## Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB#: 0925-0648 Exp., date: 05/2021)

**TITLE OF INFORMATION COLLECTION:** Workflow information Tracking System (WiTS) Climate Survey

#### **PURPOSE:**

The purpose of the WiTS Climate survey is to collect feedback from customers (Administrative Officers (AOs), HR Specialists) on the system, the supporting services and user documents. This information will help the WiTS Project Team identify areas for improvement and ensure an optimal customer experience.

	<b>DESCRIPTION OF RESPONDENTS:</b> The target audience is NIH AOs and HR Specialists who have used the WiTS system in CY2019.				
T	TYPE OF COLLECTION: (Check one)				
[]	[ ] Customer Comment Card/Complaint Form [ ] Usability Testing (e.g., Website or Software [ ] Focus Group  [ ] Other:				
<b>C</b> :	CERTIFICATION:				
<ol> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> <li>5.</li> </ol>	<ol> <li>I certify the following to be true:</li> <li>The collection is voluntary.</li> <li>The collection is low-burden for respondents and low-cost for the Feder</li> <li>The collection is non-controversial and does <u>not</u> raise issues of concern</li> <li>The results are <u>not</u> intended to be disseminated to the public.</li> <li>Information gathered will not be used for the purpose of <u>substantially</u> in</li> <li>The collection is targeted to the solicitation of opinions from respondent program or may have experience with the program in the future.</li> </ol>	to other federal agencies.  forming <u>influential</u> policy decisions.			
Na	Name: Terrye Verge				
To	To assist review, please provide answers to the following question:				
1.	<ol> <li>Personally Identifiable Information:</li> <li>Is personally identifiable information (PII) collected? [ ] Yes [X ] No</li> <li>If Yes, is the information that will be collected included in records that a 1974? [ ] Yes [ ] No</li> </ol>				

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

#### **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/households	857	1	5/60	71
Totals		857		71

Category of Respondent	Total Burden	Hourly Wage Rate*	Total Burden Cost	
	Hours	_		
Staff	71	\$34.12	\$2,422.52	
Total			\$2,422.52	

<sup>\*</sup>Bls.gov Occupational Employment and Wages, May 2018 Metropolitan and Nonmetropolitan Area Occupational Employment and Wage Estimates Washington-Arlington-Alexandria, DC-VA-MD-WV, <a href="https://www.bls.gov/oes/current/oes">https://www.bls.gov/oes/current/oes</a> 47900.htm

#### **FEDERAL COST:** The estimated annual cost to the Federal government is \$1,445.80.

				Fringe (if applicable)	Total Cost to Gov't
Staff	Grade/Step	Salary*	% of Effort	иррисиоте)	
Federal Oversight					
Supervisory HR	GS 14/8				
Specialist		\$144,538	1%		\$1,445.80
Contractor Cost					
Travel					
Other Cost					
Total					\$1,445.80

<sup>\*</sup>the Salary in table above is cited from <a href="https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2018/DCB.pdf">https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2018/DCB.pdf</a>

### 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 sent out through an email to all users of the WiTS system:

# Administration of the Instrument1. 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

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