

## **Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0915-0212)**

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**TITLE OF INFORMATION COLLECTION:** Maternal, Infant, and Early Childhood Home Visiting Innovation Technical Assistant Center (ITAC) Satisfaction Surveys

**PURPOSE:** The purpose of this information collection request is to assess participant satisfaction with various training and technical assistance (TA) activities offered through a contracted TA provider, Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Innovation Technical Assistant Center (ITAC). ITAC supports the MIECHV Program Innovation awardees to develop, implement, and evaluate innovations that leverage new technology and/or data collection and sharing strategies to improve the delivery and extend the impact of high-quality early childhood home visiting programs. The overall purpose of the ITAC satisfaction surveys is to collect immediate awardee feedback on their TA experiences to make continuous improvements to service delivery. The contractor will protect the integrity of the data collected, provide opportunities for honest feedback, and maintain the confidentiality of survey participants. Data analysis for each tool will include basic descriptive statistics and qualitative analysis of responses.

The three instruments under this Information Collection are:

1. Annual Awardee Survey: Customer satisfaction on technical assistance received and learning collaboratives attended during the past year.
2. Post Webinar Survey: Customer satisfaction on webinars attended, taken after completing a webinar.
3. Post Learning Collaborative Survey: Customer satisfaction with learning collaboratives attended, taken after completing a learning collaborative.

**DESCRIPTION OF RESPONDENTS:**

MIECHV Program Innovation awardees and participants of webinars and learning collaborative activities provided by ITAC (who may or may not be MIECHV Program Innovation awardees). MIECHV Innovation Awards support state and territory MIECHV awardees, so the affected public would be state governments.

**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: Soohyun Kim, Senior Public Health Analyst**  
**Division of Home Visiting and Early Childhood Systems**  
**Maternal and Child Health Bureau**

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, will any information that is collected be included in records that are subject to the Privacy Act of 1974? [ ] Yes [ ] No
3. If yes, has an up-to-date System of Records Notice (SORN) 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

**BURDEN HOURS**

Category of Respondent	No. of Respondents <sup>1</sup>	Participation Time	Burden Hours Total
TA Recipients (MIECHV Program Innovation Awardees)	25	0.75	18.75
Webinar Attendees	400	0.08	32
Learning Collaborative Participants	240	0.08	19.2
<b>Total</b>			<b>69.95</b>

**FEDERAL COST:**

The estimated annual cost to the federal government is \$38,136, which includes \$1,777 in staff hours (30 hours at the GS 13, Step 4 level) in project management and contract oversight and \$36,359 in contract costs (estimated at 1% of the total contract cost) for survey administration and data analysis.

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions: N/A**

**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?

<sup>1</sup>The number of respondents is not an unduplicated count

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?

ITAC will have a list of all MIECHV Program Innovation Awardees that receive TA and all individuals that attend webinars or participate in learning collaboratives through pre-registration. There will be no sampling, all the TA recipients will receive the annual survey and all awardee/learning collaborative participants will receive webinar or learning collaborative survey, respectively, after each event.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)
  - Web-based or other forms of Social Media
  - Telephone
  - In-person
  - Mail
  - Other, Explain
2. Will interviewers or facilitators be used?    Yes  No

**Please make sure that all instruments, instructions, and scripts are submitted with the request.**