SUPPORTING STATEMENT A

APPLICATION FOR TRAINING
OMB No. 0920-0017

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A. Justification

1. Circumstances Making the Collection of Information Necessary

Background
This Information Collection Request (ICR) is for revision of a currently approved collection being submitted for approval for three years.. The ICR is comprised of three information collection instruments. These instruments are the **National Laboratory Training Network Registration Form**- CDC 32.1 (paper form) (Attachment 1), **National Laboratory Training Network Registration Form** - CDC 32.1 (electronic form) (Attachment 2), and **CDC Training and Continuing Education New Participant Registration Form -** CDC 36.5 (electronic form) (Attachment 3). These instruments have served and are proposed to continue to serve as official training application forms used for training activities conducted by the Centers for Disease Control and Prevention (CDC). There have been no changes to the collection instruments other than an increase in burden due to project participation of students for training via teleconferencing.

CDC, through its Office of Workforce and Career Development (OWCD) and other centers, institutes, and offices, offers public health training activities to professionals worldwide. Within OWCD, the Training Services Division (TSD) supports training activities including laboratory training, classroom study, online training, and distance-learning activities. This cost-effective, timely training in the laboratory sciences, on infectious diseases, and other health-related topics are provided for laboratorians, nurses, and physicians. It serves to prepare them to respond to bioterrorism, infectious disease outbreaks, and other public health threats and emergencies. This data collection is necessary for course registration, verification of training activity attendance, and to provide continuing education credit.

The information collection instruments listed above are completed by laboratorians, physicians, and nurses seeking to obtain certificates of attendance or continuing education credits for participating in CDC training activities. As a result of participating in these training activities, respondents learn current public health practices and maintain professional licensure. The information collection instruments have provided and will provide CDC with information necessary to manage and conduct training activities pertinent to its mission. The information collected has allowed and will continue to allow CDC to send confirmation of registration to participants, provide certificates of attendance or continuing education credits as proof of participants' attendance, and generate aggregate reports on attendance.

Attachments 1 and 2 are completed by laboratorians seeking laboratory field training.

Attachment 3 is completed by physicians and nurses seeking to register for training available through the CDC's online registration system, Training and Continuing Education Online. CDC was granted OMB approval to use these information collection instruments through March 31, 2010, and now is seeking to renew OMB's approval for three additional years.

Since the last clearance, there have been no changes to these information collections instruments. However, the number of annual responses has increased therefore the total burden hours has increased. These information collection instruments have supported and will continue to support CDC training activities until data collection requirements modify.

The collection of information is authorized by the Public Health Service Act 42 USC Sec. 243 (b) (Attachment 4).

Privacy Impact Assessment
An overview of the data collection system, listing of the items of information collected, and indication of associated websites are provided below.

Overview of the Data Collection System
Respondents complete the form once per course or per new registration. Data is collected for 95% of the forms electronically. The paper form (Attachment 1) is used for approximately 5% of laboratory field training for those laboratorians who did not pre-register electronically for the training activity. Data from the information collection instruments are entered in tracking databases to allow the generation of certificates of attendance or continuing education credits as proof of participants' attendance, aggregate reports or to produce a transcript when requested. The data collection is used by CDC/OWCD and the Association of Public Health Laboratories (APHL) — which has a cooperative agreement with CDC to support the National Laboratory Training Network (NLTN) — for course registration and to grant continuing education credits. The information collected is maintained for a period of seven years.

Items of Information to be Collected
The categories of information in identifiable form collected from individual respondents include: Name, Mailing Address, Phone Numbers, Email Address, and Other.

Identification of Website(s) and Website Content Directed at Children Under 13 Years of Age
There are no websites or website content directed at children under 13 years of age.

2. Purpose and Use of Information Collection
The forms have been used by and continue to be needed for professionals to register for training courses. The information collected facilitates CDC/OWCD and APHL through NLTN to award laboratorians, physicians, and nurses continuing education credits.

Respondents complete the form once per course or per new registration. Data is collected for 95% of the forms electronically. The paper form (Attachment 1) is used for approximately 5% of laboratory field training for those laboratorians who did not pre-register for the training activity electronically.

Data from the information collection instruments are entered in tracking databases to allow the generation of certificates of attendance or continuing education credits as proof of participants' attendance, aggregate reports or to produce a transcript when requested. The data collection is used by CDC/OWCD and APHL for course registration and to grant continuing education credits.

The information collection instruments (Attachment 1, Attachment 2, and Attachment 3) require no changes from the previously cleared forms which were granted OMB approval through March 31, 2010. The data collected on these instruments are used to generate annual reports that have assisted and will continue to assist CDC/OWCD with managing this training program.

The collection of information is authorized by the Public Health Service Act 42 USC Sec. 243 (b) (Attachment 4).

Privacy Impact Assessment Information

Data from the three information collection instruments are entered in a tracking database to allow the generation of certificates of attendance or continuing education credits as proof of participants' attendance, aggregate reports or to produce a transcript when requested.

