

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0920-1050)

Instruction: This form should be completed by the primary contact person from the Program sponsoring the collection.

DETERMINE IF YOUR COLLECTION IS APPROPRIATE FOR THIS GENERIC CLEARANCE MECHANISM:

Instruction: Before completing and submitting this form, determine first if the proposed collection is consistent with the scope of the Collection of Routine Customer Feedback generic clearance mechanism. To determine the appropriateness of using the Collection of Routine Customer Feedback generic clearance mechanism, complete the checklist below.

If you select “yes” to all criteria in Column A, the Collection of Routine Customer Feedback generic clearance mechanism can be used. If you select “yes” to any criterion in Column B, the Collection of Routine Customer Feedback generic clearance mechanism cannot be used.

Column A	Column B
The information gathered will only be used internally to CDC. [X] Yes [] No	Information gathered will be publicly released or published. [] Yes [X] No
Data is qualitative in nature and not generalizable to people from whom data was not collected. [X] Yes [] No	Employs quantitative study design (e.g. those that rely on probability design or experimental methods) [] Yes [X] No
There are no sensitive questions within this collection (e.g. sexual orientation, gender identity). [X] Yes [] No	Sensitive questions will be asked (e.g. sexual orientation, gender identity). [] Yes [X] No
Collection does not raise issues of concern to any other Federal agencies. [X] Yes [] No	Other Federal agencies may have equities or concerns regarding this collection. [] Yes [X] No
Data collection is focused on determining ways to improve delivery of services to customers of a current CDC program. [X] Yes [] No	Data will be used to inform programmatic or budgetary decisions, for the purpose of program evaluation, for surveillance, for program needs assessment, or for research. [] Yes [X] No
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. [X] Yes [] No	

Did you select “Yes” to all criteria in Column A?

If yes, the Collection of Routine Customer Feedback generic clearance mechanism may be appropriate for your investigation. You may proceed with this form.

Did you select “Yes” to any criterion in Column B?

*If yes, the Collection of Routine Customer Feedback generic clearance mechanism is **NOT** appropriate for your investigation. Stop completing this form now.*

TITLE OF INFORMATION COLLECTION:

Centers for Disease Control and Prevention's National Contact Center (CDC-INFO) Interactive Voice Response (IVR) Satisfaction Survey (for Private Sector Respondents Who Inquire by Phone)

PURPOSE:

The Centers for Disease Control and Prevention (CDC) seeks to obtain approval to conduct surveys of customers who call the CDC National Contact Center (CDC-INFO). CDC-INFO offers CDC health information in English and Spanish, to the general public who call the contact center (1-800-CDC-INFO). The phone survey is a part of an automatic Interactive Voice Response (IVR) system designed to improve service delivery and monitor caller satisfaction. The survey is deployed after each call interaction and is automated by touch tone (pressing keypad to select survey options); active consent is required in order to participate. The survey collects customer feedback on satisfaction with call agent handling and help received, satisfaction with the response received, trust in CDC's health information, and customer demographic information (including age, race, and ethnicity).

Once the information is collected, CDC-INFO staff will use analyze the survey data to:

- Monitor satisfaction with the CDC-INFO call services and improve program performance.
 - Lower than expected thresholds of reported customer satisfaction with service or quality of responses (whether their health question was answered or not) will be reported to and addressed through internal system improvement (if needed).
- Monitor satisfaction with the quality of agent interaction.
 - Lower than expected thresholds of reported customer satisfaction with agent handling will be reported to and addressed with CDC-INFO contractor.
- Measure the public's trust in CDC to provide accurate health information, following the A-11 OMB guidance.
- Monitor the reason people use the telephone service over other forms of communication, including if we're serving those who may not have internet access.

Justification for Collecting Race/Ethnicity Data

There is growing focus within HHS and CDC on Health Equity, and a movement towards public health communications that ensure equitable health information access for diverse populations (see, [Using a Health Equity Lens | Gateway to Health Communication | CDC](#)). CDC-INFO is a consolidated contact center for whole of CDC, providing the American people with information on health topics ranging from smoking cessation to where to get vaccines, where to get HIV/STD test, cancer screening, COVID-19, access to resources such as free or low-cost medicine, tests, and health services, and more. The CDC-INFO hotline is a free resource and is designed to serve those who might not have ready Internet access, the elderly and underserved populations.

