

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0648 Exp., date: 05/2021)**

**TITLE OF INFORMATION COLLECTION:** NITAAC Customer Feedback Questionnaire

**PURPOSE:**

To identify, define, and refine meaningful metrics to effectively and fairly measure performance of all contributors and stakeholders of the NIH Information Technology Acquisition and Assessment Center (NITAAC) community to provide an ongoing feedback loop to all stakeholder to continuously and meaningfully improve the NITAAC programs, the performance and services being delivered by all constituents, and elevate this ecosystem to a preeminent exemplar for all Federal Acquisitions programs and agencies. OMB has designated NITAAC as an executive agent to establish and manage IT Government Wide Acquisition Contracts (GWACs) and recently designated NITAAC’s three GWACs as Best-In-Class. NITAAC is required to promote agency use of Best-In-Class GWACs and to solicit stakeholder feedback from our agency stakeholders on how to continuously improve our program.

**DESCRIPTION OF RESPONDENTS:**

- **Agency Stakeholders:** Contracting Officers, Contracting Officer’s Representatives and Program Managers, and Program Support staff

**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: Wendy Lazernik (contractor)

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, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [ ] Yes [ X ] No
3. If Applicable, has a System or Records Notice been published? [ ] Yes [ ] No (N/A)

**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/households	100	1	6/10	10
<b>Totals</b>		100		<b>10</b>

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Contractors/program staff/program officers	10	\$57.18	\$571.80
<b>Totals</b>			<b>\$571.80</b>

<https://www.bls.gov/oes/current/oes113061.htm>

**FEDERAL COST:** The estimated annual cost to the Federal government is \$2,412.00

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov't
<b>Federal Oversight/</b>					
NITAAC Program Support COR	13/5	\$100,539	1.5%		\$ 1,546.62
<b>Contractor Cost</b>		\$90,000	3.8%	25%	\$ 865.38
Travel					0
Other Cost					0
<b>Total</b>					<b>\$2,412.00</b>

\*the Salary in table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2019/RUS.pdf>

**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?

Our customer list will be pulled from NITAAC electronic government ordering system (e-GOS) based on active users in the past 12 months. The survey will be sent to 100% of customers and we anticipate a 20% response rate.

**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