Request for Approval under the "DOI Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery" OMB Control Number: 1090-0011

TITLE OF INFORMATION COLLECTION: National Park Service Office of Public Health On-line Customer Satisfaction Survey

PURPOSE:

The NPS Office of Public Health (OPH) would like to use a Customer Satisfaction Survey to collect information that will be used to identify areas of strength and weakness of our programs and services. The survey will be used as a feedback mechanism for program improvement.

DESCRIPTION OF RESPONDENTS:

The respondents will be any individual or representative of an entity who receives technical support from a member of the OPH staff.

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 <u>not</u> raise issues of concern to other federal agencies.
- 4. The results are <u>not</u> intended to be disseminated to the public.
- 5. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> 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: Sarah Newman, Director, NPS Office of Public Health (OPH)

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

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 (If yes, please explain.)

BURDEN HOURS

Category of Respondents	No. of Respondents	Participation Time	Burden
Private Sector	1,200	3 minutes	60 hours
Totals	1,200	3 minutes	60 hours

FEDERAL COST: The estimated annual cost to the Federal government is \$5,000. This includes salaries and benefits for OPH staff to administer this information collection. Currently there are three members of the staff ranging from GS11 to GS13 who spend no more than 10 minutes a week colleting this information.

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.

Respondent Universe and Sampling Plan: The respondent universe for this collection will be all customers (n=6,000) receiving email correspondences from OPH. We anticipate receiving 1,200 completed responses with a rate of 20%. The customers in this sample will consist of concessioners, contractors, and facility operators.

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

Instrument Administration: All correspondences are typically transmitted via email. Within the email there will be an invitation to provide feedback about our services by completing a short survey. This invitation will include the URL for the survey. Upon clicking the link (or cutting and pasting it into their browser) the customer will be directed to a 9 question survey that will be administered using Survey Monkey. The respondent will be able to complete the survey in three minutes or less.

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

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

ATTACHED

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.

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.

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 in minutes 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.

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