Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB#: 0925-0648)

TITLE OF INFORMATION COLLECTION: Live Chat User Satisfaction Survey

PURPOSE: NIDDK OCPL wishes to gauge satisfaction with its new live chat channel which will field inquiries from visitors to the NIDDK website.

DESCRIPTION OF RESPONDENTS:

- Visitors to the NIDDK website that seek guidance or additional information in regards to health information.

TYPE OF COLLECTION: (Check one)

[ ] Customer Comment Card/Complaint Form
[ ] Usability Testing (e.g., Website or Software)
[ ] Focus Group
[X] Customer Satisfaction Survey
[ ] Small Discussion 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: Joslin Sheridan

To assist review, please provide answers to the following question:

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? [X] Yes [ ] No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [X] 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

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	4,236	1	2/60	141
Totals		4,236		141

Cost to Respondent

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals or Households	141	$25.72	$3,632
Totals	**141**		$3,632

*Source: U.S. Bureau of Labor Statistics May 2019 National Occupational Employment and Wage Estimates, United States

FEDERAL COST: The estimated annual cost to the Federal government is ___$1,517___

Staff	Grade/Step	Salary	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Lead Public Health Advisor	14/10	$159, 286	2%		$427
Contractor Cost—Marketing Strategy & Analysis Senior Associate		$1,090	100%		$1,090
Travel					
Other Cost					
Total					$1,517

*The Lead Public Health Advisor's cost is based on an estimated .5 hours per month of effort.

*the Salary in table above is cited from https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2021/DCB.pdf

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 potential group of respondents will be visitors to the NIDDK website that choose to engage in a live chat conversation. The website currently receives inquiries through the phone or email, around 4, 236 annually. We anticipate that individuals that typically engage NIDDK's inquiry response center via email or the phone will choose to use the live chat function. Respondents to the live chat will have the option to complete the survey every time they choose to engage in a live chat conversation.

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

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