Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB#: 0925-0642 ExpDate:05/2020)

TITLE OF INFORMATION COLLECTION:

NCI Healthcare Teams Cyber Discussion Feedback Survey

PURPOSE:

The Healthcare Teams (HCT) Cyber Discussion series, hosted by the National Cancer Institute's Healthcare Delivery Research Program, identifies strategies for healthcare teams to measure and evaluate teamwork processes in cancer care delivery. The purpose of this information collection is to obtain feedback from participants of Cyber Discussion to understand what went well and what enhancements can be made to improve service delivery.

DESCRIPTION OF RESPONDENTS:

Personally Identifiable Information:

Privacy Act of 1974? [] Yes [x] No

1. Is personally identifiable information (PII) collected? [x] Yes [] No

a. PII includes respondent name, title, institution, mailing and email address2. If Yes, is the information that will be collected included in records that are subject to the

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

Respondents are 90 individuals interested in how cancer care teams improve cancer care delivery including: cancer care clinicians, researchers, cancer patients and their families.

TYPE OF COLLECTION: (Check one)	
[] Customer Comment Card/Complaint Form [] Usability Testing (e.g., Website or Software [] Focus Group	[x] Customer Satisfaction Survey[] Small Discussion Group[] Other:
CERTIFICATION:	
I certify the following to be true:	
1. The collection is voluntary.	
2. The collection is low-burden for respondents a	nd low-cost for the Federal Government.
3. The collection is non-controversial and does <u>not</u> agencies.	ot raise issues of concern to other federal
4. The results are <u>not</u> intended to be disseminated	to the public.
5. Information gathered will not be used for the p policy decisions.	•
6. The collection is targeted to the solicitation of experience with the program or may have expe	-
	1 0
Name: Veronica Y. Chollette	
To assist review, please provide answers to the following	lowing question:

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Gifts or Payments:

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
Individuals	90	1	5/60	8
Totals	90	90		8

Category of Respondent	Total Burden	Wage Rate*	Total Burden
	Hours		Cost
Individuals	8	\$23.86	\$190.88
Totals	8		\$190.88

^{*}Occupation title "All-Occupations", Occupation code "00-0000", https://www.bls.gov/oes/current/oes_nat.htm#00-0000

FEDERAL COST: The estimated annual cost to the Federal government is \$2,889

			% of	Fringe (if applicable)	Total Cost to Gov't
Staff	Grade/Step	Salary	Effort		
Federal Oversight					\$2,689
Public Health Advisor	14/7	\$134,426	2%		\$2,689
Contractor Cost					\$200
Data Collection					\$200
Travel					\$0
Other Cost					\$0
Total					\$2,889

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 customer list includes name and contact information of registered participants for each Cyber Discussion session. We use this list to build the database of individuals interested in healthcare teams research. We do not have a sampling plan. At the close of each Cyber Discussion registered participants have the option to participate in a post session questionnaire.

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

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