

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0648 Exp. Date: 05/31/2021)**

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**TITLE OF INFORMATION COLLECTION:** NLM GeneEd User Survey

**PURPOSE:**

The purpose of this National Library of Medicine (NLM) survey is to collect qualitative customer service feedback from users of the GeneEd website. GeneEd is scheduled to be retired and taken offline in spring 2019. Selected content from this resource will be moved to another NLM website, Genetics Home Reference. The survey responses will be used to help determine which content should be transferred and how to prioritize it.

**DESCRIPTION OF RESPONDENTS:**

Regular users of the GeneEd website.

**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: Stephanie Morrison

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, 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  No

**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 or Households	200	1	5/60	17
<b>Totals</b>	<b>200</b>	200		<b>17</b>

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Individuals or Households	17	\$24.34	\$413.78
<b>Totals</b>	<b>17</b>		<b>\$413.78</b>

\*BLS National Occupational Employment and Wage Estimates Occupational Employment and Wages, May 2017  
[https://www.bls.gov/oes/current/oes\\_nat.htm](https://www.bls.gov/oes/current/oes_nat.htm)

**FEDERAL COST:** The estimated annual cost to the Federal government is: **\$394.53**

Staff	Grade/Step	Salary	% of Effort	Fringe (if applicable)	Total Cost to Gov't
<b>Federal Oversight</b>					
Research Information Specialist	13/7	\$116,365	0.2%		\$232.73
<b>Contractor Cost</b>		\$80,900	0.2%		\$161.80
Travel					N/A
Other Cost					N/A
<b>TOTAL</b>					<b>\$394.53</b>

**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 [X] 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?

The survey will be offered in a link at the top of every page of the GeneEd website. The link will open to the survey instrument in Survey Monkey.

### **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

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