Request for Approval under the "Conference, Meeting, Workshop, Registration and Challenges Generic Clearance (OD)"
(OMB#: 0925-0740 Exp Date: 09/2025)

TITLE OF INFORMATION COLLECTION: 5th Annual NIH HEAL Initiative Investigator Meeting - Abstract and Topic Suggestion Submission Form

PURPOSE:

The NIH HEAL Initiative® plans to host the 5th Annual NIH HEAL Initiative Investigator Meeting on February 7-8, 2024, to bring together researchers funded by the initiative that are working to stem the pain and opioid crises. The purpose of this information collection is to collect scientific research abstracts for oral and poster presentations. Abstract content is limited to 400 words or less. Respondents will also have the option to submit topic suggestions for the meeting. Submissions are encouraged but not required. Submissions are free of charge to all individuals.

DESCRIPTION OF RESPONDENTS:

Respondents are individuals that intend to attend the 5th Annual NIH HEAL Initiative Investigator Meeting on February 7-8, 2024, 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 abstract and topic suggestion submission form is the same for every individual. By completing the abstract submission and topic suggestion form, respondents are demonstrating their interest in attending and presenting their work at the annual investigator meeting.

TYPE OF COLLECTION: (Check all that apply)

[X] Abstract   [ ] Application
[ ] Challenges and Competition   [ ] Form
[ ] Registration Form   [ ] Other:_____

FREQUENCY OF REPORTING: (Check one)

[ ] Once   [ ] Quarterly
[ ] Monthly   [ ] 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 not raise issues of concern to other federal agencies.

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
Amount: _____
Explanation for incentive: (include number of visits, etc.)

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 Hours	Wage Rate*	Total Burden 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.**

Staff	Grade/Step	Salary	% of Effort	Fringe (if applicable)	Total Cost to Gov't
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**

The selection of 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 abstract and topic suggestion submission 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, we sent the form to these listservs and received 200 responses. With increased time to submit nominations, we estimate 300 responses. An NIH Scientific Planning Committee will review nominations and select abstracts utilizing a scoring rubric based on impact, innovation, accomplishments/progress, and timeliness of the responses. A HEAL Investigator Meeting Coordinating Committee will take into consideration topic suggestions during program planning. The HEAL staff will review recommendations and make final selections.

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
        [ ] Survey form
        [ ] Chart Abstraction
        [ ] Other, Explain

2. Will interviewers, facilitators, or research coordinators be used? [ ] Yes [X] No

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