The information requested on the electronic registration form for the **National Laboratory Training Network Registration Form** (Attachment 2) is identical to the paper registration form (Attachment 1). The screens of the electronic form are found in Attachment 2. Once the initial identifying data are captured in a database, CDC uses the data as described above. If the paper registration form is used, CDC shreds the form after transcribing the data therein to a password- and firewall-protected file.

The information requested on the forms is used by CDC/OWCD and APHL (which has a CDC cooperative agreement to support the NLTN) to grant individual laboratorians, physicians, and nurses the continuing education credits they need to maintain their licenses and certification required by their profession.

The proposed data collection will have little to no effect on the respondent's privacy. There is no sensitive information being collected. The categories of information collected in identifiable form is minimal and includes respondent's name, mailing address, phone number, e-mail address, and other such as profession. This information is required to meet accrediting organizations' standards, to distinguish professional groups for aggregate data for reports, and to create a transcript or summary of training completed at

the respondent's request. These reports have assisted and will continue to assist CDC with managing its training programs, facilitating tasks such as course registration, verification of training activity attendance, and provision of continuing education credit.

CDC is accredited by multiple accrediting organizations including the Accreditation Council for Continuing Medical Education (ACCME) to provide Continuing Medical Education credits (CME) and the American Nurses Credentialing Center (ANCC) to provide Continuing Nurse Education credits (CNE). The accrediting organizations require a method of tracking an individual's completion of a training activity. The demographic data collected in the information collection instruments allows CDC to meet this requirement. Also, the accrediting organizations require a record which lists the participant's name, address, and phone number, to facilitate retrieval of historical information for a time period of seven years as to when a participant completed a course or several courses. This information is also used to verify the participant's electronic request for transcripts and course certificates.

3. Use of Improved Information Technology and Burden Reduction

Respondents complete the form only once per course or per new registration. Data is collected for 95% of the forms electronically. The paper form (Attachment 1) is used for approximately 5% of laboratory field training for those laboratorians who were unable to pre-register for the training activity electronically. The forms have not been modified since previous cleared versions and still only include the minimum data fields necessary to meet accrediting organizations' standards and to process each application.

4. Efforts to Identify Duplication and Use of Similar Information

The required demographic information is not readily available from any other source. CDC's training applications are used for uniformity and standardization that are required for tracking attendance in the course offerings. The standardized data that is required for the laboratory training, classroom study, online training, and distance-learning activities are only requested via these forms. No other CDC component requests this information for these training activities.

5. Impact on Small Businesses or Other Small Entities

No small businesses have been, are, or will be involved in the data collection. Data is collected from individual laboratorians, physicians and nurses seeking to register for training activities.

6. Consequences of Collecting the Information Less Frequently

Data are collected only once per course per applicant, or once per new registration. There are no legal obstacles to reduce the burden.

7. Special Circumstances Relating to the Guidelines of 5 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

A. A 60-day notice has been published in the Federal Register Federal Register/Vol 74, No. 207/Wednesday, October 28, 2009/Notices pg.55561 (Attachment 5). No public comments have been received as of December 24, 2009.

B. Although there were no formal consultations outside the agency, CDC encourages students' comments in the evaluation segment of each training activity. There have been no problems identified concerning the completion of training applications.

9. Explanation of Any Payment or Gift to Respondents

There are no payments or gifts provided to respondents.

10. Assurance of Confidentiality Provided to Respondents

Since the last clearance, there have been no changes to these information collections instruments or the collection procedures and practices. The categories of information in identifiable form collected from individual respondents include: Name, Mailing Address, Phone Numbers, Email Address, and Other. The demographic data are needed to create a transcript or summary of training completed at the participant's request. The data are also needed to generate management reports and to maintain training and accreditation statistics. These reports have assisted and will continue to assist CDC with managing its training programs. Personally identifiable information will be filed and retrieved by the name of the individual, but will not be published.

IRB is not required for these information collection instruments (Attachment 6). This data collection is not considered research based on the description and justification and based on the definition of research as defined by the federal policy for the protection of human subjects (Title 45 CFR Part 46).

<u>Privacy Impact Assessment Information</u>

A. This submission has been reviewed by ICRO, who determined that the Privacy Act does apply. The applicable System of Records Notice is 09-20-0161, "Records of Health Professionals in Disease Prevention and Control Training Programs," last published in entirety in the Federal Register, Vol. 51, No. 226, November 24, 1986, pp. 42485-87 and last updated in 1994.

B. Data on paper forms are kept in locked files in locked rooms, with access limited to staff with a bona fide need to know to perform their official duties. Hard copy forms are shredded after information has been computerized. Data collected on electronic forms are stored on a secured Microsoft SQL Server located behind the firewall.

   All data reside behind a strict firewall with security protection. Security provisions for data storage meet all requirements established by CDC's Health Information

System and Surveillance Board (HISSB).

