

**Request for Approval under the “Generic Clearance for the Collection of
Routine Customer Feedback” (OMB Control Number: 2700-0153)**

TITLE OF INFORMATION COLLECTION:

SMD IDEA Learning Opportunity Feedback Survey

PURPOSE:

The Science Mission Directorate (SMD) within NASA is undertaking an Inclusion, Diversity, Equity, and Accessibility (IDEA) change effort. NASA SMD began these efforts as a response to their 2019 FEVS results by choosing Diversity and Inclusion as a focus area. As part of a comprehensive approach to IDEA that seeks to advance these principles in all SMD programs and activities, the effort aligns with the objectives of White House direction as articulated in Executive Orders 13985 and 14035.

SMD has begun a series of internal initiatives ranging from monthly discussions on IDEA-related topics, guest speaker programs, workshops and career development programs such as mentoring and shadowing programs. These initiatives all are done to provide learning opportunities and experiences to the SMD workforce. To ensure these initiatives are achieving their intended purpose, SMD would like to institute a post-event satisfaction survey. This survey will be brief and seek to determine if the opportunity was informative and how it can be improved in subsequent iterations. This survey will be used for a variety of opportunities. Data obtained is intended for SMD internal use; it will be used to design and refine its IDEA initiatives and improve its internal environment. Currently, there are approximately 2 to 4 events monthly with participation typically between 20 to 60 individuals. The survey respondents will be kept anonymous.

DESCRIPTION OF RESPONDENTS:

Survey would be voluntary but offered to any NASA SMD staff (civil servants and contractors) who participated in an IDEA WG Learning Event. The potential range of individual contributors will be approximately 350 to 400 individuals. However, because this is event-based, some individuals will be provided the survey multiple times—one for each opportunity for which they participate in—typical attendance at opportunities is approximately 20 to 60 individuals.

TYPE OF COLLECTION: (Check one)

- | | |
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| ☐ Customer Comment Card/Complaint Form | ☐ Customer Satisfaction Survey |
| ☐ Usability Testing (e.g., Website or Software) | ☐ Small Discussion Group |
| ☐ Focus Group | ☒ Other: <u>Internal Operations Survey</u> |

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.
6. 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.

Name: Tracy Urman

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, will any information that is collected be included in records that are subject to the Privacy Act of 1974? ☐ Yes ☐ No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? ☐ Yes ☐ No

[NOTE: Identities will not be captured. Survey will include some demographic questions that will be optional or include “not reported” as one of the responses. Data will be insufficient to identify individuals.]

Gifts or Payments:

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

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Private Sector (NASA SMD Contractors)	160	5 minutes per survey (assume 6 events attended for 30 minutes total)	80 hours
Federal Government (NASA SMD Civil Servants)	240	5 minutes (assume 6 events attended for 30 minutes total)	120 hours
Totals	400		200 hours

FEDERAL COST:

The estimated annual cost to the Federal government is \$8,000 assuming a cost of \$40/hour. Computed as [total hours] x [rate] = [cost] is 200 hours x \$40/hour = \$8,000.

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?

☒ Yes ☐ No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

Respondents will be SMD staff who participate in specific learning opportunities. We will offer the opportunity to participate to all opportunity participants as opposed to sampling attendees. We wish to maximize feedback obtained to collect representations of all views. Each opportunity set of participants is relatively low quantity and not conducive to sampling.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)

☐ Web-based or other forms of Social Media
☐ Telephone
☐ In-person
☐ Mail
☒ Other, Explain. (Respondents will be emailed a link to complete the survey. Survey will be programmed into MS Forms.)
2. Will interviewers or facilitators be used? ☐ Yes ☒ 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 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.

DESCRIPTION OF RESPONDENTS: Provide a brief 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.

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. Note: 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.

Gifts or Payments: If you answer yes to the question, please describe the incentive and provide a justification for the amount.

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 (in minutes) 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 Respondents and the Participation Time then 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.

Submit all instruments, instructions, and scripts are submitted with the request.