

United States Food and Drug Administration

Customer/Partner Customer Service Satisfaction Surveys

OMB Control No. 0910-0360

SUPPORTING STATEMENT

Terms of Clearance: None.

Part A. Justification

1. Circumstances Making the Collection of Information Necessary

Executive Order 12862 directs agencies that “provide significant services directly to the public” to “survey customers to determine the kind and quality of services they want and their level of satisfaction with existing services.” The Food and Drug Administration (FDA, we, or us) provides a wide range of services to the public and to regulated industries. To fulfill this directive and to allow for ongoing, collaborative and actional communications between FDA and its customers and stakeholders, FDA requests extension of OMB approval for this generic ICR to conduct:

- customer service surveys of any FDA-regulated entities such as food processors, cosmetic, drug, biologic, medical device, human and animal food, and tobacco product manufacturers, consumers, health professionals, and State and local governments;
- web-based, remote-user feedback surveys to assess and improve the quality of information services that FDA provides through its website.

We plan to seek ideas from respondents on (1) their current level of satisfaction with the services and information provided by the agency and (2) their recommendations on how to improve services and information provided by the agency. FDA will submit to OMB each survey instrument (gen IC), including an abbreviated supporting statement (OMB memo) for review and OMB will provide feedback or approve within 10 business days.

This collection of information is necessary to enable FDA to garner customer and stakeholder feedback in an efficient, timely manner, in accordance with our commitment to improving service delivery. The information collected from our customers and stakeholders will help ensure that users have an effective, efficient, and satisfying experience with FDA’s programs. This feedback will provide insights into customer or stakeholder perceptions, experiences and expectations, provide an early warning of issues with service, contribute to the improvement of program management, or focus attention on areas where communication, training or changes in operations might improve delivery of products or services.

2. Purpose and Use of the Information Collection

Improving agency programs requires ongoing assessment of service delivery, by which we mean systematic review of the operation of a program compared to a set of explicit or implicit standards, as a means of contributing to the continuous improvement of the program. FDA will collect qualitative feedback to gain useful insights on perceptions and opinions and use information gathered to identify strengths and weaknesses in current service provisions, including FDA's website, and to make improvements that are practical and feasible. Information from these customer service and website usability surveys will be used in an effort to improve or maintain a high quality of service to affected publics. FDA's website provides a variety of services to the general public, health professionals, drug and biologics companies, consumer advocates, students, medical professionals, and journalists. Website usability will be surveyed on a regular basis on different parts of FDA's website. Information gathered from surveying website users will enable the agency to provide an effective, efficient, and satisfying experience. Timeliness, appropriateness, clarity, accuracy of information, courtesy, or problem resolution will be assessed in individual programs.

The generic clearance will be used for customer satisfaction and website usability surveys where FDA seeks to gather information that is planned for internal use and can provide a justification for qualitative or anecdotal collections that may nonetheless produce useful information for program and service improvement. Customer satisfaction surveys approved under this generic ICR will only be used to obtain information for general service improvement, not for the purpose of informing significant policy or resource allocation decisions. FDA website usability data will be collected to ensure that we have the valuable data needed to routinely revise content and reorganize important online health and consumer information in a way that is most easily understood and useful to the website users.

FDA will submit an individual gen IC for approval under this generic clearance if it meets the following conditions:

- The collections are voluntary,
- The collections are low-burden for respondents (based on considerations of total burden hours, total number of respondents, or burden-hours per respondent) and are low-cost for both the respondents and the Federal government,
- The collections are non-controversial and do not raise issues of concern to other Federal agencies,
- 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,
- Personally identifiable information (PII) is collected only to the extent necessary and is not retained,
- Information gathered will only be used internally for general service improvement and program management purposes and is not intended for release outside FDA (if released, procedures outlined in Question 16 will be followed),
- Information gathered will not be used for the purpose of substantially informing influential policy decisions, and

- Information gathered will yield qualitative information; the collections will not be designed or expected to yield statistically reliable results or used as though the results are generalizable to the population of study.

This generic ICR does not include statistical surveys and the results will not yield quantitative results that can be generalized to the population of study.

Respondents to this collection of information cover a broad range of customers and stakeholders who have specific characteristics related to certain products or services regulated by FDA.

3. Use of Improved Information Technology and Burden Reduction

Information technology will be used to collect and process information for these surveys. Surveys will be simple with short questions. Data collection methods and procedures may vary and the specifics of these will be provided with each gen IC. FDA expects to use a variety of methodologies for these collections such as commercial survey-specific software to automate its collection and analysis of feedback. Telephone scripts and interviews may also be used.

