

National HIV Prevention Program Monitoring and Evaluation Data  
**0920-0696**

Attachment 9: Burden Estimate Calculations

Approximately 300 directly funded CBOs and 65 state and city health department jurisdictions will collect and report the required national HIV prevention program monitoring and evaluation (NHM&E) data. The number of CBOs is expected to increase during the subsequent 3 years, so an estimated maximum has been used to calculate burden. As requested by OMB in the last approval, there have been numerous efforts in collaboration with grantees to reduce the burden on grantees. This is shown by the reduction in the number of required variables indicated in this ICR, and the simplification of the requirements so that health departments and CBOs report the same data, also reflected in this ICR. The increase in estimated burden for this ICR is based on additional funding for HIV testing, special outcome evaluation studies that require collection of the same data at multiple times, and additional grantees reporting NHM&E data. In short, there are more grantees providing more prevention services to more clients. In addition, we anticipate additional funding in the future to support even more grantees to conduct even more prevention activities, especially HIV testing. We have offset some of this increase in burden by reducing the number of required variables and are continuing to work with the grantees to keep the burden to a minimum while still obtaining the data necessary for national reporting and program management. It is the increase in prevention activities, not an increase in the reporting requirements, that is causing the increase in burden. But for purposes of this estimate, we have based our estimates on anticipated maximums at each step in the calculations.

Each health department jurisdiction will be required to submit the required NHM&E data for agency and program plan information (which includes Community Planning and funding), health education and risk reduction interventions (HE/RR)(which includes HC/PI, outreach, etc.), HIV testing (formerly known as CTR), and partner services interventions (PS). CBOs will be required to submit agency and program plan information, HE/RR, and CTR data, if applicable. Approximately 100 of the 300 directly funded CBOs will receive supplemental funding and will collect additional data variables related to outcome evaluation. This number of CBOs is subject to change based on funding.

The burden calculations that follow are presented in the order listed in above(beginning with the data categories "agency and program plan"(and are based on the time required to enter data into the Program Evaluation and Monitoring System (PEMS) software developed and provided by CDC for use by HIV prevention program grantees. Some agencies have their own electronic data collection systems. It is assumed that the time required to

enter data into other systems is similar to entering data into PEMS. The NHM&E variables and values are standardized and independent of the software systems used to collect and submit to CDC.

Many CDC-funded health department jurisdictions subcontract with CBOs, medical agencies, and other organizations that provide various direct services to clients in need of HIV prevention services. The cost of contracting out for information collection is not included in the annualized burden for respondents; however, many health department jurisdictions will enter data into PEMS or the health department jurisdiction's data collection system for their funded agencies.

To estimate the number of indirectly funded contractors at each health department jurisdiction, five jurisdictions with a low, moderate, or high rate of HIV prevalence were asked to provide the number of vendors they fund and an average was calculated.

<b>State Health jurisdiction</b>	<b>Indirectly Funded Contractors</b>
New York State	100
Maryland	48
Louisiana	24
South Carolina	17
Idaho	18
TOTAL	207
AVERAGE	41 vendors/health jurisdiction

#### AGENCY AND PROGRAM PLAN DATA VARIABLES

##### HEALTH DEPARTMENT JURISDICTIONS

Agency and program plan data variables for health department jurisdictions include information on agency characteristics, program announcement awards, contractors, site facilities, HIV prevention programs, program budget, target populations, intervention plan characteristics, and community planning. These data will be entered one time, annually, then must be reviewed and updated by the jurisdictions as needed.

Search of the PEMS database for existing agency and program plan records

PEMS agency and program plan data variables are separated into twelve tables. A quarterly search of the PEMS database for existing health jurisdiction records will take approximately 30

seconds per table or six (6) minutes. Quarterly burden for each health jurisdiction is estimated to be six (6) minutes and 65 health department jurisdictions will take 6.5 hours or 26 hours annually.

