Request for Approval under the "Generic Clearance for Improving Customer Experience: OMB Circular A-11, Section 280 Implementation"
(OMB Control Number: 1090-0012)

TITLE OF INFORMATION COLLECTION: Customer Satisfaction Survey for Bureau of Trust Funds Administration (BTFA) – Trust Beneficiary Call Center (TBCC)

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 the Customer Satisfaction Survey will be to measure what about the experience with the BTFA TBCC contributed to the beneficiary's trust or distrust of BTFA in providing services via the TBCC. The results will be analyzed along with additional the following additional call metrics:
- first line resolution
- length of time in the call queue
- length of call
- type of call (account maintenance, disbursements, inquires, other)
- Amazon Cloud Analytics

The results will be utilized to identify where improvements can be made and allow us to assess how well we are meeting the beneficiaries needs and BTFA's mission.

TYPE OF ACTIVITY: (Check one)

[   ] Customer Research (Interview, Focus Groups, Surveys)
[x] 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?
   [x] Yes
   [   ] No
   [   ] Not a survey

2. How will you collect the information? (Check all that apply)
    [ ] Web-based or other forms of Social Media
    [x] 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?)

BTFA is responsible for the fiduciary trust responsibility of managing funds for approximately 4,200 Tribal accounts and more than 411,000 Individual Indian Money (IIM) accounts with an estimated $8.6 billion in monetary assets that DOI holds in trust. The number of accounts grows daily. In 2004, the Trust Beneficiary Call Center was created to provide an easy way to access a primary point of contact for individual beneficiaries to inquire about their trust assets (i.e. fractional owner interests, account balances, lease activity), checking the status of a requested service or requesting a disbursement form, or an update to their account maintained by BTFA. In addition, beneficiaries call in regarding dates of oil and gas distributions and totals they will receive through the distribution.

Beneficiary (customer) feedback will be obtained from Indian Trust beneficiaries who contact the TBCC via telephone.

The TBCC receives an average of 200,000 calls per year which results in about 50% of contact that beneficiaries and Tribes make across all touchpoints. The Trust Beneficiary Call Center plays a critical role in the delivery of trust services to account holders and individuals inquiring about if they are an account holder.

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)

After an individual calls into the Trust Beneficiary Call Center and they complete their intended purpose of calling the TBCC, the phone system will ask them if they want to participate in a voluntary survey about their service. The caller will utilize their phone keypad to provide a numerical response to each question.

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?

An individual calling into the TBCC who chooses to participate in the voluntary after call survey will enter into an unrecorded section of the call system. They will hear a recording that will give them instructions on how to participate in the survey.

The individual will be asked questions via a recording and be given the opportunity to provide a numerical response via their keypad on their phone to each 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.

//Introduction
Thank you for opting into this voluntary survey, it will only take a few minutes and is authorized under Control Number 10900012. Send any comments about this survey to survey@btfa.gov. Your response here will support our efforts to improve our services to you.

Please respond to the following questions by entering your satisfaction rating after the question is presented. Satisfaction ratings are from 1 to 5. *Press 1 for strongly disagree; 2 for disagree, 3 for neither agree nor disagree, 4 for agree, and 5 for strongly agree.*

 //Question 1

Based on this call, I trust that the Bureau of Trust Funds Administration is working in my best interest.

//Question 2
To understand what contributed to your response, please answer the following statements:
- The call addressed my need. *(PAUSE) Press 1 for Yes, Press 0 for No*
- It was easy to complete what I needed to do. *(PAUSE) Press 1 for Yes, Press 0 for No*
- My call took a reasonable time to be connected to an agent. *(PAUSE) Press 1 for Yes, Press 0 for No*
- Once I spoke to an agent, my call took a reasonable amount of time. *(PAUSE) Press 1 for Yes, Press 0 for No*
- The agent I interacted with was helpful and respectful. *(PAUSE) Press 1 for Yes, Press 0 for No*
- My call needed to be referred to a different person or local agency. *(PAUSE) Press 1 for Yes, Press 0 for No*
- I have used the self-service option to retrieve my account details. *(PAUSE) Press 1 for Yes, Press 0 for No*
- Related the previous question, if you used the self-service option, did you find it easy to use? *(PAUSE) Press 1 for Yes, Press 0 for No*
-

//End
Thank you for participating! Have a nice day! Goodbye.

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.")

The voluntary phone survey will be offered at the completing of the call to the TBCC. The beneficiary will be offered the opportunity to take the after-call survey if they remain on the phone line.

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
Individual Trust Beneficiaries	200,000	2 Mins	6,666
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: Tamisha Tenorio

Email address: Tamisha_tenorio@btfa.gov

All instruments used to collect information must include:
OMB Control No. 1090-0012
Expiration Date: 02/28/2027

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.