

## SUPPORTING STATEMENT A

# Fellowship Management System (FMS)

OMB Control No. 0920-0765

Revision

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OMB APPROVAL IS REQUESTED NO LATER THAN

October 1<sup>st</sup>, 2022

**Intended use of the resulting data:** CDC uses the information collected for processes that aid and enhance the selection of fellowship participants and host sites and to track participant information that helps strengthen the current, emerging, and ever-changing public health workforce.

**Methods to be used to collect:** All information is collected electronically through a web-based portal from voluntary respondents who seek to participate in, and who do participate in, CDC fellowships.

**The subpopulation to be studied:** Potential respondents include nonfederal fellowship and host site applicants, current fellows and supervisors, reference letter writers, and alumni of CDC fellowships.

**How the data will be analyzed:** All data will be analyzed through descriptive statistics to inform program design and management, data will only be presented or distributed in aggregate.

## **A. JUSTIFICATIONS**

### **1. Circumstances Making the Collection of Information Necessary**

This information collection request (ICR) is for the revision of a currently approved information collection (0920-0765, exp. March 31, 2023). Approval is requested for 3 years. This collection of information and data from nonfederal respondents is authorized by the Public Health Service Act §301, Title 42 U.S.C. §241(a): Research and Investigations Generally (Attachment 1, Authorizing Legislation).

#### About CDC's Division of Scientific Education and Professional Development (DSEPD)

The mission of CDC's Division of Scientific Education and Professional Development (DSEPD) is to support the development of a competent, sustainable, and empowered public health workforce. Professionals in public health, epidemiology, medicine, economics, information science, veterinary medicine, nursing, public policy, and other related professions seek opportunities through CDC fellowships to broaden their knowledge and skills to improve the science and practice of public health.

Fellowship programs are a key part of the CDC's professional development programming for current and future members of the public health workforce. Fellowships across the CDC assign fellows to host (work) sites in both federal and nonfederal public health agencies and organizations. Assignments include state, tribal, local, and territorial public health agencies, and operational divisions of HHS, including CDC, the Centers for Medicare & Medicaid Services and the Indian Health Service. Nongovernmental assignments include academic institutions, tribal organizations, and private, public health organizations. These assignments provide opportunities for CDC fellows to build and sustain public health capacity both during and after their fellowships.

#### Background on the Fellowship Management System (FMS)

In 2008, CDC obtained OMB approval to collect information through the Fellowship Management System ("FMS"). FMS is a web-based, flexible, and robust data management system that allows CDC to electronically collect and process fellowship applications, host site assignment proposals, and fellowship alumni information from nonfederal persons. FMS also supports and monitors ongoing fellowship activities and compliance with fellowship requirements.

Over the years, CDC has enhanced FMS resulting in improved accuracy, readability, timeliness, completeness, and consistency of information submitted in a streamlined, standardized format across multiple fellowship programs. Through Revisions and Non-Substantive Change Requests, CDC has adapted FMS to reflect changes in the demand for fellowship opportunities, improve alignment and tailoring of questions for each fellowship program's eligibility criteria, and clarify questions and instructions in response to user feedback.

The data collected in FMS optimize CDC's fellowship service delivery, building and sustaining public health capacity while supporting ongoing public health operations across the country. Critical components of FMS manage the application and matching process of fellowship assignment proposals with qualified fellowship applicants by matching interests and skills of qualified fellowship candidates with host (work) site needs. The best matches between fellows

and assignments often lead to long-term employment and the sustained public health capacity of state, tribal, local, and territorial public health agencies and organizations. Approximately 85% of CDC fellowship program graduates obtain jobs working in public health. Many of them remain in the same host programs that provided applied, on-the-job learning in their fellowship experiences.

FMS supports supervisors' and fellowship program staff's ability to monitor and assess fellows' progress during a fellowship, according to public health competencies established under each fellowship program. Finally, FMS also includes an alumni database. Through the FMS Alumni Directory, CDC can identify alumni possessing mission-critical skills to respond to a national public health emergency or an urgent public health need, better assess fellowship programs, and reinforce professional networking among fellowship alumni. Overall, FMS provides overarching support for the administration and management of many CDC fellowship programs, across their lifecycle, from the application process to supporting alumni.

### Scope and purpose of proposed revision

This revision includes two changes: 1) Increase in respondents and 2) A change in software platform.

The increase in the number of respondents described in this revision is the result of anticipated, continued expansion in fellowship program size. Additional funding for these fellowship programs allows for expansion.