[30 seconds/table x 12 tables = 360 seconds or 6 minutes per HD  
6 minutes/quarter x 65 HD = 390 minutes or 6.5 hours/quarter  
6.5 hours/quarter x 4 = 26 hours annually]

Gather and maintain agency and program plan data

Health department jurisdictions gather agency and program plan variables as part of their usual and customary business practices. Reading the agency and program plan variables and gathering the documented information quarterly for entry is estimated to require 20 minutes per health department jurisdiction, 21.7 hours/quarter for 65 jurisdictions and 86.8 hours annually. [20 minutes/quarter x 65 HDs = 1,300 minutes  
1,300 minutes/60 = 21.7 hours/quarter and 86.8 hours annually]

Complete the collection of agency and program plan data records

Determining the time required to enter agency and program plan data is based upon information gathered from agencies during consultations, telephone calls, site visits, and PEMS training courses.

It is estimated that health department jurisdictions will require 90 minutes to initially enter their agency variables and will need an additional 20 minutes to enter agency data for each of their funded vendors.

Using an average of 41 indirectly funded vendors per state, each state health jurisdiction will take 15.2 hours annually to initially enter agency data or 3.8 hours/quarter.

[41 vendors x 20 minutes/vendors = 820 minutes  
820 minutes + 90 minutes/HD = 910 minutes/HD or 15.2 hours  
910 minutes/year ÷ 4 quarters/year = 227.5 minutes/quarter or 3.8 hours/quarter]

Review of agency and program plan data

Quarterly review of agency and program plan data variables is estimated at 15 minutes for each health jurisdiction and an additional 10 minutes for data review of their funded vendors. Each health jurisdiction averages 41 funded vendors, resulting in

an estimated quarterly review time of 7.1 hours per health jurisdiction, 461.5 hours/quarter for 65 HDs or 1846 hours annually.

[41 contractors x 10 minutes/contractor = 410 minutes  
410 minutes/contractor + 15 minutes/HD = 425 minutes or 7.1 hours  
7.1 hours/quarter x 65 HDs = 461.5 hours/quarter or 1,846 hours annually]

## AGENCY AND PROGRAM PLAN DATA VARIABLES

### COMMUNITY-BASED ORGANIZATIONS

Community-based organizations funded by CDC to provide HIV prevention services are required to enter NHM&E data variables for agency demographics, program announcement award, funded contractors, site facilities, HIV prevention programs, budget, target populations, and intervention plan characteristics. To ascertain the number of interventions planned at each CBO, a review of 141 CBOs funded to conduct HIV prevention was conducted. This indicated that an average number of three (3) interventions are planned per CBO per year. Agency and program plan data will be entered one time only per CBO and will remain in the data collection system throughout the life of the system. Grantees are responsible for reviewing this information quarterly and updating the information as needed.

Search of the PEMS database for existing agency and program plan records

Quarterly searches of agency and program plan data in ten tables will take approximately five (5) minutes per CBO. Quarterly burden for 300 CBOs is estimated to be 25 hours or 100 hours annually.

[30 seconds/table x 10 tables/CBO = 300 seconds/CBO or 5 minutes/CBO

5 minutes/quarter x 300 CBOs = 1500 minutes or 25 hours/quarter  
25 hours/quarter x 4 = 100 hours annually]

Gather and maintain agency and program plan data

Most agency and program plan variables are gathered by CBOs as part of their usual and customary business practices. Reading the agency and program plan variables and gathering the documented information quarterly for entry into PEMS is estimated to require 20 minutes per CBO, 100 hours/quarter for 300 CBOs and

400 hours annually. [20 minutes/quarter x 300 CBOs = 6000 minutes  
6,000 minutes/60 = 100 hours/quarter and 400 hours annually]

Complete the collection of agency and program plan data records

CBOs will require 60 minutes to initially enter agency variables and will need an additional 10 minutes to enter each planned intervention. This estimate is based upon information gathered during consultations, telephone calls, site visits, and PEMS training courses.

Using an average of 3 interventions planned per CBO, each CBO will take 90 minutes annually to initially enter agency data or 22.5 minutes/quarter.

[3 interventions x 10 minutes/intervention = 30 minutes  
30 minutes + 60 minutes/CBO = 90 minutes/CBO/year  
90 minutes/year ÷ 4 quarters/year = 22.5 minutes/quarter]

Review agency and program plan data prior to submission

Quarterly review of agency and program plan data variables is estimated at 15 minutes for each CBO and an additional five (5) minutes for each of their interventions. Each CBO averages three interventions, resulting in an estimated quarterly search time of 30 minutes per CBO, 150 hours/quarter for 300 CBOs and 600 hours annually.

