Request for Approval under the "Generic Clearance for NIH Citizen Science and Crowdsourcing Projects"

(OMB#: 0925-0766 Exp., date: 04/2023)

TITLE OF INFORMATION COLLECTION: Interagency Pain Research Coordinating Committee (IPRCC) Member Nomination Form

PURPOSE: The Interagency Pain Research Coordinating Committee (IPRCC) seeks nominations for IPRCC members from scientists, physicians and health professionals who are leaders in the field of pain research; and members of the general public who are representatives of leading research, advocacy and service organizations for individuals with pain-related conditions.

The Department is soliciting nominations for one non-federal member from among scientists, physicians, and other health professionals and for three non-federal members of the general public who represent a leading research, advocacy, or service organization for people with pain-related conditions. These candidates will be considered to fill positions opened through completion of current member terms.

The process for nomination of members to serve on the IPRCC includes a call for candidates from diverse populations. The selection of candidates for each submitted slate of nominees for approval for membership is reviewed before submission to HHS to ensure that diversity of the committee is represented across racial, ethnic, sex, geographic, scientific areas of interest, and pain conditions. These steps have been and continue to be taken each time a slate of nominees is submitted in order to maintain such diversity as committee members complete their terms and rotate off the committee.

DESCRIPTION OF RESPONDENTS:

The respondents are members of the pain research community and members of the pain patient advocacy community.

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. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> policy decisions.
- 5. 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: Sophia Jeon, National Institute of Neurological Disorders and Stroke (NINDS), NIH

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
- 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	No. of	No. of Responses	Time per	Total
Respondent	Respondents	per Respondent	Response	Burden
			(in hours)	Hours
Individuals (Pain	40	1	20/60	13
Researchers and Pain				
Patient Advocates)				
Totals		40		13

COST TO RESPONDENT

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals (Pain	13	\$43.22	\$562
Researchers and Pain			
Patient Advocates)			
Totals			\$562

^{*}Hourly wage rates for 19-1029 Biologic Scientist is \$43.22 (based on http://www.bls.gov/oes/current/oes191029.htm).

FEDERAL COST: The estimated annual cost to the Federal government is \$3,629.16.

			% of	Fringe (if applicable)	Total Cost to Gov't
Staff	Grade/Step	Salary*	Effort		
Federal Oversight	13/6	\$120,972	3%		\$3,629.16
Contractor Cost (optional)					
Travel					
Other Cost					
Total					\$3,629.16

^{*}the Salary in table above is cited from https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/21tables/html/dcb.aspx

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 univers	e of potential
	respondents and do you have a sampling plan for selecting from this univ	erse?
	[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 link will be published in a Federal Register Notice. It will also be shared via the NIH Pain Consortium Listserv which includes NIH-funded pain researchers, pain patients, and pain patient advocates. We expect up to 40 respondents / submissions based on the number of previous submissions we received in 2019 (33 submissions).

Administration of the Instrument

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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