We can use race/ethnicity data to determine:

1. Is our service reaching racial/ethnic groups that are at higher risk for certain diseases and conditions? As CDC programs run communication campaigns, data will show if information is reaching different demographics of people, including those are

underserved and may be socially or economically vulnerable. Data that demonstrate that certain groups are not reached enables CDC-INFO to develop corrective strategies.

- a. As an example, CDC-INFO recently piloted a chat channel to try to reach a younger, more diverse audience, as demographic data so far showed our regular channels reached mainly older callers who are White.
2. Equity of service: Moreover, people need information that they can understand, use, and that is appropriate culturally and linguistically. CDC-INFO can link customer survey satisfaction scores to demographic data and determine if there are racial/ethnic differences in satisfaction rates and perception of service received and trust in CDC to provide accurate health information. Using this data, CDC-INFO can better adapt its content pool, scripts, and processes to improve the public's trust in CDC's communication.
3. Equity and access to services: CDC-INFO also serves the Hispanic/Latino population, who may have unique challenges ranging from low English proficiency to lack of access to a doctor or Internet. Having race/ethnicity data enables CDC-INFO to identify these respondents and understand their unique needs and help CDC-INFO improve its scripts, resources, and referrals for that population.

In addition, below is a table that shows drop-off rates for each consecutive question in the phone/IVR survey. Ethnicity and race questions, in that order, are the last two questions in the survey. As you can see from the table, in January, for example, total of 5.7% of respondents that answered the previous question dropped off as the race and ethnicity questions were asked (English survey). In February that number was 6.8%. Comparative drop-off rate for *all* demographic questions (sex, age, ethnicity, race) were 13.4% in January and 14.8% in February. For the 3 non-demographic questions (Q2-Q4), total drop-off was 7.34% in January and 7.16% in February. These numbers do not necessarily demonstrate that there is excessive or uneven drop-off due to the nature of the ethnicity and race questions.

Questions from current CSAT survey	Jan-22					
	English Total Responses	Respondents Lost	Percentage drop off after previous question	Spanish Total Responses	Respondents Lost	Percentage drop off after previous question
Q1 - How satisfied are you with the agent who handled your call?	13877	0	0.00%	1078	0	0.00%
Q2 - Did you receive the health information you were looking for?	13711	166	-1.20%	1070	8	-0.74%
Q3 - How likely are you to make changes regard you/your family's behavior?	13269	442	-3.22%	1003	67	-6.26%
Q4 - Why did you contact CDC-INFO?	12881	388	-2.92%	965	38	-3.79%
Q5 - Are you male or female?	12078	803	-6.23%	899	66	-6.84%
Q6 - How old are you?	11832	246	-2.04%	874	25	-2.78%
Q7 - What ethnicity do you identify with?	11489	343	-2.90%	861	13	-1.49%
Q8 - What race do you identify with most?	11155	334	-2.91%	796	65	-7.55%

Questions from current CSAT survey	Feb-22					
	English Total Responses	Respondents Lost	Percentage drop off after previous question	Spanish Total Responses	Respondents Lost	Percentage drop off after previous question
Q1 - How satisfied are you with the agent who handled your call?	6058	0	0.00%	608	0	0.00%
Q2 - Did you receive the health information you were looking for?	5974	84	-1.39%	597	11	-1.39%
Q3 - How likely are you to make changes regard you/your family's behavior?	5800	174	-2.91%	546	51	-2.91%
Q4 - Why did you contact CDC-INFO?	5634	166	-2.86%	526	20	-2.86%
Q5 - Are you male or female?	5259	375	-6.66%	482	44	-6.66%
Q6 - How old are you?	5149	110	-2.09%	466	16	-2.09%
Q7 - What ethnicity do you identify with?	4991	158	-3.07%	456	10	-3.07%
Q8 - What race do you identify with most?	4799	192	-3.85%	421	35	-3.85%