[3 interventions/CBO x 5 minutes/intervention = 15 minutes/CBO  
15 minutes/CBO + 15 minutes/CBO = 30 minutes/CBO  
30 minutes/CBO x 300 CBOs = 9,000 minutes  
9,000 minutes/60 = 150 hours/quarter and 600 hours annually]

#### **TOTAL ESTIMATES FOR AGENCY AND PROGRAM PLAN DATA VARIABLES**

##### **HEALTH JURISDICTIONS**

It is estimated that each health jurisdiction will average 11.2 hours quarterly to search, gather, complete and review agency and program plan data.

Searching existing database:	6 minutes
Gathering and maintaining data:	20 minutes
Completing the data:	227.5 minutes
Quarterly review of agency data:	<u>+ 425 minutes</u>
	673.5 minutes
TOTAL QUARTERLY HOURS	11.2 hours
TOTAL ANNUAL HOURS	44.8 hours

## COMMUNITY-BASED ORGANIZATIONS

It is estimated that each CBO will average 1.3 hours quarterly to search, gather, complete, and review agency and program plan data.

Searching existing database:	5 minutes
Gathering and maintaining data:	20 minutes
Completing the data:	22.5 minutes
Quarterly review of agency data:	<u>+ 30 minutes</u>
	77.5 minutes
TOTAL QUARTERLY HOURS	1.3 hours
TOTAL ANNUAL HOURS	5.2 hours

## HEALTH EDUCATION/RISK REDUCTION DATA

Health department jurisdictions and CBOs funded by CDC to conduct HIV prevention services customarily counsel clients and gather sensitive information as part of their usual HIV prevention practices. To establish the time needed to gather client-level HE/RR data that are not routinely collected by grantees, CDC conducted an informal pretest, timing CDC staff persons who are not skilled at HIV counseling. Per the informal pretest, collecting client demographic, risk profile, and behavioral variables as required for NHM&E will take approximately six (6) minutes per client.

An approximation of the number of unique clients seen per agency was assessed using data obtained from 98 CBOs conducting three broad intervention types during May, July, and September 2003. The intervention types were individual-level interventions (ILI), group-level interventions (GLI), and comprehensive risk counseling and services (CRCS). The agencies averaged 294 clients quarterly for these interventions. This estimate of 294 clients per quarter will be used for both the HD and CBO calculations. It is also assumed that HDs will not be entering the HE/RR data for their funded vendors.

## HE/RR DATA

## HEALTH DEPARTMENT JURISDICTIONS

Search of the PEMS database for existing HE/RR records

Searching the PEMS database for existing client records will take approximately one (1) minute per client. Health department jurisdictions averaged 294 clients quarterly, resulting in a total estimated quarterly search time of 4.9 hours per health jurisdiction, 637 hours for 65 health department jurisdictions or 1,274 hours annually.

[294 clients/quarter x 1 minute/client = 294 minutes or 4.9 hours/quarter

4.9 hours/quarter x 65 HD = 318.5 hours/quarter or 318.5 x 4 = 1,274 hours annually]

#### Gather and maintain HE/RR data

If each health jurisdiction averages 294 clients per quarter, and six (6) minutes are required to gather the data per client, the total time required for each health jurisdiction to gather HE/RR data quarterly is estimated to be 29.4 hours, 1,911 hours/quarter for 65 HD or 7,644 hours annually.

[294 clients x 6 minutes/client = 1,764 minutes per quarter  
1,764/60 minutes = 29.4 hours/quarter

29.4 hours/quarter x 65 HD = 1,911 hours/quarter or 7,644 hours annually]

#### Complete the collection of HE/RR records

It is estimated that completing the collection of HE/RR data will take each health jurisdiction 1 hour per day or 4,225 hours/quarter for 65 health department jurisdictions and 16,900 hours annually.

