## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0923-0047)

**TITLE OF INFORMATION COLLECTION:** Post-Meeting Survey of State, Local, and Tribal Government Attendees at the NACP Grantee Meeting 2018

**PURPOSE:** The purpose of this data collection request is to collect feedback from state, local, and tribal government attendees on the National Asthma Control Program (NACP) Grantee meeting, which will be held March 6 – 8, 2018.

The National Center for Environmental Health’s NACP helps Americans with asthma achieve better health and improve their quality of life. The program funds states, school programs, and non-governmental organizations to help them improve surveillance of asthma, train health professionals, educate individuals with asthma and their families, and explain asthma to the public. These activities occur under three current cooperative agreements—Funding Opportunity Announcement (FOA) EH 14-1404, EH 15-1503, and EH 16-1606. Eligible applicants include state and territorial governments or their bona fide agents or non-governmental organizations (NGOs).

The purpose of the annual NACP Grantee Meeting is to assemble CDC’s asthma program and asthma grantees in Atlanta, Georgia to share information on program direction, share lessons learned among state grantees, and plan future initiatives and provide training opportunities. The meeting objectives are to: 1) improve communication between CDC and organizations that have cooperative agreements with the agency; 2) provide technical assistance on how to establish and maintain an effective asthma surveillance system and intervention program; 3) interact with colleagues from across the country to discuss scientifically proven interventions; and 4) provide program guidance related to future directions for CDC’s NACP based on the current funding opportunity announcement.

The proposed information collection consists of a survey designed to collect feedback from

NACP grantees regarding their satisfaction with the NACP Grantee Meeting 2018. The information collected will be used to inform and improve planning of future grantee meetings.

**DESCRIPTION OF RESPONDENTS**: In total, there will be approximately 120 attendees at

the NACP Grantee Meeting 2018. Of the 120 attendees, a total of 90 are not federal employees.

The online survey questionnaire (Attachments B and C) will be offered to all 120 meeting attendees, consisting of NACP funded grantees (State, NGO, or their contracted employees) and federal employees (see Table 1 below). This information collection request is for approval to survey state, local, or tribal government attendees (n=70). A separate information collection request has been submitted for approval to survey NGO attendees. We want to acknowledge that although we are including federal employees in the burden table, we are not assessing their burden because they are participating as part of their official job responsibilities.

Table 1. Attendees grouped by affected public

|  |  |
| --- | --- |
| **Affected Public** | **Number of Attendees** |
| Federal employees | 30 |
| State, Local, or Tribal Governments | 70 |
| Private Sector (non-governmental organizations) | 20 |

**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 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:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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** |
| 2018 NACP Meeting Attendees (State, Local, or Tribal Governments) | 70 | 10/60 | 12 hours |
| 2018 NACP Meeting Attendees (Federal stakeholders) | 30 | 10/60 | 0 hours |
| **Totals** | **100** |  | **12 hours** |

**FEDERAL COST:** The estimated annual cost to the federal government is $199.04. This cost reflects approximately 4 hours of salary (GS-0601-13) for one staff person to design and implement the survey, and draft an internal report of results.

**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?

The survey will be emailed to all attendees of the NACP Grantee Meeting 2018. Attendees’ email addresses will be used to send out the electronic survey.

**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

1. Will interviewers or facilitators be used? [ ] Yes [ x ] No

The program will use SurveyMonkey® to collect the online survey responses. The use of SurveyMonkey® has been reviewed and approved to be compliant with HHS IT security

standards. An IT security plan is in place for this application.

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

The following attachments are included:

Attachment A: Email Invite for the NACP Grantee Meeting Feedback

Attachment B: NACP Grantee Post Meeting Survey\_screenshot

Attachment C: NACP Grantee Post Meeting Survey\_text