

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0648 Exp., date: 06/30/2024)**

**TITLE OF INFORMATION COLLECTION:** 2022-2023 Principles of Pediatric Clinical Pharmacology and Therapeutics Course – Webinar Feedback Satisfaction Questionnaire (NICHD)

**PURPOSE:**

NICHD conducts weekly virtual webinars for its T32 Pediatric Pharmacology Training Program. This course repeats annually. The webinars focus on therapeutic progress and challenges in pediatric medical research and care, particularly in the areas of the safe and effective use of interventions in this population. NICHD would like to collect feedback from participants for each of the webinars in the 25-webinar course, Principles of Pediatric Clinical Pharmacology and Therapeutics. Feedback will be collected through the Cvent event management system. The lecture series has been specifically designed to meet the needs of pediatric clinical pharmacology students who lack a formal educational curriculum in this discipline as mandated under the Best Pharmaceuticals for Children Act (BPCA). Participant feedback is used to determine which speakers were effective in meeting the goals of their presentations, to determine what content areas are of most interest to participants for future lectures, and if any logistical/technical issues need to be addressed. Feedback is shared with speakers upon request but not the public.

**DESCRIPTION OF RESPONDENTS:**

The feedback questionnaire is sent to all registrants for each weekly webinar in the Principles of Pediatric Clinical Pharmacology Lecture Series. Participants are T32 trainees, researchers, public health officials and others with an interest in pediatric clinical pharmacology. The 2021-22 course had 502 unique participants, who attended as few as one and as many as 28 (of 28) webinars. Participants attended an average of 4.6 webinars each. Similar participation is expected for the 2022-23 course which will have 25 lectures.

**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.

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

**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
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 Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
Individuals	500	5	3/60	125
<b>Totals</b>	<b>500</b>	<b>2500</b>		<b>125</b>

*Note: Estimate of 500 respondents is based on the 2021-22 course enrollment. 5 responses per respondent accounts for the fact that respondents attend an average of 4-5 webinars each.*

**COST TO RESPONDENT**

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	125	\$30.19	\$3,773.75
<b>Totals</b>			<b>\$3,773.75</b>

\* Bureau of Labor Statistics/Occupational Employment and Wages, May 2021: Occupational Code 19-1042, Medical Scientists, national estimates for 25th percentile (<https://www.bls.gov/oes/current/oes191042.htm>). This estimate falls within the range allowed for postdoctoral trainees on T32 grants (<https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-070.html>).

**FEDERAL COST:** The estimated annual cost to the Federal government is \$2,566.83

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov't
<b>Federal Oversight</b>					
Program Officer	GS-12, Step 6	\$104,808.00	1.0	N/A	\$1,048.08
<b>Contractor Cost (T&amp;M Contract)</b>		\$60.75 per hour	25 hours		\$1,518.75
Travel					
Other Cost					
<b>Total</b>					<b>\$2,566.83</b>

\*the Salary in table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2022/DCB.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?  
[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 questionnaire is sent to all registrants of a particular lecture in the 25-lecture webinar series.

**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  
[ ] Other, Explain
2. Will interviewers or facilitators be used? [ ] Yes [X] No

**Please make sure that all instruments, instructions, and scripts are submitted with the request.**