

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0970-0401)

TITLE OF INFORMATION COLLECTION: Child Welfare Information Gateway’s Grantee Exchange Platform Feedback Surveys

PURPOSE: Child Welfare Information Gateway (Information Gateway) is a service of the Children’s Bureau (CB), a component within the Administration for Children and Families, and is dedicated to the mission of connecting professionals and concerned citizens to information on programs, research, legislation, and statistics regarding the safety, permanency, and well-being of children and families.

Information Gateway has developed the Grantee Exchange platform to support collaboration, learning, and information sharing among grant recipients. It is an online community for grantees to connect, ask questions, share resources, and leverage collective learning in the service of achieving grant goals. To inform enhancements to the Grantee Exchange platform, these surveys will collect feedback from two respondent groups: one with familiarity with the platform and one without much familiarity. The overall purpose of these surveys is to gather feedback from users with different experience levels with the Grantee Exchange. Information collected will be used to make modifications to the Grantee Exchange platform so that it can better meet all user needs.

DESCRIPTION OF RESPONDENTS:

Newer Users: Respondents to the New User Survey will include Fiscal Year (FY) 2021 Family Support Through Primary Prevention grantees with Grantee Exchange licenses.

Experienced Users: Respondents to the Experienced User Survey will include FY 2018 and FY 2019 Family Support Through Primary Prevention grantees and FY 2018 and FY 2019 Community Collaborations to Strengthen and Preserve Families grantees with Grantee Exchange licenses.

TYPE OF COLLECTION:

☐ Customer Comment Card/Complaint Form	☒ Customer Satisfaction Survey
☐ Usability Testing (e.g., Website or Software	☐ Small Discussion Group
☐ Focus Group	☐ 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 primary purpose of the results is not for public dissemination.

- Information gathered will not be used for the purpose of substantially informing influential policy decisions.
- 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 and affiliation: Beth Claxon, Child Welfare Program Specialist, ACF Administration on Children, Youth and Families (ACYF)

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

Personally Identifiable Information:

- Is personally identifiable information (PII) collected? ☐ Yes ☒ No
- If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? ☐ Yes ☐ No
- 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

Information Collection	Category of Respondent	No. of Respondents	No. of Responses per Respondent	Estimated Time per Response	Burden Hours
Child Welfare Information Gateway's Grantee Exchange Platform New User Survey	Individuals	50	1	0.0833	4.17
Child Welfare Information Gateway's Grantee Exchange Platform Experienced User Survey	Individuals	50	1	0.0833	4.17
Totals		100	1	.0833	8

FEDERAL COST: The estimated annual cost to the Federal government is: \$1,316.40

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

- 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.

Survey recipients will include those grantees in the FY2021 Family Support Through Primary Prevention Program with a Grantee Exchange license, FY 2018 and FY 2019 Family Support Through Primary Prevention grantees, and FY 2018 and FY 2019 Community Collaborations to Strengthen and Preserve Families grantees with Grantee Exchange licenses.

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.