## Request for Approval under the “Improving Customer Experience (OMB Circular A-11, Section 280 Implementation)”

## (OMB Control Number: 0503-XXXX)

**TITLE OF INFORMATION COLLECTION:** Web Survey on customer service interaction at Ask USDA Contact Center

**PURPOSE:**

*The goal is to collect this feedback to improve customer service through an emailed web survey after a customer contacts the Ask USDA Contact Center. USDA will gather information regarding the customer/employee interaction, satisfaction with services provided and information available to USDA customers.*

*The USDA’s overall objective is to provide leadership on agriculture, food, natural resources, rural infrastructure, nutrition, and related issues in an efficient and effective manner. To help achieve this, USDA created Ask USDA Contact Center as a front door, single entry point that improves the services provided to our external customers.  Ask USDA Contact Center aims to provide a public-facing omni-channel contact center that delivers superior customer service and consistent information in alignment with Secretary Perdue’s mission of creating the most fact-based, data-driven, and customer-focused government agency.*

*The Ask USDA Contact Center is an initiative to find efficiencies within the USDA public facing Customer Service Contact Centers across multiple agencies. The Ask USDA project is leveraging technology (Interactive Voice Response, Knowledge Management Database and Customer Relationship Management (CRM) tools) and best practices to improve information and customer service provided to constituents that use USDA programs.*

*The screenshots of the email and the survey interface are included in this submission.*

**TYPE OF ACTIVITY:** (Check one)

[ ] Customer Research

[ X ] Customer Feedback Survey *no deviation from A-11*

[ ] User Testing of Services and Digital Products

**DESCRIPTION OF ACTIVITY**

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

**For Customer Research and User Testing Services:**

*Explain who will be interviewed and why the group is appropriate for the Federal program / service to connect with. Do you have a list of customers to reach out to (e.g., intercept interviews at a particular field office)? Please provide a description of how you plan to identify your potential group of respondents and if only a sample will be solicited for feedback, how you will select them.*

N/A

*Generally describe the information collection activity – e.g. will facilitators or interviewers be used? What will respondents be asked? Or, what actions will you observe / how will you have respondents interact with a product you need feedback on?*

N/A

**For Customer Feedback Survey:**

*The survey will be sent to those who come to the Ask USDA Contact Center for information. The majority of Ask USDA Customers are private individuals and businesses from across the nation that are looking for information regarding USDA programs and services. The programs and services are provided by the different agencies within USDA; ranging from information on how to receive a mushroom picking permit from the Forest Service to starting the process at Farm Service Agency on receiving funding for a Women Farmers and Ranchers Loan.*

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [ ] Yes [ X ] No

**CERTIFICATION:**

I certify the following to be true:

1. The collections are voluntary;
2. The collections are low-burden for respondents (based on considerations of total burden hours or burden-hours per respondent) and are low-cost for both the respondents and the Federal Government;
3. The collections are non-controversial and do not raise issues of concern to other Federal agencies;
4. Any 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 near future;
5. Personally identifiable information (PII) is collected only to the extent necessary and is not retained;
6. Information gathered is intended to be used for general service improvement and program management purposes
7. Upon agreement between OMB and the agency all or a subset of information may be released as part of A-11, Section 280 requirements only on performance.gov. Summaries of customer research and user testing activities may be included in public-facing customer journey maps.
8. Additional release of data will be coordinated with OMB.

Name: Sally A. Jewel, Office of Customer Experience

**BURDEN HOURS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent**  | **No. of Respondents** | **Participation Time** | **Burden****Hours** |
| Individuals - Public, businesses and anyone interested in contacting the USDA Agencies | 10,000 | 3 mins | 500 hours |
|  |  |  |  |
| **Totals** | **10,000** | 3 mins | **500 hours** |

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

**All instruments used to collect information must include:**

**OMB Control No. 0530-XXXX**

**Expiration Date: XX/XX/XXXX**

## Instructions for completing Request for Approval under the “Improving Customer Experience (OMB Circular A-11, Section 280 Implementation)”

**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:** 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 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.

**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 applicable, 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.