4. Efforts to Identify Duplication and Use of Similar Information

Research conducted is not anticipated to duplicate any other evaluation being completed by FDA or other federal agencies.

5. Impact on Small Businesses or Other Small Entities

These proposed data collection activities will focus primarily on participants in their roles as stakeholders and customers of the agency. Small business or other small entities may be involved in these efforts, but FDA will minimize the burden on them of information collections approved under this clearance by sampling appropriately, asking for readily available information, and using short, easy-to-complete information collection instruments.

6. Consequences of Collecting the Information Less Frequently

If this information is not collected, vital feedback regarding customer satisfaction or dissatisfaction with various aspects of FDA program services, including FDA's website, will be unavailable. Without feedback about its service delivery, FDA will not have timely information to adjust its services to meet customer needs.

7. Special Circumstances Relating to the Guidelines of 5 CFR 1320.5

There are no special circumstances. The information collected will be voluntary and will not be used for statistical purposes.

8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency

In accordance with 5 CFR 1320.8(d), FDA published a 60-day notice for public comment in the *Federal Register* of April 3, 2026 (91 FR 16951). One comment was received, but the comment was not responsive to the four collection of information topics solicited.

9. Explanation of Any Payments or Gift to Respondents

FDA, as a rule, will not provide payment or other forms of remuneration to respondents of its various forms of collecting feedback on customer satisfaction.

In the case of in-person interview requiring travel, any proposed stipend needs to be justified to OMB. Normally, a stipend of \$40 will be provided. If such information collections include hard-to-reach groups and FDA plans to offer non-standard stipends, FDA will provide OMB with additional justifications in the request for clearance of these specific activities. If OMB guidance for the stipend level is adjusted upward, the stipends may also be increased accordingly.

10. Assurance of Confidentiality Provided to Respondents

This ICR collects personally identifiable information (PII) or information of a personal nature. PII collected is contact information. This ICR is collecting information from our customers and stakeholders which will help ensure that users have an effective, efficient, and satisfying experience with FDA's programs. FDA determined that although PII is collected the collection is not subject to the Privacy Act of 1974 and the particular notice and other requirements of the Act do not apply. Specifically, FDA does not use name or any other personal identifier to routinely retrieve records from the information collected.

In preparing this Supporting Statement, FDA staff consulted with the FDA Privacy Office to ensure appropriate handling of information collected. FDA minimized the PII to be collected to protect the privacy of the individuals.

Information provided by respondents will be kept secure to the extent provided by law and anonymous, except as otherwise required by law. This will be communicated to respondents by means of introductory letters, explanatory texts on the cover pages of questionnaires, scripts read prior to telephone interviews, and consent forms. Respondents also will be advised of the following: the nature of the activity; the purpose and use of the data collected; and the fact that participation is voluntary at all times. Because responses are voluntary, respondents will be assured that there will be no penalties if they decide not to respond, either to the information collection as a whole or to any particular questions.

Only personnel from a contractor conducting the information collection will have access to individual-level survey or interview data. All project staff from a contractor conducting the information collection must take required measures to ensure the security and anonymity of data. Personally identifiable data shall be limited to information that may be required in the process of

respondent enrollment. Personally identifiable information will be accessible to only those contractors who need them and will not be linked to interview data. All personally identifiable data will be destroyed at the completion of the study. Neither FDA employees nor any federal employee of any other Agency will have access to this information.

All electronic and hard-copy data will be maintained securely throughout the information collection and data processing phases. While under review, electronic data will be stored in locked files on secured computers; hard-copy data will be maintained in secure building facilities in locked filing cabinets. To prepare for further security and anonymity, all presentation of data in reports will be in aggregate form, with no links to individuals. Reports will be used only for research purposes and for the development of communication messages.

Minors (or children) are persons who have not attained the legal age for consent to treatments or procedures described in the study are covered under the applicable law of the jurisdiction in which the research will be conducted. Where FDA's IRB determines that minors are capable of giving an assent, the IRB shall determine whether adequate provisions are made for soliciting assent. Generally, assent requires securing the signature of a minor to the research in a separate assent form, in addition to the consent form the parent or legal guardian signs. An assent document should contain an explanation of the study, a description of what is required of the subject (e.g., what they will experience (whether the interview will take place, whether the child's parents will be with him or her, etc.)), an explanation of any risks or mental anguish associated with the study, and an explanation of the benefits to the child or others.

11. Justification for Sensitive Questions

No questions will be asked that are of a personal or sensitive nature.

