

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 1670-0027)

TITLE OF INFORMATION COLLECTION:

Secure Tomorrow Series Participant Feedback Questionnaire

PURPOSE:

The Cybersecurity and Infrastructure Security Agency’s Secure Tomorrow Series is a strategic foresight capability that examines emerging and evolving risks that could significantly affect our nation’s critical infrastructure in the next 5 to 20 years. Secure Tomorrow Series strives to build a more resilient and secure future by bringing together groups of subject matter experts, thought leaders, and other stakeholders from diverse backgrounds to think proactively about future risks. Toward this end, the Secure Tomorrow Series team conducts several participant activities, including an annual “scenarios workshop” that serves as the capstone activity for each Secure Tomorrow Series cycle of performance.

To ensure that participant activities are effective, relevant, and timely, the Secure Tomorrow Series team would like to obtain feedback from participants using a brief, optional questionnaire. The Secure Tomorrow Series Participant Feedback Questionnaire, previously referred to as the “Cybersecurity and Infrastructure Security Agency (CISA) Stakeholder Feedback Survey,” was previously approved under 1670-0027.

The Secure Tomorrow Series team will conduct basic tabulation and qualitative analysis on the aggregate data and develop a summary briefing that will be provided to the National Risk Management Center managers and leadership to assist in finding opportunities for recognition or improvement.

The purpose of the Secure Tomorrow Series Participant Feedback Questionnaire is to gauge the level of satisfaction that participants have regarding the quality and effectiveness of Secure Tomorrow Series–hosted activities. The survey questionnaire will be emailed as a fillable PDF form to participants following completion of the activity.

DESCRIPTION OF RESPONDENTS:

Respondents to this instrument will include industry, academic, nongovernmental organization, and other non-federal government stakeholders who attend Secure Tomorrow Series activities hosted by the National Risk Management Center. All individuals participating in an activity will be voluntarily asked to complete the questionnaire upon completion of the activity.

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:

Leigh Blackburn and Erin Walsh

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, 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 or Records Notice 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	No. of Responses per Respondent	No. of Responses	Participation Time	Burden	Annual Burden Cost ¹
Secure Tomorrow Series Activity Participant	100	1	100	0.05 hours (3 minutes)	5 hours/year	\$196.25
Totals	100	1	100		5 hours/year	\$196.25

FEDERAL COST: The estimated annual cost to the Federal government is \$1,830.40.

It is estimated that the equivalent of one staff member at a GS level 14, Step 1 will spending approximately 1% of their time (2080 annual working hours x 1% = 20.8 hours) annually to review, analyze, and assimilate questionnaire responses.

¹ The above Average Hourly Wage Rate is the [May 2020 U.S. Bureau of Labor Statistics](https://www.bls.gov/news.release/ecec.t01.htm) average wage for “All Occupations” of \$27.07 per hour times the wage rate benefit multiplier of 1.45 (to account for fringe benefits) equaling \$39.25 per hour. The selection of “All Occupations” was chosen as the expected respondents for this collection could be expected to be from any occupation. The benefits multiplier is estimated by dividing total compensation of \$39.55 by salaries and wages of \$27.35, based on Employer Cost for Employee Compensation, June 2020 data, released September 2021. <https://www.bls.gov/news.release/ecec.t01.htm>.

Using the FY22 (Washington-Baltimore-Arlington) [GS pay scale](#), the fully-loaded wage rate for a GS14, Step 1 is \$88.00/hr (\$126,233 annual salary/2080 hours = \$60.69/hr base wage rate x 1.45 benefit multiplier = \$88.00/hr fully-loaded wage rate).

The annual government cost is estimated to be \$1,830.40 (20.8 hours annually x \$88.00 = \$1,830.40).

STATISTICAL METHOD:

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?
[X] 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?

Recipients are determined by standard distribution lists dependent upon product type.

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
 - [X] Other (email response)
An electronic fillable PDF form will be emailed to participants following completion of the Secure Tomorrow Series activity. Completed questionnaire responses will be separated from e-mail addresses and saved in a manner that will not reveal information about the submitter.
2. Will interviewers or facilitators be used? [X] Yes, for email distribution of questionnaire [] No

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

Instructions for completing Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback”

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.

DESCRIPTION OF RESPONDENTS: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

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: Provide answers to the questions.

Gifts or Payments: If you answer yes to the question, please describe the incentive and provide a justification for the amount.

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.

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.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.

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. Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

Administration of the Instrument: Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

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