# Request for Approval under the "DOL Departmental Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 1225-0088)

| TITLE OF INFORMA | TION | COL | LECTION |
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Field Test for Safety and Health Programs

## **PURPOSE:**

The purpose of this request for approval under the existing generic clearance 1225-0088 is for a survey to determine the usefulness of a voluntary, step-by-step, web-based field test of worksheets and resources created to help support or build safety and health programs. OSHA wants to solicit feedback to learn about the specific experiences of individuals after reviewing and completing the worksheets. Information collected will ensure that these products meet the participant's needs and improve as needed.

## **DESCRIPTION OF RESPONDENTS:**

The field test will target individuals from the public, emphasizing workers and employers from various industries.

| TYPE OF COLLECTION: (Check one)   |  |
|---|--|
| [ ] Customer Comment Card/Complaint Form [ ] Usability Testing (e.g., Website or Software [ ] Focus Group | <ul><li>[X] Customer Satisfaction Survey</li><li>[] Small Discussion Group</li><li>[] Other:</li></ul> |

## **CERTIFICATION:**

I certify the following to be true:

- 1. The collection is voluntary.
- 2. The collection is a low burden for respondents and a low cost for the Federal Government.
- 3. The collection is non-controversial and does **not** raise issues of concern to other federal agencies.
- 4. OSHA will not disseminate the results to the public.
- 5. Information gathered will not be used to inform effective policy decisions substantially.
- 6. The collection is targeted at soliciting opinions from respondents who have experience with the program or may have experience with the program in the future.

| Name: | Pamela Barclay |  |
|-------|----------------|--|
|       |                |  |

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 of Records Notice  | e been published? [ ]                                | Yes [ ] No                          |         |
|---|--|-------------------------------------|---------|
| <b>Gifts or Payments:</b> Is an incentive (e.g., money or reimbursement of participants? [ ] Yes [X] No   | expenses, token of app                               | reciation) provide                  | ed to   |
| BURDEN HOURS OSHA Anticipates it will take respondents 5-10 r. complete the survey  | ninutes, with an averag                              | ge of 7 minutes, to                 |         |
| Category of Respondent  | No. of Respondents                                   | Participation<br>Time (in<br>hours) | Burde   |
| Field test participants   | 500  | (7/60 minutes)<br>0.116666667 h     | 58      |
| Totals  | 500  |                                     | 58      |
| If you are conducting a focus group, survey, or provide answers to the following questions:  The selection of your targeted respondents  1. Do you have a customer list or something sime respondents and do you have a sampling plan | nilar that defines the un<br>for selecting from this | iverse of potential                 |         |
| If the answer is yes, please provide a description  | [ ] Y<br>of both below (or attack                    | es [X] No  th the sampling pla      | •       |
| the answer is no, please provide a description of herespondents and how you will select them?   | now you plan to identif                              | y your potential g                  | roup of |
| We will be advertising the availability of the field<br>outreach meetings and presentations, and through<br>anyone who chooses to respond.  | _  |                                     | _       |
| Administration of the Instrument  1. How will you collect the information? (Check [X ] Web-based or other forms of Social [ ] Telephone     [ ] In-person     [ ] Mail     [ ] Other, Explain   | 11 0 /   |                                     |         |

2. Will interviewers or facilitators be used? [ ] Yes [ X ] No

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