

Appendix B. WIC NATS OMB Burden Table

Respondent Category	Type of respondents	Instruments	OMB Appendix Number	Sample Size	Responsive						Non-responsive						Hourly Rate (p)	Total Annualized Cost
					Number of respondents	Frequency of response (annual)	Total Annual responses	Hours per response	Total Annual Burden (hours)	Number of Non-respondents	Frequency of response (annual)	Total Annual responses	Hours per response	Total Annual Burden (hours)	Grand Total Burden Estimate (hours)			
State, Local, or Tribal Government	WIC State Agency (SA)	Introductory Email from FNS to SA	D1	13	10	1	10	0.07	0.67	3	1	3	0.02	0.05	0.72	58.88	42.28	
		Email to SA with Info Packet and Schedule Call	D2	13	10	1	10	0.15	1.50	3	1	3	0.02	0.05	1.55	58.88	91.45	
		Call with State Agency Director and Request Documents	C1	10	10	1	10	0.50	5.00	0	1	0	0.02	0.00	5.00	58.88	294.40	
		SA to Submit WIC Nutrition Risk materials	n/a	10	10	1	10	0.50	5.00	0	1	0	0.02	0.00	5.00	58.88	294.40	
		SA to Submit MIS data extract	n/a	10	10	2	20	2.00	40.00	0	2	0	0.02	0.00	40.00	58.88	2355.20	
		MOU for SA	D3	10	10	1	10	0.12	1.17	0	1	0	0.02	0.00	1.17	58.88	68.83	
		Email to SA with LAs Selected for Site Visit	F1	10	10	1	10	0.07	0.67	0	1	0	0.02	0.00	0.67	58.88	39.33	
		SUBTOTAL OF SA		13	10	8.0	80	0.68	54.01	3	2.00	6	0.02	0.10	54.11		3185.89	
	WIC Local Agency (LA)	PRETEST	n/a	3	3	1	3	1.49	4.47	0	1	0	0.10	0.00	4.47	58.88	263.19	
		Introductory Email from SA to all LAs with Info Packet	E1	259	217	1	217	0.07	14.50	42	1	42	0.02	0.70	15.20	58.88	894.80	
		Email to LA with LA Director Survey Link	E2	259	155	1	155	0.03	5.18	104	1	104	0.02	1.74	6.91	58.88	407.08	
		Reminder Emails to Complete LA Director Survey	E3	104	62	2	124	0.02	2.07	42	2	84	0.02	1.40	3.47	58.88	204.53	
		Local Agency Director Survey	C2, C2a	259	217	1	217	0.55	119.35	42	1	42	0.02	0.70	120.05	58.88	7068.63	
		Site Visit Email from SA to Selected LA	F2	24	24	1	24	0.03	0.80	0	1	0	0.02	0.00	0.80	58.88	47.20	
		Site Visit Email to LA and Schedule Call	F3	24	21	1	21	0.03	0.70	3	1	3	0.02	0.05	0.75	58.88	44.25	
		Call with Local Agency Director and Request Documents	C3	21	21	1	21	1.00	21.00	0	1	0	0.02	0.00	21.00	58.88	1236.48	
		Clinic Site Information Form	C4	21	21	1	21	1.00	21.00	0	1	0	0.02	0.00	21.00	58.88	1236.48	
		LA to Submit Nutrition Risk Assessment Documents	n/a	21	13	1	13	0.50	6.50	8	1	8	0.02	0.13	6.63	58.88	390.59	
		Reminder Email to Submit Nutrition Risk Assessment Documents	F4	8	8	1	8	0.50	4.00	0	1	0	0.02	0.00	4.00	58.88	235.52	
	Email to LA with Selected Site Name	G1	21	21	1	21	0.08	1.75	0	1	0	0.02	0.00	1.75	58.88	103.25		
	SUBTOTAL OF WIC LA		262	220	3.84	845	0.24	201.32	42	6.74	283	0.02	4.73	206.05		12131.99		
	WIC Clinic	PRETEST	n/a	1	1	1	1	3.68	3.68	0	1	0	0.23	0.00	3.68	14.91	54.87	
		Site Visit Email from LA to WIC Clinic	G2	24	24	1	24	0.03	0.80	0	1	0	0.02	0.00	0.80	14.91	11.95	
		Site Visit Email to WIC Clinic and Schedule Call	G3	24	21	1	21	0.08	1.75	3	1	3	0.02	0.05	1.80	14.91	26.89	
		Telephone Call with WIC Clinic	G4	21	21	1	21	1.00	21.00	0	1	0	0.02	0.00	21.00	14.91	313.11	
		Informed Consent for Site Director Interview	G5	21	21	1	21	0.08	1.75	0	1	0	0.02	0.00	1.75	14.91	26.14	
		Site Director Interview Guide	C6	21	21	1	21	0.75	15.75	0	1	0	0.02	0.00	15.75	14.91	234.83	
