

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0970-0401)**

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**TITLE OF INFORMATION COLLECTION: Solicitation of Opinions for 2017 ACF Native American Grantee Meeting**

**PURPOSE:** The Administration for Children and Families (ACF) in the Department of Health and Human Services (HHS) Native Americans (ANA) is planning a Native American Grantee Meeting July 25-27, 2017 in Washington DC.

This is a request for approval by the Office of Management and Budget (OMB), under the Federal Paperwork Reduction Act of 1995, for a new data collection task to be added to the Administration for Children and Families’ already approved generic OMB clearance # 0970-0401.

In years past, ACF’s Native American Grantee Meetings did not always develop meeting content that met the particular needs of ACF’s grantee population. This year, to ensure topics presented in the 2017 Native American Grantee Meeting are aligned with the needs and interests of ACF grantees, respondents are asked for their opinions on meeting topics they are useful and of interest to them from a list of possible meeting content.

This collection of information is necessary to enable ACF to garner customer and stakeholder feedback in an efficient, timely manner, in accordance with our commitment to improve service delivery and experience. The information collected from our customers and stakeholders will help ensure not only that users have a useful experience with the 2017 Native American Grantee Meeting, but it will also allow ACF to work continuously to ensure that our programs are effective and meet our customers’ needs through the collection of qualitative feedback that will provide us with useful and timely insights on grantee and stakeholder perceptions and opinions.

Information received will only be used internally to substantively improve ACF service delivery and will not be released outside ACF. It is targeted to the solicitation of opinions from respondents who have experience and service needs as ACF grantees. This feedback will provide timely and relevant qualitative information to help ACF identify and provide supportive programming for specific service needs as well as to focus attention on areas where communication, training or changes in operations might improve delivery of ACF services.

Responses will be assessed to plan and inform efforts to improve or maintain the quality of service offered at the Native American Grantee Meeting to grantees and stakeholders to the public. If this information is not collected, vital feedback from customers and stakeholders on ACF’s services will be unavailable. This collection is targeted to the solicitation of opinions from respondents who have experience with ACF programs or may have experience with ACF programs in the near future.

Information gathered through this voluntary collection will only be used internally for general service improvement and ACF program management purposes and is not intended for release outside of the agency. Information gathered will yield qualitative information and is not designed or expected to yield statistically reliable results or used as though the results are generalizable to

any population. The collection is designed to be low-burden for respondents with no or *de minimis* cost for both respondents and ACF.

**DESCRIPTION OF RESPONDENTS:** Survey respondents are ACF Native American grantees. An estimate of the annual response burden is outlined in the following table.

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

- |  |   |
|--|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form          | <input 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 checked="" type="checkbox"/> Other: <u>Customer Opinion Solicitation</u> |

**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.

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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**

Category of Respondent	No. of Respondents	Participation Time	Burden
State, local, or tribal governments	800	0.16 (10 minutes)	133 hours
Private sector		0	0

Federal Government		0	0
<b>Totals</b>			<b>133 hours</b>

**FEDERAL COST:** The estimated annual cost to the Federal government is approximately \$0

**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? **Each ACF program office will utilize their grantee lists.**

The above figures are based on an estimate of approximately 0.052 hour per response to respond and submit each online survey. The potential group of respondents is based ANA’s current grantee pool. The survey will be sent out to these grantees requesting their input.

**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”**

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**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 (in minutes) 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 Respondents and the Participation Time then 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.