# Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 3045-0137)

## TITLE OF INFORMATION COLLECTION:

Process and Implementation Evaluation of Public Health AmeriCorps: Grantee Survey

### **PURPOSE:**

AmeriCorps (formerly the Corporation for National and Community Service) requests approval from the Office of Management and Budget (OMB) to administer a survey as part of its process and implementation evaluation of Public Health AmeriCorps under the "Generic Clearance for the Collection of Routine Customer Feedback (OMB Control Number: 3045-0137)." The current application discusses the survey. An accompanying application discusses the focus group.

Public Health AmeriCorps is a partnership between AmeriCorps and the Centers for Disease Control and Prevention (CDC) with two main goals:

- 1. Address public health needs of local communities by providing support in state and local public health settings and advancing equitable health outcomes for underserved communities.
- 2. Create pathways to public health-related careers through onsite experience and training and recruiting AmeriCorps members who reflect the communities they serve.

The Grantee Survey is a component of a national evaluation of Public Health AmeriCorps. The purpose of the Grantee Survey is to identify any gaps in grantee resources and program delivery that can inform continuous improvement of the program. The survey covers questions on program design and implementation process, communities served, member recruitment and retention, training and professional support, career pathways for members, and partnerships. AmeriCorps will use the survey results internally to adapt and innovate the program, particularly member recruitment, training, and grantee-level processes. The users of the survey's results will be AmeriCorps leadership in Public Health AmeriCorps program offices and in the CEO's office to make decisions about program and service experience improvement for Public Health AmeriCorps members and communities served.

## **DESCRIPTION OF RESPONDENTS:**

The respondents are Public Health AmeriCorps partners who have received funding to implement a program that addresses public health needs of local communities and advance equitable health outcomes for underserved communities; and to create pathways for the members that serve to enter the public-health workforce.

Partners are nonprofit organizations, federally recognized Indian tribes, public, private, tribal, or faith-based nonprofit organizations as well as local or state agencies.

| TYPE OF COLLECTION: (Check one)  |   |
|--|---|
| [ ] Customer Comment Card/Complaint Form<br>[ ] Usability Testing (e.g., Website or Software | [ ] Customer Satisfaction Survey [ ] Small Discussion Group |

| [] | Focus | Group |
|----|-------|-------|
|----|-------|-------|

[X] Other: <u>Process evaluation survey</u>

#### **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 <u>not</u> raise issues of concern to other federal agencies.
- 4. The results are <u>not</u> intended to be disseminated to the public.
- 5. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> 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: Nicole Jones, COR |
|-------------------------|
|-------------------------|

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

## **Personally Identifiable Information:**

- 1. Is personally identifiable information (PII) collected? [ ] Yes [X] 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 reim | bursement of | expenses, to | ken of a | appreciation) | provide | d to |
|-------------------|----------------------|--------------|--------------|----------|---------------|---------|------|
| participants? [   | ] Yes [X] No         |              |              |          |               |         |      |

#### **BURDEN HOURS**

| Category of Respondent                    | No. of      | Participation | Burden   |
|---|-------------|---------------|----------|
|   | Respondents | Time          |          |
| 1 representative from each funded grantee | 82          | 30 minutes    | 41 hours |
|   |             |               |          |
| Totals                                    | 82          | 30 minutes    | 41 hours |

| FEDERAL COST:   | The estimated | annual cos | st to the | Federal | government is |
|-----------------|---------------|------------|-----------|---------|---------------|
| <b>\$17,743</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 fr                              | om this univers   | e?            |  |
|      |   | [X] Yes           | [.] No        |  |
|      |   |                   |               |  |
| If t | the answer is ves, please provide a description of both below (                           | or attach the sar | npling plan)? |  |

It 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?

There are currently 82 partners that are funded to implement a Public Health AmeriCorps program in their communities. AmeriCorps will contact all 82 funded partners to participate in the survey.

## **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   |
|    | [ X ] Other, Explain: online survey                          |
| 2. | Will interviewers or facilitators be used? [ ] Yes [ X] No   |

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

