ATTACHEMENT 2d: NCIPC DMP Template

Form Approved

 OMB NO: 0920-xxxx

 Exp. Date: X/XX/XXXX

NCIPC Data Management Plan Template

***Project Identifiers and Description of Data***

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| **Project Title:** |  |
| **Principal Investigator****Agency/Contact Information** |  |
| **Data Steward (if different from Principal Investigator)** |  |
| **Funding information (type and number)** |  |
| **Data Publisher/Owner** |  |
| **Last date DMP updated** |  |
| **Tags**Tags (or keywords) to help users discover the data set; please include terms that would be used by technical and non-technical users.  |
| **Brief Description of project and data that will be collected.** Include information on the public health impact. Human-readable description (e.g., an abstract) with sufficient detail to enable a user to quickly understand whether the data set is of interest. |
| **Population Represented by Dataset:***Describe population represented by the data, e.g. “residents of X”, “inpatients at X”, “users of product X”.* |
| **Location of Raw Dataset** |
| **Project Type** □ Surveillance □ Research □ Evaluation □ Administration  □ Other – Describe: |
| **Type of data:** □ Survey  □ Record Review □ Observation □ Focus Group □ Other -- Describe: |
| **Is data one-time data collection or ongoing** □ One time □ Baseline and Follow-up (Specify expected number of follow-up collections: \_\_\_\_\_\_\_\_\_\_) □ Ongoing surveillance |
| **Current project Status** □ Planning, collection not started □ Collection ongoing □ Collection Complete – data cleaning □ Collection Complete – data available □ If data not yet available, **Expected Data Release Date:** |
| **Temporal Metadata**Start Date of data collection: End Date of data collection: (if ongoing indicate NA) If Ongoing:  Are there scheduled releases □ Yes □ No  If Yes, anticipated date of next release:   |
| **Spatial Metadata: as applicable include**Country: Region: State: County: City: |
| **Is there a Certificate of Confidentiality** □ Yes □ No  If Yes: Provide link  |
| **Security Assessment & Authorization Status** (select one)[ ] Not started [ ]  In progress with Information Systems Security [ ]  Office of the Chief Information Security Officer processing [ ]  Authority to Operate granted |

***Access to Data***

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| **Name of Dataset** **Public Access level***The degree to which this dataset could be made publicly-available, regardless of whether it has been made publicly available****Check all that apply***[ ]  Public (Data set is or could be made publicly available to all without restrictions).[ ]  Restricted access (Data set is available under certain use restrictions).[ ]  Summary (Machine readable summary tables available),[ ]  Non-public (Data set is not available to members of the public).**Justification of Access Level:** |
| **Information collected but not publicly available:** |
| **Data Dictionary** **Location:** **Format:****Other Dataset Documentation if available** **Description:** **Location:** |
| **If Restricted Data Set (Shared Data)****Data Use Agreement Required:** [ ] Yes [ ]  No**If available, link to Data Use Agreement:****Type of Use Agreement or License** (select all that apply) [ ]  Non-license / public domain[ ]  Memorandum of Understanding [ ]  Data Sharing Agreement[ ]  Data Transfer Agreement[ ]  Inter-Agency Agreement[ ]  Other***Accessing Restricted Data*** **Data publisher/owner:** **Website URL:** **Download URL:** |

**Data Standards (Optional Fields)**

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| **Data Plans and Protocols for Quality Assurance (links to SOPs or Descriptions of plans such as validations checks, quality assurance)**  |
| **Process for Omitting Personally Identifying Information Prior to Public Release** *Description of what identifiers are in the database, how they will be removed before data is published and by whom*  |

**Archival and Long-Term Preservation of Data**

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| *Preservation Timeline. State when and how the dataset will be archived or destroyed.* |