

**Request for Approval under the “Generic Clearance for the Collection of
Routine Customer Feedback” (OMB Control Number: 1530-0023)**

TITLE OF INFORMATION COLLECTION: User Research and Testing for Data
Transparency Office Products

PURPOSE:

The Bureau of the Fiscal Service, Data Transparency Group will deploy a variety of low burden methods to measure the customer experience from users and potential users across our three outwardly pointing website projects (USAspending, the Data Lab, and a new site that is currently being referred to as DTG).

Included among these activities will be a sign-up form for people who are interested in participating in user testing and/or receiving emails about data transparency products. The form will be sent to people who have voluntarily contacted the group through email, social media, or at conferences, and volunteered to participate in user research.

A diverse set of users who signed up will be selected to participate in user testing to better understand how real users interact with data transparency product designs, language and products so that we can improve them to better meet user (or potential user) needs.

DESCRIPTION OF RESPONDENTS:

Members of the general public

TYPE OF COLLECTION: (Check one)

☐ Customer Comment Card/Complaint Form

☒ Customer Satisfaction Survey

☒ Usability Testing (e.g., Website or Software

☐ Small Discussion Group

☐ Focus Group

☒ Other: User Research

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: Bruce A. Sharp

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

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
Sign-up Form	2000	5 min	167 hours
Testing Interviews	400	60 min	400 hours
Totals	2400		567 hours

FEDERAL COST: The estimated annual cost to the Federal government is estimated at \$43,000.

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?

[X] 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?

The sign-up form will be sent to people who have already emailed the group volunteering to participate in user research and testing.

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: webex or zoom calls
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 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.

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