

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0648, Exp. date: 06/2024)

TITLE OF INFORMATION COLLECTION: Environmental Health Equity through Implementation Science Workshop Feedback Survey (NIEHS)

PURPOSE: The purpose of this survey is to determine level of satisfaction among participants who attend the Advancing Environmental Health Equity through Implementation Science workshop on February 28th and March 1st, 2022. The survey will ask questions about logistics, workshop content, and what additional information participants would like to learn more about in subsequent workshops. Information collected in the survey will be used to enhance future workshops based on participant interests.

DESCRIPTION OF RESPONDENTS:

The respondents will comprise of workshop attendees from the Advancing Environmental Health Equity through Implementation Science workshop.

TYPE OF COLLECTION: (Check one)

- | | |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> 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 not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential 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: Lindsey Ann Martin, PhD

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

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? Yes 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 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/household	1000	1	10/60	167
Totals		1000		167

COST TO RESPONDENT

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals/household	167	44.44	\$7421.48
Totals			\$7421.48

*Cite source per bls.gov if applicable
 19-0000; [Life, Physical, and Social Science Occupations](http://www.bls.gov/oes/current/naics4_541700.htm);
http://www.bls.gov/oes/current/naics4_541700.htm

FEDERAL COST: The estimated annual cost to the Federal government is: \$101.88

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Health Scientist Administrator	12/8	101,877	0.1%		\$101.88
Contractor Cost					0
Travel					0
Other Cost					0
Total					\$101.88

*the Salary in table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2022/RA.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?

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 universe of potential participants includes everyone that logs onto the Zoom Webinar platform to attend the workshop. Only those who attend the workshop will be directed to the survey. Once a workshop participant clicks 'leave webinar,' the survey immediately launches in the participant's web browser. Completion of the survey is entirely optional. If the participant chooses not to complete the survey, they can simply close their web browser. The survey link will also be put in the Zoom chat box for participants to access.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)

Web-based or other forms of Social Media *

Telephone

In-person

Mail

Other, Explain [

*The survey was created in an approved platform Microsoft Forms. The Zoom webinar platform will be used to launch the Microsoft Forms survey. The survey will show in the participant's web browser when the webinar ends. The direct survey link will also be placed in the Zoom chat box for direct access. Data collected in the Microsoft Forms survey will be downloaded in a Microsoft Excel file.]

2. Will interviewers or facilitators be used? Yes No