Changes since last submission

As a result of internal user testing, the telephone survey removed one question that seemed redundant to another question, revised one question, and added two new ones. These changes were made after assessing the data collected so far and determining the need for refining some of the questions. The revised question seeks to better understand whether callers visited the CDC internet prior to contacting the hotline. The new questions added are to understand equity of service (if we reached those who may not have Internet access) and an optional open-ended question to gather qualitative feedback on how to improve our overall service. The latter will allow respondents to provide more in depth and detailed feedback about ways CDC can improve its customer experience that would otherwise not be captured through quantitative response options.

DESCRIPTION OF RESPONDENTS:

Participation in the CDC-INFO phone survey is optional. Since 2006, the contact center has received more than 6.8 million phone and email inquiries from both Spanish and English speakers in the United States. Most inquiries are from the general public. Other customers usually include healthcare professionals, health departments and clinics, and international travelers. In 2021, CDC-INFO had over 170,000 survey via phone with an average response rate of 21%.

TYPE OF COLLECTION: (Check one)

Instruction: Please sparingly use the Other category

☐ Customer Comment Card/Complaint Form
☐ Usability Testing (e.g., Website or Software)

☒ Customer Satisfaction Survey
☐ Small Discussion Group

☐ Focus Group

☐ Other: _____

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.

Name: Lilla Dorvee

To assist review, please provide answers to the following question:

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? ☐ Yes ☒ No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? ☐ Yes ☐ No
3. If Applicable, has a System or Records Notice been published? ☐ Yes ☐ No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? ☐ Yes ☒ No

If Yes: Please describe the incentive. If amounts are outside of customary incentives, please also provide a justification

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Private Sector (consisting mainly of medical and healthcare professionals)	14,000	3/60 hr	700
Totals			700

FEDERAL COST: The estimated annual cost to the Federal government is \$2722.50. These costs are comprised of:

- Enhanced Call Routing (ECR) - \$535.00
- ECR coding & Professional Recordings - \$267.50
- Contractor support for reporting & analyzing customer call records (~10 hours a month) - \$1,920

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?
[X] Yes [] No

If Yes: Please provide a description of both below (or attach the sampling plan)

If No: Please provide a description of how you plan to identify your potential group of respondents and how you will select them or ask them to self-select/volunteer

Our potential universe are individuals who call CDC-INFO with a legitimate health inquiry, mainly the general public, public health partners, and medical and healthcare providers seeking CDC health and safety information. Active consent is required in order to participate in the automated CDC-INFO phone survey that is deployed after each call. Callers who do not wish to participate can indicate so by touch tone, voice, or simply by hanging up. We estimate a 23% response rate based on past, average response rates to the IVR survey.

The Interactive Voice Response (IVR) survey is automated by phone system and does not use a live interviewer or facilitator. Participants use their touch tone phone (pressing numbers on their keypad) to input responses to the survey. Responses are captured in the CDC-INFO contractor's IVR technology platform and a coded comma separated value (CSV) file is provided to CDC staff daily capturing survey responses.

Administration of the Instrument

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

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

Instructions for completing Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback”

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 concise 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.

DESCRIPTION OF RESPONDENTS: Provide a concise description of the targeted group or

groups for this collection of information. These groups must have experience with the program.

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. The ‘Other’ category should be used only in the contexts in which the provided categories cannot reasonably apply.

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: Provide answers to the questions.

Gifts or Payments: As a general matter, incentives are not appropriate for customer service collections; however, incentives may be appropriate for focus groups or in-depth usability studies, especially when participants must travel to a site to participate. In the latter circumstance, the incentive should include travel costs. Customary incentives for focus groups in the Federal government are \$40 for a one-hour interview and \$75 for a 90-minute focus group. If you answer yes to the question, please describe the incentive and provide a justification for amounts other than those cited above; justifications should be limited to Federal studies of a similar design and subpopulation.

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.

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.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.

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. Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

Administration of the Instrument: Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

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