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

**TITLE OF INFORMATION COLLECTION:** W&I Refundable Credits Examination Operations (RCEO) Toll-Free Customer Service

**PURPOSE OF COLLECTION:**

The Internal Revenue Service (IRS) has a balanced measurement system consisting of business results, customer satisfaction, and employee satisfaction. This initiative is part of the Service-wide effort to maintain a system of balanced organizational performance measures mandated by the IRS Restructuring and Reform Act (RRA) of 1998. This is also a result of Executive Order 12862 that requires all government agencies to survey their customers.

As part of an agency-wide initiative to monitor and improve customer satisfaction, the Interactive Voice Response (IVR) surveys measure customer satisfaction “at the point of transaction” after completion of a telephone call with an IRS representative. W&I solicits taxpayer feedback through customer satisfaction research to continually improve its RCEO Toll-Free customer service operation.

**TYPE OF ACTIVITY:** (Check one)

[ ] Customer Research (Interview, Focus Groups)

[X] Customer Feedback Survey

[ ] User Testing

**ACTIVITY DETAILS**

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

[ ] Web-based or other forms of Social Media

[X] Telephone

[ ] In-person

[ ] Mail

[ ] Other, Explain

1. Who will you collect the information from?

Callers are randomly selected by the IRS’ call center software system during business days. The survey goal is to receive 50 completed surveys at each of the 5 call sites each month. The surveying does not stop after the site goals are met each month.  Exceeding the monthly goal helps ensure statistical reliability and minimization of survey bias; however, not reaching the goal can have the opposite effect.

1. How will you ask a respondent to provide this information?

Notices of calls identified for survey invitation appear on IRS Customer Service Representatives (CSRs) telephone displays.  At the end of the service interaction, the CSR reads a short script to invite survey participation.  If callers give consent, the CSR transfers them to the contractor’s

IVR system and the survey is administered.

1. What will the activity look like?

The survey will comprise 12 questions, inclusive of the questions required per the A-11 Section 280 guidance.

1. Please provide your question list.

Attached

1. When will the activity happen?

The data collection period, for the base year and each option year, is from April 1 through March 31.

1. 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 survey Respondents annually** | **Participation Time** | **Burden****Hours** |
| Individuals | 3,000 | 5 mins | 250 |
|  |  |  |  |
| **Totals** | **3,000** | 5 mins | **250** |

**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; and,
7. Information gathered will only be shared publicly in the manner described in the umbrella clearance of this control number.

Name: \_\_\_\_\_\_Chiquita Russaw

**All instruments used to collect information must include:**

**OMB Control No. 1545-2290**

**Expiration Date: 07/31/2023**

**Sample PRA statement:**

This report is authorized under the Paperwork Reduction Act.  The approval is OMB No: 1545-2290, expiration date 7/31/2023. Data collected will be shared with IRS staff, but your responses will be used for research and aggregate reporting purposes only and will not be used for other non-statistical or non-research purposes such as direct enforcement activities. The information that you provide will fully be protected as allowable under the Freedom of Information Act (FOIA). Public reporting burden for this collection of information is estimated to average 5 minutes. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Special Services Section, SE:W:CAR:MP:T:M:S, Room 6129, 1111 Constitution Avenue, NW, Washington, DC 20224.

## HELP SHEET

## (OMB Control Number: XXXX-XXXX)

**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.