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

## (OMB Control Number: 0535-0261)

**TITLE OF INFORMATION COLLECTION:**

* Illinois Department of Agriculture Customer Service Survey.

**PURPOSE OF COLLECTION:**

* Results from the survey will allow the Illinois Department of Agriculture (IDOA) staff to evaluate customer satisfaction for four Bureaus within the IDOA. The Bureaus will also use some of the information in an annual Public Accountability Report to the Comptroller for the state of Illinois.

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

[ ] Customer Research (Interview, Focus Groups, Surveys)

[X] Customer Feedback Survey

[ ] Usability Testing of Products or Services

**ACTIVITY DETAILS**

1. If this is a survey, will the results of this survey be reported to Touchpoints as part of quarterly reporting obligations specified in OMB Circular A-11 Section 280?

[ ] Yes

[X] No. results will be shared with the client for customer service improvement, but cannot be shared with respondents as all returns are anonymous.

[ ] Not a survey

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

[ ] Web-based or other forms of Social Media

[ ] Telephone

[ ] In-person

[X] Mail. There will be two mailings.

[ ] Other, Explain

1. DESCRIPTION OF RESPONDENTS – Who will you collect the information from?

The survey will contact customers of the four IDOA Bureaus mentioned below. The IDOA maintains these lists.

* For the Bureau of Warehouses, the universe is grain dealers and warehouses. Surveys will be mailed to all the businesses on their list (approximately 250).
* For the Ag Products Inspection Bureau, the universe is feed manufacturers, seed producers, and fertilizer distributors. The sample size will be 1,000 which is suitable for IDOA. The list will be sorted by size, then a systematic sample of 1,000 will be drawn so that a sample will accurately reflect the sampling universe.
* For the Environmental Programs Bureau, the universe is primarily agricultural producers and agribusiness owners. The sample size will be fixed at 1,000 and that is suitable for IDOA. The list will be sorted by size, then a systematic sample of 1,000 will be drawn so that a sample will accurately reflect the sampling universe.
* For the Bureau of Weights and Measures, the universe consists of gas stations, commercial establishments that use scales, and Registered Service Persons. For years, the sample size has been fixed at 1,000 and that is suitable for the IDOA. The list will be sorted by size, then a systematic sample of 1,000 will be drawn so that a sample will accurately reflect the sampling universe.
1. How will you ask a respondent to provide this information?
* The IDOA will mail questionnaires, along with a business reply envelope and cover letter, to the people and businesses that are selected for the surveys.
1. What will the activity look like?
	1. Respondents will complete a paper questionnaire and return it in a postage-paid business reply envelope. The time to complete a survey is estimated at 10 minutes. Nearly all of the questions use a 7 point scale where 1 means “Not at all satisfied” and 7 means “Extremely Satisfied.”
2. Please provide your question list.
* **Four questionnaires and two cover letters are attached.**
1. When will the activity happen?
* April and May 2024.
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 Respondents** | **Participation Time** | **Burden** |
| Responses | 600 | 10 min | 100 hrs |
| Non-responses | 2650 | 2 min | 88 hrs |
| **Totals** | **3250** |  | **188 hrs** |

**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;
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
7. The agency will follow the procedures specified in OMB Circular A-11 Section 280 for the required quarterly reporting to OMB of trust data and experience driver data from surveys.
8. Outside of the quarterly reporting mentioned in the bullet immediately above, if the agency intends to release journey maps, user personas, reports, or other data-related summaries stemming from this collection, the agency must include appropriate caveats around those summaries, noting that conclusions should not be generalized beyond the sample, considering the sample size and response rates. The agency must submit the data summary itself (e.g., the report) and the caveat language mentioned above to OMB before it releases them outside the agency. OMB will engage in a passback process with the agency.

Name and email address of person who developed this survey/focus group/interview:

**Name: Mark Schleusener**

**Email address: mark.schleusener@usda.gov**

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

**OMB Control No. 0535-0261**

**Expiration Date: 04/30/2027 NOTE: This date is not final, but should be close.**

## HELP SHEET

## (OMB Control Number: 0535-0261)

**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.