Request for Approval under the "Generic Clearance for NIH Citizen Science and Crowdsourcing Projects" (OMB#: 0925-0766, Expiration Date: 04/30/2023)

TITLE OF INFORMATION COLLECTION: NCI Cohort Consortium Data Pooling Questionnaire

PURPOSE:

This questionnaire aims to elucidate common goals, approaches, facilitators, challenges and barriers to participation in collaborative projects within the NCI Cohort Consortium. The questionnaire will help Cohort Consortium leadership better understand its members' past and present participation in Cohort Consortium collaborative projects. The findings will inform recommended priority actions by the Cohort Consortium Steering Committee and NCI to address any challenges or barriers to participation.

DESCRIPTION OF RESPONDENTS:

The respondents are 744 investigators associated with member cohorts of the Cohort Consortium.

TYPE OF COLLECTION: (Check one)

[] Data Catalogue	[X] Repository of Tools and Best Practices
[] Recommendations of scientific reviewers	[] Resources
[] Call for Nominations	[] 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: Audrey Wellons, M.P.H.

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

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [] Yes [X] No

Amount:	

Explanation for incentive: (include number of visits, etc)

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	744	1	10/60	124
Totals		744		124

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	124	\$44.33	\$5,496.92
Total			\$5,496.92

^{*}Source of the mean Hourly Wage Rate is the average provided by the Bureau of Labor Statistics, for Occupation titles "Medical Scientists" 19-1040, at \$ 48.45 https://www.bls.gov/oes/2020/May/oes_nat.htm#19-1040 and Occupation title "Epidemiologists" 19-1041, at \$ 40.20, https://www.bls.gov/oes/2020/May/oes_nat.htm#19-1041.

FEDERAL COST: The estimated annual cost to the Federal government is \$523.20

Staff	Grade/Step	Salary**	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Program Director	12/7	\$106,641	.005		\$523.20
Contractor Cost					\$0
Travel					\$0
Other Cost (Venue, AV)					\$0
Total					\$523.20

^{**}The salary in the table above is cited from https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2021/DCB.pdf

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

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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 survey will be sent to 744 investigators associated with member cohorts of the Cohort Consortium. The sample email is attached.

Administration of the Instrument

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	

Will interviewers, facilitators, or research coordinators be used? [] Yes [X] No