# Request for Approval under the "Generic Clearance for Improving Customer Experience: OMB Circular A-11, Section 280 Implementation"

(OMB Control Number: 2511-0001)

**TITLE OF INFORMATION COLLECTION:** Partner/Intermediary Customer Survey

#### **PURPOSE OF COLLECTION:**

TYPE OF ACTIVITY: (Check one)

What are you hoping to learn / improve? How do you plan to use what you learn? Are there artifacts (user personas, journey maps, digital roadmaps, summary of customer insights to inform service improvements, performance dashboards) the data from this collection will feed?

The goal of this customer survey is to gain insights into partner/intermediary customer experiences and satisfaction levels with HUD services. Broadly, the collected data will help HUD better understand its customers, inform leadership on HUD's organizational performance as it relates to customer experience, and support data-driven decisions to enhance service delivery and customer satisfaction levels.

In the near term, survey data will feed internal trackers, such as the HUD Organizational Health Dashboard, to monitor and measure the impact of ongoing initiatives as well as inform strategic workforce planning.

Survey data will also support organizational health and performance reporting, such as M-23-15 reporting to HUD leadership and other federal entities. Over the long term, we intend to aggregate this and other survey data to construct a baseline of HUD's customer experience performance, enabling analyses that assess HUD's customer experience performance over time. This information will also be trended against information collected during 2021 CX Visioning Sessions.

Survey insights will also be used to identify opportunities to improve HUD's ability to partner successfully.

Ē	X ] Customer Research (Interview, Focus Groups, Surveys) ] Customer Feedback Survey ] Usability Testing of Products or Services
AC	TIVITY DETAILS
1.	If this is a survey, will the results of this survey be reported to Touchpoints as part of quarterly reporting obligations specified in OMB Circular A-11 Section 280?  [ ] Yes [ X ] No [ ] Not a survey
2.	How will you collect the information? (Check all that apply)

	X	] Web-based	or	other	forms	of	Social	Media
	]	Telephone						
	]	In-person						
	]	Mail						
[	]	Other, Exp	laiı	า				

3. Who will you collect the information from? Explain who will be interviewed and why the group is appropriate for the Federal program / service to connect with. Please provide a description of how you plan to identify your potential group of respondents and if only a sample will be solicited for feedback, how you will select them(e.g., anyone who provided an email address to a call center rep, a representative sample of Veterans who received outpatient services in May 2019, do you have a list of customers to reach out to (e.g., a CRM database that has the contact information, intercept interviews at a particular field office?)

We will collect the information from partner/intermediary customers (including, but not limited to public housing authorities, grantees, lenders, public housing industry, housing industry, disability groups, homelessness groups, etc.)

In this survey, we are specifically interested in collecting feedback from customers who partner with HUD's program offices to provide essential services to public customers. Given their crucial role in our work, their perspectives, experiences, and insights serve as an invaluable resource for understanding and enhancing our service delivery.

We plan to reach out to the identified Program Offices to obtain email distribution lists of all their partner organizations.

4. How will you ask a respondent to provide this information? (e.g., after an application is submitted online, the final screen will present the opportunity to provide feedback by presenting a link to a feedback form / an actual feedback form)

The survey will be deployed via email to customers identified as a part of one of HUD's partnering organizations. An email invitation will be sent to recipients, and the email will include a brief introduction about the purpose of the survey and a secure link to the online survey.

The survey link created in Medallia will be emailed to the participants requesting their feedback. By sending a survey over email, respondents can complete the survey at a time that's convenient for them, increasing the likelihood of their participation. We want to make this process as user-friendly as possible to encourage responses and obtain high quality, useful feedback.

5. What will the activity look like?

Describe the information collection activity – e.g. what happens when a person agrees to participate? Will facilitators or interviewers be used? What's the format of the interview/focus group? If a survey, describe the overall survey layout/length/other details? If User Testing, what actions will

you observe / how will you have respondents interact with a product you need feedback on?

The feedback survey will be collected through the Medallia platform, which will be accessible via a feedback link emailed to the participants. Along with the feedback link, there will be a short description outlining the purpose and nature of the survey:

"This voluntary feedback survey aims to gather stakeholder feedback and insights to enhance our understanding and improve our assistance and programs. If you wish, please click on the link to complete the survey."

