# Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 0990-0379)

**TITLE OF INFORMATION COLLECTION:** Pilot for Establishing Infrastructure for Publicly Released Research Data

**PURPOSE:** The goal of this study is to identify challenges to implementing a public access policy for data among operational divisions of the Department of Health and Human Services. Grantees of six operational divisions will soon be expected to release their research data to the public but the policy is challenging operational divisions. The pilot program will gather publicly released datasets and converse with grantees who can speak to the challenges in implementation of the public access policy. Based on characterizations of datasets and conversations, the pilot will recommend a department-wide policy for data release, standards for compliance to the policy and a mechanism for programmatic evaluation of compliance.

### **DESCRIPTION OF RESPONDENTS:**

Grantees of research project grants funded by the National Institutes of Health, Food and Drug Administration, Center for Disease Control, Agency for Healthcare Research and Quality, Office of the Assistant Secretary for Preparedness and Response or Administration for Community Living.

### TYPE OF COLLECTION: (Check one)

- [] Customer Comment Card/Complaint Form
- [] Usability Testing (e.g., Website or Software
- [] Focus Group

# **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 <u>not</u> raise issues of concern to other federal agencies.
- 4. The results are <u>not</u> intended to be disseminated to the public.
- 5. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> 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: Daniel Janes

To assist review, please provide answers to the following question:

### **Personally Identifiable Information:**

- 1. Is personally identifiable information (PII) collected? [] Yes [X] No
- 2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [] Yes [X] No

[] Customer Satisfaction Survey

[X ] Small Discussion Group [ ] Other:\_\_\_\_\_ 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 [X] No

### **BURDEN HOURS**

Category of Respondent	No. of	Participation	Burden
	Respondents	Time	10
Individuals: Grantees	60	10/60	10
			hours
Totals	60	10/60	10
			hours

**FEDERAL COST:** The estimated annual cost to the Federal government is \$600 (10 hours at the GS-14 level) in project management and oversight.

# 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

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 [X] 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?

A search of publicly available datasets released in association with an HHS research grant were located through communication with program staff at the relevant operational divisions or by using the iSearch online tools (https://itools.od.nih.gov/isearch/grants/) developed by the NIH Office of Portfolio Analysis. Grantees who released the identified datasets will be contacted for conversation about their experience of releasing datasets in association with an HHS research grant.

The conversation will consist of 5-10 open-ended questions intended to gather a narrative about the grantee's experience of publicly releasing data. Each grantee will be asked to describe the challenges they faced while selecting a dataset for release and a format and public repository in which to release it. By collecting and synthesizing their responses, our team hopes to identify immediate concerns of the community to be addressed in order to increase likelihood of compliance to future public access requirements.

#### Administration of the Instrument

- 1. How will you collect the information? (Check all that apply)
  - [ ] Web-based or other forms of Social Media
  - [X] Telephone
  - [] In-person
  - [] Mail
  - [ ] Other, Explain
- 2. Will interviewers or facilitators be used? [] Yes [X] 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.

**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. **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.

Please make sure that all instruments, instructions, and scripts are submitted with the request.