

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0920-1050)

Instruction: This form should be completed by the primary contact person from the Program sponsoring the collection.

DETERMINE IF YOUR COLLECTION IS APPROPRIATE FOR THIS GENERIC CLEARANCE MECHANISM:

Instruction: Before completing and submitting this form, determine first if the proposed collection is consistent with the scope of the Collection of Routine Customer Feedback generic clearance mechanism. To determine the appropriateness of using the Collection of Routine Customer Feedback generic clearance mechanism, complete the checklist below.

*If you select “yes” to all criteria in Column A, the Collection of Routine Customer Feedback generic clearance mechanism **can** be used. If you select “yes” to any criterion in Column B, the Collection of Routine Customer Feedback generic clearance mechanism **cannot** be used.*

Column A	Column B
The information gathered will only be used internally to CDC. [X] Yes [] No	Information gathered will be publicly released or published. [] Yes [X] No
Data is qualitative in nature and not generalizable to people from whom data was not collected. [X] Yes [] No	Employs quantitative study design (e.g. those that rely on probability design or experimental methods) [] Yes [X] No
There are no sensitive questions within this collection (e.g. sexual orientation, gender identity). [X] Yes [] No	Sensitive questions will be asked (e.g. sexual orientation, gender identity). [] Yes [X] No
Collection does not raise issues of concern to any other Federal agencies. [X] Yes [] No	Other Federal agencies may have equities or concerns regarding this collection. [] Yes [X] No
Data collection is focused on determining ways to improve delivery of services to customers of a current CDC program. [X] Yes [] No	Data will be used to inform programmatic or budgetary decisions, for the purpose of program evaluation, for surveillance, for program needs assessment, or for research. [] Yes [X] No
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. [X] Yes [] No	

Did you select “Yes” to all criteria in Column A?

If yes, the Collection of Routine Customer Feedback generic clearance mechanism may be appropriate for your investigation. You may proceed with this form.

Did you select “Yes” to any criterion in Column B?

*If yes, the Collection of Routine Customer Feedback generic clearance mechanism is **NOT** appropriate for your investigation. Stop completing this form now.*

TITLE OF INFORMATION COLLECTION: Public Health Improvement Training Reaction Survey

PURPOSE: The Centers for Disease Control and Prevention seeks to obtain approval to collect feedback for the Public Health Improvement Training hosted on June 12 - 14, 2019. The Public Health Improvement Training, referred to as PHIT, is an annual training conference that provides a series of interactive learning and skill-building sessions designed to help public health professionals improve outcomes and strengthen the performance of their organizations. The 2019 PHIT will offer training sessions covering a variety of topic areas including:

- Systems thinking
- Change management
- Communication
- Health assessments or health improvement plans
- Partnerships
- Performance management, performance measurement, or quality improvement/problem solving
- PHAB accreditation or reaccreditation preparation
- Rural Health
- Social or structural determinants of health
- Workforce development

To obtain feedback related to participants' satisfaction with and reaction to PHIT, CDC is proposing two low-burden, quick modes of data collection:

1. Individual Session Surveys (8 questions) administered immediately following each session a participant attends.
2. End-of-training survey (20 questions) administered at the conclusion of the entire PHIT conference.

DESCRIPTION OF RESPONDENTS:

Registered attendees of the 2019 PHIT will be invited to respond to the PHIT individual session survey (Attachment A - MS Word Survey and Attachment B - Web-based Survey Screenshots) and end-of-training survey (Attachment C - MS Word Survey and Attachment D - Web-based Survey Screenshots). Respondents include public health leaders and professionals from state, territorial, local and tribal health departments as well as public health professionals from regional and national public health nonprofit organizations and academic institutions. Common titles of respondents include, but are not limited to: accreditation coordinator, performance improvement manager, program manager, program coordinator, health planner, health assessment and improvement coordinator, quality improvement coordinator/manager.

TYPE OF COLLECTION: (Check one)

Instruction: Please sparingly use the Other category

- Customer Comment Card/Complaint Form
 Usability Testing (e.g., Website or Software)
 Focus Group

- 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 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.

