

**Request for Approval under the “Voluntary Partner Surveys to Implement  
Executive Order 12862” (OMB Control Number: 0915-0212)**

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**TITLE OF INFORMATION COLLECTION:** Tree Testing of HRSA’s Ryan White HIV/AIDS Program website

**PURPOSE:** The goal of tree testing is to assess the usability of the updated information architecture. The test results will validate or invalidate the proposed updates to the site’s information architecture.

**DESCRIPTION OF RESPONDENTS:** Primary audience of the Ryan White HIV/AIDS Program website, which includes current and prospective HIV/AIDS Bureau grant recipients and representatives of the HIV community.

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

- |   |   |
|---|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form                     | <input type="checkbox"/> Customer Satisfaction Survey |
| <input checked="" 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:** Richard Morey

To assist review, please provide answers to the following question:

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected?  Yes  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  No

**BURDEN HOURS**

Category of Respondent	No. of Respondents	Participation Time	Burden Hours Total
<b>Individuals:</b> Health care professionals and paraprofessionals	50	30 min.	25
<b>Totals</b>			25

**FEDERAL COST:**

The estimated annual cost to the federal government is \$2,000.00 which includes 1) \$1,200 in configuration and testing, and 2) \$800 (12 hours at the GS-14 level) in project management and oversight.

**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  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?

We will leverage existing relationships through our project officers to reach out to existing and prospective grantees, as well as to others with an interest in HRSA funding to choose participants from categories including:

- Current and former HIV/AIDS Bureau grant recipients
- Prospective HIV/AIDS Bureau grant recipients who have not been awardees in the past
- Representatives of the HIV community

When a recipient of the email selects the link, a random number will be attached to their study responses. This number will be the only way to identify the respondent.

**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.**