## Request for Approval under the “Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery”

## (OMB Control Number: 2030-0051; EPA ICR Number: 2434.245)

**TITLE OF INFORMATION COLLECTION:** Planning with Structured Decision Making/DASEES

**PURPOSE:**

The purpose of this ICR is to collect information on user experience with DASEES as part of community planning workshops. The information gathered from this collection largely focuses on user satisfaction with the content, functionality and usefulness of DASEES as a decision support tool for community planning. The survey also seeks to understand whether the workshops are sufficient in introducing attendees to DASEES tools and resources. Under this ICR, EPA will collect information necessary: 1) to gauge respondent satisfaction with DASEES in a workshop setting; 2) to understand user experiences with features; and 3) to facilitate development of training resources to increase user confidence with DASEES.

This information collection with be conducted using low-burden web surveys

**DESCRIPTION OF RESPONDENTS**:

Respondents will consist of those individuals who have attended an online or in-person workshop/meeting where DASEES was used. Surveys will be sent out as part of the post-application follow-up materials, and all responses are voluntary.

At present, the list of potential respondents includes the following: individuals from federal government, state/local government, university/research institutions, non-profit organizations, and concerned citizens. We expect our respondents to be wide-ranging, including students, government employees and contractors, city planners, and educators, among others. Respondents will be representing their own view of the webinar/training, and not that of their organization.

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

[ ] Customer Comment Card/Complaint Form [x] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software [ ] Small Discussion Group

[ ] Focus Group [ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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** | **Participation Time** | **Burden Hours** |
| Individuals or Households | 100 | 5 | 8.3 |
| **Totals** | 100 | 5 | 8.3 |

**FEDERAL COST:** The estimated annual cost to the Federal government is: $6,600.

**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 [x] 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?

The DASEES Team is leveraging existing relationships with partner organizations (e.g., State Agencies, FEMA) who organize community planning meetings attended by private citizens, and employees of state and federal agencies. Those organizations receive voluntary registration and contact information from attendees. A survey link will be sent to all workshop participants who registered and for whom there is an available email address.

Attendees of conference sessions or other trainings will be asked if they want to voluntarily receive the satisfaction survey. Survey responses will be completely voluntary.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)

[x] Web-based or other forms of Social Media

[ ] Telephone

[ ] In-person

[ ] Mail

[ ] Other, Explain

1. Will interviewers or facilitators be used? [ ] Yes [ x] No

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

**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.

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