

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: Regional Workshop: Alternative Approaches to Combatting Anti-Microbial Resistance (AMR)

PURPOSE: The National Institute of Allergy and Infectious Diseases (NIAID) sponsors conferences around the world, and will be co-sponsoring a conference in Almaty, Kazakhstan, April 18-19, 2019. NIAID’s Office of Global Research (OGR) is interested in knowing the participant’s overall satisfaction with what they learned at the conference as well as whether the conference was successful in fostering collaborations. This survey is part of a customer satisfaction assessment to examine the conference implementation and attendees’ perceptions to date. The information collected will enable the NIAID and partners to improve future conferences and encourage collaboration.

DESCRIPTION OF RESPONDENTS:

Potential survey respondents are the participants of the AMR Workshop including both American scientists and scientists from Europe and Central Asia. We are expecting about 70 non-FTE attendees.

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: Janette Eng (HHS, NIH, NIAID, OD, OSMO, OGR)

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 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
Private Sector/ non-USG	70	1	5/60	6
Totals	70	70		6

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Private Sector/ non-USG	6	\$23.23/hour	\$139.38
Totals	6		\$139.38

*Cite source per bls.gov if applicable

FEDERAL COST: The estimated annual cost to the Federal government is a **\$258.59 one-time cost.**

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Program Analyst	13/3	\$103,435	.25%		\$258.59
Contractor Cost					
Travel					
Other Cost					
Total					

*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?

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 survey will be provided to all the participants at the AMR Workshop, with an option for paper or web-based submission on the final day of the conference. The survey will also include a question for participants to indicate whether they are government employees or not. The conference registration is not complete; therefore, the list of specific participants is not yet available. We anticipate hosting 70 non-FTE participants at the conference. The surveys will be administered and collected by Janette Eng.

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.