12. Estimates of Annualized Burden Hours and Cost

12a. Annualized Hour Burden Estimate

Potential respondents may include state, local, tribal, and territorial partners, pharmaceutical companies, biotechnology firms, medical device manufacturers, clinical research organizations, regulatory affairs consultants, patients, healthcare professionals, and consumers. A variety of instruments and platforms will be used to collect information from respondents, and each GenIC will vary by number of respondents and average time per response.

The burden tables below are illustrative. Estimates for the number of respondents and time per response for new requests have been made based on use over the past three years and anticipated use over the next three years. The estimates for the number of respondents and time per response for the ongoing information collections are based on our experience since their approval.

The total burden request, including estimated burden of new collections and the burden associated with ongoing GenICs is 19,054 hours (14,700 + 4,354). While we will not exceed the total burden cap for this generic without requesting a change for updates, we may use more or less burden within

each instrument type.

Table 1.—Annual Burden Estimates for New Requests

Activity	No. of Respondents	No. of Responses per Respondent	Total Annual Responses	Average Burden per Response	Total Hours
Mail, telephone, Web-based	35,000	1	35,000	0.42 (25 minutes)	14,700

Table 2.— Annual Burden Estimates for Ongoing Information Collections

Ongoing Information Collections	Annual No. of Respondents	Total No. of Responses per Respondent	Average Burden per Response	Annual Burden Hours
CBER Office of Therapeutics Event Feed Back Survey	9,323	1	.05 (3 minutes)	466
CDER NextGen Portal Survey	8,500	1	.03 (2 minutes)	255
CDRH Advisory Committee Satisfaction Survey	1,200	1	.08 (5 minutes)	100
CDRH Customer Service Satisfaction and Experience Survey	3,000	1	.08 (5 minutes)	250
OC FDA.gov Site-Wide Customer Service Satisfaction Survey	40,000	1	.08 (5 minutes)	3,200
OII OTED Self-Paced Course Evaluation	1,000	1	.08 (5 minutes)	83
Total				4,354

12b. Annualized Cost Burden Estimate

There are no costs to the respondents.

13. Estimates of Other Total Annual Costs to Respondents and/or Recordkeepers/Capital Costs

There are no capital costs or operating and maintenance costs associated with this collection.

14. Annualized Cost to the Federal Government

FDA may incur costs to hire a contractor to select respondents, draft the questionnaire, cognitively test the questionnaire, and conduct and analyze the survey for which we estimate \$8,000 per survey resulting in a total of \$160,000 for 20 surveys.

Assuming a cost of \$325,348 per one full-time equivalent (salary plus overhead, full-time 40-hour week) divided by the total number of hours worked (2,080 hours) per year, the fully loaded wage rate is \$156 per hour. An FTE may devote 30% (624 hours) of their time preparing, reviewing, and monitoring a project resulting in \$97, 344 (624 hours x \$156/hour) spent annually. An FTE supervisory may spend 25% (520 hours) of their time reviewing and monitoring a project resulting in \$81,120 (520 hours x \$156/hour) spent annually. Therefore, we estimate \$178,464 is spent on government salaries.

FDA's total annualized estimated cost to the Federal government is \$338,464.

15. Explanation for Program Changes or Adjustments

This is a request to extend approval of an existing overarching generic clearance and a subset of GenICs that have been approved over the past three years. Burden estimates have been adjusted to reflect estimated new collections over the next three years as well as burden for currently approved ongoing data collections. Adjustments reflect a revised estimate of anticipated collection activity under the generic clearance. Specifically, we have reduced the estimated annual number of respondents and responses for new collections under the umbrella. We also retained burden for existing and continuing approved individual clearances. Cumulatively, the information reflects a decrease of 16,646 hours but an additional 13,023 responses. The estimated completion time remains 0.42 hours (approximately 25 minutes) per response. No changes have been made to the collection instruments or scope of activity.

16. Plans for Tabulation and Publication and Project Time Schedule

Feedback collected under this generic clearance provides useful information, but it does not yield data that can be generalized to the overall population. Findings will be used for general service improvement, but are not for publication, other public release, or the purpose of informing significant policy or resource allocation decisions.

Although FDA does not intend to publish its findings, it may receive requests to release the information (e.g., congressional inquiry, Freedom of Information Act requests). FDA will disseminate the findings when appropriate, strictly following FDA's "Guidelines for Ensuring the Quality of Information Disseminated to the Public," and will include specific discussion of the limitation of the qualitative results discussed above.

17. Reason(s) Display of OMB Expiration Date is Inappropriate

The agency is not requesting an exemption.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

There are no exceptions to the certification.