## 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:** NIH Data Management and Sharing (DMS) Webinar Series Feedback Forms

**PURPOSE:** To ensure that the webinar presented information and increased participants’ knowledge on the DMS topic.

**DESCRIPTION OF RESPONDENTS**: Webinar registrants, which may include NIH extramural and intramural investigators; NIH and NIDDK staff; and other interested individuals who registered for the webinar.

**TYPE OF COLLECTION:** (Check one)

[ ] Customer Comment Card/Complaint Form [ ] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software [ ] Small Discussion Group

[ ] Focus Group [ X] Other: Feedback Survey

**FREQUENCY OF REPORTING:** (Check one)

[ ] Once [ ] Quarterly

[ ] Monthly [ ] On Occasion

[ ] Annually [X ] Other Feedback Survey sent out 3 times over 3 months

**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: Reaya Reuss

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
3. If Applicable, has a System or Records Notice been published? [ ] Yes [ ] No
4. Privacy Act Systems of Records Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FR Citation \_\_\_\_FR\_\_\_

**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 or Households | 75 | 3 | 3/60 | 11 |
|  |  |  |  |  |
| **Totals** |  | 225 |  | **11** |

|  |  |  |  |
| --- | --- | --- | --- |
|  **Category of Respondent** | **Total Burden****Hours** | **Hourly Wage Rate\*** | **Total Burden Cost**  |
| Individuals or Households | 11 | $29.76 | $327.36 |
|  |  |  |  |
| **Totals** | **11** |  | $327.36 |

\*Source: [U.S. Bureau of Labor Statistics May 2022 National Occupational Employment and Wage Estimates, United States](https://www.bls.gov/oes/current/oes_nat.htm) all occupations median salary

**FEDERAL COST:** The estimated annual cost to the Federal government is $485.72

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Staff** | **Grade/Step** | **Salary\*** | **% of Effort** | **Fringe (if applicable)** | **Total Cost to Gov’t** |
| **Federal Oversight** |  |  |  |  |  |
| Health Science Policy Analyst | 14-9 | $167,663 | .001 |  | $161.21 |
|  |  |  |  |  |  |
| **Contractor Cost** |  |  |  |  |  |
| Research Systems Programmer/Analyst |  | $109.1/hr | 2.1% | $179.01 | $288.12 |
| Manager, Systems Analysis & Programming |  | $13.78/hr | 0.2% | $22.61 | $36.39 |
| Travel |  |  |  |  |  |
| Other Cost |  |  |  |  |  |
|  |  |  |  |  |  |
| **Total** |  |  |  |  | $485.72 |

\*the Salary in table above is cited from [**https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2023/DCB.pdf**](https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2023/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?

Potential respondents include only those individuals who register for the webinar. We estimate 10-30% of 300 potential registrants will respond to the survey. They will receive a link via email to the feedback form after the webinar.

**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

1. Will interviewers or facilitators be used? [ ] Yes [ X ] No