		Finalize Plans with WIC Clinic on Day of Site Visit	n/a	21	21	1	21	0.25	5.25	0	1	0	0.02	0.00	5.25	14.91	78.28	
		Informed Consent for Observation and Staff Interview	G6	21	21	6	126	0.08	10.52	0	6	0	0.02	0.00	10.52	14.91	156.87	
		Identified Risks Data Collection Form	C7a	21	21	6	126	0.08	10.52	0	6	0	0.02	0.00	10.52	14.91	156.87	
Staff Interview Guide		C8	21	21	5	105	1.00	105.00	0	5	0	0.02	0.00	105.00	14.91	1565.55		
SUBTOTAL OF WIC CLINIC		25	22	22.14	487	0.36	176.03	3	1.00	3	0.02	0.05	176.08		2625.36			
TOTAL STATE AND LOCAL AGENCY			300	252	5.60	1412	0.31	431.36	48	6.08	292	0.02	4.88	436.23		17943.24		
Business or Other For-Profit and Nonprofit Institutions	WIC Local Agency (LA)	PRETEST	n/a	5	2	1	2	1.49	2.98	3	1	3	0.10	0.30	3.28	58.88	193.13	
		Introductory Email from SA to all LAs with Info Packet	E1	111	89	1	89	0.07	5.95	22	1	22	0.02	0.37	6.31	58.88	371.69	
		Email to LA with LA Director Survey Link	E2	111	56	1	56	0.03	1.87	55	1	55	0.02	0.92	2.79	58.88	164.21	
		Reminder Emails to Complete LA Director Survey	E3	55	33	2	66	0.02	1.10	22	2	44	0.02	0.73	1.84	58.88	108.16	
		Local Agency Director Survey	C2, C2a	111	89	1	89	0.55	48.95	22	1	22	0.02	0.37	49.32	58.88	2903.81	
		Site Visit Email from SA to Selected LA	F2	12	12	1	12	0.03	0.40	0	1	0	0.02	0.00	0.40	58.88	23.60	
		Site Visit Email to LA and Schedule Call	F3	12	9	1	9	0.03	0.30	3	1	3	0.02	0.05	0.35	58.88	20.65	
		Call with Local Agency Director and Request Documents	C3	9	9	1	9	1.00	9.00	0	1	0	0.02	0.00	9.00	58.88	529.92	
		Clinic Site Information Form	C4	9	9	1	9	1.00	9.00	0	1	0	0.02	0.00	9.00	58.88	529.92	
		LA to Submit Nutrition Risk Assessment Documents	n/a	9	5	1	5	0.50	2.50	4	1	4	0.02	0.07	2.57	58.88	151.13	
		Reminder Email to Submit Nutrition Risk Assessment Documents	F4	4	4	1	4	0.50	2.00	0	1	0	0.02	0.00	2.00	58.88	117.76	
	Email to LA with Selected Site Name	G1	9	9	1	9	0.08	0.75	0	1	0	0.02	0.00	0.75	58.88	44.25		
	SUBTOTAL OF WIC LA		116	91	3.95	359	0.24	84.80	25	6.12	153	0.02	2.81	87.61		5158.22		
	WIC Clinic	PRETEST	n/a	2	1	1	1	3.68	3.68	1	1	1	0.23	0.23	3.91	14.91	58.30	
		Site Visit Email from LA to WIC Clinic	G2	12	12	1	12	0.03	0.40	0	1	0	0.02	0.00	0.40	14.91	5.98	
		Site Visit Email to WIC Clinic and Schedule Call	G3	12	9	1	9	0.08	0.75	3	1	3	0.02	0.05	0.80	14.91	11.95	
		Telephone Call with WIC Clinic	G4	9	9	1	9	1.00	9.00	0	1	0	0.02	0.00	9.00	14.91	134.19	
		Informed Consent for Site Director Interview	G5	9	9	1	9	0.08	0.75	0	1	0	0.02	0.00	0.75	14.91	11.20	
		Site Director Interview Guide	C6	9	9	1	9	0.75	6.75	0	1	0	0.02	0.00	6.75	14.91	100.64	
		Finalize Plans with WIC Clinic on Day of Site Visit	n/a	9	9	1	9	0.25	2.25	0	1	0	0.02	0.00	2.25	14.91	33.55	
Informed Consent for Observation and Staff Interview		G6	9	9	6	54	0.08	4.51	0	6	0	0.02	0.00	4.51	14.91	67.23		
Identified Risks Data Collection Form		C7a	9	9	5	45	0.08	3.76	0	5	0	0.02	0.00	3.76	14.91	56.02		
Staff Interview Guide	C8	9	9	5	45	1.00	45.00	0	5	0	0.02	0.00	45.00	14.91	670.95			
SUBTOTAL OF WIC CLINIC		14	10	20.20	202	0.38	76.85	4	1.00	4	0.07	0.28	77.13		1150.01			
TOTAL PROFIT/NON-PROFIT BUSINESS			130	101	5.55	561	0.29	161.65	29	5.41	157	0.02	3.09	164.74		6308.24		
		PRETEST	n/a	4	2	1	2	0.96	1.92	2	1	2	0.12	0.24	2.16	7.25	15.66	

