## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0581-0269)

**TITLE OF INFORMATION COLLECTION:**

Agricultural Marketing Service Grants Evaluation: Performance Outcomes and Indicator Survey

**PURPOSE:**

The U.S. Department of Agriculture (USDA), Agricultural Marketing Service (AMS), Transportation and Marketing Program, Grants Division is evaluating existing performance measures, required as part of the grant making process. To assess current and identify potential new performance measures, AMS partnered with the National Association of State Departments of Agriculture Foundation (NASDA Foundation) and Grant Thornton. This collaborative effort will develop a national evaluation methodology for collecting and aggregating stakeholder feedback to better distill, define, and describe measurable performance metrics, while diminishing the administrative burden for AMS grant applicants, recipients, subrecipients, and AMS staff. The Performance Outcomes and Indicators Survey is one component of this larger performance measure evaluation plan for AMS grant programs.

The survey will collect stakeholder feedback about the relevance, achievability, and measurability of performance outcomes and indicators. Continuity of performance metrics within and across programs is necessary to demonstrate accurate impacts of USDA funds. This low-burden, low-cost survey will help guide the Grants Division and its non-Federal partners to improve existing performance metrics, remove unnecessary or overly burdensome performance metrics, and develop new performance metrics which are better suited to the programs’ purpose and goals. These new and updated metrics will cover the same basic subject areas as existing metrics, but will clarify metric language, ask fewer potentially duplicative and sensitive questions (such as income), and improve expectations for performance. These metrics will also allow AMS staff to more accurately report on grant recipients’ accomplishments.

There is Congressional support for the effort to examine performance measures. The Agriculture Improvement Act of 2018 (P.L. 115—334) (Farm Bill) directed the USDA and the State departments of agriculture, in consultation with specialty crop stakeholders, to examine and develop performance measures related to the Specialty Crop Block Grant Program (SCBGP) (7 U.S.C. 1621 note). The SCBGP funds approximately 750 projects each year with $73 million in funds, ranging from marketing and research to food safety and training and technical assistance projects. A sub-component of the SCBGP, the Specialty Crop Multi-State Program, funds about 8 projects through approximately $5 million in available funding per year. In addition to this Congressional direction as well as stakeholder feedback received, AMS seeks to concurrently re-examine the performance measures for its other grant programs, including the Acer Access and Development Program, Dairy Business Innovation Initiatives, Farmers Market and Local Food Promotion Program, Federal-State Marketing Improvement Program, Sheep Production and Marketing Grant Program, and Regional Food System Partnership Program (all of which are included in the existing Office of Management and Budget (OMB) clearance 0581-0269).

The survey instrument includes options for respondents to provide feedback on each of the AMS grant programs, however it is expected that respondents will choose only those programs with which they are familiar. The burden time was based on the feedback from a small sampling (<9) of grant recipients that characterize the target audience. They had the option to provide feedback on all programs but responded only on those programs which were relevant to their expertise. We understand that the full survey is 74 questions, but the logic within the survey will limit the questions to 1 to 24 per program.

**DESCRIPTION OF RESPONDENTS**:

Voluntary survey participants will include: AMS grant program recipients, subrecipients, and other members of the public with a vested interest in the programs and their goals.

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

[ ] Customer Comment Card/Complaint Form [X] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software [ ] Small Discussion Group

[] Focus 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.
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:\_\_John Mikozek, Director; USDA, AMS, TM, Grants Division\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**BURDEN HOURS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent** | **No. of Respondents** | **Participation Time (hours)** | **Burden(hours)** |
| Individuals or households | 200 | 0.5 | 100 |
| Federal Government | 30 | 0.5 | 15 |
| State, Local and Tribal Government | 100 | 0.5 | 50 |
| **Totals** | **330** |  | **165** |

**FEDERAL COST:** The estimated annual cost to the Federal government is $73,000\_

**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?

A list of current and past grant recipients from the AMS Grants Division has been developed and will be the backbone of stakeholders targeted to take the survey. The survey will be disseminated via email.

**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

1. Will interviewers or facilitators be used? [ ] Yes [X] No

**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 0581-)

**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:** Provide answers to the questions.

**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.

**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.**