# Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB#: 0925-0668 Exp. Date: 02/2019)

**TITLE OF INFORMATION COLLECTION:** U.S.-Japan Cooperative Medical Science Program -19<sup>th</sup> International Conference on Emerging Infectious Diseases (EID) in the Pacific Rim

#### **PURPOSE:**

The National Institute of Allergy and Infectious Diseases (NIAID) sponsors conferences around the world, and will be co-sponsoring a conference in Seoul, South Korea, February 7-10 2017. NIAID's Office of Global Research (OGR) is interested in knowing the participant's overall satisfaction with what they learned at the conference as well as whether the workshop/consultation was successful in fostering collaborations. This survey is part of a customer satisfaction assessment to examine the conference implementation and attendees' perceptions to date. The information collected will enable the NIAID and partners to improve future conferences and encourage collaboration.

#### **DESCRIPTION OF RESPONDENTS:**

Potential survey respondents are the participants of the USJCMSP including both American scientists and scientists from Asia. We are expecting about 287 non-FTE attendees.

<b>TYPE OF COLLECTION:</b> (Check one)	
[ ] Customer Comment Card/Complaint Form [ ] Usability Testing (e.g., Website or Software	[X] Customer Satisfaction Survey [ ] Small Discussion Group
[] Focus Group	[] 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 <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: Janette Eng (HHS, NIH, NIAID, OD, OSMO, OGR)

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 [ ] No

<b>Gifts or Payments:</b>	
Is an incentive (e.g., r	noney or reimbursement of expenses, token of appreciation) provided t

3. If Applicable, has a System or Records Notice been published? [ ] Yes [ ] No

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?  $[\ ]$  Yes [X] 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
Private Sector/ non-USG (Academia, industry, notfor profits, scientists)	287	1	5/60	24
Totals	287	287		24

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Private Sector/ non-USG (Academia, industry, not-for profits, scientists)	24	\$23.23/hour	\$555.20
Totals	24		\$555.20

<sup>\*</sup>Cite source per bls.gov if applicable

**FEDERAL COST:** The estimated annual cost to the Federal government is **\$4,543** 

				Fringe (if applicable)	Total Cost to Gov't
Staff	Grade/Step	Salary	% of Effort		
Federal Oversight					
Policy Analyst	GS14/8	132,368/annual	2%		\$2,647
Program Analyst	GS13/1	94,796/annual	2%		\$1,896
Contractor Cost					
Travel					
Other Cost					
Total					\$4,543

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 potenti	al
	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 survey will be provided to all the participants at the USJCMSP Conference, with an option for paper or web-based submission on the final day of the conference. The survey will also include a question for participants to indicate whether they are government employees or not. The conference registration is not complete; therefore, the list of specific participants is not yet available. We anticipate hosting 287 non-FTE participants at the conference. The surveys will be administered and collected by Janette Eng.

#### **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
	[X] 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.