[1 hour/day x 65 business days/per quarter = 65 hours/quarter

65 hours/quarter x 65 HD = 4,225 hours/quarter or 16,900 hours annually]

#### Review of HE/RR data prior to submission

Review of HE/RR data prior to submission to CDC will require approximately 15 minutes per day or 1,056.25 hours quarterly for 65 health department jurisdictions and 4225 hours annually.

[15 minutes x 65 business days/quarter = 975 minutes/quarter or 16.25 hours per quarter

975 minutes/quarter x 65 HD = 63,375 minutes/quarter or 1,056.25 hours/quarter and 4,225 hours annually]

#### HE/RR DATA



## COMMUNITY-BASED ORGANIZATIONS

### Search of the PEMS database for existing HE/RR records

Searching the PEMS database for existing client records will take approximately one (1) minute per client. Agencies averaged 294 clients per quarter, resulting in a total estimated quarterly search time of 1,470 hours for 300 CBOs and 5,880 hours annually.

[294 clients/quarter x 1 minute/client = 294 minutes/quarter or 4.9 hours/quarter

4.9 hours/quarter x 300 CBOs = 1,470 hours/quarter

1,470 hours/quarter x 4 quarters = 5,880 hours annually]

### Gather and maintain HE/RR data

If each CBO averages 294 clients quarterly, and six (6) minutes are required to gather the data, the total time required for 300 CBOs to gather HE/RR data quarterly is estimated to be 8,820 hours quarterly or 35,280 hours annually.

[294 clients x 6 minutes/client = 1,764 minutes/quarter

1,764/60 minutes = 29.4 hours per quarter

29.4 hours/quarter x 300 CBOs = 8,820 hours/quarter or 35,280 hours annually]

### Complete the collection of HE/RR data records

It is estimated that completing the collection of HE/RR data will take each CBO 30 minutes per day or 32.5 hours/quarter and 9,750 hours per quarter for 300 CBOs or 39,000 hours annually.

[30 minutes/day x 65 business days/per quarter = 32.5 hours/quarter

32.5 hours/quarter x 300 CBOs = 9,750 hours/quarter or

39,000 hours annually]

### Review of HE/RR data prior to submission

Review of HE/RR data prior to submission to CDC will take each CBO approximately 15 minutes per day or 16.25 hours per quarter and 4,875 hours per quarter for 300 CBOs or 19,500 hours annually.

[15 minutes x 65 business days/quarter = 975 minutes/quarter or 16.25 hours per quarter

975 minutes/quarter x 300 CBOs = 292,500 minutes/quarter or 4,875 hours/quarter and 19,500 hours annually]

## TOTAL ESTIMATES FOR HE/RR DATA VARIABLES

### HEALTH JURISDICTIONS

It is estimated that each health jurisdiction will average 115.5 hours quarterly to complete HE/RR data collection.

Searching existing database:	4.9 hours
Gathering and maintaining data:	29.4 hours
Completing collection of records:	65.0 hours
Quarterly review of agency data:	<u>+16.25 hours</u>
TOTAL QUARTERLY HOURS	115.55 hours
TOTAL ANNUAL HOURS	462.2 hours

### COMMUNITY-BASED ORGANIZATIONS

It is estimated that each CBO will average 83 hours quarterly to complete the data collection.

Searching existing database:	4.9 hours
Gathering and maintaining data:	29.4 hours
Completing collection of records:	32.5 hours
Quarterly review of agency data:	<u>+16.25 hours</u>
TOTAL QUARTERLY HOURS	83.05 hours
TOTAL ANNUAL HOURS	332.2 hours

## HIV Counseling and Testing and Referral (CTR)

CDC requires minimal core data from all health department jurisdictions and CBOs funded under cooperative agreements to conduct HIV Testing, but use of the HIV Testing scan form developed by CDC is optional. For the purpose of these calculations, it is estimated that 30 health department jurisdictions will use the HIV Testing scan form (based on current usage, though this number may change) and all 100 CBOs funded directly by CDC to deliver HIV testing will use the scan form (while actual scanning of forms will occur at the respective health department jurisdictions). The other 35 health department jurisdictions are not anticipated to use the HIV Testing scan form.

