you or show you a copy of the cemetery video on military honors?

Questions for Funeral Directors:

Added question(s)

- N. Are you aware of the cemetery video on military honors?
- O. Do you typically provide this video on military honors to the next of kin?

Modified Question R.

Changed from: How long does it typically take to confirm the scheduling of an interment with the national cemetery.

Changed to: How long does it typically take to confirm the scheduling of an interment with the National Cemetery Scheduling Office.

Modified Question o.

Changed from: The appearance of my loved one's gravesite /columbaria is excellent

Changed to: The appearance of my loved one's gravesite /columbaria is excellent (next of kin only)

VA Memorial Products Survey for Funeral Directors

Added question(s)

- 3a. How interested are you in ordering the VA headstones, markers, or medallions online?
- 5c. Do you consider the following “terms of endearment” as appropriate?
- 6a. How aware are you of the changes to VA Form 40-1330 and VA Form 40-1330M, and the requirement for the next of kin signed or delegation of representation?

VA Memorial Products Survey for Next of Kin

Added questions

- 7b. Do you consider the following “terms of endearment” as appropriate?
- 17a. Are you aware of the veteran-dual benefits?
- 17b. Which of the following war eras did you serve in?

Modified Question 13a.

Changed from: If you ordered a Bronze headstone, marker or medallion, what unexpected amounts were you required to pay?

Changed to: If you ordered a Bronze marker, what unexpected amount were you required to pay?

Modified Question 13b.

Changed from: If you ordered a Stone headstone, marker or medallion, what unexpected amounts were you required to pay?

Changed to: If you ordered a Granite/Marble headstone, what unexpected amounts were you required to pay?

DESCRIPTION OF RESPONDENTS:

Respondents are Next-of-Kin of Veterans and Funeral Directors

TYPE OF COLLECTION: (Check one)

- | | |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> 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.

- 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: Faith Walden

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

Personally Identifiable Information:

- Is personally identifiable information (PII) collected? Yes No
- If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? Yes No
- If Yes, has an up-to-date System of Records Notice (SORN) been published? Yes No

Gifts or Payments:

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

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
1 Next of Kin	15.000	30 mins	7,500 hours
2 Funeral Directors	15.000	30 mins	7,500 hours
Totals	30,000	60 mins	15,000 hours

FEDERAL COST: The estimated annual cost to the Federal government is _____

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

- 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?
 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?

Respondents are randomly selected from the Burial Operating Support System.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)
 - Web-based or other forms of Social Media
 - Telephone
 - In-person
 - Mail
 - Other, Explain
2. Will interviewers or facilitators be used? Yes No

Please make sure that all instruments, instructions, and scripts are submitted with the request.

Instructions for completing Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback”

TITLE OF INFORMATION COLLECTION: Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

PURPOSE: Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

DESCRIPTION OF RESPONDENTS: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

TYPE OF COLLECTION: Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

CERTIFICATION: Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

Personally Identifiable Information: Provide answers to the questions. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

Gifts or Payments: If you answer yes to the question, please describe the incentive and provide a justification for the amount.

BURDEN HOURS:

Category of Respondents: Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households;(2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected per row.

No. of Respondents: Provide an estimate of the Number of respondents.

Participation Time: Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

Burden: Provide the Annual burden hours: Multiply the Number of responses and the participation time and divide by 60.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.

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. Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

Administration of the Instrument: Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

Submit all instruments, instructions, and scripts are submitted with the request.