# Public Health Law Training and Technical Assistance Needs Assessment of State, Tribal, Local, and Territorial Health Department Staff

OSTLTS Generic Information Collection Request OMB No. 0920-0879

# **Supporting Statement – Section A**

Submitted: May 16, 2012

#### **Program Official/Project Officer**

Lindsay Culp Public Health Analyst Office for State, Tribal, Local, and Territorial Support 4770 Buford Highway, MS E-70, Atlanta, GA 30341 404-498-0456 404-498-6882 Lvc9@cdc.gov

### Section A – Justification

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

#### Background

This data collection is being conducted using the Generic Information Collection mechanism of the OSTLTS Survey Center (OSC) – OMB No. 0920-0879. The respondent universe for this data collection aligns with that of the OSC. Data will be collected from state, Tribal, local, and territorial (STLT) government officials and employees, across occupational and functional groups, employed by a public health agency and acting in their official capacities.

This data collection is authorized by Section 301 of the Public Health Service Act (42 U.S.C. 241).

The Public Health Law Program (PHLP) at the CDC Office for State, Tribal, Local, and Territorial Support works to improve the health of the public by developing law-related tools and providing legal training and technical assistance to public health practitioners and policy makers in STLT jurisdictions (**see Attachment A – Public Health Law Program brochure**). This work includes researching laws that impact public health; conducting comparative analyses of laws across jurisdictions; drafting guidance, articles, reports, and toolkits; and developing and disseminating public health law curricula.

Currently, PHLP offers three training courses in public health law in an effort to improve practitioners' understanding of the role of law in public health practice. Public Health Law 101, a foundational course consisting of nine individual units, provides an introduction to fundamental principles of law, ethics, and the legal system as they frame public health practice in the United States. Public Health Emergency Law is designed to improve understanding of the role of law in public health emergency response, and Forensic Epidemiology guides public health and law enforcement agencies in strengthening their coordinated response to pandemic influenza and similar disease outbreaks. In addition to offering these courses on the PHLP website for either self-study or for presentation by an outside instructor, the Public Health Law Program presents workshops on these topics at various public health conferences. In 2012 PHLP has presented Public Health Law 101 at two Brownbag Lecture Series for CDC Project Officers, via teleconference for Local Health Officials, and for CDC Public Health Prevention Specialists.

PHLP provides legal technical assistance in response to queries from STLT public health department officials and employees. Although PHLP does not provide legal advice, the program can provide guidance, research, and analysis to health departments on legal matters, such as a survey of state laws pertaining to diverse aspects of public health, data sharing and other cross jurisdiction agreements, health information privacy, and emergency

preparedness. Furthermore, PHLP can contact CDC subject matter experts for scientific expertise related to the legal question. Recently, PHLP has provided technical assistance to an Alaskan Tribal consortium on healthcare worker immunization requirements, the New Orleans Department of Health on a complete, systematic review of their enabling and programmatic ordinances, and Multnomah County, Oregon, on the impact that federal Affordable Care Organization legislation and similar state legislation may have on public health departments and how public health may interact with the new entities.

In developing public health law training materials and providing related technical assistance, one of PHLP's main goals is to ensure that public health professionals, their legal counsel, and relevant partners understand the legal framework in which they operate and are competent in applying legal authorities to public health issues. The *Core Legal Competencies for Public Health Professionals*, were developed in 2001 by the Center for Law and the Public's Health, and represent a set of seven domains of law-specific skills and legal knowledge desirable for the practice of public health (see Attachment B – Core Legal Competencies for Public Health Professionals). These competencies are intended to serve as guides to workforce development and technical assistance efforts. Because public health practitioners should have knowledge in these areas, measuring competency levels is critical to the effective development of appropriate public health law curricula and training materials, and to identify technical assistance needs.

Although PHLP provides public health law-related training and technical assistance to STLT health department employees, the program has only anecdotal evidence about STLT law-related training and technical assistance needs, and has no systematic method of measuring and evaluating those needs. The purpose of this assessment is to identify STLT public health law-related training and technical assistance needs. PHLP will use data from this survey to streamline program operations by informing the development of resources, tools, and curricula that are most needed by STLTs.