### CTR DATA

#### HEALTH JURISDICTIONS THAT USE CDC SCAN FORM

Health department jurisdictions currently submit data for approximately 3,500,000 HIV tests annually, but this is anticipated to increase to 5,000,000 tests per year, funding permitting. An estimated 30 jurisdictions using the scan form submit approximately 1,000,000 tests annually. (This number of jurisdictions includes the Pacific Island Jurisdictions, which use a slightly modified HIV testing form.) No data are currently available to systematically determine the number of tests that health department jurisdictions conduct directly versus those conducted by subcontractors. Due to this lack of available documentation, it was estimated that 20% of tests are directly conducted by health department jurisdictions, with the remainder contracted out. For the 30 health department jurisdictions, 200,000 tests are estimated to be conducted directly annually or 50,000 tests per quarter and 1,667 tests quarterly per health jurisdiction (50,000 tests/30 HD = 1,667 tests/HD).

Searching the database for existing data  
Scanned forms are completed for each patient tested so searching the PEMS database is not applicable.

#### Gather and maintain CTR data

Health department jurisdictions that conduct HIV testing customarily collect HIV testing data as part of their usual business practices. Data will be entered directly onto scanned forms while the information is being gathered. It is estimated that collecting HIV testing variables required by CDC will take each health jurisdiction approximately five (5) minutes per test; 8,335 minutes per quarter; or 138.9 hours per quarter for each health jurisdiction and 4,167 hours per quarter or 16,668 hours annually for 30 health department jurisdictions.

[1,667 tests/quarter x 5 minutes = 8,335 minutes/quarter or 138.9 hours/quarter

138.9 hours/quarter x 30 HD = 4,167 hours/quarter

4,167 hours/quarter x 4 = 16,668 hours annually]

#### Complete the collection of CTR data

Completing the collection of CTR data will occur during the gathering phase, therefore, the completion phase is not applicable.

#### Review and scan CTR data

It is assumed that the 30 health department jurisdictions will scan all of the tests that are conducted by themselves and their contractors (1,000,000 tests) in addition to the forms completed by the estimated 100 directly funded CBOs (estimated 146,000 tests annually, see below). Review of HIV testing data and scanning the forms is expected to take health department jurisdictions an average of approximately three (3) minutes per form; 877,000 minutes per quarter for 30 health department jurisdictions and 28,650 minutes per quarter for each health jurisdiction or 477.5 hours per quarter for each health jurisdiction. If each health jurisdiction takes 477.5 hours per quarter, 30 health department jurisdictions will take 14,325 hours per quarter or 57,300 hours annually to review and scan the CTR forms.

[1,000,000 tests/HDs + 146,000 tests/CBOs = 1,146,000 tests annually for 30 HDs

1,146,000 tests / 30 HD = 38,200 tests/HD annually

38,200 tests/4 = 9,550 tests/quarter

9,550 tests/quarter x 3 minutes per test = 28,650 minutes/quarter or 477.5 hours/quarter

477.5 hours/quarter x 30 HD = 14,325 hours/quarter

14,325 hours/quarter x 4 = 57,300 hours annually]

#### CTR DATA

##### COMMUNITY-BASED ORGANIZATIONS

For the purpose of these burden calculations, directly funded CBOs do not subcontract HIV testing services, and each of the approximately 100 CBOs directly funded to conduct HIV testing (of the 300 anticipated directly funded CBOs) will conduct an average of approximately four (4) tests daily or 1,460 tests per year (4 X 365 days per year = 1,460; 365 tests quarterly), so these 100 CBOs funded to conduct HIV testing will conduct a total of 146,000 tests annually (1,460 x 100 = 146,000) or 36,500 tests quarterly (146,000/4 = 36,500).

Searching the database for existing data

Scanned forms are completed for each patient counseled so searching the PEMS database is not applicable.

Gather and maintain CTR data

It is estimated that collecting HIV testing variables required by CDC will take each CBO approximately five (5) minutes per test or 1,825 minutes per quarter or 30.41 hours quarterly. The 100 CBOs in total will require approximately 3,041 hours per quarter or 12,164 hours annually.