Name: Cassidy Monte Frayja

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

If Yes: Please describe the incentive. If amounts are outside of customary incentives, please also provide a justification

BURDEN HOURS

It is estimated that approximately 250 PHIT registrants will respond to the 2019 end-of-training survey and individual session surveys, based on past experience with similar training sessions.

The individual session survey includes up to 8 questions – 5 questions are closed-ended and 3 questions are open-ended. The survey will include conditional branching, therefore the actual number of items responded to by participants will vary. Using Qualtrics®, respondents will complete an individual session survey for each session attended. The 2019 PHIT includes plenary sessions, breakout sessions, poster sessions and workshops. In total participants will attend 10 individual sessions. CDC staff completed the survey, as part of a pilot, to determine the average length of time to complete the survey, including reading the instructions. Based on the results of the pilot, the average time to complete the individual session survey is 2 minutes. As each individual is expected to participate in 10 sessions, the estimated participation time for this instrument is 20 mins (2 mins x10 sessions).

The end-of-training survey includes up to 20 questions – 14 questions are closed-ended and 6 questions are open-ended. The survey will include conditional branching, therefore the actual

number of items responded to by participants will vary. Respondents will complete the survey using Qualtrics© web-based survey software. To estimate the burden (hours), CDC piloted the survey with internal CDC staff to calculate the average length of time to complete the survey, including reading the instructions. Based on the results of the pilot, the average time to complete the end-of-training survey is 4 minutes.

The total estimated burden (hours) for 250 respondents is reflected in the table below. There are no other costs to the respondent.

Category of Respondent	No. of Respondents	Participation Time	Burden
Individual Session Survey			
State, local, or tribal government respondents	215	20/60	72
Private sector	35	20/60	12
Totals	250		84
End-of Training Survey			
State, local, or tribal government respondents	215	4/60	14
Private sector	35	4/60	2
Totals	250		16

FEDERAL COST: The estimated annual cost to the Federal government is **\$9,157.60**

There are no equipment or overhead costs. The costs to the federal government includes the salary of 2 CDC FTE staff and 1 contractor. The contract staff are responsible for developing and programming the survey in Qualtrics©, administering the survey, and performing data analysis.

Estimated Annualized Cost to the Federal Government

Staff (FTE)	Average Hours	Average Hourly Rate	Total Average Cost
Health Scientist (GS13) OMB package development, pilot testing	40	\$51.22/hr	\$2,048.80
Health Scientist (GS12) Questionnaire development, pilot testing	24	\$40.62/hr	\$974.88
National Network of Public Health Institutes (Contractor) Questionnaire development, web-based instrument programming, data management and analysis (cleaning, analysis, reporting)	208	\$29.49/hr	\$6,133.92
Estimated Total Cost of Information Collection			\$9,157.60

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 Yes: Please provide a description of both below (or attach the sampling plan)

If No: Please provide a description of how you plan to identify your potential group of respondents and how you will select them or ask them to self-select/volunteer

All individuals who register to attend the 2019 PHIT will serve as the potential group of respondents. Attendees to individual sessions will be invited to access the external Web link to the individual session survey from within the 2019 PHIT mobile application (Attachment E). All registrants for 2019 PHIT will receive an email invitation (Attachment F) at the email address provided during registration that contains an external Web link to complete the end-of-training survey.

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

To increase participation, registrants will receive an invitation to complete the individual session survey based on the session selected within the 2019 PHIT mobile application (Attachment E). The mobile application will also provide a reminder to complete the survey. On the last day of the training, participants will receive an email invitation to complete the end-of-training survey (Attachment F). They will receive an email reminder one day prior to the close of the survey (Attachment G). Participants will be given two weeks to complete the session and end-of-training surveys.

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 concise 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 concise 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. The 'Other' category should be used only in the contexts in which the provided categories cannot reasonably apply.

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.

Gifts or Payments: As a general matter, incentives are not appropriate for customer service collections; however, incentives may be appropriate for focus groups or in-depth usability studies, especially when participants must travel to a site to participate. In the latter circumstance, the incentive should include travel costs. Customary incentives for focus groups in the Federal government are \$40 for a one-hour interview and \$75 for a 90-minute focus group. If you answer yes to the question, please describe the incentive and provide a justification for amounts other than those cited above; justifications should be limited to Federal studies of a similar design and subpopulation.

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.

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.

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