The change in software platform is motivated by various factors. CDC's last revision of FMS in 2020 included a change in software platform that was guided by a formal IT system analysis of alternatives process. However, in practice, the platform has proven inefficient and unwieldy for the diverse and often changing needs of CDC fellowship programs. This revision centers on a shift to a new software platform: the Microsoft® Power Platform® (Microsoft Corporation, Cary, Washington), a cloud-based technology, to underpin FMS. This platform promises to provide an improved data management system that reduces existing challenges and addresses business needs. This will be an enterprise capability that provides reusable functionality and data for current and future fellowships and will enhance interconnectivity. Integration of the suite of Microsoft tools for data management, analysis, and visualization will allow CDC to better access and use fellowship data; moreover, data cleaning and manipulation can be handled in the system itself, which will increase the security of these data. These improved functionalities will facilitate the enhanced use of administrative data collections for program improvement and evidence building activities across CDC and other federal agencies. The update to the software platform will also make it easier for additional fellowships to opt to use FMS, expanding the benefits of the system to a broader set of CDC programs.

There are no proposed changes to the content of information collection forms, from what was last approved by OMB in February 2022 in a Non-Substantive Change Request.

Overall, the proposed changes create a system that will better serve CDC, applicants, and host sites, with a more efficient, effective, and secure electronic mechanism for collecting, processing, and monitoring fellowship information. These improvements are in direct response to feedback from users and administrators on the shortcomings of the platform adopted in the 2020 FMS revision. All FMS data collections align with HHS's strategic goal to strengthen

nation's health and human services infrastructure and workforce (U.S. Department of Health and Human Services Strategic Plan, Foster a 21<sup>st</sup> Century Health Workforce).

## 2. Purpose and Use of Information Collection

Currently, eleven programs use FMS:

1. Epidemic Intelligence Service (EIS);
2. Epidemiology Elective Program (EEP)
3. CDC Steven M. Teutsch Prevention Effectiveness (PE) Fellowship
4. Public Health Associate Program (PHAP)
5. Public Health Informatics Fellowship Program (PHIFP)
6. Science Ambassador Fellowship (SAF)
7. Preventive Medicine Residency and Fellowship (PMR/F)
8. Population Health Training in Place Program (PH-TIPP)
9. Laboratory Leadership Service (LLS)
10. Future Leaders in Infectious and Global Health Threats (FLIGHT)
11. CDC E-Learning Institute (ELI)

FMS contains four modules used for information collection. Each of the four modules has specialized functionality. Use of each module can differ among fellowships; for example, the Public Health Associate Program (PHAP) uses only a portion of the application module. On average, CDC collects FMS data yearly, as most fellowship cycles occur once during the calendar year. There are some exceptions; for example, Epidemiology Elective Program (EEP) collects applications in fall and spring cycles.

The FMS Application Module (**Attachment 3**) is used to collect the information from applicants needed to match them with appropriate fellowship opportunities (e.g., skills, interests, and qualifications). This Module also collects information from people writing reference letters for applicants, to support their application to particular fellowship programs (**Attachment 3**).

The FMS Host Site Module (**Attachment 4**) is used to collect information from nonfederal employees of public health agencies to ensure that each fellowship program that partners with nonfederal hosts can effectively identify and match fellows with appropriate hosts and supervisors.

The FMS Activity Tracking Module (**Attachment 5**) gives nonfederal supervisors the ability to input fellows' learning assessments directly into FMS (twice yearly). This allows fellowship staff to review and monitor fellows' learning outcomes and ensure that fellows are achieving program competencies and are on track for fellowship completion and graduation.

The FMS Alumni Directory (**Attachment 6**) is used to collect information from fellowship alumni. Alumni who voluntarily participate in the Alumni Directory have the option of providing updates when their information changes, on average approximately once every three years. Alumni may use the directory for maintaining professional networks. Fellowship program staff may use the information to identify alumni possessing mission-critical skills, assess fellowship programs, and reinforce professional networking among alumni.

Information collected in all modules may also be used to generate fellowship program reports and assess fellowship processes and outcomes. For example, completed applications and host

site assignment proposals for the different fellowships are converted into electronic reports for online review by CDC reviewers. Through FMS administrative functions, fellowship administrators and programmatic staff can process applications and host site assignment proposals, compile their reviews, schedule interviews, select candidates, and match candidates to selected host site assignments. Both fellowship staff and applicants can track this process and the status of the onboarding process through FMS. The Microsoft Power Platform will improve upon existing functionalities and promote greater accessibility for administrators and other parties working on the back end of FMS.

