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: Feedback on the Center for Scientific Reviews' (CSR) Bias Prevention in Peer Review Training.

PURPOSE: NIH depends on CSRs' peer review process to ensure that all NIH grant applications receive fair, independent, expert, and timely reviews that are free from inappropriate influences. A critical element in achieving this quality of peer review is to educate reviewers on the importance of preventing bias in the NIH peer review process. Preventing bias and mitigating its effects are essential for ensuring objectivity and fairness throughout the review process. The Center for Scientific Review (CSR) has expended considerable effort in creating and distributing an online training presentation to help educate reviewers on how to recognize and prevent bias in peer review. CSR proposes to conduct a survey to understand the effectiveness of the training and reviewer's general satisfaction with the training. Information collected from the survey will help refine and improve the quality of future CSR trainings on bias prevention in peer review.

DESCRIPTION OF RESPONDENTS: Respondents will be approximately 250 NIH CSR grant reviewers who are participating in reviews of the Maximizing Investigators' Research Award for Early Stage Investigators (MIRA) applications for the May 2020 council round. Most of these individuals are research scientists who work at academic universities across the U.S.

TYPE OF COLLECTION: (Check one)

[ ] Customer Comment Card/Complaint Form   [**X**] Customer Satisfaction Survey
[ ] Usability Testing (e.g., Website or Software   [ ] Small Discussion Group
[ ] Focus Group   [ ] 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.
4. The results are <u>not</u> intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> 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: Hope Cummings_____

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

Personally Identifiable Information:
1. Is personally identifiable information (PII) collected? [ ] Yes [**X**] 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
Individuals	250	1	5/60	21
Totals		1		**21**

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	21	$36.62	$769.02
Total			**$769.02**

*The wage rate was obtained from https://www.bls.gov/oes/2018/may/oes_nat.htm#19-0000

FEDERAL COST: The estimated annual cost to the Federal government is 2,668.94

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Health Scientist Administrator	GS-14/4	133,447	2%		2,668.94
Contractor Cost					N/A
Travel					N/A
Other Cost					N/A
Total					**2,668.94**

*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?

[**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 customer list will consist of all individuals who will serve as CSR reviewers on the Maximizing Investigators' Research Award for Early Stage Investigators (MIRA) meetings for the May 2020 council round. The review meeting roster will be used as the participant list. Most of these individuals are research scientists who work at academic universities across the U.S.

Administration of the Instrument
1. How will you collect the information? (Check all that apply)
   [**X**] Web-based or other forms of Social Media
   [ ] Telephone
   [ ] In-person
   [ ] Mail
   [ ] 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.