Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 0990-0379)

TITLE OF INFORMATION COLLECTION:
Office of Population Affairs Teen Pregnancy Prevention and Pregnancy Assistance Fund Grantee Satisfaction Survey

PURPOSE:

The Office of Population Affairs (OPA) at the U.S. Department of Health and Human Services (HHS) requests permission to conduct an annual assessment of Teen Pregnancy Prevention (TPP) and Pregnancy Assistance Fund (PAF) grantees' satisfaction with the support and communication that OPA routinely offers as part of its regular services to its funded grantees. The annual survey will assess the overall communication and level of support provided by OPA staff and OPA contractors to OPA-funded TPP and PAF grantees. Results of these surveys will provide OPA with information that may be used to improve the quality of future grantee support.

DESCRIPTION OF RESPONDENTS:

OPA funds Teen Pregnancy Prevention (TPP) grantees and Pregnancy Assistance Fund (PAF) grantees. The contractor will contact Teen Pregnancy Prevention (TPP) grantee and Pregnancy Assistance Fund (PAF) grantee program directors who work on their cooperative agreements. The universe of organizations to be contacted includes Fiscal Year 2015 TPP Grantees, FY 2018 TPP and PAF Grantees, and FY 2019 TPP Grantees (a total of 145 grantee respondents).

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: ___Tara Rice_____

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
Private Sector (Web survey or conference paper survey) – Annual survey	145	20/60	48 hours
Totals	**145**	**20/60**	**48 hours**

FEDERAL COST: The estimated annual cost to the Federal government is $12,223.

For cost calculations, we estimate 20 hours of time for a GS-14. These hours account for OPA staff to create and distribute the surveys, and then collect and review customer feedback. For the contractor, we estimate 83 hours of an intermediate staff member's time to program the surveys and tabulate the results and 17 hours of senior staff time to review the 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?

> **Description of Customer List.** OPA's list of project directors for the grantee organizations will be used as the customer list. The grant programs, listed by category, are displayed in the Table 1 below.

Sampling Plan. The universe of potential respondents will include all of the project directors on the grantee list for PAF and TPP grantees. The annual survey would be sent to each grantee each year of their grant. Therefore, this administration of the annual survey will have up to 145 respondents each year inclusive of all OPA grantee cohorts. Three cohorts are finishing the close

out year (TPP 15, TPP 18, and PAF) and one cohort has another year (TPP 19) remaining on their grant, that is a total of 145 respondents for this administration of the survey.

Table 1. Number of grantees to which survey will be distributed by program and tier within OPA grant programs

OPA Grant Program/Tier	N	Tier Count (n)
Pregnancy Assistance Fund (PAF)	25	
Teen Pregnancy Prevention (TPP) – total number	120	
TPP by FY and tier:		
FY15		
Tier 1A – Capacity Building for Evidence-based Programs; pass-through with sub-awardees; implementation of evidence-based TPP; replication		7
Tier 1B – Implementing Evidence-based Programs to Scale; emphasis on implementation of programs and evaluation, with some sub-awardees; communities with greatest need		47
Tier 2A – Early Innovation (pass through with sub-awardees; programs and evaluation; innovative strategies; early innovation)		2
Tier 2B – Rigorous Evaluation of New Approaches; innovative strategies; implementation of programs and evaluation; rigorous evaluation of new or innovative approaches		21
FY18		
Tier 2 Phase 1 – New and Innovative Strategies		14
FY19		
Tier 1 Replication of Programs Proven Effective through Rigorous Evaluation to Reduce Teenage Pregnancy, Behavioral Risk Factors Underlying Teenage Pregnancy, or Other Associated Risk Factors		29
TOTAL	145	120

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

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

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