### **3. Use of Improved Information Technology and Burden Reduction**

FMS is a secure electronic data management system that collects and processes information for CDC's fellowship programs. All (100%) of the information and data, all submitted voluntarily by applicants, reference letter writers, supervisors and staff of public health agency host sites, and alumni, are collected electronically through FMS (**Attachments 3–6**). The use of technology for electronic submission eliminates cumbersome paper processing and reduces errors. FMS includes technology that validates completeness of data entry.

Using an electronic system for fellowship application and host site assignment proposals saves time associated with reviewing applications for completeness, as compared to the amount of time associated with processing a paper-based system. CDC fellowship staff use the information to aid in the selection of quality candidates and fellow assignments at public health agencies. The system improves matching between fellows and host sites by allowing both fellows and host sites to enter interview rankings during the selection and matching process and run algorithms to maximize each fellowship match process. FMS offers practical utility to all users by allowing easy, secure submission of applications and host site assignment proposals compared with paper-based systems. Since the new platform will offer increased usability for administrators, the Activity Tracking module (**Attachment 5**) will become a more practical tool for fellowships to use in monitoring and evaluating fellowship programming and participants in real time. Similar benefits can be expected for the Alumni Directory (**Attachment 6**), as improved data extraction will enhance processes to identify trends and potential needs among alumni.

FMS processes streamline burden for respondents. Applicants to fellowships and public health agencies proposing to host fellows enter their information only once and update only as necessary. Fellowship supervisors using the Activity Tracking Module provide information up to twice per year. Alumni who choose to participate in the Alumni Directory have the option of providing updates when their information changes which occurs, on average, every three years.

The software platform change included in this revision promises additional technological efficiencies. The new platform makes the system easier to update and manage in numerous ways. It will ease incorporation of new fellowship programs, enhance data management functionality, improve data security; and reduce maintenance and operational burdens, resulting in savings to the government.

The FMS information and data collection system assures compliance with the Government Paperwork Elimination Act (GPEA), Public Law 105-277, title XVII, 1998; lowers the burden to the respondents, as compared with paper-based systems; allows respondents to submit

information to CDC electronically; and provides capabilities for CDC to maintain secure electronic records.

#### **4. Efforts to Identify Duplication and Use of Similar Information**

Information collected through FMS is for the completion of fellowship-related submissions and is not available from any other source. Data are requested via FMS only; no other CDC component requests this information. There are no duplications of these data.

#### **5. Impact on Small Businesses or Other Small Entities**

No small businesses have been, are, or will be involved in FMS data collection.

#### **6. Consequences of Collecting the Information Less Frequently**

The timeliness of data collection during the fellowship application process (**Attachment 3, FMS Application Module**) is critical. Applications are collected through FMS annually, once per fellowship cycle; all fellowship cycles occur once per calendar year except for Epidemiology Elective Program (EEP), which has a fall and a spring rotation. The timeliness of data collected from public health agencies submitting host site assignment proposals (**Attachment 4, FMS Host Site Module**), is for an agency to be selected to host a fellow during a given fellowship year. Host site assignment proposals submitted after fellows have been selected are not considered for that fellowship year. Host site assignment proposals are collected through FMS annually, once per fellowship cycle. Public health agencies may resubmit proposals with updated information in subsequent years if they wish to continue hosting fellows. Fellows' learning assessments (**Attachment 5, Activity Tracking**) will be collected twice yearly. The timeliness of data collected from alumni (**Attachment 6, FMS Alumni Directory**) is less critical.

#### **7. Special Circumstances Relating to the Guidelines of CFR 1320.5**

This request fully complies with the regulation 5 CFR 1320.5.

#### **8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency**

The agency's notice of proposed revision to the existing data collection was published in the Federal Register on March 14, 2022, Vol. 87, No. 49, pages 14271-14272 (see **Attachment 2**). CDC received no comments in response to the notice.

#### **9. Explanation of Any Payments or Gifts to Respondents**

There are no payments or gifts provided to respondents.