[365 tests/quarter x 5 minutes = 1,825 minutes/quarter  
 1,825 minutes/quarter ÷ 60 = 30.41 hours/quarter  
 30.41 hours/quarter x 100 CBOs = 3,041 hours/quarter  
 3,041 hours/quarter x 4 = 12,164 hours annually]

Complete the collection of HIV testing data  
 Completing the collection of HIV testing data will occur during the gathering phase, therefore, the completion phase is not applicable.

Review and scan CTR data

Reviewing and scanning HIV testing data is expected to be performed by the health department jurisdictions; the estimates have been included in the health jurisdiction estimates for review and scan of HIV testing data.

TOTAL ESTIMATES FOR SCANNED CTR DATA  
 HEALTH DEPARTMENT JURISDICTIONS

It is estimated that each health jurisdiction will average 616.4 hours per quarter to complete CTR data collection.

Gathering and maintaining data:	138.9 hours
Review and scan of data for health depts:	+ <u>477.5 hours</u>
TOTAL QUARTERLY HOURS	616.4 hours
TOTAL ANNUAL HOURS	2465.6 hours

COMMUNITY-BASED ORGANIZATIONS

It is estimated that each CBO will average 30.41 hours per quarter to complete CTR data collection.

Gathering and maintaining data	<u>30.41 hours</u>
TOTAL QUARTERLY HOURS	30.41 hours
TOTAL ANNUAL HOURS	121.64 hours

HIV TESTING DATA

HEALTH DEPARTMENT JURISDICTIONS THAT DO NOT USE CDC SCAN FORM

The approximately 35 health department jurisdictions that do not use the CDC scan form will submit data for an anticipated maximum of 4,000,000 tests annually. No data are currently available to systematically determine the number of tests health department jurisdictions conduct directly versus those conducted by subcontractors. Due to this lack of available documentation, it was estimated that 20% of tests are directly conducted by health

department jurisdictions with the remainder contracted out. It is also assumed that health departments will not be entering the HIV testing data for their funded vendors. For the 35 health department jurisdictions, 800,000 tests (20% of 4,000,000 tests) are estimated to be conducted directly annually or 200,000 tests quarterly and 5,714.3 tests quarterly per health department jurisdictions (200,000/35 HD = 5,714.3 tests).

#### Searching the database for existing data

As with each component of PEMS, searching the PEMS or an equivalent database for existing client records will take approximately one (1) minute per client. For HIV testing data this translates into 200,000 minutes quarterly; or 3,333 hours quarterly for the 35 health department jurisdictions not using the CDC scanning solution and 13,333 hours annually.

[200,000 tests x 1 minute = 200,000 minutes  
200,000 minutes/60 = 3,333 hours/quarter  
3,333 hours/quarter x 4 = 13,333 hours annually  
3,333 hours/quarter/35 jurisdictions = 95.2 hours/ jurisdiction]

#### Gather and maintain CTR data

Health department jurisdictions that conduct HIV testing customarily collect HIV testing data as part of their usual business practices. It is estimated that collecting additional HIV testing variables required by CDC will take the 35 health jurisdiction approximately thirty seconds per client; 100,000 minutes quarterly; or 1,667 hours quarterly or 6,666 hours annually.

[200,000 tests x 30 seconds = 100,000 minutes; 100,000 minutes/60 = 1,667 hours/quarter  
1,667 hours/quarter x 4 = 6,666 hours annually  
1,667 hours/quarter/35 jurisdictions = 47.6 hours/quarter/jurisdiction]

#### Complete the collection of CTR records

Completing the collection of CTR data is expected to take health department jurisdictions an average of approximately three (3) minutes per test; 600,000 minutes quarterly or 10,000 hours/quarter or 40,000 hours annually.

[3 minutes X 200,000/quarter = 600,000 minutes; 600,000 minutes/60 = 10,000 hours/quarter  
10,000 hours/quarter x 4 = 40,000 hours annually  
10,000 hours/quarter/35 jurisdictions = 285.7 hours/quarter/jurisdiction]

## Review of CTR data prior to submission

It is estimated that each health jurisdiction will average 10 minutes per day to review HIV testing data, or 10.8 hours quarterly. The 35 health department jurisdictions not using the scanning system are estimated to require 532 hours per quarter or 1,512 hours annually.

