

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0920-0974)

TITLE OF INFORMATION COLLECTION: Evaluating the Applicability and Use of The Community Guide among Substance Abuse and Mental Health Services Administration (SAMHSA) Grantees

PURPOSE:

The purpose of this project is to gather baseline data to assess Task Force Liaison (TFL) organizations and their constituent’s level of awareness and how TFLs use, share, and prefer to receive support in using The Community Guide. This project is part of an overall goal to evaluate the awareness and use of The Community Guide (website) among TFL organizations.

DESCRIPTION OF RESPONDENTS:

SAMHSA, Center for Substance Abuse Prevention, Division of Community Programs and Division of State Programs Grantees

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: Anita Alston Ellis

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, 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 No

BURDEN HOURS

We estimate it will take no more than 15 minutes to complete the survey. We are seeking to collect feedback from approximately 1021 grantees. Based on preliminary conversations with SAMHSA staff and this survey being voluntary, we anticipate 255 grantees to respond, resulting in total of 64 burden hours. The table below displays this breakdown.

Category of Respondent	No. of Respondents	Participation Time	Burden (hours)
Total # of Grantees we anticipate to respond	255	15	64
Total # of burden hours			64

FEDERAL COST: The estimated annual cost to the Federal government is \$3,960. The table below includes the estimated amount of time spent and annual cost for one FTE and one non-FTE Community Guide Branch staff.

Category of Employees	No. of Employees	Hourly Rate	No. of Hours	Annual Cost
FTE staff	1	43	60	2580
Non-FTE staff	1	26	20	520
Totals	2	69	80	3100

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? Y 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?

SAMHSA staff will distribute the survey to community and state grantees via their internal email system. Responses will be collected and exported via the Survey Monkey tool however is not directly linked to SAMHSA grantees.

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.

Attachments include:

Worksheet Part II
Recruitment email for Grantees
Follow-up email for Grantees
Screenshots of Survey instrument
Pdf of Survey Instrument