

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: DASH User Feedback

PURPOSE: The purpose of these surveys is to solicit feedback on the user friendliness, efficiency of workflow, and process for study submission and cataloging, data request, and biospecimen request with the ultimate goal of improving the overall experience of using NICHD DASH. The survey will be delivered to a DASH registered user after the user has completed and obtained approval of their data submission, catalog submission, or data/biospecimen request. The DASH registered user will receive a link to the respective survey along with the approval notification email.

DESCRIPTION OF RESPONDENTS: The respondents will be DASH registered users who have either (A) submitted or cataloged study data or (B) requested study data or biospecimens in NICHD DASH. The registered users using the NICHD DASH interface vary from academic, government, nonprofit or for-profit principal investigators and, also, include graduate students, medical students, and medical fellows.

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: Dr. Regina Bures _____

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

Form Name	Category of Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
NICHD DASH-Study Submission and Cataloging Survey	Individuals	36	1	5/60	3
NICHD DASH-Data Requester Survey	Individuals	60	1	5/60	5
NICHD DASH-Biospecimen Requester Survey	Individuals	36	1	5/60	3
	Totals		132		11

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	11	\$47.49	\$522.39
Totals			\$522.39

Salary/Wage Source: Bureau of Labor Statistics/Occupational Employment and Wages, May 2019: Occupational Code 19-1042, Medical Scientists, national estimates: <https://www.bls.gov/oes/current/oes191042.htm>

FEDERAL COST: The estimated annual cost to the Federal government is \$3,946.33

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Application Lead/ Program Officer	GS-15/ Step 4	\$ 156,973	1.0		\$1,569.73
Contractor Cost					
Archive Administrator/ Content Analyst		\$ 118,830	2.0		\$2,376.60
Total					\$3,946.33

*the Salary in table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2020/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 customer list is composed of all the registered users in NICHD DASH. Surveys will only be sent to those registered users who have requested data, requested biospecimens, submitted or cataloged study data and have received approval through NICHD DASH.

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.