**Request for OLDA Data ACCESS**

***SECTION i***

**PROJECT TITLE** Click here to enter text.

**BRIEF PROJECT DESCRIPTION** Click here to enter text.

**RESEARCH TEAM MEMBERS**

|  |  |
| --- | --- |
| **Name:** Click here to enter text.**Project Role:** Click here to enter text.**E-Mail:** Click here to enter text.**Phone:** Click here to enter text. | **Position/Title:** Click here to enter text.**Department:** Click here to enter text.**Institution:** Click here to enter text.**Office Mailing Address:** Click here to enter text. |
| **Name:** Click here to enter text.**Project Role:** Click here to enter text.**E-Mail:** Click here to enter text.**Phone:** Click here to enter text. | **Position/Title:** Click here to enter text.**Department:** Click here to enter text.**Institution:** Click here to enter text.**Office Mailing Address:** Click here to enter text. |
| **Name:** Click here to enter text.**Project Role:** Click here to enter text.**E-Mail:** Click here to enter text.**Phone:** Click here to enter text. | **Position/Title:** Click here to enter text.**Department:** Click here to enter text.**Institution:** Click here to enter text.**Office Mailing Address:** Click here to enter text. |

**OTHER INSTITUTIONAL AFFILIATION OR FUNDING SOURCE**

**RESEARCH AREA(S)**

Choose an item.

Choose an item.

**how will this research inform state policy decisions?**

**KEY TERMS (up to 5)**

|  |  |  |
| --- | --- | --- |
| Key term 1 | Key term 2 | Key term 3 |
| Key term 4 | Key term 5 |  |
|  |

**RESEARCH QUESTION(S)**

**PURPOSE OF THE RESEARCH/EXPECTED PRODUCTS**

**Data linkages**

|  |  |  |  |
| --- | --- | --- | --- |
| **Dataset 1** | **Dataset 2** | **Linking Indicator1** | **Who Will Merge** |
| Click here to select dataset | Click here to select dataset | Click here to select linkage |  Click here to select  |
| Click here to select dataset | Click here to select dataset | Click here to select linkage |  Click here to select  |
| Click here to select dataset | Click here to select dataset | Click here to select linkage |  Click here to select  |

*1All linking indicators are pseudo-identifiers, unless otherwise noted.*

If supplemental data sources are to be linked to OLDA data sets, outline the proposed data transfer process.

NOTES:

***SECTION II***

**RESEARCH DESIGN (specify study population, dataset(s) and variable list/data elements requested)**

Dataset: Click here to select dataset

First Year: Click here to enter text. Last Year: Click here to enter text. Defined by: Click here to enter text.

Data extract population:

Variable list:

Frequency of Data Delivery: [ ]  one time [ ]  repeated: Click here to enter text to indicate frequency and timing

Supplemental Data Source(s) (if applicable):

*The researchers understand the agency data providers make no warranty concerning the accuracy of the data accessed from the OLDA.*

**EStimated chrr staff time** (to be completed by chrr)

**Estimated Project Timeline**

The researcher(s) request data access by Click here to enter a date.. CHRR will remove data access rights or the researcher(s) will destroy or return accessed data files to CHRR by Click here to enter end date. Any extensions to the effective end date will require an agency-approved addendum to this request.

**OLDA DE-IDENTIFICATION AND SUPPRESSION**

**All data accessed by the researcher(s) will be de-identified**, regardless of the data access plan requested above.

No raw data shall be duplicated by being copied onto, transferred to, or maintained by paper, data disks, flash drives, hard drives, cameras, or mobile communication devices or any other electronic or physical medium without prior authorization. Mobile devices are defined for this purpose as devices which 1) contain a wireless interface (Wi-Fi, cellular, etc.), 2) contain built-in non-removable primary storage, and 3) do not run a full-fledged desktop or laptop operating system. Mobile devices include but are not limited to tablets and phones.

The researchers will ensure that no information provided is disclosed in any manner that would reveal the identity of an individual, residential property, or employing unit by either direct or indirect means.

**The researchers will aggregate results as needed to avoid reporting cell sizes of less than 10 individuals.**

**The researchers will ensure that the data will be suppressed** for any geographic unit in which there are fewer than 3 properties, and for any combination of geographic unit and industry for which: 1) there are fewer than three firms; or 2) there are three or more firms, but employment in one firm comprises 80% or more of the industry. To accomplish this, data will be rolled up by NAICS and/or geography, time period, or other applicable variables until the criteria are met. To address secondary disclosure issues, before any reports, publications, presentations, or media that contains aggregate data is published, researchers must give due diligence and compare their publication materials with information published by the DOL BLS to ensure consistency with the level of suppression.

