

# Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0642 Expiration Date: 3/31/2023)

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**TITLE OF INFORMATION COLLECTION:** Customer Satisfaction Surveys for CBIIT’s Newsletter and Intranet

**PURPOSE:** The purpose of this information collection is to gather data from the Center for Biomedical Informatics & Information Technology (CBIIT)’s staff to determine satisfaction with the internal newsletter and the intranet, CBITT Central. This information will be used to better the service delivery of CBITT’s newsletters and Intranet content to its stakeholders.

**DESCRIPTION OF RESPONDENTS:** The surveys will be completed by both federal employees of CBIIT and its contractors. This information collection request is for the 330 contractors.

**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: Karen Ortner

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

Amount: \_\_\_\_\_

Explanation for incentive: (include number of visits, etc.)

**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	330	1	10/60	55
<b>Totals</b>		<b>330</b>		<b>55</b>

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Individuals	55	\$44.75	\$2,461.25
<b>Total</b>			<b>\$2,461.25</b>

\*Source of the mean Hourly Wage Rate is provided by the Bureau of Labor Statistics, Occupation title Calculated by taking the average of mean hourly wage rate of Management Analysts, (Occupation Code #13-1111) (\$45.94) and Operations Research Analysts (Occupation Code #15-2031) (\$43.56), [https://www.bls.gov/oes/2019/May/oes\\_nat.htm#00-0000](https://www.bls.gov/oes/2019/May/oes_nat.htm#00-0000).

**FEDERAL COST:** The estimated annual cost to the Federal government is \$978.48

Staff	Grade/Step	Salary**	% of Effort	Fringe (if applicable)	Total Cost to Gov't
<b>Federal Oversight</b>					
Communications Mgr.	12/5	\$97,848	1%		\$978.48
<b>Contractor Cost</b>					
Travel					
Other Cost					
<b>Total</b>					<b>\$978.48</b>

\*\*The salary in the table above is cited from: <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/20Tables/html/DCB.aspx>

**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?

CBIIT has a staff list with email addresses.

**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
  - Survey Form
  - Chart Abstraction
  - Other, Explain

2. Will interviewers, facilitators, or research coordinators be used? [ ] Yes [ X ] No

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