

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0648 Exp. Date: 05/2021)

TITLE OF INFORMATION COLLECTION:

NIBIB Website Survey for Website Satisfaction Rating

PURPOSE:

The National Institute of Biomedical Imaging and Bioengineering (NIBIB) wishes to collect feedback on user satisfaction with its website (<https://www.nibib.nih.gov>). The NIBIB site provides information about research on medical technologies to scientists, the public, and grantees. Qualitative customer feedback on the NIBIB site will help us better understand who is visiting the site so we can create more and improved content for those audiences.

The website survey will collect satisfaction data via five questions (see attached PDF NIBIB Site Survey Questions). The conciseness of the survey increases the chance of participation and completion. The information from this survey will be used to improve the design and operation of the publicly accessed website.

Along with this form, we have submitted screenshots of what the survey will look like on the site (see attached PDF NIBIB Survey Workflow and Questions). We will display the OMB burden statement on our privacy policy page: <https://www.nibib.nih.gov/policies#privacy> (see attached PDF NIBIB Privacy Policy for what this will look like) and will include links to this page from the survey. We have also submitted a list of all the pages the survey will be on (see attached spreadsheet NIBIB Pages for Site Survey).

DESCRIPTION OF RESPONDENTS:

Visitors to NIBIB website who choose to respond to the survey.

TYPE OF COLLECTION: (Check one)

- | | |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> 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.
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.

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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

ESTIMATED BURDEN HOURS and COSTS

Category of Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
Individuals or Households	10,000	1	2/60	333
Totals		10,000		333

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Individuals or Households	333	\$24.34	\$8,113.33
Totals			\$8,113.33

*BLS National Occupational Employment and Wage Estimates
https://www.bls.gov/oes/current/oes_nat.htm

FEDERAL COST: The estimated annual cost to the Federal government is \$761.76

Staff	Grade/Step	Salary	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Social Science Analyst	14/10	\$152,352	.5%		\$761.76
Contractor Cost					
Travel					N/A
Other Cost					N/A
Total					\$761.76

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 universe of potential respondents will be visitors to NIBIB website, and the sample will consist of those who choose to respond to the survey.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)
[X] Web-based or other forms of Social Media
[] Telephone
[] In-person
[] Mail
[] Other, Explain
2. Will interviewers or facilitators be used? [] Yes [X] No