**Secure Data Access Plan**

Choose one of the below data access options.

[x]  CHRR will prepare de-identified datasets in the Ohio Department of Administrative Services’ Innovate Ohio Platform (IOP) and/or on CHRR’s network according to the study specifications. The researcher(s) will access data through CHRR’s secure data enclave using a CHRR-assigned individual ID and account. The researcher(s) will store and analyze the data in their assigned workspace in the enclave. The researcher(s) must submit all aggregate results and research output to CHRR staff for agency disclosure review. CHRR will then place the approved output in a folder for the researchers to download from the CHRR sFTP site.

[ ]  The researcher(s) will access data through the Ohio Department of Administrative Services’ Innovate Ohio Platform (IOP) using a DAS-assigned individual ID and account. The researcher(s) will store and analyze the data in their assigned zone on the IOP. The researcher(s) may export aggregate results from the IOP following the specified OLDA de-identification and suppression rules.

[ ]  The researcher(s) will access data through the Coleridge Initiative’s (CI) Administrative Data Research Facility (ADRF) using a CI-assigned individual ID and account. The researcher(s) will store and analyze the data in their assigned workspace in the ADRF. The researcher(s) must submit all research output and results to CI staff for disclosure review and export from the ADRF following the ADRF export procedures.

[ ]  The researcher(s) will access data only within the physical offices of the CHRR building at 921 Chatham Lane, Columbus, Ohio, 43221. No researcher affiliated with this project will remove or transfer any raw data from CHRR offices.

[ ]  The researcher(s) will access encrypted and password-protected data housed on CHRR's secure FTP server using an individual password-protected account. The researcher(s) will store and analyze the data on a secured server or other institutionally-administered computing environment which meets the following criteria:

-        *The computer is on the researcher’s employer’s premises and in an area that is physically safe from access by unauthorized persons during duty-hours, as well as non-duty hours when not in use.*

*- Dedicated custodians manage data access and data storage.*

*- The computer is encrypted using whole disk encryption.*

-        *The computer is running an actively-supported Operating System and security patches are kept up to date.*

-        *If using Windows, the computer is running antivirus software and the virus definitions are kept up to date.*

-        *Passwords are set for all user accounts on the computer.*

-        *A network firewall for inbound traffic is enabled on the computer.*

 **This option is not available for projects that involve linking OLDA data to surveys or other researcher-collected data.**

**Additional security notes:**

**Authorized Representative**

Click here to enter text. will be the designated as the single authorized representative responsible for transmitting all data requests and maintaining a log or other record of all data requested and received. This authorized representative will confirm the completion of any projects using this data and will be responsible for the return or destruction of data upon the project’s completion.

**FEES**

In accordance with CHRR’s standard cost-recovery practices and rates, CHRR will provide a cost estimate for staff time and computing resources used to fulfill the project specifications described in this data request. Bills for any applicable fees shall be submitted to

**Institution/Individual:** Click here to enter text.

**Email Address:** Click here to enter text.

**Phone:** Click here to enter text.

**Mailing Address:**  Click here to enter text.

 Click here to enter text.

**statement of human subjects Review**

Each researcher is responsible for ensuring the proposed data use complies with their institution’s guidelines for research involving human subjects. Upon receiving notice of pending agency approval for OLDA data access, the signed data request application must be forwarded in full for review by the researcher’s Institutional Review Board (IRB) or its equivalent. Please provide CHRR with a copy of the submitted human subjects protocol and written documentation that the research plan has either been approved or granted exempt status. The level of formality of such review will vary among institutions, and verification may in some cases be a simple E-mail exchange stating the project is exempt.

**OLDA DATA ACCESS HISTORY**

Have any of the research team members ever accessed data from the OLDA? [ ] Yes[ ] No

If **YES**, please indicate all data that have been previously accessed by any of the research team members.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Number:** OLDA20YY####**Data Access Start Date:** MM/20YY**Data Access End Date:** MM/20YY | **OLDA Datasets Previously Accessed:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **odjfs** | [ ]  UI Wages[ ]  QCEW Employer[ ]  UI Claims[ ]  WIA/WIOA/PIRL[ ]  Job Seeker/PIRL[ ]  RAPIDS | **oDHE** | [ ]  HEI [ ]  awe/OTC[ ]  able/aspire[ ]  National Student Clearinghouse | **ode** | [ ]  EMIS [ ]  National Student Clearinghouse[ ]  GED/HiSET |
| **OOD** | [ ]  911 Vocational Rehabilitation | **OHFA** | [ ]  Tenant[ ]  Home Owner | **Other** | Click here to enter text. |

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