After an extensive search, PHLP determined a number of trade organizations, including the Council on Education for Public Health, the Association of Schools of Public Health, and the Association for State and Territorial Health Officials, had conducted public health workforce training and technical assistance needs assessments. The findings of several assessments indicated that public health law was among the top areas in which public health practitioners wanted training and technical assistance. For example, the Northwest Center for Public Health Practice found that 40% of respondents were interested in learning about public health law, and another 42% were interested in receiving legal technical assistance.<sup>1</sup> Another survey of 78 state and local health agency supervisors from six states found the supervisors considered "an understanding of the ... laws that characterize the public health field" to be "important not only for newly hired and clerical personnel but also

<sup>&</sup>lt;sup>1</sup> D'Ambrosio L. (2011) Northwest Center for Public Health Practice Program Outcome Evaluation. National Public Health Improvement Initiative. <u>http://www.doh.wa.gov/PHIP/perfmgtcenters/docs/CDCVisit/NWCPHP.pdf</u>

for professional workers."<sup>2</sup> Further, several comprehensive training needs assessment studies by the South Central Public Health Training Center of public health practitioners in a four-state region identified an ability to "enforce laws and regulations that protect health and ensure safety" as a priority training need.<sup>3</sup>

Although the literature demonstrates a desire for public law-related training in general, none of the identified assessments focused specifically on the public health law related training and technical assistance needs of the public health workforce. This proposed needs assessment expands on these previous surveys by assessing competency levels, priority topics, and delivery methods specific to training and technical assistance in public health law. Furthermore, the proposed assessment will be the first to use the *Core Legal Competencies for Public Health Professionals* to identify the public health law-related training and technical assistance needs of state, Tribal, local, and territorial (STLT) government officials and employees, across occupational and functional groups, employed by a public health agency.

#### **Privacy Impact Assessment**

<u>Overview of the Data Collection System</u> – The data collection system consists of a webbased questionnaire (**see Attachment C – Survey Instrument: MS Word version and Attachment D – Survey Instrument: Web version**) designed to survey STLT government officials and employees regarding their public health law-related training and technical assistance needs. The data collection instrument will be administered as a web-based survey. The survey was pilot tested by five public health practitioners. Feedback from this group was used to refine questions as needed, ensure accurate programming and skip patterns and establish the estimated time required to complete the survey.

#### Items of Information to be Collected -

The survey consists of 38 questions of various types including single response, multiple response, interval, filter, and open-ended. An effort was made to limit questions requiring narrative responses from respondents (two open-ended questions and four questions with an "other, please describe" option on multiple response questions). The survey will collect information on the following:

- a. Respondent characteristics: employer type (state, tribal, local, or territorial), primary field of practice;
- b. Training needs: topic areas, preferred delivery format;
- c. Technical Assistance needs: topic areas;
- d. Core Legal Competencies: familiarity with competencies, confidence level in ability to perform tasks related to each competency, perceived need for training related to each competency area.

<sup>&</sup>lt;sup>2</sup> Potter M, Pistella CL, Fertman CI, Dato VM. (2000). Needs assessment and a model agenda for training in the public health workforce. American Journal of Public Health, 90: 1294-1296.

<sup>&</sup>lt;sup>3</sup> Chauvin SW. (2011). Training needs assessment update. South Central Public Health Training Center. <u>http://lms.southcentralpartnership.org/AdditionalCourseMaterial/Misc/Needs%20Assessment%202011.pdf</u>

<u>Identification of Website(s) and Website Content Directed at Children Under 13 Years of</u> <u>Age</u> – The data collection system involves using a web-based survey. Respondents will be sent a link directing them to the online survey only (i.e., not a website). No website content will be directed at children.

#### 2. Purpose and Use of the Information Collection

The purpose of this assessment is to assist the Public Health Law Program (PHLP) in identifying public health law-related training and technical assistance needs of state, Tribal, local, and territorial (STLT) government officials and employees, across occupational and functional groups, employed by a public health agency. PHLP aims to develop an online survey instrument which focuses on an assessment of 1) the existing and desired competency levels of respondents in each of the seven domain and skill areas as identified in the *Core Legal Competencies for Public Health Professionals* developed by The Center for Law and the Public's Health; 2) the top 5-10 subject areas in public health law where training is needed; 3) the preferred delivery methods for training; and 4) current and emerging legal issues where technical assistance is of the greatest demand.

