

NIH COVID-19 At-Home Testing Program Survey

In order to promote a safe work environment, NIH is exploring a program to provide employees with rapid, at-home COVID-19 tests to be taken three (3) times per week, in the privacy of their own homes. Your responses to these questions will help us determine whether to roll out this program.

Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a current valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0648). Do not return the completed form to this address.

OMB Control Number: 0925-0648

Expiration Date: 5/31/2021

* Required

1. How interested would you be in participating in an NIH program that provided rapid, at-home COVID-19 tests to be taken 3 times per week and provided results in 10 minutes? *

- ☐ Definitely interested
- ☐ Probably interested
- ☐ Somewhat interested
- ☐ Probably not interested
- ☐ Definitely not interested

2. Would you prefer to use rapid, at-home tests for COVID-19 or use the asymptomatic testing currently provided on the NIH campus? *

- ☐ Prefer to use the asymptomatic testing on campus
- ☐ Prefer to use rapid, at-home testing 3 times per week
- ☐ I'm not sure

3. If NIH cannot fully cover all of the costs of an at-home testing program, how much would you be willing to pay for three (3) rapid tests per week? *

- ☐ Up to \$9 per week (\$3 per test)
- ☐ Up to \$6 per week (\$2 per test)
- ☐ I would not be willing to pay any amount

4. If you participated in an NIH at-home testing program, would you be willing to share your test results with NIH Occupational Medical Service (OMS)? *

- ☐ Yes
- ☐ No
- ☐ I'm not sure

5. If you participated in an at-home testing program, would you be willing to share your test results with your supervisor? *

- ☐ Yes
- ☐ No
- ☐ I'm not sure