

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 2900-0770)

TITLE OF INFORMATION COLLECTION: VA Info App

PURPOSE: Human Factors Engineering (HFE) aims to recruit a number of Veterans to take a questionnaire in order to validate the priority of feature included in the application. The questionnaire was drafted and approved by the VA InfoApp’s project manager and was based upon the draft functional requirements document.

DESCRIPTION OF RESPONDENTS:

HFE contract staff will recruit, screen, and recruit 30 Participants according to the following profile:_

- Veteran Status (development team will provide credentials for access to the test site)
- Ability to use a standard desktop computer or laptop
- Age Range
 - 20 to 29 (20% or approx. 4 to 6 Users of onsite Veterans Health Administration (VHA) services)
 - 30 to 39 (20% or approx. 4 to 6 Users of onsite VHA services)
 - 40 to 49 (20% or approx. 4 to 6 Users of onsite VHA services)
 - 50 to 59 (20% or approx. 4 to 6 Users of onsite VHA services)
 - 60+ (20% or approx. 4 to 6 Users of onsite VHA services)
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- Familiarity with mobile application
 - Used mobile applications (30% or approx. 8 to 10 Users of onsite VHA services)
 - Use MyHealthVet (MHV) Monthly (30% or approx. 8 to 10 Users of onsite VHA services)
 - Use MHV Weekly (30% or approx. 8 to 10 Users of onsite VHA services)
- Gender Mix
 - 75 % Male (approx. 18 to 23 MyHealthVet Users)
 - 25% Female (approx. 7 to 10 Users of onsite VHA services)

TYPE OF COLLECTION: (Check one)

- Customer Comment Card/Complaint Form Customer Satisfaction Survey
 Usability Testing (e.g., Website or Software) Small Discussion Group

Focus Group

Other: App Feature Value Questionnaire

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: John William Brown

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

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? Yes No
2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? Yes No
3. 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 *(sample calculation in grey)*

Category of Respondent	No. of Respondents	Participation Time (× minutes =)	Burden (÷ 60 =)
Individuals – questionnaire respondents	30	x 30 = 900	15 hrs
Totals			15 hrs

FEDERAL COST:

The total cost to the Federal Government is approximately \$9077.46.

(a) Cost for Participants

$$30 \text{ participants} \times \$250 \text{ per participant} = \$7500$$

This cost was determined from the participant contract broken down by total number of allotted participants, this cost has already been paid for upfront in the contract in effect.

(b) Cost for Employee Work Hours

1 Employee GS-13 (\$43.28/hr x (Loaded Rate Modification 1.30) x 24 work hours = \$1350.34

1 Employee GS-11 (\$28.39/hr) x 8 work hours = \$227.12

This includes employment cost x labor hours for the primary team member of the project in addition to the cost of the reviewing team member of the final documentation.

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?

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?

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.