

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0970-0401)**

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**TITLE OF INFORMATION COLLECTION:** Feedback on Child Care and Development Fund Plan for States/Territories for FFY 2019–2021 (ACF–118)

**PURPOSE:** The purpose for this collection is to solicit information from users (State and Territory Lead Agencies) on the current Child Care and Development Fund (CCDF) Plan (the Plan) for States and Territories. The information collected will help the Office of Child Care (OCC) refine the FY 2022-2024 CCDF Plan Pre-Print and also help us develop a training framework on the Plan Preprint for States and Territories.

The Plan for States and Territories (ACF-118; OMB #0970-0114) is required from each CCDF Lead agency in accordance with Section 658E of the Child Care and Development Block Grant Act of 1990 (CCDBG Act), as amended, CCDBG Act of 2014 (Pub. L.113–186), and 42 U.S.C 9858. The Plan, submitted on the ACF–118, is required triennially, and remains in effect for three years.

**DESCRIPTION OF RESPONDENTS:** State and Territory CCDF Administrators who oversee the administration of the CCDF program in their respective states/territories.

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

- |  |   |
|--|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form          | <input type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group       |
| <input checked="" 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.

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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, will any information that is collected be included in records that are subject to the Privacy Act of 1974?  Yes  No

3. If Yes, has an up-to-date System of Records Notice (SORN) been published?  Yes  No

**Gifts or Payments:**

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

**BURDEN HOURS**

Category of Respondent	No. of Respondents	Participation Time	Burden
State/Territory Administrators	56	1.5 hours	84
<b>Totals</b>	<b>56</b>	1.5 hours	<b>84</b>

**FEDERAL COST:** The estimated annual cost to the Federal government is **\$820.00**

The annual cost to the Federal government is estimated at \$820.00. This is based on 56 state/territory administrators participating in 8 focus groups, requiring approximately 2 facilitator staff hours totaling 24 hours (8 x 2 x 1.5) at an average of \$30 per hour (24\*\$30 = \$720.00); and reproduction and printing fees for facilitator’s guide of approximately \$100.

**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?  
 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?

State Administrators, Co-Administrators, and other key state staff will be given the opportunity to engage in a 1 ½ hour focus group during an in-person regional meeting across the country. All 56 state and territory administrators will be attending the regional meetings with the option of participating in these voluntary focus groups.

**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  
 Other, Explain

2. Will interviewers or facilitators be used?  Yes  No

Information will be collected by facilitators during focus groups. Note takers will be employed to capture responses and relevant customer feedback. No standard response format will be provided to respondents.

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

Focus group discussions will be framed around the following four questions:

- How does your Lead Agency use the CCDF Plan in your State or Territory?
- As a State Administrator, what barriers or challenges do you face when completing your CCDF Plan?
- How does your Lead Agency define success in the CCDF program? What about your stakeholders?
- What types of training and resources are most helpful to you and your team when completing your CCDF Plan? Are there any strategies that have contributed to your success?

## **Instructions for completing Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback”**

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**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:** Provide answers to the questions. 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.

**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.

**Submit all instruments, instructions, and scripts are submitted with the request.**