# Request for Approval under the "Conference, Meeting, Workshop, and Poster Session Registration Generic Clearance (OD)" (OMB\#: 0925-0740 Exp Date: 07/2022) 

TITLE OF INFORMATION COLLECTION: NIMH Joint Alliance-Coalition for Research Progress Meeting Registration Form (Federal)

## PURPOSE:

The National Institute of Mental Health (NIMH) Office of Science Policy, Planning, and Communications (OSPPC) supports the Institute's mission by strengthening the public health impact of NIMH-supported research through effective and efficient outreach that seeks to assure dissemination of research findings to key stakeholders. Through the use of targeted initiatives, programs and activities which encourage two-way communication, OSPPC sustains existing partnerships and works to build new relationships with groups and organizations with an interest in NIMH's mission or programs.

NIMH convenes the Joint Alliance-Coalition for Research Progress Meeting, comprised of representatives of patient and family advocacy organizations, professional groups, and select non-profit groups, to share the latest research advances and related developments and foster dialogue on the future path and directions of research. Registration information collected is used to develop a participant list and to distribute related materials after the meeting.

## DESCRIPTION OF RESPONDENTS:

Participants in the Joint Alliance-Coalition for Research Progress Meeting are representatives of national patient and family advocacy organizations, professional groups, and non-profit organizations who have an interest in NIMH research.

TYPE OF COLLECTION: (Check all that applies)
[ ] Abstract
[X] Registration Form
[ ] Application
[ ] Other: $\qquad$

## 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.

Name: Rajni Agarwal, NIMH OSPPC

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: $\qquad$
Explanation for incentive: (include number of visits, etc.)

## ESTIMATED BURDEN HOURS and COSTS

| Category of <br> Respondent | No. of <br> Respondents | No. of Responses <br> per Respondent | Time per <br> Response <br> (in hours) | Total <br> Burden <br> Hours |
| :--- | :---: | :---: | :---: | :---: |
| Individual (federal <br> contractor respondents) | 5 | 1 | $5 / 60$ | 1 |
|  |  |  |  |  |
| Totals |  | 5 |  | $\mathbf{1}$ |


| Category of Respondent | Total Burden Hours | Wage Rate* | Total Burden Cost |
| :--- | :---: | :---: | :---: |
| Individual (federal <br> contractor respondents) | 1 | $\$ 60.87 / \mathrm{hr}$ | $\$ 60.87$ |
| Totals |  |  | $\$ 60.87$ |

* The federal contractor respondent wage was estimated based upon the locality pay for the DC-MD-VA-WV-PA salary table at https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2020/DCB.pdf. Private sector respondent wage rate data is from the Top Executives (11-1000) category at http://www.bls.gov/oes/current/oes nat.htm\#00-0000.

FEDERAL COST: The estimated annual cost to the Federal government is $\$ \underline{616}$

| Staff | Grade/Step | Salary* | \% of <br> Effort | Fringe (if applicable) | Total Cost to Gov't |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Federal Oversight |  |  |  |  |  |
| Program Analyst | $13 / 7$ | $\$ 123,198$ | .5 |  | $\$ 616$ |
|  |  |  |  |  |  |
| Contractor Cost |  |  |  |  |  |
|  |  |  |  |  |  |
| Travel |  |  |  |  | $\$ 616$ |
| Other Cost |  |  |  |  |  |
| Total |  |  |  |  |  |

[^0]
## The selection of 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?

$$
[\mathrm{X}] \text { Yes [] No }
$$

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?

NIMH OSPPC maintains a list of organizations that have participated in previous outreach and engagement activities. Invitations to register are sent to this distribution list.

## 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
[ ] Survey form
[ ] Chart Abstraction
[ ] Other, Explain
2. 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.


[^0]:    *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

