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: NINR Public Website Feedback Survey

PURPOSE:

The purpose of this information collection is to gather feedback on customer satisfaction to better understand the National Institute of Nursing Research's (NINR) website users and their reasons for accessing the website.

The survey will collect users' self-identified education and professional role(s), determine whether the users found what they were looking for on the website by selecting "Yes" to open a branch question that provides options to describe the type of information sought (and if not, they can select the "No" option to open a branch question that provides options to describe the difficulty encountered), and asks for additional information about the users' experience using the website.

The results of this survey will allow us to better understand who is coming to the NINR website so that we can better tailor it to their information needs as we continue to explore a website redesign.

DESCRIPTION OF RESPONDENTS:

Respondents will be users of the NINR public website. The respondents could include a mix of federal staff, contractors, external researchers, and the general public.

TYPE OF COLLECTION: (Check one)

[ ] Customer Comment Card/Complaint Form   [X] Customer Satisfaction Survey
[ ] Usability Testing (e.g., Website or Software   [ ] Small Discussion Group
[ ] Focus Group   [ ] Other:

FREQUENCY OF REPORTING: (Check one)

[ ] Once   [ ] Quarterly
[ ] Monthly   [X] On Occasion
[ ] Annually   [ ] 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 <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: <u>Jonathan Marker</u>

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 [ ] 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 minutes)	Total Burden Hours
Individuals (All Occupations)	300	1	2/60	10
Totals		**300**		**10**

COST TO RESPONDENT

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals (All Occupations [Occupation Code 00-0000])	10	$28.01	$280.10
Totals			**$280.10**

*BLS May 2021 National Occupational Employment and Wage Estimates, United States
https://www.bls.gov/oes/current/oes_nat.htm#00-0000

FEDERAL COST: The estimated annual cost to the Federal government is ___$308.60___

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					

Public Relations Manager	GS14, Step 6	$154,428	0.025%		$38.60
Contractor Cost**					
Researcher	N/A	$130,000	.1%		$130.00
Developer	N/A	$140,000	.1%		$140.00
Total					$308.60

*The Salary in table above is cited from https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2023/DCB.pdf.
**Salary reflected is approximate value at the time of the form submission. May be subject to slight variance/change.

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?

Respondents will be users accessing the NINR website who click on the popup survey upon arrival and complete the questions.

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.