# Request for Approval under the "Generic Clearance for Improving Customer Experience: OMB Circular A-11, Section 280 Implementation"

(OMB Control Number: 0651-0088)

**TITLE OF INFORMATION COLLECTION:** USPTO Website Survey - 2X3 A/B Pilot of Satisfaction and Trust Metrics

#### **PURPOSE OF COLLECTION:**

What are you hoping to learn / improve? How do you plan to use what you learn? Are there artifacts (user personas, journey maps, digital roadmaps, summary of customer insights to inform service improvements, performance dashboards) the data from this collection will feed?

USPTO wants to collect customer feedback on the experience using the www.uspto.gov website. The survey will allow us to learn about and measure customers' satisfaction with the website. It will also help us identify customer pain points with the website's design, navigation, and content. The feedback will assist with enhancements to these elements of the website.

In collaboration with OMB's Customer Experience (CX) team, this survey pilot will include A/B testing of different ways of asking about overall satisfaction and trust. The study will look at both question format (i.e., agree/disagree and construct-specific) and response scale (i.e., unipolar and bipolar). The pilot will help us better assess what impact wording could have on trust and satisfaction metrics. The data from this collection will be shared with the OMB CX team to incorporate into the evaluation of the CX survey model within Circular A-11, Section 280.

TYPE OF ACTIVITY: (Check one)
<pre>[ ] Customer Research (Interview, Focus Groups) [ X ] Customer Feedback Survey [ ] User Testing</pre>
ACTIVITY DETAILS
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. Who will you collect the information from?

Explain who will be interviewed and why the group is appropriate for the Federal program / service to connect with. Please provide a description of how you plan to identify your potential group of respondents and if only a sample will be solicited for feedback, how you will select them(e.g., anyone who provided an email address to a call center rep, a representative sample of Veterans who received outpatient services in May 2019, do you have a list of customers to reach out to (e.g., a CRM database that has the contact information, intercept interviews at a particular field office?)

Surveys will display to a random sampling of website visitors.

3. How will you ask a respondent to provide this information? (e.g., after an application is submitted online, the final screen will present the opportunity to provide feedback by presenting a link to a feedback form / an actual feedback form)

Surveys display as a pop-up form asking if the visitor would complete an optional survey.

4. What will the activity look like?

Describe the information collection activity – e.g. what happens when a person agrees to participate? Will facilitators or interviewers be used? What's the format of the interview/focus group? If a survey, describe the overall survey layout/length/other details? If User Testing, what actions will you observe / how will you have respondents interact with a product you need feedback on?

After visiting multiple webpages, a customer may be invited to participate in a voluntary survey. Surveys display as a pop-up form. If the customer agrees to respond to the option survey, the survey opens a new browser window for the survey.

They are able to begin the survey immediately or wait to respond until after they have finished their session on <a href="www.uspto.gov">www.uspto.gov</a>. Once they select to begin the survey, the respondent will answer one question on each page. After answering the final question, the respondent will select the Submit button and will then see a "Thank you" message.

Respondents will be randomly assigned and evenly distributed across six conditions. The experimental design is presented below.

Trust

Satisfaction	Agree/disagree format with bipolar scale	Construct-specific format with unipolar scale
Agree/disagree format with bipolar scale		
Construct-specific format with unipolar scale		
Construct-specific format with bipolar scale		

Each respondent will be randomly presented with 1 of the 2 versions of the trust question and 1 of the 3 customer satisfaction question. No respondent will be presented with multiple versions of the same question.

5. Please provide your question list.

Paste here the questions or prompts presented to participants in your activity. If you have an interview / facilitator guide, that can be attached to the submission and referenced here.

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

### Customer Satisfaction Metric - 3 versions

Alternative 1: Agree/disagree format with bipolar scale

Please indicate your level of agreement with the following statement:

I am satisfied with my experience visiting www.uspto.gov today.

Strongly disagree
Disagree
Neither agree nor disagree
Agree
Strongly agree

Alternative 2: Construct-specific format with unipolar scale

Overall, how satisfied are you with your experience visiting www.uspto.gov today?

□ Not at all satisfied

Not at all satisfie
A little satisfied
Somewhat satisfied
Very satisfied
Extremely satisfied

Alternative 3: Construct-specific format with bipolar scale

Overall, how satisfied are you with your experience visiting www.uspto.gov today?  Uvery dissatisfied  Dissatisfied  Neither satisfied nor dissatisfied  Satisfied  Very satisfied
<b>Trust Metric – 2 versions</b> Alternative 1: Agree/disagree format with bipolar scale
Please indicate your level of agreement with the following statement:
I trust USPTO to grant patents and register trademarks in accordance with U.S. laws and regulations.
<ul> <li>□ Strongly disagree</li> <li>□ Disagree</li> <li>□ Neither agree nor disagree</li> <li>□ Agree</li> <li>□ Strongly agree</li> </ul>
Alternative 2: Construct-specific format with unipolar scale
How much do you trust USPTO to grant patents and register trademarks in accordance with U.S. laws and regulations?
<ul> <li>□ I do not trust USPT0</li> <li>□ I trust USPT0 a little</li> <li>□ I trust USPT0 somewhat</li> <li>□ I trust USPT0 a lot</li> <li>□ I trust USPT0 a great deal</li> </ul>
Remaining questions on survey Which of the following was true about your experience when visiting www.uspto.gov today?
□ Very dissatisfied □ Dissatisfied □ Neither satisfied nor dissatisfied □ Satisfied □ Very
☐ It was easy to complete what I needed do ☐ It took a reasonable amount of time to do what I needed to do ☐ I understood what steps I needed to take to do what I needed to do

How can we improve your experience when visiting www.uspto.gov?