#### **10. Protection of the Privacy and Confidentiality of Information Provided by Respondents**

CSELS/DSEPD's Information Systems Security Officer has reviewed this request and determined that the Privacy Act does apply. The applicable System of Records Notice (SORN) is

09-20-0112, "Fellowship Program and Guest Researcher Records. HHS/CDC/AHRC" and the Privacy Impact Assessment (PIA) is included as **Attachment 8**. FMS collects only the minimum data elements necessary to satisfy the requirements for application submission and processing. All FMS modules will operate on Microsoft Power Platform servers and will be front-end web pages with a backend cloud database, automating existing manual processes. The data for the Application Module, Host Site Module, Activity Tracking, and Alumni Directory are submitted through the Internet. Data are stored and regularly backed up on Microsoft Dataverse database. Access to information on Microsoft Dataverse are only available only through FMS for DSEPD programmatic personnel and IT staff. Data are password protected and reside on a server managed by the OCIO Digital Services Office (DSO) Application Hosting Branch (AHB) under strict physical security. AHB personnel have access to the physical server. Registrant data will not be sold, rented, or shared with third parties for their promotional use. All data are maintained behind a strict firewall with security protection.

Security provisions for data storage meet all requirements established by the CDC's Information Council Executive Committee.

CDC fellowship staff use the information that is voluntarily submitted by applicants and reference letter writers (**Attachment 3**), public health agencies (**Attachment 4, Attachment 5**), and alumni (**Attachment 6**) to process applications, select qualified candidates and quality assignments, match fellows to host site (work) assignments, track progress of fellows towards program objectives, and maintain a current alumni database to document the impact of the fellowships on alumni careers. This data collection has little to no effect on the privacy of the public health professionals and staff of public health agencies, who voluntarily submit information through FMS.

Personally identifiable information (PII) is stored on Microsoft Power Platform Microsoft Dataverse database and will be stored and retrieved by appropriate CDC fellowship staff. PII will not be published. Programmatic data from FMS are reported in aggregate to provide program reports on programmatic processes, trends, performance information, and facilitate evidence-building activities to drive programs across CDC and other federal agencies.

Information in identifiable form (IIF) collected from the FMS Application Module (**Attachment 3**) is needed to process application data and select qualified candidates. IIF collected from applicants includes name, mailing address, telephone numbers, e-mail address, education records, visa information, employment status, and information crucial for assessing eligibility of and communicating with applicants. After logging in to apply, applicants are informed immediately that their administrative information will be shared with CDC and other federal agencies for program improvement and evidence-building activities. Consent is implied by voluntary participation. Non-IIF includes fellowship entry year, work experience, volunteer activities, research grants, presentations, publications, interests, skills, and abilities. No PII from the Application Module (**Attachment 3**) will be shared beyond the purpose of processing, selecting, and matching candidates. IIF that will be collected from applicant references in the FMS Application Module (**Attachment 3**) is needed to provide accurate and useful information for participant selection. IIF collected from applicant references includes name, job title, and e-mail address. Applicant references who wish to submit a reference for an applicant do not require

consent. No PII from the Application Module (**Attachment 3**) about the applicant references will be shared beyond the purpose of processing and selecting candidates.

IIF collected from public health agencies from the Host Site Module (**Attachment 4**) include the agency's name, location, type of public health agency, mailing address, telephone numbers, e-mail address, and name, and titles of primary and secondary supervisors or mentors. Consent is implied by voluntary participation in this non-research information collection. Agency employees are immediately informed that their information will not be shared and used only by the fellowship to which they are submitting the host site assignment proposal during the initial review and selection process. Non-IIF includes activities the fellows will engage in, type of support and training the fellows will receive, extent of mentorship and supervision for the fellows, and additional professional development opportunities and collaborations that might be available for fellows. No PII from the Host Site Module (**Attachment 4**) will be shared beyond the purpose of processing, selecting, and matching candidates to host sites.

IIF collected for the Activity Tracking Module (**Attachment 5**) will include name, mailing address, telephone numbers, e-mail address, educational records, professional licensure, and employment status. No PII from the Activity Tracking Module (**Attachment 5**) will be shared beyond the purpose of generating administrative evidence for building activities to drive program improvement. All participating fellowship programs will use the FMS Activity Tracking Module (**Attachment 5**) to collect information from fellows twice yearly. No PII from the Activity Tracking Module (**Attachment 5**) will be shared beyond the purpose of fellowship activity tracking.

