Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 0920-0953)

TITLE OF INFORMATION COLLECTION:
User Feedback Questionnaire for ERHMS Info Manager

PURPOSE:
The Centers for Disease Control and Prevention (CDC), National Institute for Occupational Safety and Health (NIOSH) seeks approval from the Office of Management and Budget (OMB) to collect feedback from the Emergency Responder Health Monitoring and Surveillance (ERHMS) Steering Committee and ERHMS Info Manager pilot testers to review and assess the functionality and implementation of software compared to the functions outlined in the ERHMS Technical Assistance framework document.

Significant gaps and deficiencies continue to exist in health monitoring and surveillance provided to the 3.5 million emergency response workers. The persistence of these gaps emphasizes that there remains a need for a coherent, comprehensive approach to protecting these workers. The solution to this problem is a health monitoring and surveillance framework, called the Emergency Responder Health Monitoring and Surveillance (ERHMS) system that includes specific recommendations and tools for all phases of a response. We are developing ERHMS Info Manager as a market-ready software product that will help end-users adopt the ERHMS framework. It will provide the underlying data repository and collection methodology for critical ERHMS information as well as the training that the users need to successfully carry out the various components of the recommended ERHMS framework.

To ensure that ERHMS Info Manager will satisfy our customers' needs, NIOSH proposes to collect information on the user-friendliness of the software, features and functions included in the software, ability of the software to perform its intended task, and considerations for future development of the software.

DESCRIPTION OF RESPONDENTS:
Respondents will be the ERHMS Steering Committee and ERHMS Info Manager pilot testers who have collaboratively helped with the development of the software. This group is composed of Federal employees, State health departments, non-governmental organizations, and private businesses—all with roles in emergency response.

TYPE OF COLLECTION: (Check one)

[ ] Customer Comment Card/Complaint Form   [ ] Customer Satisfaction Survey
[X] 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:

Chad H. Dowell, Deputy Associate Director for Emergency Preparedness and Response, NIOSH

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

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
State health department and professionals	55	15/60	14
Non-governmental organizations	5	15/60	1
Private business	5	15/60	1
Total	**65**		**16**

FEDERAL COST: The estimated annual cost to the Federal government is $200.00 (personnel time)

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
[X] Mail
[ ] Other, Explain
2. Will interviewers or facilitators be used? [ ] Yes [X] No