Upon opting to participate, stakeholders will simply click on the feedback link, redirecting them to the survey on their internet browser. The survey is designed to be completed in under 20 minutes. It comprises various question formats, including multiple-choice, binary scale (thumbs up, thumbs down), and optional open comment section. Importantly, all questions within the survey are optional, allowing participants to provide feedback as they see fit.

### 6. Please provide your question list.

Paste here the questions or prompts presented to participants in your activity. If you have an interview / facilitator guide, that can be attached to the submission and referenced here.

"This voluntary feedback survey aims to gather stakeholder feedback and insights to enhance our understanding and improve our assistance and programs. If you wish, please click on the link to complete the survey."

#	Question	Answer Choices	Question Type
	Which Program Office(s) do you primarily work with? (check all that apply)	<ul> <li>Center for Faith-Based and Neighborhood Partnerships (e.g., Capacity Building for Community Development and Affordable Housing Program)</li> <li>Community Planning and Development (e.g., Community Development Block Grant (CDBG) Program, Emergency Solutions Grants (ESG) Program)</li> <li>Fair Housing and Equal Opportunity (e.g., Fair Housing Assistance Program (FHAP), Economic Opportunities for Low- and Very-Low Income Persons (Section 3))</li> <li>Field Policy and Management (HUD field offices and field operations) Ginnie Mae (e.g., Mortgage-Backed Securities Program)</li> <li>Healthy Homes and Lead Hazard Control (e.g., Lead-Based Paint Hazard)</li> <li>Housing (e.g., Federal Housing Administration (FHA) Programs, Housing for the Elderly (Section 202), Project-Based Rental Assistance (PBRA))</li> <li>Policy Development and Research (e.g., Research Partnerships Program)</li> <li>Public and Indian Housing (e.g., Public</li> </ul>	Check applicable (Multi- selection)

2	What is the number of	Housing Capital Fund (PHCF), Housing Choice Voucher Program)  Small/Disadvantaged Business Utilization (e.g., Small Disadvantaged Business Participation Program)  Other (fill in the blank if not listed)	Select one
2	customers that your organization provides benefits or services to on an annual basis?	<ul> <li>0-50 customers</li> <li>51-100 customers</li> <li>101-500 customers</li> <li>500-1000 customers</li> <li>1001+ customers</li> </ul>	
3	How long have you personally been engaged with the HUD partnership?	<ul><li>0-1years</li><li>1-2years</li><li>3-5years</li><li>6years+</li></ul>	Select one
4	Based on your experience over the past year, has your trust in HUD increased?	<ul><li>Thumbs Up</li><li>Thumbs Down</li></ul>	Select one
5	What about your experience over the past year increased your trust in HUD?	<ul> <li>My needs were addressed</li> <li>It was easy to complete what I needed to do</li> <li>It took a reasonable amount of time to do what I needed to do</li> <li>I understand what was being asked of me throughout HUD's processes</li> <li>I was treated fairly</li> <li>Employees I interacted with were helpful</li> <li>Employees were accessible</li> <li>Other (fill in the blank)</li> </ul>	Check applicable (Multi- selection)
6	Why did your experience over the past year not increase your trust in HUD?	<ul> <li>My needs were not addressed</li> <li>It was difficult to complete what I needed to do</li> <li>It took too long to do what I needed to do</li> <li>I did not understand what was being asked of me throughout HUD's processes</li> <li>I was not treated fairly</li> <li>Employees I interacted with were not helpful</li> <li>Employees were inaccessible</li> <li>Other (fill in the blank)</li> </ul>	Check applicable (Multi- selection)
7	How would you rate your experience engaging with HUD?	<ul> <li>Unacceptable</li> <li>Poor</li> <li>Sufficient</li> <li>Good</li> <li>Excellent</li> <li>N/A</li> </ul>	Rating scale
8	How important is it to engage with HUD personnel face-to-face to meet your objectives?	<ul> <li>Extremely Unimportant</li> <li>Unimportant</li> <li>Neutral</li> <li>Important</li> <li>Extremely Important</li> </ul>	Rating scale
9	How often do you want to meet face-to-face with HUD personnel for the following activities?  Monitoring Property Inspection Technical Assistance General Program/Policy Support Training Networking/Knowledge-Sharing Meetings	<ul> <li>Do not want face-to-face interactions</li> <li>Less frequently</li> <li>Current balance of virtual/face-to-face interactions are appropriate</li> <li>More face-to-face interactions are needed</li> <li>N/A</li> </ul>	Select One (per option)

