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

TITLE OF INFORMATION COLLECTION: State Capacity Building Center Specialized Resources TA Feedback Collection

PURPOSE:

The ACF Office of Child Care is seeking approval to collect feedback from users of five specialized resources in order to learn if these resources are useful and how they can be improved. These resources are: 1) Early Childhood Systems Building Guide and Tools; 2) Child Care and Development Fund Fundamentals Resource Guide; 3) Emergency Preparedness and Response Materials; 4) Infant and Toddler Policy Planning Tool; and 5) Infant and Toddler Resource Guide. These resources were developed to meet the key priorities of the State Capacity Building Center. The information gathered will be used to inform planning and improvement of future resource development by the Office of Child Care.

The Child Care State Capacity Building Center (SCBC) is funded by the Office of Child Care to provide evidence-informed training and technical assistance services for State and Territorial public child care agencies and their partners. The SCBC has three teams—1) State Systems Specialist Network (SSS Network), 2) Infant Toddler Specialist Network (ITS Network), and 3) Intensive Capacity Building Network (ICB Network), each of whom focuses on different areas, deploys a variety of technical assistance strategies, and works with a wide and differing variety of state staff and their partners.

- State Systems Specialist Network. The audience for the State Systems Specialist Network is the state Child Care and Development Fund (CCDF) administrator, state staff and partners.
- Infant Toddler Specialist Network. The audience for the Infant Toddler Specialist Network are individuals working in states (in state government as well as their partners).
- The Intensive Capacity Building Network (ICB Network) provides *intensive tailored* technical assistance through long-term (24 to 48 months) consultation to 9 states and territories who applied to participate in this work, known as the Impact Project.

Under this generic clearance request, the Office of Child Care will seek feedback from recipients of five specialized resources developed to support the work of either the SSS Network or the ITS Network. The proposed survey will be sent out to individuals who have been provided with the specified resources as part of the technical assistance services that they receive from the SSS Network or the ITS Network. The purpose of the survey is to learn whether the resources are clear, practical and add value to the users. .

The Network staff records the use of the specialized resources in an administrative data base, which will trigger the receipt of the survey. Completed survey information will be reviewed by the SCBC evaluation team and the SCBC leadership team to identify areas of strength and weakness to develop recommendations to improve the provision of specialized technical assistance resources.

Overall, the survey information will be used to improve technical assistance resources to best meet the needs of users for quality, practical information.

DESCRIPTION OF RESPONDENTS:

Respondents will be individuals who received the specialized resources from the SSS network or the ITS network. These individuals include state government staff (who are ACF grantees) as well as staff of state partners. State partner organizations include non-profit organizations who provide professional development, technical assistance, and other services in support of child care, and child care programs.

The State Capacity Building Center has an administrative data base, created at the direction of the Office of Child Care, in which it records information about the technical assistance it provides. This data base includes information about whether the specific resources that trigger the use of this survey have been used and the person who was provided with the resource for its use. Using the information in the data base, the State Capacity Building Center will identify the users of the resources and will email these individuals inviting them to complete the voluntary survey in the month following their receipt of the resources. Sending this survey in the month after the specialized resource was provided, rather than waiting until all technical assistance services that may relate to the topic are concluded, will yield the most timely and accurate feedback about the value of the resources. It is estimated the collection of specialized resources will be used by 36 individuals

TYPE OF COLLECTION: (Check one)	
[] Customer Comment Card/Complaint Form [] Usability Testing (e.g., Website or Software [] Focus Group	[x] Customer Satisfaction Survey[] Small Discussion 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: Patricia Haley

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, 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 a	an up-to-date System	n of Records Not	ice (SORN) been publis	hed? [] Yes [] No	
Gifts or Payme Is an incentive (participants? [e.g., money or reim	bursement of exp	oenses, token of apprecia	ntion) provided to	
BURDEN HOU	URS				
Category of Respondent	No. of Respondents	Participation Time	Frequency of Data Collection	Burden	
Individuals	36	5 minutes	4	12 hours	
includes staff of annual basis, wi responses and p	f the State Capacity ith the survey sent o reparing a report.	Building Center ut monthly (if a s	ne Federal government is reaching out to up to 36 specialized resource is us lan to employ statistica	recipients on an sed), analyzing	
	rs to the following		<u>an to employ statistica</u>	i metnous, piease	
The selection of your targeted respondents1. 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					
the answer is no		lescription of hov	ooth below (or attach the v you plan to identify yo	1 01 ,	
agencies that red State Capacity I of the individua will be used to i voluntary electr	ceived the specialize Building Center (SC ls within states with dentify TA recipien	ed resources fron CBC) staff mainta whom they shar its, and SCBC wi irvey responses v	ff and partners of state and the SSS Network or the ins an administrative date the specified resources ll send requests via emai vill be anonymous, and to sponses.	e ITS Network. The ta base with records s. This information il to complete the	
1. How will yo [x] We [] Telep [] In-pe [] Mail [] Othe	erson	nation? (Check al rms of Social Me	dia		

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"

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.

Submit all instruments, instructions, and scripts are submitted with the request.

Attachments: OCC OMB GC Request - SCBC Task 2- April 2017 Tool