IIF collected from the FMS Alumni Directory (**Attachment 6**) includes name, mailing address, telephone numbers, e-mail address, education records, visa information, employment status, and information crucial for communicating with alumni. Participation in the Alumni Directory is voluntary, and program graduates are encouraged to participate in their fellowship's Alumni Directory after graduation. Each time alumni log on to their fellowship Alumni Directory, they are asked if they wish to share their information with other alumni who have access to the alumni directory. (See Electronic Consent Statement in **Attachment 6**, FMS Alumni Directory). If a respondent consents, his or her information will be visible to other alumni who participate in the fellowship alumni directory. If a respondent does not consent, only his or her name and fellowship year, which already are in the public domain, will be visible to other alumni who participate in the fellowship alumni directory. All data are merged from the FMS's Fellowship Application Module into the Alumni Directory for each alumnus. Editing data does not require data reentry. Alumni who choose to participate in the Alumni Directory have the option of providing updates when their information changes.

No PII from the Alumni Directory (**Attachment 6**) will be shared beyond the purpose of professional networking among alumni and to present opportunities for alumni with mission-critical skills to respond to a national public health emergency or an urgent public health need.

The first time that an applicant applies for the fellowship or a designated employee of a public health agency submits a host site assignment proposal electronically through FMS, the applicant or employee will receive a secure and unique login and password that allows them to enter their

information only once. When additional applications are submitted to the same or other CDC fellowships in subsequent years, the applicant or the public health agency employee will use the same login and password to access application data in FMS. FMS will also allow applicants to copy, revise, and submit updated versions to one or more fellowships. Data are stored indefinitely and maintained securely in FMS so that applicants and host site representatives can update their information when they wish to apply to other fellowships. Alumni data is also stored indefinitely through the secured FMS to track and document the impact of the fellowships on alumni careers, provide alumni an opportunity to network with each other, and present opportunities to alumni to respond to a national public health emergency or an urgent public health need.

FMS also includes information that is not in identifiable form. Collected information from applicants and alumni that are not IIF include fellowship entry year, work experience, volunteer activities, research grants, presentations, publications, interests, skills, and abilities. Collected information from employees of public health agencies that are not IIF include activities the fellow will engage in, type of support and training the fellow will receive, and additional professional development opportunities and collaborations that might be available for the fellow.

## **11. Institutional Review Board (IRB) and Justification for Sensitive Questions**

The Fellowship Application module (**Attachment 3**) includes questions about sensitive and identifiable information. Sensitive and identifiable information requested include the applicant's identity, contact information, educational records, race and ethnicity, and citizenship or visa status. Although the information may be considered sensitive, collection of some (e.g., educational attainment, citizenship) is required to determine the eligibility of applicants for fellowship opportunities. Race and ethnicity questions are optional for all applicants and used by CDC to assess efforts to increase the diversity of its applicant pools and fellows. Safeguards are in place to ensure that sensitive, identifiable information is protected.

This data collection is not considered research, and approval by the CDC Institutional Review Board (IRB) is not required (**Attachment 7**, Research Determination Memorandum).

## **12. Estimates of Annualized Burden Hours and Costs**

Time burden estimates are based on pilot testing conducted for the previous revision request and subsequent updates from Non-Substantive Change Requests.

The respondent types included in the burden estimates for this revision are nonfederal applicants, reference letter writers, employees of public health agencies, fellows, and program alumni. The target respondent universe for each data collection differs for each fellowship program. Annualized burden hours and costs presented include only the burden of respondents who are not federal employees or entities.

Use of each data collection module differs among fellowships; for example, PHAP uses only a portion of the Application Module (**Attachment 3**). The calculated annualized burden and costs for each data collection module take into consideration the variances for each fellowship, the increase in voluntary submission of applications by applicants and employees of public health agencies each year, and an adjustment for increased cost of living in respondents' estimated salaries.

A. Estimated Annualized Burden Hours

The FMS Application Module (**Attachment 3**) reflects an average of 87 minutes per response for an estimated 5,146 applicants once per year. The FMS Application Module will also be used for application reference letter writers with an average time burden of 15 minutes per response for an estimated 6,842 respondents once per year. In addition, approximately 220 Epidemic Intelligence Service (EIS) applicants are invited to participate in Interview Day each year. During Interview Day, these applicants will log into their FMS application module and respond to a single prompted question during a timed, 30-minute session (**Attachment 3**).

The FMS Host Site Module (**Attachment 4**) reflects an average of 75 minutes for an estimated 960 respondents, employees of public health agencies and other prospective program partners, each responding once per year.

