Request for Approval under the "Conference, Meeting, Workshop, and Poster Session Registration Generic Clearance (OD)"
(OMB#: 0925-0740 Exp Date: 7/31/2022)

TITLE OF INFORMATION COLLECTION: Multilevel Intervention Training Institute (MLTI)

PURPOSE:
The National Cancer Institute (NCI) Division of Cancer Control and Population Sciences (DCCPS) hosts this training institute to provide participants with a thorough grounding in conducting multilevel intervention (MLI) research with a specific focus on cancer, across the cancer control continuum. The institute utilizes a combination of a one-day in-person and distance learning sessions (4 months) that cover relevant theory and its use in multilevel intervention research; study approaches and methods (quantitative, qualitative, and mixed methods); and additional topics central to the design, successful funding, and conduct of research on multilevel healthcare delivery interventions. Faculty and guest lecturers are the leading experts in multilevel research.

Questions regarding race and gender, will be used to determine whether the National Cancer Institute (NCI) is reaching a diverse population of trainees. The information collected will only be disclosed in aggregate as NCI evaluates its efforts to reach a diverse population of trainees, providing this information is voluntary and has no impact on their status as a trainee.

DESCRIPTION OF RESPONDENTS:

Scientists, Researchers, PIs, postdocs and academic

TYPE OF COLLECTION: (Check one)

[ ] Abstract   [X] Application
[ ] Registration Form   [ ] 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.

Name: Erica Breslau

To assist review, please provide answers to the following question:
Personally Identifiable Information:
1. Is personally identifiable information (PII) collected? [X] Yes [ ] No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [X] Yes [] No

Gifts or Payments:
Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [ ] Yes [X] No
Amount: _____
Explanation for incentive: (include number of visits, etc.)

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	150	1	10/60	25
Totals		**150**		**25**

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	25	$45.80	$1,145.00
Total			**$1,145.00**

*Source of the mean Hourly Wage Rate is provided by the Bureau of Labor Statistics, Occupation title "Medical Scientists" 19-1040, https://www.bls.gov/oes/2018/May/oes_nat.htm#00-0000.

FEDERAL COST: The estimated annual cost to the Federal government is $5,564.35

Staff	Grade/Step	Salary**	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Program Director	14/5	$137,491	1%		$1,374.91
Contractor Cost					$4,189.44
Travel					$0
Other Cost					$0
Total					**$5,564.35**

**The salary in the table above is cited from https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/20Tables/html/DCB.aspx

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
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?

This training program is advertised through the Healthcare Delivery Research Program listserv.

Administration of the Instrument
How will you collect the information? (Check all that apply)
[X] Web-based or other forms of Social Media
[ ] Telephone
[ ] In-person
[ ] Mail
[ ] Survey Form
[ ] Chart Abstraction
[ ] Other, Explain

Will interviewers, facilitators, or research coordinators be used? [ ] Yes [X] No

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