[10 minutes/day x 65 business days/quarter = 650 minutes or 10.8 hours

10.8 hours/quarter x 35 HD = 378 hours/quarter

378 hours/quarter x 4 = 1,512 hours annually

378 hours/quarter/ 35 jurisdictions = 10.8

hours/quarter/jurisdiction]

## Total Estimates for CTR-non scan.

It is estimated that health department jurisdictions will average 15,378 hours/quarter for the 35 health jurisdiction not using the CDC scan system and 439.3 hours/quarter per health jurisdiction.

Searching existing database: 3,333 hours

Gathering and maintaining data: 1,667 hours

Completing collection of data: 10,000 hours

Review of CTR data: + 378 hours

TOTAL QUARTERLY HOURS	15,378 hours/35 HD
	439.3 hours/ HD
TOTAL ANNUAL HOURS	1,757.2 hours/ HD

## PARTNER SERVICES (PS)

Community-Based Organizations do not currently conduct Partner Services (PS). The calculations for PS were derived from data collected during calendar year 2002. Cumulative data from the ten state health department jurisdictions with the greatest number of AIDS cases determined 903 HIV-positive clients and 440 of their partners were interviewed or 1,343 cases annually (335.75 cases quarterly), or an average of 134 cases annually for each of the ten health department jurisdictions (903 + 440 = 1,343 cases or 1,343/10 HD = 134 cases/HD). From this information the number of PS cases interviewed annually for the remaining 55 health department jurisdictions was estimated. If each of the 55 health department jurisdictions interviewed an average of one quarter of the cases seen by each of the top ten,

the total number of cases interviewed annually would be 1,842.5 or 460.62 cases quarterly.

[134 cases/4 = 33.5 cases annually; 33.5 cases x 55 = 1,842.5 cases annually or 460.62 cases quarterly for the remaining health department jurisdictions]

The total number of PS cases interviewed for 65 health department jurisdictions is then estimated to be 796.37 cases quarterly (335.75 + 460.62 = 796.37). Since this is 2002 data, and an expansion of PS is anticipated as HIV testing increases, funding permitting, the estimate for the period of this ICR is 4,000 PS cases per year or 1,000 cases quarterly.

### **Searching the database for existing data**

As with each component of PEMS, searching the PEMS database for existing client records will take approximately one (1) minute per client. For PS this translates into 1,000 minutes per quarter; or 16.67 hours per quarter for health department jurisdictions and 66.7 hours annually.

[1,000 clients x 1 minute = 1,000 minutes

1,000 minutes/60 = 16.67 hours/quarter

16.67 hours/quarter x 4 = 66.7 hours annually

16.67 hours/ quarter/ 65 jurisdictions = 15.4 minutes/ quarter/jurisdiction]

### **Gather and maintain PS data**

Health department jurisdictions that conduct PS customarily counsel clients and collect PS data as part of their usual business practices. It is estimated that collecting additional PS variables required by CDC will take health jurisdiction approximately thirty seconds per client; 500 minutes per quarter; or 8.33 hours per quarter or 33.3 hours annually.

[1,000 clients x 30 seconds = 30,000 seconds; 30,000 seconds/60 seconds per minute = 500 minutes; 500 minutes/60 minutes per hour = 8.33 hours/quarter

8.33 hours/quarter x 4 = 33.3 hours annually

8.33 hours/quarter/ 65 jurisdictions = 7.7 minutes/ quarter/jurisdiction]

### **Complete the collection of PS records**

Completing the collection of PS data is expected to take health department jurisdictions an average of approximately one (1) minute per client; 1,000 minutes per quarter or 16.67 hours/quarter or 66.7 hours annually.



[1,000 clients x 1 minute = 1,000 minutes;  
 1,000 minutes/60 = 16.67 hours/quarter  
 16.67 hours/quarter x 4 = 66.7 hours annually  
 16.67 hours/quarter/ 65 jurisdictions = 15.4 minutes/ quarter/  
 jurisdiction]

**Review of PS data prior to submission**

It is estimated that each health jurisdiction will average 10 minutes per day to review PS data, or 10.8 hours quarterly. All 65 health department jurisdictions are estimated to require 702 hours per quarter or 2,808 hours annually.

