

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0648, exp., date 5/31/2021)

TITLE OF INFORMATION COLLECTION:

NLM 2019 Data Science Services Survey

PURPOSE:

The purpose of this National Library of Medicine (NLM) survey is to obtain qualitative feedback from librarians who support NLM staff for data-driven research and health services. The information collected from the survey will help NLM to better assess the data science support provided by librarians and further improve NLM’s data delivery services for our stakeholders.

DESCRIPTION OF RESPONDENTS:

Respondents will be librarians who work at the Regional Medical Libraries (RMLs) of the National Networks of Libraries of Medicine (NNLM) funded through an NIH Cooperative Agreement.

TYPE OF COLLECTION: (Check one)

- | | |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input 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 checked="" type="checkbox"/> Other: <u>Services Delivery Feedback</u> |

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: Dianne Babski, Deputy Assoc. Dir. for Library Operations

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 N/A

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 (Librarians)	90	1	5/60	8
Totals	90	90		8

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Private Sector (Librarians)	8	\$29.21	\$233.68
Totals	8		\$233.68

*BLS: 254021 Librarians: <https://www.bls.gov/oes/current/oes254021.htm>

FEDERAL COST: The estimated annual cost to the Federal government is: \$2521.24

Staff	Grade/Step	Salary *	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Information Research Specialist	13/10	\$126,062	2%		\$2521.24
Contractor Cost					N/A
Travel					N/A
Other Cost					N/A
Total					\$2521.24

*The Salary in table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/19Tables/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

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 targeted respondents will be a list of the librarians who work at the Regional Medical Libraries (RMLs) of the National Networks of Libraries of Medicine (NNLM).

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