The Activity Tracking Module (**Attachment 5**) reflects an average of 30 minutes for an estimated 555 respondents, employees of public health agencies and other program partners serving as supervisors for fellows each responding twice per year.

The Alumni Directory (**Attachment 6**) reflects an average of 37 minutes for an estimated 3,484 alumni each responding once per year.

The total estimated annualized burden hours for applicants, reference letter writers, alumni, and public health agency or organization staff is 13,186. This burden constitutes an increase of 106% over the approved February 2022 Non-Substantive Change Request estimate (6,407 hours). This increase is entirely due to increased number of respondents in each respondent group. The estimated increase in burden is the result of an increase in both funding and capacity across fellowships and CDC's ability to expand fellowship size and reach.

Table 1 shows the average total response burdens for current FMS application modules by respondent type.

Table 1. FMS Estimated Annualized Burden Hours\*

Type of respondents	Form	Number of Respondents	Number of Responses per Respondent	Average Burden per Response (in hours)	Total Burden (in hours)
Fellowship	FMS	5146	1	87/60	7462

Applicants	Application Module				
Reference Letter Writers	FMS Application Module	6842	1	15/60	1711
Subset of FMS Fellowship Applicants**	FMS Application Module (13.6)	220	1	30/60	110
Public Health Agency or Organization Staff	FMS Host Site Module	960	1	75/60	1200
Public Health Agency or Organization Staff	FMS Activity Tracking Module	555	2	30/60	555
Fellowship alumni*	FMS Alumni Directory	3484	1	37/60	2148
Total		17207			13186

\* Some alumni are deceased or cannot be located. Response burden assumes response from one responding alumnus, on average, every 3 years (which is likely an overestimate of frequency).

\*\* Subset of the total 5146 applicants that are invited to participate in Interview Day each year.

### B. Estimates of Annualized Cost to Respondents

There is no cost to respondents other than their time to complete the data collection. The following sources were used to determine the average salaries of fellowship applicants, alumni, and reference letter writers:

- Salary Table GS, 2022, [SALARY TABLE 2022-GS \(opm.gov\)](https://www.opm.gov/policy-data-oversight/salary-tables/)
- US Department of Labor, Bureau of Labor Statistics  
[http://www.bls.gov/oes/current/oes\\_nat.htm](http://www.bls.gov/oes/current/oes_nat.htm)
- HigherEd Jobs Senior-Level Administrator Median Salaries by Title and Institution Type  
[Executive-Level Administrator Salaries - HigherEdJobs](https://www.higheredjobs.com/salaries/)

The following source was used to determine the average salaries of employees of public health agencies who submit host site assignment proposals:

- US Department of Labor, Bureau of Labor Statistics  
[http://www.bls.gov/oes/current/oes\\_nat.htm](http://www.bls.gov/oes/current/oes_nat.htm)

The average hourly wage rates for fellowship and host site applicants, as well as activity tracking reporting and alumni, are taken from previous FMS submissions' cost burden estimates, adjusted for inflation to 2022 rates. Reference letter writers' average hourly wage comes from HigherEd

Jobs’ annual salary estimate and a 40-hour 52-week work year. Table 2 shows the annualized cost for each group of respondents in this collection.

Table 2. Estimated Annualized Burden Costs\*

Type of Respondents	Form Name	Number of Respondents	Number of Responses per Respondent	Average Burden per Response (in hours)	Average Hourly Wage Rate	Total Burden Cost
Fellowship Applicants	FMS Application Module	5146	1	87/60	\$68.58	\$511,723.39
Reference Letter Writers	FMS Application Module (12.2 – 12.3.3)	6842	1	15/60	\$209.64	\$358,589.22
Subset of FMS Fellowship Applicants**	FMS Application Module (13.6)	220**	1	30/60	\$68.58	\$7543.80
Public Health Agency or Organization Staff	FMS Host Site Module	960	1	75/60	\$140.41	\$168,492
Public Health Agency or Organization Staff	FMS Activity Tracking Module	555	2	30/60	\$140.41	\$77,927.55
Fellowship Alumni	FMS Alumni Directory	3484	1	37/60	\$174.81	\$375,573.46
Total		17207				\$1,499,849.42

\* Some alumni are deceased or cannot be located. Burden assumes one alumnus responds every 3 years is likely an overestimate of frequency. Average hourly wage rate takes into consideration an adjustment for cost of living since 2020, as well variance among respondent types (e.g., level of education and employment categories).

