

**Request for Approval under the "Generic Clearance for Improving  
Customer Experience: OMB Circular A-11, Section 280  
Implementation"  
(OMB Control Number: 1601-0029)**

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**TITLE OF INFORMATION COLLECTION:** National Threat Assessment  
Center Survey Tool

**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?*

The purpose of this survey tool shall provide the Secret Service's National Threat Assessment Center (NTAC) with quantifiable data and validate the impact of outreach training efforts and is further used for the purpose to enhance training provided by NTAC based upon the survey data collected.

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

- Customer Research (Interview, Focus Groups, Surveys)
- Customer Feedback Survey
- Usability Testing of Products or Services

**ACTIVITY 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
  - No
  - Not a survey

2. How will you collect the information? (Check all that apply)
- Web-based or other forms of Social Media
  - Telephone
  - In-person
  - Mail
  - Other, Explain

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?)*

Survey participants are attendees of NTAC trainings, which typically include federal, state, local, and tribal law enforcement officers, K-12 personnel, such as teachers, administrators, counselors, and nurses, and other public safety professionals working in government, houses of worship or private enterprises.

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)*

NTAC training attendees will be asked to complete an electronic survey using Qualtrics, an online survey platform. At the conclusion of the training event, a PowerPoint slide will be displayed with a QR code that participants can scan with their cell phone camera. This code will direct them to the online survey. The PowerPoint slide also contains a URL website link that participants can type into their internet browser if they choose.

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 survey consists of 11 core questions that asks participants to indicate their perceptions regarding the NTAC training event they attended, and 7 background questions that asks participants about their background and demographic information.

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.*

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

## Survey Questions

### Core Questions:

Please select your level of agreement to the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Overall, I am satisfied with the training.					
The presenter(s) were knowledgeable about the topic.					
The presenter(s) held my attention.					
The case examples aided my understanding of concepts related to behavioral threat assessment.					
I learned new information at this NTAC training that could help me prevent targeted violence.					
Based on what I learned today, I am familiar with NTAC's principles of behavioral threat assessment.					
After completing this NTAC training today, I feel better prepared to identify concerning behaviors.					
After completing this NTAC training today, I feel more confident in my ability to gather the information required for making an assessment.					
After completing this NTAC training today, I feel more confident in my ability to manage the risk an individual poses by taking appropriate action.					
I intend to apply the behavioral threat					

assessment principles that I learned today in my job or at my workplace.					
I intend to read NTAC publications in the future.					

Background Items:

1. In what field do you currently work?
  - a. Education (e.g., K-12, higher education)
  - b. School Based Law Enforcement/Security (e.g., School Resource Officers, security officers, campus police)
  - c. Law Enforcement (e.g., non-school based federal, state, local, tribal)
  - d. First Responders (e.g., firefighters, EMS)
  - e. Mental Health (e.g., school psychologists, clinicians, counselors, therapists)
  - f. Social Worker
  - g. Healthcare
  - h. Government (non-law enforcement)
  - i. Military (e.g., Active Duty, Reserves, National Guard, Coast Guard)
  - j. Justice (e.g., probation/parole officers, corrections officers, prosecutors, judges)
  - k. Non-profit (e.g., community violence prevention leaders, service coordinators)
  - l. Private Sector (e.g., businesses/corporations, safety compliance, loss prevention, contracted security agencies, workplace violence)
  - m. Houses of Worship (e.g., clergy members, worship safety & security staff, faith leaders, religious personnel, volunteer group organizers)
  - n. Other
  
2. Is there a behavioral threat assessment team at your current place of employment?
  - a. Yes
  - b. No
  - c. Unsure
  
3. Are you currently serving on a behavioral threat assessment team?
  - a. Yes
  - b. No
  
4. Have you previously been involved in conducting a behavioral threat assessment?
  - a. Yes
  - b. No
  
5. Have you previously attended an NTAC training?
  - a. Yes
  - b. No

6. Beyond studying the topic, how many years of experience do you have working within the field of behavioral threat assessment?
  - a. Drop down
7. What brought you to the NTAC training today? Check all that apply.
  - a. Required training
  - b. Optional training
  - c. Referral
  - d. Personal curiosity/interest
  - e. Other

**End of survey language:**

We thank you for your time spent taking this survey.  
Your response has been recorded.  
For more on NTAC, visit our [website](#).

In accordance with 5 CFR 1320.5(b), an agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB Control No. for this survey is 1601-0029 (expires 12/31/2026). All responses are voluntary. The public reporting burden for this collection of information is estimated at 2 minutes per response, including the time for reviewing instructions, completing the survey, and submitting the survey. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Secret Service, Office of Strategic Planning and Policy, Enterprise Policy Division, 245 Murray Lane SW, Building T-5, Mail Stop #8404, Washington, DC 20223. **Do not mail your completed survey to this address.**

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.")*

NTAC intends to continuously survey training audiences. Based on the first 8,000 responses or 6 months of response (whichever comes first), NTAC will determine whether to survey only a sample of training audiences. If it is determined we should only survey a sample of training audiences, the first 8,000 responses of 6 months of responses will be used to develop a sampling plan to achieve a representative sample. More variation between the responses of different audiences and different types of audiences will suggest that NTAC should continue sampling all trainings to determine the causes of variance.

8. Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?

Yes  No

If Yes, describe:

### BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden Hours
Individuals or households	16,000	2	533
<b>Totals</b>			<b>533</b>

### 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: Dr. Aaron Cotkin

Email address: aaron.cotkin@usss.dhs.gov

All instruments used to collect information must include:  
OMB Control No. 1601-0029  
Expiration Date: 12/31/2026

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

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**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.