

**Request for Approval under the “Generic Clearance for the Collection of  
Routine Customer Feedback” (OMB#: 0925-0648 Exp., date: 05/2021)**

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**TITLE OF INFORMATION COLLECTION:** NIGMS Audience Survey

**PURPOSE:**

The primary research question driving this effort is to understand:

- Who are the NIGMS audiences?
- What are the information and resource needs of each audience?

The goals of the audience analysis are to:

- Understand the type of audiences currently utilizing NIGMS resources.
- Determine the types and formats of information/topics and communication channels that would best serve NIGMS audiences.
- Identify areas for improvement according to followers.
- Determine if there are key audiences that NIGMS should be reaching that it is currently not.

**DESCRIPTION OF RESPONDENTS:**

The survey will be promoted through online and social media channels, with the intent of reaching audiences that subscribe, visit, or follow one of the following platforms:

MailChimp subscription lists for the Feedback Loop and Biomedical Beat blogs, Feedback Loop and Biomedical Beat landing pages, NIGMS website, Twitter: @NIGMS, @NIGMStraining, @NIGMSgenes, @NIHDPC, NIGMS Facebook, NIGMS Pinterest and/or Instagram. The scope of respondents will be expanded through requests for internal NIGMS staff to share the survey with their contacts (grantees, trainees), and for the NIGMS director to share with Institute staff. Additionally, survey promotion in Newswise, as well as promotion to external stakeholders, such as professional societies connected with NIGMS, will expand the pool of potential respondents.

The survey will ask respondents to select one of the following categories that best describes themselves: Student (Undergraduate, Postbaccalaureate, or Graduate), Scientist/Researcher (Postdoctoral fellow, Early career investigator in academia, Established investigator in academia, Scientist/researcher in industry or government, Scientist/researcher in other sector, as specified), Educator (K-12 or Undergraduate), Healthcare provider (e.g., physician, nurse, pharmacist, medical administrator), Public health professional (e.g., health communicator, patient advocate), Professional society stakeholder, Librarian/information specialist, Media professional, Member of the general public, Other self-reported option.

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

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

- ☒ 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 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: Susan Athey

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 [ ] No

**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            | 600                | 1                               | 8/60                         | 80                 |
|                        |                    |                                 |                              |                    |
| <b>Totals</b>          |                    | 600                             |                              | 80                 |

| Category of Respondent | Total Burden Hours | Hourly Wage Rate* | Total Burden Cost |
|------------------------|--------------------|-------------------|-------------------|
| Individuals            | 80                 | \$25.72           | \$2,058           |
|                        |                    |                   |                   |
| <b>Totals</b>          |                    |                   | \$2,058           |

\*The General Public wage rate was obtained from [https://www.bls.gov/oes/current/oes\\_nat.htm](https://www.bls.gov/oes/current/oes_nat.htm)

**FEDERAL COST:** The estimated annual cost to the Federal government is \$4,946.

| Staff                    | Grade/Step | Salary*   | % of Effort | Fringe (if applicable) | Total Cost to Gov't |
|--------------------------|------------|-----------|-------------|------------------------|---------------------|
| <b>Federal Oversight</b> |            |           |             |                        |                     |
| Public Health Analyst    | 14/10      | \$157,709 | .015%       |                        | \$2,366             |
|                          |            |           |             |                        |                     |
|                          |            |           |             |                        |                     |
| <b>Contractor Cost</b>   |            |           |             |                        |                     |
| IQ Solutions Staff       |            | \$60,000  | 4.3%        |                        | \$2,580             |
| Travel                   |            |           |             |                        |                     |
| Other Cost               |            |           |             |                        |                     |
|                          |            |           |             |                        |                     |
| <b>Total</b>             |            |           |             |                        | <b>\$4,946</b>      |

\*the Salary in table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2018/DCB.pdf>

**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?

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**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)
  - ☒ Web-based or other forms of Social Media
  - ☐ Telephone
  - ☐ In-person
  - ☐ Mail
  - ☐ Other, Explain
2. Will interviewers or facilitators be used? ☐ Yes ☒ No

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