

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

**TITLE OF INFORMATION COLLECTION:** Assist User Experience

**PURPOSE:**

NIH is considering discontinuing paper and streamlined eRA Commons submission options for administrative supplements. Prior to making/implementing a decision, we would like to get a sense of the applicant experience using the remaining submission options, including ASSIST, to see if additional hardening of these options is needed first.

**DESCRIPTION OF RESPONDENTS:**

Members of the extramural research community who use the NIH ASSIST system for electronic application submission and who have voluntarily subscribed to a listserv to share their individual perspectives on proposed ASSIST enhancements and options for addressing system issues.

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

- |  |  |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form          | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group                  |
| <input type="checkbox"/> Focus Group                                   | <input type="checkbox"/> 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: \_\_\_\_\_ Sheri Cummins \_\_\_\_\_

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

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected?  Yes  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

**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 and Households	100	1	10/60	17
<b>Totals</b>		<b>100</b>		<b>17</b>

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals and Households	17	\$35.76	\$607.92
<b>Totals</b>			<b>\$607.92</b>

\*[https://www.bls.gov/oes/2017/may/oes\\_nat.htm#19-0000](https://www.bls.gov/oes/2017/may/oes_nat.htm#19-0000)

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

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov't
<b>Federal Oversight</b>					
Program Analyst	GS-14, Step 6	\$136,725	10%		\$ 13,672.50
<b>Contractor Cost</b>					
Travel					
Other Cost					
<b>Total</b>					<b>\$ 13,672.50</b>

\*the Salary in table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2019/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?

The ASSIST-Development-L listserv has 210 subscribers and is comprised of ASSIST users who have voluntarily signed up to share their individual perspectives on proposed ASSIST enhancements and options for addressing system issues.

We will send the following email and accept any responses received within a 1 week timeframe.

**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  
[ X ] eMail  
[ ] 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.**