\*\* Subset of the total 5146 applicants that are invited to participate in Interview Day each year.

### 13. Estimate of Other Total Annual Cost Burden to Respondents or Record Keepers

There are no other capital or maintenance costs to respondents.

### 14. Annualized Cost to the Government

Changes to FMS since 2020 include updating to a new technology platform, accommodating new respondents, adding and deleting questions for different program needs, reformatting and modifying instructions to minimize burden, and updating and tailoring technical functions. Costs are based on FMS current requirements and modifications identified by fellowships to ensure that information collection supports the necessary evolution of fellowship implementation and management. Table 3 below shows the annualized cost to the federal government of developing, maintaining, and operating this collection’s supporting technology.

The estimated annualized costs to operate and maintain the system are \$401,400. The estimated annualized costs of system development over the next three years is \$867,705.

Table 3. Annualized Cost to the Federal Government

Item	Cost Categories	Annualized Cost to Federal Government
Operations & Maintenance (O&M) Cost	Project Management	\$41,000
	Program Staff*	\$82,000
	System Maintenance and IT Support*	\$278,400
Development Cost	System Development and Implementation	\$867,705
Total O&M Cost		\$1,269,105

### 15. Explanation for Program Changes or Adjustments

The increase in the number of respondents described in this revision is the result of expansions, both realized and anticipated, in fellowship program size. There are no changes to data content proposed in this revision. Table 4 shows the change in total respondents from the most recently approved OMB packages for FMS.

Table 4. Summary of Proposed Revision to Number of Respondents

Type of Respondent	Form	Last Approved Number of	Requested Number of	Change in Total
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		<b>Respondents</b>	<b>Respondents</b>	<b>Respondents</b>
Fellowship applicants	FMS Application Module	2216	5146	+4,249
Reference Letter Writers	FMS Application Module (12.2 – 12.3.3)	4412	6842	+608
Subset of FMS Fellowship Applicants**	FMS Application Module (13.6)	200	220**	+10
Public Health Agency or Organization Staff	FMS Host Site Module	448	960	+640
Public Health Agency or Organization Staff	FMS Activity Tracking Module	350	555	+205
Fellowship Alumni	FMS Alumni Directory	1732	3484	+1080
<b>Total</b>				<b>+6,792</b>

Table 5. Summary of Proposed Revision to Burden Hours Per Respondent

<b>Type of Respondent</b>	<b>Form</b>	<b>Last Approved Burden Hours per Respondent</b>	<b>Requested Burden Hours per Respondent</b>	<b>Change in Total Burden Hours per Respondent</b>
Fellowship applicants	FMS Application Module	87/60	87/60	+0
Reference Letter Writers	FMS Application Module (12.2 – 12.3.3)	15/60	15/60	+0
Subset of FMS Fellowship Applicants**	FMS Application Module (13.6)	30/60	30/60	+0
Public Health Agency or Organization Staff	FMS Host Site Module	75/60	75/60	+0
Public Health Agency or Organization	FMS Activity Tracking Module	30/60	30/60	+0

Staff				
Fellowship Alumni	FMS Alumni Directory	37/60	37/60	+0
<b>Total</b>				+0

The proposed change in software platform is motivated primarily by the fact that current platform does not support timely or adequate use of information collected. Programs have struggled to extract, clean, and manipulate the information to support continuous quality improvement of our programs. Improving the ability to use data from the system in a timely manner will be the primary focus of the change in platform. The Microsoft Power Platform, a cloud-based solution for FMS, will provide a robust data management system and infrastructure that reduces/eliminates existing pain points and addresses user needs. This will be an enterprise capability that provides reusable functionality and data for existing and/or future Fellowship Management Programs.

This platform promises to provide an improved data management system that reduces existing challenges and addresses business needs. This will be an enterprise capability that provides reusable functionality and data for current and future fellowships and will enhance interconnectivity. Integration of the suite of Microsoft tools for data management, analysis, and visualization will allow CDC to access fellowship data in real time; moreover, data cleaning and manipulation do not need to be done outside the system, which will increase the security of these data. These increased functionalities will facilitate the enhanced use of administrative data collections for program improvement and evidence building activities across CDC and other federal agencies. The update to the software platform will also make it easier for additional fellowships to opt to use FMS, expanding the benefits of the system to a broader set of CDC programs.

