`Request for Approval under the "Generic Clearance for NIH Citizen Science and Crowdsourcing Projects"

(OMB#: 0925-0766 Exp., date: 07/2023)

TITLE OF INFORMATION COLLECTION: NIH HEAL Initiative 2024 Director's Awards Nomination Form

PURPOSE:

Each year, the NIH HEAL Initiative® recognizes HEAL-funded researchers for outstanding work. There are five award categories: Trailblazers, Excellence in Research, Mentorship, Interdisciplinary Collaboration, and Community Partnership. Awardees will be recognized at the 5th Annual NIH HEAL Initiative Investigator Meeting on February 7-8, 2024.

The purpose of this information collection is to collect nominations for each award. Nominations include a statement to the selection committee on why a researcher should receive the award. The statement is limited to 500 words or less. Trailblazer awardees will present their work at the meeting, and therefore require an extra abstract submission detailing the work they would present, not to exceed 400 words. Submissions are encouraged but not required. Submissions are free of charge to all individuals. Respondents can submit one nomination per response, so this scenario was used to estimate the time required for these forms.

DESCRIPTION OF RESPONDENTS:

Respondents are primarily HEAL-funded researchers and their staff from academic and private institutions around the country. Respondents may also include NIH scientific staff that support HEAL research programs, patient and community partners, and miscellaneous HEAL stakeholders. The Director's Awards nomination form is the same for every individual. By completing the Director's Awards nomination form, respondents are recognizing a researcher they believe has provided exemplary value to the HEAL Initiative.

| TYPE OF COLLECTION: (Check one) | | | | | | | | |
|---|----------------------------------|---|--|--|--|--|--|--|
| [] Data Catalogue[] Recommendations of scientific reviewers[X] Call for Nominations | | [] Repository of Tools and Best Practices [] Resources [] Other: | | | | | | |
| FREQUENC | Y OF REPORTING: (Check one) | | | | | | | |
| [] Once [] Monthly | [] Quarterly [] On Occasion | | | | | | | |
| [X] Annually | [] 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. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> policy decisions.
- 5. 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: Diana S. Morales, MPH, Communications Director, NIH HEAL Initiative

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

Personally Identifiable Information:

- 1. Is personally identifiable information (PII) collected? [X] Yes [] No
- 2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [X] Yes [] No
- 3. If Applicable, has a System or Records Notice been published? [] Yes [X] 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 |
|---------------------------|-----------------------|------------------------------------|------------------------------------|-----------------------|
| Individual | 300 | 1 | 30/60 | 150 |
| Totals | | 300 | | 150 |

COST TO RESPONDENT

| Category of Respondent | Total Burden | Hourly Wage Rate* | Total Burden | |
|-------------------------------|--------------|-------------------|--------------|--|
| | Hours | | Cost | |
| Individual | 150 | \$46.11* | \$6,917 | |
| Totals | | | \$6,917 | |

^{*}Hourly wage rates are based on http://www.bls.gov/oes/current/oes191029.htm: on the mean hourly wage percentile for biological scientists

FEDERAL COST: The estimated annual cost to the Federal government is \$4,510.

| | | | % of | Fringe (if applicable) | Total Cost to Gov't |
|-------------------------|------------|-----------|--------|------------------------|------------------------|
| Staff | Grade/Step | Salary* | Effort | | |
| Federal Oversight | | | | | |
| Communications Director | 14/8 | \$163,252 | 0.5% | | \$816 |
| Administrative Officer | 12/1 | \$94,199 | 0.5% | | \$471 |
| | | | | | |
| Contractor Cost | | | | | |
| Meeting Planner | | | | | \$2,119 |
| Editor | | | | | \$1,104 |
| | | | | | |
| Travel | | | | | |
| Other Cost | | | | | |
| | | | | | |
| Total | | | | | \$4,510 |

^{*}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

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 [] Not Applicable |

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 nomination form will be sent to two listservs used to communicate with HEAL stakeholders – the investigator listserv (~1000 recipients) and the NIH scientific staff listserv (~1300 recipients). Last year (the inaugural year for the awards), we sent the form to these listservs and received 200 responses. With increased awareness about the awards as well as more time to submit nominations, we estimate 300 responses. The HEAL staff will review nominations and select awardees utilizing a scoring rubric specific to each award. NIH scientific staff will vet the choices and the HEAL Director will make the final determinations.

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? | [| l Yes | [X] | N |
|----|------|--------------|-----------------|----------|---|-------|-----|---|
| | | | | | | | | |

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