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: HUD Digital Experience Web Survey

PURPOSE OF COLLECTION:

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?

To collect customer experience feedback on all website pages within hud.gov. This feedback will provide insight into the quality of information shared on all webpages associated with hud.gov and the user experience of navigating the information on those webpages.

Data gathered through a survey will be used to explore and evaluate HUD's role in improving customer experience.

TYPE OF ACTIVITY: (Check one)
<pre>[] Customer Research (Interview, Focus Groups, Surveys) [X] Customer Feedback Survey [] Usability Testing of Products or Services</pre>
[] Usabitity restring or Products of Services
ACTIVITY DETAILS
<pre>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</pre>
<pre>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, Explain</pre>
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 customers (including, but not limited to homeowners, residents, renters, members of FHIP, FHAP, attorneys/lawyers, etc..) who visit the hud.gov webpages and want to provide feedback.

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 displayed via a feedback button on the site of the website page. The survey will then pop up when a person clicks the feedback button.

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?

Customer Experience feedback will be collected through the Medallia platform which will be linked to the feedback button on the side of the web page. The beginning of the survey explains the nature of the survey.

If a customer chooses to participate, they will click the feedback link and will be taken to the survey in their internet browser. The survey should take less than 5 minutes if full filled out. Question response types include multiple choice a binary scale (thumbs up, thumbs down), and one optional open comment question.

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.

Metric/Driver

Trust	This interaction increased my trust in HUD	. •
Satisfaction	I was satisfied with my experience interacting with HUD.	. IT
Effectiveness, Ease, Efficiency, Transparency, Other	What about this interaction increased your trust in HUD? (Choose all that apply) ** these answer choices will show up if someone provided a 'thumbs-up'	 The information on the site was useful It was easy to find what I needed I found what I needed on the site quickly I understood the information on the website Something else
Effectiveness, Ease, Efficiency, Transparency, Other	Why did this interaction not increase your trust in HUD? (Choose all that apply) **these answer choices will show up if someone provided a 'thumbs	 The information on the site was not useful It was not easy to find what I needed It took too long to find the information on the site I did not understand the information on the website Something else
How Website was found	How did you find the website?	 Search engine HUD.gov Landlord Lawyer HUD Employee Another government agency HUD or social media
Type of Customer	I would describe myself as:	 Property resident/renter Homeowner Housing provider Person who is homeless/unsheltered Social Worker Legal professional Fair Housing Initiatives Program (FHIP) agency Fair Housing Assistance Program (FHAP) agency Other Fair Housing or Civil Rights professional

Location	Where are you located?	(All 50 States, Puerto Rico, DC and USVI)
Open comment	How can we improve your experience on our website? (this question is not required for survey completion)	Open Comment Box

Please make sure that all instruments, instructions, and scripts are submitted with the request. See attached- sample of Medallia survey

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. 10th, or

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

timing of the overall clearance.")

We are aiming to launch the survey on all hud.gov website by April 30th,

8. Is an incentive (e.g., money or reimbursement of expenses,
 token of appreciation) provided to participants?
 [] Yes [X] No
 If Yes, describe:

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden Hours
Customer Feedback Survey	3,000 per year	.0833 hours per respondent	250 hours per year
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 Anj:	ir					
Email	address: _						
All i	nstruments	used t	0 0	collect	information	must	include:

OMB Control No. 2511-0001 Expiration Date: 09/30/2024

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.