Although the specific content and flow for each module is included in this revision for review and approval, screenshots for each FMS module are not available at this time. The FMS team is adopting an Agile approach to software development, which is considered best practice. In an Agile approach, they intentionally plan to rebuild parts of FMS on the new platform at a single time, rather than all at once, and then assess functionality and make changes as needed along the way, before rebuilding more of the system on the new platform. Specifically for FMS, the developers plan to rebuild modules for each fellowship, one at a time, based on the rolling existing fellowship application cycle (outlined below in section 16). Therefore, it is impractical and contrary to best practices in software development for CDC to provide screen shots in this revision for all modules' content based on the new platform. If this revision is approved, the FMS development team will start to build the content on the new platform. CDC is ready to share screen shots with OMB as they become available through Non-Substantive Change Requests, if requested. CDC expects the "look and feel" of FMS's respondent interface under the new platform to be similar to that of the existing platform.

## **16. Plans for Tabulation and Publication and Project Time Schedule**

Internal reports will be generated using FMS data elements to provide trends and program data for CDC/DSEPD leadership and fellowship managers. Staff from each fellowship program collect the information and compile them for inclusion in program reports documenting fellowship progress and performance; only aggregate data are reported. Programmatic data from FMS reported include trends and program data such as the number and types of applicants and host sites, the number of selected and matched candidates and host site assignments, demographics of alumni (e.g., employed in private or government sector), and continuous activity tracking. Table 6 below provides a brief overview for the timing of each programs’ rollout on the new software platform.

**Table 6. Timeline for Buildout of FMS on the New Platform by Fellowship Program**

<b>Build Order</b>	<b>Fellowship</b>	<b>Make FMS Application Module available on new platform</b>
<b>1</b>	<b>PHAP</b>	<b>12/4/2022</b>
<b>2</b>	<b>PH-TIPP</b>	<b>1/9/2023</b>
<b>3</b>	<b>EEP</b>	<b>2/6/2023</b>
<b>4</b>	<b>LLS</b>	<b>3/1/2023</b>
<b>5</b>	<b>EIS</b>	<b>3/1/2023</b>
<b>6</b>	<b>PMR/F</b>	<b>7/3/2023</b>
<b>7</b>	<b>PHIFP</b>	<b>8/7/2023</b>
<b>8</b>	<b>PE</b>	<b>9/11/2023</b>
<b>9</b>	<b>ELI</b>	<b>9/25/2023</b>
<b>10</b>	<b>SAF</b>	<b>11/13/2023</b>

Timeline of Key Events following Receipt of OMB Approval to ICR as of June 2022

<b>Key Events</b>					<b>Timeline</b>
Continue collecting <b>Host Site Assignment Proposals</b> from nonfederal public health agencies for EIS, LLS, PEF, PHAP, PHIFP, and PMR/F.					Once per year for three years
Continue collecting <b>Application</b> information for all fellowships from nonfederal applicants.					Once per year for three years
<b>Fellowship</b>	<b>Start Collection</b>	<b>End Collection</b>	<b>Eligibility and Review</b>	<b>Selection process</b>	
EIS	March 1	June 6	June 6-Aug 13	Sep 11–May 8	
ELI	Sep 15	Oct 30		Jul 1-Oct 15	
EEP	Feb 1	Mar 31	Apr 1–Apr 30	May 1 – Jun 30	
FLIGHT	Aug 20	Sep 3	Sep 3- Sep 13	Sep 13 – Nov 20	
LLS	April 1	July 5	July 22 - Aug 12	Aug 13 - Nov 15	
PEF	Sep 1	Feb 1	Oct 1–Feb 15	Feb 15 – Apr 15	

PHIFP	Jul 1	Dec 15	July 1–Dec 15	Mar 1 – May 15	
PHAP	April 1	Oct 13	April 8–May 31	May 22–August 5	
PMR/F	May 1	Oct 15	May 1–Oct 15	Oct 15–Feb 15	
SAF	Nov 15	Jan 15	Jan 16–Jan 31	Feb 1–Mar 31	
Check <b>Alumni Directory</b> data for completeness for all fellowships					Every three months for 3 years
Collection of <b>Activity Tracking</b> information for all fellowships					As necessary and fitting for fellowship cycles
End data collection or obtain extension from OMB					3 years after receipt of approval

**17. Reasons Display of OMB Expiration Date is Inappropriate**

CDC is not requesting an exemption from displaying the expiration date.

**18. Exceptions to Certification for Paperwork Reduction Act Submissions**

No exceptions to certification apply to this request.

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