

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: NCCIH Webinar Feedback Survey

PURPOSE: To provide a simple standard survey to enlist participant’s feedback following NCCIH-sponsored webinars. This survey will enable us to gauge participant satisfaction or dissatisfaction with our webinar events and continuously make improvements, if necessary. This collection of information is necessary to enable NCCIH to garner customer and stakeholder feedback in an efficient, timely manner, in accordance with our commitment to improving service delivery. The information collected from our customers and stakeholders will help ensure that users have an effective, efficient, and satisfying experience with the agency’s technical assistance webinars.

DESCRIPTION OF RESPONDENTS: Researchers, Research Trainees, Research Fellows, Health Care Practitioners, and the General Public.

FREQUENCY OF REPORTING: (Check one)

- Once Quarterly
- Monthly On Occasion
- Annually Other _____

TYPE OF COLLECTION: (Check one)

- Customer Comment Card/Complaint Form
- Usability Testing (e.g., Website or Software)
- Focus Group
- Customer Satisfaction Survey
- Small Discussion Group
- 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: B. Anita McRae-Williams

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, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [] Yes [X] 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

Category of Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
Registered individuals	400	1	10/60	67
Totals		400		67

COST TO RESPONDENT

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	67	\$31.44	\$2106.48
Totals			\$2106.48

*<https://www.bls.gov/news.release/empsit.t19.htm> Used “Education and health services”

FEDERAL COST: The estimated annual cost to the Federal government is **\$172.75**

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Outreach Program Manager (DER)	14/10	\$172,075	.1%		\$172.75
Contractor Cost					
Web Designer					
Survey Research Analyst					
Travel					
Other Cost					
Total					\$172.75

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?
[] Yes [X] 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?

Each individual who completes online registration to attend a virtual NCCIH webinar will receive the feedback survey following the conclusion of the webinar. Webinar registrants are generally NCCIH grantees or potential grantees and may be research trainees or research fellows. Completion of the feedback survey is optional.

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.