• [Open text box for written response]

Please indicate your level of agreement with the following

statement:
I trust USPTO to grant patents and register trademarks in accordance with U.S. laws and regulations.
<ul> <li>□ Strongly disagree</li> <li>□ Disagree</li> <li>□ Neither agree nor disagree</li> <li>□ Agree</li> <li>□ Strongly agree</li> </ul>
What was the purpose of your visit to www.uspto.gov today?
Choose all that apply:
Gather information Search for existing patents or trademarks Apply for a patent or to register a trademark Check the status of an application Respond to an office action Maintain an existing patent or trademark Pay fees File an appeal or petition Access reports or data Search for a job Find and/or register for events Other [please describe]
Was your visit to www.uspto.gov related to Patents, Trademarks, both, or something else?  Patents Trademarks Both patents and trademarks Something else [please describe]
Were you able to complete what you wanted to do today on www.uspto.gov?
<ul><li>☐ Yes</li><li>☐ No [please describe]</li><li>☐ Partially [please describe]</li></ul>
In the past 12 months, about how often have you visited www.uspto.gov?  □ First time

	Daily Weekly Monthly Once every few months Once every 6 months or less often
with USPT	patent or trademark application(s) have you filed TO?  0 1 2 3 to 5 6 to 10 11 to 49 50 or more
today? □	Patent attorney
	Trademark attorney Copyright attorney Attorney not specializing in intellectual property Paralegal or legal assistant Business Owner Entrepreneur Engineer Inventor Agent
	Artist/designer Researcher Office or administrative support staff Educator Student Other [please describe]
	nost recent application for a patent or to register a c, did an attorney or agent represent you before
	Yes, an attorney or agent filed my application on my behalf No, I filed my application on my own
Which of	the following <u>best</u> describes your organization? Law firm Small business or startup Business (other than small business) Nonprofit or NGO Primary or secondary (K-12) school College or university

	<ul> <li>U.S. federal government</li> <li>U.S. state, local, tribal, or territorial government</li> <li>Foreign government</li> <li>Individual</li> <li>Other [please describe]</li> </ul>
	What is your organization's legal entity type?  Sole proprietorship Limited liability corporation (LLC) Limited liability partnership (LLP) Corporation Other [please describe]
	Which, if any, of the following describes your organization? Choose all that apply.  American Indian or Alaska Native owned Black or African American owned Disability owned Hispanic or Latino owned LGBTQ owned Located in a historically underutilized business zone (HUBZone) Native Hawaiian or Pacific Islander owned Small disadvantaged business Veteran owned Women owned Other [please describe] None of the above I would prefer not to answer
	What is your level of expertise in {DYNAMIC FILL BASED ON [REASON FOR VISIT: ITEM 6]: Patents; Trademarks; Patents and Trademarks}?  □ Novice □ Intermediate □ Expert
•	When will the activity happen?  Describe the time frame or number of events that will occur  (e.g., We will conduct focus groups on May 13,14,15, We plan

based on scheduling logistics concluding by Sept. 10<sup>th</sup>, or "This survey will remain on our website in alignment with the timing of the overall clearance.")

to conduct customer intercept interviews over the course of the Summer at the field offices identified in response to #2

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This 2 X 3 A/B pilot survey will run until sufficient results are received (no more than identified in the burden hours below) or

OMB and USPTO agree to end to pilot. It is estimated to take approximately three months to reach adequate response levels to analyze the performance of the pilot.

7. Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?
[ ] Yes [ X ] No
If Yes, describe:

#### **BURDEN HOURS**

Category of Respondent	No. of Respondents	Participation Time	Burden Hours
Individuals or households	2,319	4 minutes	155
Private sector	12,376	4 minutes	825
State, local, or tribal governments	214	4 minutes	14
Federal Government	92	4 minutes	6
Totals	15,000		1,000

#### **CERTIFICATION:**

I certify the following to be true:

- 1. The collections are voluntary;
- 2. The collections are low-burden for respondents (based on considerations of total burden hours or burden-hours per respondent) and are low-cost for both the respondents and the Federal Government;
- 3. The collections are non-controversial and do not raise issues of concern to other Federal agencies;
- 4. Any 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 near future;
- 5. Personally identifiable information (PII) is collected only to the extent necessary and is not retained;
- 6. Information gathered is intended to be used for general service improvement and program management purposes
- 7. Upon agreement between OMB and the agency aggregated data may be released as part of A-11, Section 280 requirements only on performance.gov. Summaries of customer research and user testing activities may be included in public-facing customer journey maps.
- 8. Additional release of data will be coordinated with OMB.

Name: Charles Thomas

All instruments used to collect information must include:

OMB Control No. 0651-0088 Expiration Date: 09/30/2025

## HELP SHEET (OMB Control Number: 0651-0088)

**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.

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:** 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.

#### **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.