

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 3133-0188)**

**TITLE OF INFORMATION COLLECTION:** Discussion Group: Virtual Exam Stakeholder Outreach

**PURPOSE:**

These small discussions groups will be used to solicit feedback from impacted parties in the modernization of the examination program. The Agency is interested in ideas for turning the exam program into a more virtual, offsite program that is more efficient based on the use of new technologies and exam approaches. These discussion groups will be used to gain insight on alternative approaches to performing examination steps through technology, analytics, or different methodologies.

**DESCRIPTION OF RESPONDENTS:**

The targeted groups for collection of information are credit unions, their primary vendors, offsite vendors, and state supervisory authorities (SSA). Credit unions have examinations every 12 to 18 months by examiners. Their data processors sometimes communicate with examiners about downloads and information gathering. Offline vendors are used in examinations to verify information on the credit union books, and SSA examiners hold joint exams with NCUA examiners.

**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 checked="" 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: Felicia Shepherd Date: 2/20/19

Program Contact: Felicia Shepherd, CURE

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**

NCUA, with assistance from Deloitte, will hold groups discussions with a small number of credit unions and ask the same questions of approximately 3 different groups. Small groups of SSAs will be asked a different set of questions. One-on-one discussions will be conducted with individual data processing vendors and other offline vendors to gather information on possible ideas for virtual exam processes.

Category of Respondent	No. of Respondents	Participation Time	Burden
Private Sector; Not-for-profit institutions (Credit unions) – 3 small groups with no more than 10 in each group	30	2	60
Private Sector; Businesses and other for-profit vendors - Individual	10	1.5	15
State Government; State Supervisory Authorities – 3 small groups of 9 or 10 states from each region	30	2	60
<b>Totals</b>			<b>135</b>

**FEDERAL COST:** The estimated annual cost to the Federal government is \$17,389.45

**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:** 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.

To identify the potential pool of credit union respondents, the five regional offices provided a list of interested and willing parties. We plan to select credit unions of varying asset sizes with varying complexities on their balances sheets.

To identify the potential list of vendors we will select among the most widely used credit union providers as these would have the largest impact on the industry based on agency reporting systems and internal knowledge of credit union service providers. The sample will include a variety of offered product types (loan types, investment services, compliance services)

To identify the potential list of SSAs, a large industry trade group (NASCUS) is providing us with a list of interested and willing parties.

### **Administration of the Instrument**

1. How will you collect the information? (Check all that apply)

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Web-based or other forms of Social Media | <input checked="" type="checkbox"/> In-person |
| <input checked="" type="checkbox"/> Telephone                                | <input type="checkbox"/> Mail                 |
|  | <input type="checkbox"/> Other, Explain       |

2. Will interviewers or facilitators be used?  Yes  No

Deloitte will be facilitating the interviews with each group and asking the interview questions for open discussions within each group.

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

## **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.**