

**SUBMISSION OF INFORMATION COLLECTION UNDER THE
Generic Clearance for the Collection of Qualitative Feedback on Agency Service
Delivery**

DATE OF REQUEST: August 30, 2016

SUB AGENCY (I/C): HHS/AHRQ

TITLE: Patient Key Informant Customer Satisfaction Survey for the Evidence Based Practice Center (EPC) Division

GENERIC CLEARANCE UNDER OMB#: 0925-0179

EXP. DATE: 11/30/2017

ABSTRACT:

The mission of the EPC program is to create reports that improve healthcare by supporting evidence-based decision making by patients, providers, and policymakers. To ensure that our reports answer the questions that are important to patient, we invite 1-2 patients or patient representatives as Key Informants to participate in designing the research questions that guide the report. In order to be certain our process effectively engages these patient Key Informants and to make sure that the final report answers their questions, we would like to ask them a few questions via an online tool about their experience and about the final report, once the project is completed and the final report has been posted. This information will be used to improve how we work with patients going forward and to improve the usefulness of our reports for patients.

TOTAL ANNUAL BURDEN APPROVED: 3,383 Hours Per year

BURDEN USED TO DATE: 404 hours.

BURDEN THIS REQUEST: 10 hours.

FEDERAL COST: The estimated annual cost to the Federal government is \$600_____.

IS RACE AND ETHNICITY DATA COLLECTED AS REQUIRED?

____ YES ____ NO ____x____ N/A

OBLIGATION TO RESPOND:

____x____ VOLUNTARY
____ REQUIRED TO OBTAIN OR RETAIN BENEFITS
____ MANDATORY

HOW WILL THIS SURVEY BE OFFERED?

____x____ WEB SITE
____ TELEPHONE INTERVIEW
____ MAIL RESPONSE
____ IN PERSON INTERVIEW
____ OTHER: _____

CONTACT INFORMATION:

NAME: Erwin Brown

TELEPHONE NUMBER: 301.427.1652

EMAIL ADDRESS: ebrown@ahrq.gov