

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0642; Expiration Date: 08/31/2017)

TITLE OF INFORMATION COLLECTION:

Customer Satisfaction Survey for the Office of Management Policy and Compliance (OMPC) (NCI)

PURPOSE:

The Office of Management Policy and Compliance (OMPC), part of the Office of Management in the Office of the Director, at the National Cancer Institute is responsible for a variety of functional areas including: Delegations of Authority, Management Review, Organization Change, Paperwork Reduction Act/OMB clearance, Policy, Process Mapping, Records Management, and Risk Management. This customer satisfaction survey is being used to gather feedback to monitor existing services and improve service delivery. To date, there have been no other customer satisfaction surveys conducted in OMPC.

DESCRIPTION OF RESPONDENTS:

Respondents will include NCI staff and contractors who use OMPC’s services and access OMPC’s materials and website.

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.
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: _____ Vivian Horovitch-Kelley _____

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
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

ESTIMATED BURDEN HOURS and COSTS

Category of Respondent	No. Respondents	No. Responses per Respondent	Time per Response (in hours)	Total Burden Hours
Individuals	200	1	5/60	17
Totals		200		17

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Individuals	17	\$41.78	\$710.26
Totals			\$710.26

* Calculated by taking the average of mean hourly wage rate of Management Analysts, (Occupation Code #13-1111) and Operations Research Analysts (Occupation Code #15-2031). http://www.bls.gov/oes/current/oes_nat.htm#19-0000 -

FEDERAL COST: The estimated annual cost to the Federal government is \$15,356.75

Staff	Grade/Step	Salary	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Management Analyst	13/4	\$99,905	10%	0	\$9,990.50
Supervisor	14/1	\$107,325	5%	0	\$5,366.25
TOTAL					\$15,356.75

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?

The respondents are individuals who are in contact with OMPC and use the services and/or information materials. All respondents who contact OMPC can voluntarily complete this survey. Respondents will be made aware of the survey through word-of-mouth and they will be able to directly access the survey through a link provided in the signature line of OMPC staff members.

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.

Attachment 1: Screenshot of OMPC Customer Satisfaction Survey