## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0920-1050)

**TITLE OF INFORMATION COLLECTION:**

Participant Assessment of Science Integrity Branch Trainings

**PURPOSE:**

The purpose of this request is to describe the assessment of all Science Integrity Branch (SIB)-administered Division of Global HIV and TB (DGHT), Centers for Disease Control and Prevention (CDC) trainings provided to implementing partners (IPs) at headquarters and in country offices. These trainings are delivered to inform and instruct partners on how to perform the activities associated with conducting and publishing research funded by DGHT. To verify and maintain a high quality of training, an assessment will be provided to each participant upon completing an SIB-administered training. The data collected from the assessment will drive internal training improvements to allow SIB to best train implementing partners charged with conducting the scientific research critical to meet the goals set out by the Presidents Emergency Plan for AIDS Relief (PEPFAR).

**DESCRIPTION OF RESPONDENTS**:

Participants will include implementing partner staff who attend an SIB training. These trainings are offered on an on-going basis and by request from headquarters or in-country leadership or from individual implementing partner staff members.

**TYPE OF COLLECTION:** (Check one)

[ ] Customer Comment Card/Complaint Form [ X ]Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software [ ] 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 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.

Name:\_\_Tanya Jennings\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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
3. If Applicable, has a System or Records Notice been published? [ ] Yes [ X ] 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 Respondents** | **Participation Time** | **Burden** |
| DGHT Implementing Partners | 150 | 10min | 25 hours |
|  |  |  |  |
| **Totals** | **150** | 10 | **25** |

**FEDERAL COST:** The estimated annual cost to the Federal government is \_\_\_\_0.00\_\_\_\_\_\_\_\_

**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 assessment is offered to any participant of a SIB training. SIB has developed this training to inform and provide instruction on human subjects research, processes, and policies to implementing partners.

These trainings are offered to implementing partner staff and conducted by SIB staff either at headquarters (Atlanta, GA) or in country. SIB routinely conducts training activities for implementing partners, which are the recipients of money, property, services, or anything of value to accomplish a public purpose of support or stimulation authorized by Federal statute.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)

[ ] Web-based or other forms of Social Media

[ ] Telephone

[X ] In-person

[ ] Mail

[ ] Other, Explain

1. Will interviewers or facilitators be used? [ ] Yes [ X ] No

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