Respondents will complete a one-time web-based survey designed to assess CDC and STLT staff perceptions of public health law curriculum and legal technical assistance needs. As described below, PHLP will use the data collected to set program priorities, facilitate development of technical assistance resources for CDC programs, and to collaborate with PHLP's national public health law partners.

Results from the needs assessment will be reviewed and synthesized into a report identifying the common and recurring priority legal training and technical assistance needs of the public health workforce. This report will serve to inform the proactive development and evaluation of appropriate training and technical assistance resources and tools by PHLP and our partners. In addition, the results will be used to:

- 1) Proactively direct staff and other resources to technical assistance areas of greatest demand;
- 2) Provide an evidence base for a 3-5 year public health law training agenda;
- Determine whether baseline data indicates a need for further information gathering, such as focus groups, to identify the training and technical needs of specific occupational and functional groups; and
- 4) Delineate the best methods for the provision of public health training and technical assistance to STLT health departments.

Privacy Impact Assessment

No sensitive information is being collected. The proposed data collection will have little or no effect on respondent privacy because respondents are participating in their official capacity as staff in state, Tribal, local, or territorial departments of health.

#### 3. Considerations Given to Information Technology

Data will be collected via Survey Monkey, a web-based questionnaire allowing respondents to complete and submit their responses electronically. This method was chosen to reduce the overall burden on respondents. The survey was designed to collect the minimum information necessary for the purposes of this project (i.e., limited to 38 survey questions).

#### 4. Duplication of Information

After an extensive literature search, we have concluded there is currently no information available that can substitute for survey responses. The Public Health Law Program currently does not systematically collect information on law-related training and technical assistance needs of STLTs and, while other organizations have conducted training needs assessments, none have focused specifically on the public health law-related training and technical assistance needs of the public health workforce.

#### 5. Reducing the Burden on Small Entities

No small businesses will be involved in this data collection.

#### 6. Consequences of Not Conducting Collection

This request is for a one time data collection. There are no legal obstacles to reduce the burden. If no data are collected, the Public Health Law Program will be unable to:

- identify the public health law-related training and technical assistance needs of STLT government officials and employees,
- identify the common and recurring priority legal training and technical assistance needs of the public health workforce, and
- inform the proactive development and evaluation of appropriate training and technical assistance resources and tools by PHLP and our partners.

#### 7. Special Circumstances

There are no special circumstances with this information collection package. This request fully complies with the regulation 5 CFR 1320.5 and will be voluntary.

#### 8. Consultation with Persons Outside the Agency

This data collection is being conducted using the Generic Information Collection mechanism of the OSTLTS Survey Center (OSC) – OMB No. 0920-0879. This data collection is being conducted using the Generic Information Collection mechanism of the OSTLTS Survey Center (OSC) – OMB No. 0920-0879. A 60-day Federal Register Notice was published in the Federal Register on October 22, 2010, Vol. 75, No. 204; pp. 65353-54. Two comments were received from the Association of State and Territorial Health Officials (ASTHO), and the National Association of County and City Health Officials (NACCHO).

CDC partners with professional STLT organizations, such as the Association of State and Territorial Health Officials (ASTHO), the National Association of County and City Health Officials (NACCHO), and the National Association of Local Boards of Health (NALBOH) along with the National Center for Health Statistics (NCHS) to ensure that the collection requests under individual ICs are not in conflict with collections they have or will have in the field within the same timeframe.

#### 9. Payment or Gift

CDC will not provide payments or gifts to respondents.

#### **10. Confidentiality**

The Privacy Act does not apply to this data collection. Employees of state and local public health agencies will be speaking from their official roles and will not be asked, nor will they provide individually identifiable information.

This data collection is not research involving human subjects.

#### **11. Sensitive Nature**

No information will be collected that are of personal or sensitive nature.

#### **12. Burden of Information Collection**

The estimate for burden hours is based on a pilot test of the survey instrument by five public health professionals. In the pilot test, the average time to complete the survey including time for reviewing instructions, gathering needed information and completing the survey, was approximately eight minutes. Based on these results, the estimated time range for actual respondents to complete the survey is five to eleven minutes. For the purposes of estimating burden hours, the upper limit of this range (i.e., 11 minutes) is used.

