

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 2900-0770)

TITLE OF INFORMATION COLLECTION:

Digital Service at VA User Research Participant Recruiting Screener Questionnaire

PURPOSE: Collecting basic information about Veterans in order to participate in user research and usability testing sessions related to products and services by The Agency on Vets.gov. The information collected in this screener questionnaire is intended only for use in matching Veterans to potential usability test opportunities to inform product development and involve the user actively by understanding how they use products available to them from The Agency, specifically on Vets.gov.

DESCRIPTION OF RESPONDENTS: Veterans, Veteran’s family member, Veteran’s caretaker, Servicemember

TYPE OF COLLECTION: (Check one)

- Customer Comment Card/Complaint Form 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.

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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, 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 an up-to-date System of Records Notice (SORN) 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

Category of Respondent	No. of Respondents	Participation Time (X minutes =)	Burden (÷ 60 =)
Veteran	2000	5	166.66
Veteran's family member	500	5	41.66
Veteran's caretaker	500	5	41.66
Servicemember	1000	5	83.33
Totals	4000	20	333.31

FEDERAL COST: The estimated annual cost to the Federal government is \$0

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?

We will be collecting information from the general Veteran population in order to gain insight and information about their experience(s) interacting with The Agency, its benefits, and services. The purpose of this screener questionnaire is to collect information about the individual to be used for future usability testing. Information about the Veterans will not be shared or utilized in any way other than to determine eligibility to participate in usability tests at the time they complete the screener questionnaire and/or at a later date.

This screener questionnaire will be disseminated by word of mouth, email, social media posts from The Agency employees, or through contacting feedback@va.gov, an email address used solely for connecting with users in order to conduct user research and usability tests.

The data collected in this screener questionnaire is intended to ensure the Digital Service at VA is able to gather insights and information from a diverse Veteran user group for usability tests and user feedback sessions. Information collected is intended only for the use of user research recruiters in matching users with upcoming and/or ongoing usability tests.

For example, we are interested in learning more about Veteran's understanding of disability compensation and would like to speak with Veterans who have little to no experience with

disability compensation. From the information provided by the Veteran in this screener questionnaire, we will be able to reach out to individuals who meet specific criteria, such as, having identified interest in, but no experience with, disability compensation through The Agency. In an attempt to gather insight and feedback from a diverse user base, we would reach out to Veterans from various eras, locations, backgrounds, and demographics. If they participate in usability testing, their identities will be anonymized.

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.

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 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 responses and the participation time and 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.