C. The following statement is displayed on each of the information collection instruments, "The requested information is used only to process your training registration and will be disclosed only upon your written request". The NLTN registration forms (Attachments 1 and 2) include the following statement: "Furnishing the information requested on this form is voluntary."

D. The following statement is displayed on each of the information collection instruments, "Continuing education credit can only be provided when all requested information is submitted." Therefore, to obtain continuing education credit, the respondent is required to provide the demographic data. The demographic data are needed to create a transcript or summary of training completed at the participant's request. The data are also needed to generate management reports and to maintain training and accreditation statistics. These reports have assisted and will continue to assist CDC with managing its training programs. Personally identifiable information will be filed and retrieved by the name of the individual, but will not be published.

11. Justification for Sensitive Questions

These forms contain no sensitive questions.

12. Estimate of Annualized Burden Hours and Costs

A. Estimated Annualized Burden Hours

The only cost to the respondent is the time involved to complete the forms. CDC estimates that the agency receives a combined total (for all three forms) of 74,000 each year, each requiring approximately 5 minutes to complete each form, for a total annual respondent burden of 6,167 hours. Approximately 95% of the data will be collected electronically. Each respondent/student completes an online or a hard copy training application/registration form for each training activity he or she attends. The burden of completing the hard copy form is the same as the burden of completing the online/electronic forms.

The number of responses has increased from 40,000 to 74, 000 since the instruments' prior OMB approval. This increase is due to an increase in the number of laboratorians, physicians, and nurses requesting to participate in training activities. The total burden hours is calculated by multiplying the number of respondents by the number of responses per respondent by the average number of hours required for each response. The following table presents the total burden hours CDC is requesting for this clearance:

Estimates of Annualized Burden

Type of Respondent	Form Name	No. of Respondents	No. Responses per Respondent	Average Burden per Response (in hours)	Total Burden Hours

Laboratorians	Form 32.1	50,000	1	5/60	4,167
Nurses	Form 36.5	12,000	1	5/60	1,000
Doctors		12,000	1	5/60	1,000
Total					**6,167**

B. Estimates of Annualized Cost to Respondents
For form 32.1 (Attachment 1 and 2) the hourly wage rate of laboratorians is based on the average 2008 hourly wage rate reported in the March 2009, Volume 40 Number 3 of LABMEDICINE in an article titled *ASCP Wage and Vacancy Survey of U.S. Medical Laboratories* (http://www.ascp.org/MainMenu/About/ASCP-Career-Center/Wage-and-Vacancy-Survey.aspx). For form 36.5 (Attachment 3) the hourly wage rate for nurses and physicians is based on the average hourly wage rate reported by Allied Physicians' data for physicians' (http://allied-physicians.com/salary-survey/physicians/) and nurses' (http://www.allied-physicians.com/salary-survey/nursing/) salaries.

The following table presents the estimated annualized cost to respondents based on hourly wage rates for laboratorians, physicians, and nurses.

Estimates of Annualized Cost to Respondent

Type of Respondent	No. of Respondents	No. Responses per Respondent	Avg. Burden per Response (in hours)	Total Burden Hours	Hourly Wage Rate	Total Respondent Costs
Laboratorians	50,000	1	5/60	4,167	$23	$7,986
Nurses	12,000	1	5/60	1,000	$21	$1,750
Doctors	12,000	1	5/60	1,000	$100	$8,333
Total						**$18,069**

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

The data collection instruments and associated processes have been in place since before 1995. There are no capital or start-up costs to be incurred.

14. Annualized Cost to the Government

CDC estimates that the annual cost to the government for the information instrument collection is $254,000, which is $131,000 for Form 32.1 and $123,000 for Form 36.5. This includes personnel costs associated with registration and data management.

Personnel registration and data management cost estimates for form 32.1 are 1 FTE, health scientist, 25% of time dedicated to database ($25,000); 1 Non-FTE onsite contractor, software engineer, 25% of time dedicated to project ($30,000); 1 Non-FTE , registrar, 50% of time dedicated to project ($ 52,000); and 1 Non-FTE, program manager, 20% of time dedicated to project ($24,000).

Personnel and data management cost estimates for Form 36.5 are 1 FTE, training specialist, 25% of time dedicated to maintaining, supporting, and enhancing the system ($25,000); 1 Non-FTE onsite contractor, general clerk, 50% of time dedicated to provide

learner support to respondents of the Training and Continuing Education Online system ($26,000); 1 Non-FTE onsite contractor, administrative assistant, 75% of time dedicated to maintaining the system and providing learner support ($42,000), and 1 Non-FTE onsite contractor, software engineer, 25% of time dedicated to provide technical support and enhance the system ($30,000).

15. Explanation for Program Changes or Adjustments

The number of annual responses and annual hour burden has increased due to an increase in students registering for training activities.

16. Plans for Tabulation and Publication and Project Time Schedule

Internal reports are prepared annually to provide management statistics. Only summary data are included in these reports. No information is published.

17. Reason(s) 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

There are no exceptions to the certification.