Estimates for the average hourly wage for respondents are based on the Department of Labor (DOL) National Compensation Survey estimate for management occupations – medical and health services managers in state government and legal occupations – lawyers in state government (<u>http://www.bls.gov/ncs/ocs/sp/nctb1349.pdf</u>). Based on DOL data, an average hourly wage of \$48.98 is estimated for 345 respondents who are STLT Officials or Employees subscribing to *CDC Public Health Law News* and an average hourly rate of \$40.85 is estimated for STLT attorneys. Table A-12 shows estimated burden and cost information.

**Table A-12:** Estimated Annualized Burden Hours and Costs to Respondents – Public Health Law Comprehensive Needs Assessment Survey

Type of Respondent	No. of Respondents	No. of Responses per Respondent	Average Burden per Response (in hours)	Total Burden Hours	Hourly Wage Rate	Total Respondent Costs
STLT Official or Employee subscribing to CDC Public Health Law News	345	1	11/60	63	\$48.98	\$3,085.74
STLT Attorneys	124	1	11/60	23	\$40.85	\$939.55
TOTALS	469	1		86		\$4,025.29

#### 13. Costs to Respondents

There will be no direct costs to the respondents other than their time to participate in each survey.

#### 14. Cost to Federal Government

There are no equipment or overhead costs. Contractors are not being used to support this data collection. The only cost to the federal government would be the salary of CDC staff supporting the data collection activities and associated tasks.

The lead staff for this project are a Senior Public Health Analyst (GS-14) and a Public Health Analyst (GS-13) in the OSTLTS Public Health Law Program. The lead staff developed the survey, and will collect the data, code, enter, and prepare the data for analysis; conduct the qualitative data analysis; and conduct and prepare the evaluation report. A Health Scientist (GS-14) will analyze the data. Hourly rates of \$48.41 for GS-14 and \$40.97 for GS-13 were used to estimate staff costs. The estimated cost to the federal government is \$6,998.

A GS-14 Health Scientist in the OSTLTS Research and Outcomes Branch will develop the analysis plan and conduct the quantitative data analysis.

Staff (FTE)	Average Hours per Collection	Average Hourly Rate	Average Cost	
Senior Public Health Analyst (GS-14)	50	\$48.41	\$2420	
Instrument development, pilot testing, OMB				
package preparation, data collection, qualitative				
data analysis, quality control, report preparation				
Public Health Analyst (GS-13)	100	\$40.94	\$4094	
Instrument development, pilot testing, OMB				
package preparation, data collection, data coding				
and entry, qualitative data analysis, quality				
control, report preparation				
Health Scientist (GS-14)	10	\$48.41	\$484	
Data plan and quantitative analysis				
Estimated Total Cost of Information Collection				

#### Table A-14: Estimated Annualized Cost to the Federal Government

#### **15. Reason for Changes**

This is a new data collection.

#### 16. Tabulation of Results, Schedule, and Analysis Plan

We plan to analyze data using Microsoft Excel and SAS to gather descriptive statistics meaning the results will reflect generalizations about the sample group only and not the total STLT population. Once analyzed, we plan to share our findings with other CDC stakeholders and CDC leadership via the *CDC Public Health Law News*, the PHLP website, peer-reviewed journal articles, and conference presentations.

#### Project Time Schedule

Design survey questionnaire	(COMPLETE)
Develop survey protocol, instructions, and analysis plan	(COMPLETE)
Pilot test survey questionnaire	(COMPLETE)
Prepare OMB package	
Submit OMB package	
OMB approval	
Conduct survey	(Survey open 2 weeks)
Collect, code, enter, quality control, and analyze data	(4 weeks)
Prepare report	
Disseminate results/reports	
	Design survey questionnaire Develop survey protocol, instructions, and analysis plan Pilot test survey questionnaire Prepare OMB package Submit OMB package OMB approval Conduct survey Collect, code, enter, quality control, and analyze data Prepare report Disseminate results/reports

#### 17. Display of OMB Approval Date

We are requesting no exemption.

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

There are no exceptions to the certification. These activities comply with the requirements in 5 CFR 1320.9.

## LIST OF ATTACHMENTS – Section A

Note: Attachments are included as separate files as instructed.

- A. Public Health Law Program brochure
- B. Core Legal Competencies for Public Health Professionals
- C. Survey Instrument: MS Word version
- D. Survey Instrument: Web version