# Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB#: 0925-0648 Exp. Date: 05/31/2021)

# TITLE OF INFORMATION COLLECTION:

NCBI 2019 ClinicalTrials.gov Website Usability Survey

#### **PURPOSE:**

The National Library of Medicine (NLM) National Center for Biotechnology Information (NCBI) wishes to collect qualitative feedback from users of the ClinicalTrials.gov website. Users will be asked to complete a short on-line survey testing the usability of the website. The purpose of the survey will be: (1) to understand users' goals in visiting the site, (2) to learn where on the site they look to find the information they need, and (3) to identify the difficulties or barriers they encounter while looking for specific information. The results of this process will allow us to better understand our users' needs and improve the website content and information architecture to better meet those needs.

# **DESCRIPTION OF RESPONDENTS:**

The respondents be public users of the ClinicalTrials.gov website.

TYPE OF COLLECTION: (Check one)	
<ul><li>[ ] Customer Comment Card/Complaint Form</li><li>[X] Usability Testing (e.g., Website or Software)</li><li>[ ] Focus Group</li></ul>	<ul><li>[ ] Customer Satisfaction Survey</li><li>[ ] Small Discussion Group</li><li>[ ] Other:</li></ul>

#### **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 not 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 website or may have experience with the website in the future.

Name: Rebecca Williams

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

# **ESTIMATED BURDEN HOURS and COSTS**

Category of Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
Individuals or Households	100	1	10/60	17
Totals	100	100		17

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Individuals or Households	17	\$24.98	\$424.66
Totals	17	\$24.98	\$424.66

<sup>\*</sup>The General Public wage rate was obtained from <a href="https://www.bls.gov/oes/2018/may/oes">https://www.bls.gov/oes/2018/may/oes</a> nat.htm#00-0000

**FEDERAL COST:** The estimated annual cost to the Federal government is: \$1519.77

			0/ 6	Fringe (if applicable)	Total Cost to Gov't
Staff	Grade/Step	Salary	% of Effort	аррисавіс)	
	Grade/Step	Salary	EHOIT		
Federal Oversight					
Customer Outreach					
Service Specialist	GS13/2	\$102,477	1%		\$1024.77
Contractor Cost					N/A
Travel					N/A
Other Cost: Survey Tool					\$495.00
Total					\$1,519.77

<sup>\*\*</sup>The Salary in table above is cited from <a href="https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/19Tables/html/DCB.aspx">https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/19Tables/html/DCB.aspx</a>

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

<ol> <li>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?         <ul> <li>[ ] Yes [X ] No</li> </ul> </li> </ol>
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?
The survey will be announced and accessible from the ClinicalTrials.gov website with a static link to the survey to reach the public
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 [ <b>X</b> ] No