[10 minutes/day x 65 business days/quarter = 650 minutes or 10.8 hours  
 10.8 hours/quarter x 65 HD = 702 hours/quarter  
 702 hours/quarter x 4 = 2,808 hours annually]

**Total Estimates for PS**

It is estimated that health department jurisdictions will average 743.7 hours/quarter for all 65 health department jurisdictions and 11.44 hours/quarter per health jurisdiction.

Searching existing database:	16.7 hours
Gathering and maintaining data:	8.33 hours
Completing collection of data:	16.67 hours
Completing collection for health depts:	+ 702 hours
TOTAL QUARTERLY HOURS	743.7 hours/65 HD
	11.44 hours/ HD
TOTAL ANNUAL HOURS	45.76 hours/ HD

**BURDEN FOR GRANTEE STAFF TRAINING**

It is probable that health department jurisdictions and CBOs will conduct NHM&E training for staff annually. Instruction will include topics such as confidentiality and computer security, use of PEMS or equivalent system, evaluation principles, and use of data for program improvement. It is assumed that health jurisdiction and CBO employees who regularly collect and enter data will also conduct the training, and that each instructor will expend approximately two percent (2%) of their time or 41.6 hours annually (10.4 hours quarterly) to teach these classes.

**Estimated Total Quarterly Burden for PEMS Data Collections**

HEALTH DEPARTMENT JURISDICTIONS	
Agency variables	11.2 hours
Health education/risk reduction	115.55 hours
Partner services	11.44 hours

Staff training + 10 hours  
 TOTAL QUARTERLY BURDEN 152.55 hours  
 TOTAL QUARTERLY BURDEN for HIV Testing is 616.4 hours for each of 30 health department jurisdictions using the CDC form and scanning system and 439.3 hours for each of 35 health department jurisdictions not using the scanning system.

**COMMUNITY-BASED ORGANIZATIONS**

Agency variables 1.3 hours  
 Health education/risk reduction 83.05 hours  
 Staff training +10 hours  
 TOTAL QUARTERLY BURDEN 94.35 hours  
 TOTAL QUARTERLY BURDEN for HIV Testing is 30.41 hours for each of 100 CBOs.

These estimated burdens per quarterly response are summarized in the tables below. The total annual burdens based on these estimates are presented in Part A, Table A.12-A. For simplicity, the burdens for Agency and Program Plan Data and for HE/RR data (and for PS data for health departments) have been combined in Table A.12-A since all agencies report these data.

**Summary of Quarterly NHM&E Data Reporting Burden Estimates**

**State and Local Health Jurisdiction (HD) Grantees**

Data Type	Quarterly Burden Estimates for Each HD				
	Search Existing Data	Gather and Maintain Data	Completing the Data	Review Data	TOTAL BURDEN HOURS
Agency and Program Plan	6 minutes	20 minutes	227.5 minutes	425 minutes	11.2 hours
Client-Level HE/RR	4.9 hours	29.4 hours	65 hours	16.25 hours	115.55 hours
Client-Level HIV Testing - Scan	N/A	138.9 hours	N/A	477.75 hours	616.4 hours
Client-Level HIV Testing - Non-Scan	95.2 hours	47.6 hours	285.7 hours	10.8 hours	439.3 hours
Client-Level PS	15.4 minutes	7.7 minutes	15.4 minutes	650 minutes	11.44 hours

**Community-Based Organization (CBO) Grantees**

Quarterly Burden Estimates for Each CBO
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<b>Data Type</b>	<b>Search Existing Data</b>	<b>Gather and Maintain Data</b>	<b>Completing the Data</b>	<b>Review Data</b>	<b>TOTAL BURDEN HOURS</b>
Agency and Program Plan	5 minutes	20 minutes	22.5 minutes	30 minutes	1.3 hours
Client-Level HE/RR	4.9 hours	29.4 hours	32.5 hours	16.25 hours	83 hours
Client-Level HIV Testing	N/A	30.41 hours	N/A	N/A	30.41 hours
Client-Level PS	N/A	N/A	N/A	N/A	N/A