Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 1660-0130)

TITLE OF INFORMATION COLLECTION: Interactive Voice Response (IVR) Post-Call Satisfaction Survey, FEMA Form XXX-X-XX.

PURPOSE:
The purpose of the Interactive Voice Response (IVR) survey is to measure customer satisfaction with service provided immediately after a call with FEMA. This collection will yield the information needed for the assessment of this pilot program. Through this generic clearance, we will identify strengths and weaknesses of the FEMA Call Center. This is strictly a voluntary collection of information from customers who call into FEMA's main call center number. The survey will target areas of customer service as it relates to timeliness, comprehension, and communication.

Results will be used internally to provide insights into the customer service delivery model for disaster survivors. Without this vital feedback provided by the caller, the Agency will not have the information needed to address real time issues with services to meet our customers' needs. The results will also give insight regarding how customers feel about speaking with FEMA agents, as well as training opportunities. Failure to bridge these gaps can result in a call center that is distanced from its customers' needs and expectations, which would reward efficiency but fail at effectiveness.

The survey results will be used by the Call Center to improve customer service levels as outlined in FEMA's Strategic Plan and Performance Measurements. The continuous process improvement relates to categories such as:
• Timeliness
• Easy to understand information
• Satisfaction with call resolution
• Agent courtesy
• Satisfaction with the overall experience

No Personal Identifiable Information will be collected during the survey.

DESCRIPTION OF RESPONDENTS:
Respondents comprise of all applicants who call into FEMA's main call center number for registration intake, help line, and Flood insurance.

All inbound calls will hear an IVR message asking the caller to opt in or opt out of taking a survey after the call is completed. This message will be heard as part of the transfer process so the response is associated with the ID of the representative/agent that will be answering the call. After the agent ends the call, the caller hears the survey announcement and chooses to complete the survey.

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:_____   Date:_____

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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 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 [x] No

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden Hrs
FEMA disaster survivors calling into main number	300,000 per year	2.5 minutes	12,500 per year
Totals			

FEDERAL COST: The estimated annual cost to the Federal government is <u>$129,561.82</u>

Annualized Cost to the Federal Government							
Performance of Surveys, Analysis and Reporting, Recommendations for Improvement, Desktop Application of Survey Tools and Maintenance of Tools.							
Survey Administration or Functions	Title and GS Level	Salary at 2018 with Locality Pay Dallas - Ft Worth	Number of Staff at GS Level	Fully Loaded Wage Rate at 1.46 Multiplier	Cost (for Salaries includes the Wage Rate Multiplier)	Percent of Time	Total Cost
Supervisor(s) of IVR Survey	Supervisor GS 13 Step 5	$105,769	2	1.46	$308,845.48	1.00%	$3,088.45
Project management: Administer IVR survey program, recommend improvements, oversee reports and software application implementation, testing and maintenance of survey tools	Analyst GS 12 Step 5	$88,947	3	1.46	$389,587.86	15.00%	$58,438.18
Statistician: OMB compliance, data analysis and reporting.	Customer Satisfaction Analyst GS 12 Step 5	$88,947	1	1.46	$129,862.62	15.00%	$19,479.39
Survey Management: Administer IVR surveys, prepare sample, track data, analyze survey data, write reports and recommend improvements, software application implementation, testing and maintenance of survey tools and survey	Specialist GS 11 Step 5	$74,210	3	1.46	$325,039.80	5.00%	$16,251.99
Subtotal			9		*$1,153,335.76*	9.00%	*$97,258.02*
Other Costs							
Facilities **[cost for renting, overhead, etc. for data collection activity]**					$75,590.74	9.00%	$6,803.17
Equipment Maintenance **[cost of annual maintenance/service agreements for equipment]**					$31,446.75	9.00%	$2,830.21
Other: C3MP IVR Survey Usage / Licenses					$16,594.48	100.00%	$16,594.48
Other: Phone Licenses for 3 APS staff					$5,785.32	100.00%	$5,785.32
Other: Supplies					$3,229.24	9.00%	$290.63
Subtotal					*$132,646.52*		$32,303.81
Total							$129,561.82

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 [X] 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?

All disaster survivors who call the FEMA toll free number are offered the opportunity to take a survey at the end of their call. There will be no sampling from the universe.

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
   [X] Other, Explain
   Interactive Voice Response- The instrument is administered using a prerecorded script. The respondent is asked to enter their responses using the keypad of the telephone.

2. Will interviewers or facilitators be used? [ ] Yes [x] 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 (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.