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: Scientific Workforce Diversity Seminar Series (SWDSS): November 17 Seminar Follow-Up Survey

PURPOSE:

The Chief Officer for Scientific Workforce Diversity (COSWD) office hosts a seminar series called the Scientific Workforce Diversity Seminar Series (SWDSS). The purpose of the series is to keep scientific workforce diversity issues at the forefront, to share the latest research on these topics, and to engage with professionals and researchers within and outside of the NIH. The COSWD office is hosting a virtual seminar on November 17 titled *How Do Diversity Supplements Impact Careers in Biomedical and Behavioral Research*? and intends to ask attendees for feedback on the seminar. The results of the survey will inform future COSWD office events.

DESCRIPTION OF RESPONDENTS:

Respondents will be NIH staff and the general public from various organizations who attended the event and who voluntarily choose to participate in the survey. The survey will be accessible via a web-based survey link provided to attendees.

TYPE OF COLLECTION: (Check one)

[] Customer Comment Card/Complaint Form] Usability Testing (e.g., Website or Software

[] Focus Group

[X] Customer Satisfaction Survey

[] Small Discussion Group

[] 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: <u>Nicole Lang, Health Program Specialist</u> Chief Officer for Scientific Workforce Diversity (COSWD) Office

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

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? [] Yes [X] No

 If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [] Yes [X] No If Applicable, has a System or Records Notice been published? [] Yes [X] 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	150	1	5/60	13
Totals		150		13

COST TO RESPONDENT

Category of Respondent	Total Burden	Hourly Wage Rate*	Total Burden
	Hours		Cost
Individuals	13	\$38.15	\$495.95
Totals			\$495.95

*Mean hourly wage for Life, Physical, and Social Science Occupations https://www.bls.gov/oes/2020/may/oes_nat.htm#19-0000

While the event is open to the public, we anticipate that most participants will work in life, physical, or social science occupations, given the seminar focus on scientific workforce diversity topics.

FEDERAL COST: The estimated annual cost to the Federal government is \$569.72.

			% of	Fringe (if applicable)	Total Cost to Gov't
Staff	Grade/Step	Salary*	Effort		
Federal Oversight					
Social Science Analyst	13-03	\$113,944	0.5%		\$569.72
Contractor Cost					
Travel					
Other Cost					
Total					\$569.72

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

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?

All event attendees will be invited to respond to the survey.

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.