	Other (fill in the		
	Other… (fill in the blank)		
10	What is your preferred method of engaging with HUD?	<ul> <li>Emails</li> <li>Video Conferences</li> <li>Phone Calls</li> <li>Text Messages</li> <li>Mail</li> <li>Website</li> <li>Face-to-face Interaction</li> </ul>	Rating scale (rank top 3)
11	How easy is it to use the HUD website to find the information you need?	<ul> <li>Very difficult</li> <li>Difficult</li> <li>Adequate</li> <li>Easy</li> <li>Very easy</li> <li>N/A</li> </ul>	Rating scale
12	Where do you see opportunities for HUD to incorporate information/digital technology to enhance the quality of services provided to your organization?	<ul> <li>Improve grants management tools</li> <li>Improve ease of navigating the HUD website</li> <li>Improve customers' ability to locate resources/people (e.g., chatbot)</li> <li>Verify online resources (e.g., handbooks) are authoritative and up-to-date</li> <li>Digitalize and/or automate manual processes</li> <li>Other (fill in the blank)</li> <li>N/A</li> </ul>	Rating scale (rank top 3)
13	How can we improve your experience interacting with HUD?		Open Ended
14	How can HUD improve its assistance to the American public?		Open Ended

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

7. When will the activity happen?

Describe the time frame or number of events that will occur

(e.g., We will conduct focus groups on May 13,14,15, We plan

to conduct customer intercept interviews over the course of

the Summer at the field offices identified in response to #2

based on scheduling logistics concluding by Sept. 10<sup>th</sup>, or

"This survey will remain on our website in alignment with the

timing of the overall clearance.")

We plan to open the survey mid-March and close the survey at the end of March, allowing over a week for customers to participate. We will send out reminders to the identified customers over the course of the survey to gently encourage feedback. We will analyze the results and summarize the findings by Mid-April and conduct out brief follow up communications by the end of April .

8.	Is an incentiv	e (e.g.,	money or	reimbursement of	expenses,
	token of appre	ciation)	provided	to participants?	
	[ ] Yes [ X ]	No			
	If Yes, descri	be:			

#### **BURDEN HOURS**

Category of Respondent	No. of Respondents	Participation Time	Burden Hours
Partner/Intermediary Customers (public housing authorities, state/local municipalities, lenders, etc.)	1,200	20/60	400
Totals			

#### **CERTIFICATION:**

I certify the following to be true:

- 1. The collections are voluntary;
- 2. The collections are low-burden for respondents (based on considerations of total burden hours or burden-hours per respondent) and are low-cost for both the respondents and the Federal Government;
- 3. The collections are non-controversial;
- 4. Any 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 near future;
- 5. Personally identifiable information (PII) is collected only to the extent necessary and is not retained;
- 6. Information gathered is intended to be used for general service improvement and program management purposes
- 7. The agency will follow the procedures specified in OMB Circular A-11 Section 280 for the required quarterly reporting to OMB of trust data and experience driver data from surveys.
- 8. Outside of the quarterly reporting mentioned in the bullet immediately above, if the agency intends to release journey maps, user personas, reports, or other data-related summaries stemming from this collection, the agency must include appropriate caveats around those summaries, noting that conclusions should not be generalized beyond the sample, considering the sample size and response rates. The agency must submit the data summary itself (e.g., the report) and the caveat language mentioned above to OMB before it releases them outside the agency. OMB will engage in a passback process with the agency.

Name and email address of person who developed this survey/focus group/interview:

Name: Shimu Anjir

Email address: shimu.anjir@hud.gov

All instruments used to collect information must include:

OMB Control No. 2511-0001 Expiration Date: 12/31/2024

### HELP SHEET (OMB Control Number: XXXX-XXXX)

**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.

**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:** Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

#### **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 per row.

**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.