

**Request for Approval under the “Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery”
(OMB Control Number: 0920-0953)**

TITLE OF INFORMATION COLLECTION: Surveillance Systems Feedback Survey

PURPOSE: The Surveillance Branch of the Division of Surveillance, Hazard Evaluations and Field Studies, created several web applications meant to support surveillance activities for users. Obtaining user satisfaction metrics for federal government IT systems is a requirement of the Federal Information Technology Acquisition Reform Act (FITARA). There are three system applications for which we would like to obtain user feedback; the purpose of each application is different, though each application was built in-house by NIOSH and contract IT personnel:

- NIOSH Industry and Occupation Computerized Coding System (NIOCCS)
- State-based Occupational Health Surveillance Clearinghouse (“Clearinghouse”)
- Worker Health Charts (WHC)

The purpose of this effort is to determine usability of each application and identify ways to improve or verify that the applications are functioning properly and are useful to users. The results will be used to direct future IT efforts by identifying and triaging improvements needed to ensure our tools are useful to public health researchers, academia, and state agencies. Please see the attached screen shots of the survey tool, which was created in Survey Monkey. The results will not be used for publication purposes but will be used to satisfy FITARA reporting requirements.

DESCRIPTION OF RESPONDENTS: These three system applications are publicly accessible, so the set of respondents is not entirely known. In some cases, we have a list of users and are able to contact them directly because they are required to register for a user account.

Because it is likely that our users use more than one application, we will prepare a master list of email contacts from each of the listservs below and remove duplicate email addresses to avoid sending multiple emails to the same user. The survey instrument will give users the opportunity to complete survey questions for the system applications they use, rather than send out multiple surveys.

The master listserv will be prepared using contact information obtained from:

- Registered NIOCCS users (n= 500)
- State agencies who also conduct surveillance efforts (n= 174)
- ABLES listserv (n=184) (ABLES data are included in the Worker Health Charts application, and therefore users of ABLES may have used WHC)

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: _____Amy E Mobley_____

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 [x] 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 |
|------------------------|--------------------|--------------------|-----------|
| NIOCCS Users | 500 | 5/60 | 42 |
| State Agency Contacts | 174 | 5/60 | 15 |
| ABLES listserv | 184 | 5/60 | 15 |
| Totals | 858 | | 72 |

FEDERAL COST: The estimated annual cost to the Federal government is \$2,000 (cost of one-year Survey Monkey subscription and personnel time) _____

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?

NIOCCS maintains a list of self-subscribing users. Additionally, the ABLES data set, which is used in Worker Health Charts, also maintains a listserv of stakeholders. It is likely that these stakeholders have gone to chart the data in Worker Health Charts. We also have a list of state agency contacts who participate in the Clearinghouse. From these three lists, we will create a master listserv, removing duplicate email addresses to avoid sending multiple survey requests to a user who may be on more than one listserv.

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.