

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0648 Exp., date: 06/30/2024)**

**TITLE OF INFORMATION COLLECTION: OHR Proof of Concept Assessment Surveys**

**PURPOSE:** NIH OHR is going through a 6-month proof of concept as it explores how the organization can opt-in to a mostly virtual workplace and make it a model for the future. Throughout this proof of concept, OHR will be soliciting regular feedback from OHR employees and IC customers so that it can monitor its progress and adjust as needed. Areas of focus will be OHR employee satisfaction, OHR employee engagement, OHR employee resource needs, and agency customer satisfaction.

**DESCRIPTION OF RESPONDENTS:** NIH OHR federal employees. NIH federal employees utilizing OHR services.

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

- |  |  |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form          | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input 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: Joseph Ciaravella

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, is the information that will be collected included in records that are subject to the Privacy Act of 1974?  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**

<b>Forms</b>	<b>Category of Respondent</b>	<b>No. of Respondents</b>	<b>No. of Responses per Respondent</b>	<b>Time per Response (in hours)</b>	<b>Total Burden Hours</b>
OHR Proof of Concept Customer Survey	Federal Government	200	6	5/60	100
OHR Proof of Concept Assessment-Employees/Managers Pulse Check	Federal Government	366	7	5/60	214
Open Feedback	Federal Government	366	7	5/60	214
<b>Totals</b>		<b>566</b>	<b>6,324</b>		<b>527</b>

**COST TO RESPONDENTS**

<b>Category of Respondent</b>	<b>Total Burden Hours</b>	<b>Hourly Wage Rate*</b>	<b>Total Burden Cost</b>
Management Occupations	100	\$60.81	\$6,081
Human Resources Specialists	428	\$33.38	\$14,286
<b>Totals</b>			<b>\$20,367</b>

\* Bureau of Labor Statistics: The hourly rate for Life, Physical and Social Sciences occupations was obtained from [https://www.bls.gov/oes/2020/may/oes\\_nat.htm#19-0000](https://www.bls.gov/oes/2020/may/oes_nat.htm#19-0000) and was used for this calculation.

**FEDERAL COST:** The estimated annual cost to the Federal government is: \$20, 540

<b>Staff</b>	<b>Grade/Step</b>	<b>Salary*</b>	<b>% of Effort</b>	<b>Fringe (if applicable)</b>	<b>Total Cost to Gov't</b>
<b>Federal Oversight</b>					
Management Analyst	GS 14-2	130,441	10%		13,045
Management Analyst	GS 14-2	130,441	10%		7,495
<b>Contractor Cost</b>					
Travel					
Other Cost					
<b>Total</b>					<b>20,540</b>

\*The NIH Federal Employee salary estimated based on the locality pay for the DC-MD-VA-WV-PA salary table: <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2022/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?  
[x] 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?

Respondents will primarily be identified through existing agency email distribution lists (OHR-OM-OHR-ALL, NIH Executive Officers, Deputy EO Routable Group, Intramural Administrative Management Council, and Extramural Administrative Management Council). Some NIH federal agency customers may access the survey after utilizing one of the few OHR services that will be offered in person.

**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.**