

**SUBMISSION OF INFORMATION COLLECTION UNDER THE  
SAFE TO SLEEP GENERIC CLEARANCE**

**DATE OF REQUEST:** October 10, 2014

**SUB AGENCY (I/C):** NICHD

**TITLE:** Safe to Sleep National Champions Tracking and Feedback Form

**GENERIC CLEARANCE UNDER OMB#:** 0925-0701      **EXP. DATE:** 07/31/2017

**ABSTRACT:**

The *Eunice Kennedy Shriver* National Institute of Child Health and Human Development (NICHD) propose conducting an assessment of its Safe to Sleep® (STS) National Champions (NC) program. NC is a volunteer program designed to enlist interested members of the general public and health care professionals in conducting local media outreach activities (in print, radio, television, and social media), and community outreach activities on behalf of the STS campaign.

NICHD will collect information using the STS NC Tracking and Feedback form (Attachment 3). The form collects information on the types of media hits and media outlets Champions have been able to contact and the target audiences of these various outlets, as well as types of community outreach activities conducted. This information will be used to track the Champions' activities and the total number of people reached. Champions will also be asked to comment on any challenges they faced, lessons learned, as well as accomplishments. This information will be used to identify areas where additional guidance is needed from NICHD and to adjust training activities to improve the program's overall usefulness and effectiveness.

**TOTAL ANNUAL BURDEN APPROVED:** 3,000

**BURDEN USED TO DATE:** 0

**BURDEN THIS REQUEST:** 125 State/local/tribal governments

**FEDERAL COST:** The estimated annual cost to the Federal government is \$4,203.44.

**IS RACE AND ETHNICITY DATA COLLECTED AS REQUIRED?**

\_\_\_\_\_ YES       X \_\_\_\_\_ NO      \_\_\_\_\_ N/A

**OBLIGATION TO RESPOND:**

X VOLUNTARY  
\_\_\_\_\_ REQUIRED TO OBTAIN OR RETAIN BENEFITS  
\_\_\_\_\_ MANDATORY

**HOW WILL THIS SURVEY BE OFFERED?**

X WEBSITE  
\_\_\_\_\_ TELEPHONE INTERVIEW  
\_\_\_\_\_ MAIL RESPONSE  
\_\_\_\_\_ IN PERSON INTERVIEW  
\_\_\_\_\_ OTHER: \_\_\_\_\_

**CONTACT INFORMATION:**

NAME: Shavon Artis  
TELEPHONE NUMBER: 301-435-3459  
EMAIL ADDRESS: [artiss@mail.nih.gov](mailto:artiss@mail.nih.gov)