

# **Survey of State, Tribal, Local, and Territorial Health Departments about Pandemic Influenza Nonpharmaceutical Interventions**

OSTLTS Generic Information Collection Request  
OMB No. 0920-0879

## **Supporting Statement – Section B**

### **Submitted:**

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## **Section B – Data Collection Procedures**

### **1. Respondent Universe and Sampling Methods**

The respondent population consists of state, tribal, local, and territorial health department officials (STLTs) who have a role in preparing for or responding to an influenza pandemic. Examples of positions these respondents may hold include: state epidemiologist, pandemic influenza coordinator, emergency preparedness coordinator, and public health information officer. During such an influenza pandemic, it is rare that just emergency preparedness or influenza staff is called on to respond to requests. In addition, during an emergency, STLTs may take on new responsibilities and may be deployed into emergency response positions. For this reason, it is important that we not only reach influenza or emergency preparedness officials, but various staff. The population will cover all 50 states and the District of Columbia. The survey begins with screening questions for those who will not have a role during an influenza pandemic.

Eligible representatives will be contacted by organizations with members who are STLTs identified by CDC staff as public health partners. These organizations are Association of State and Territorial Health Officials (ASTHO), Council of State and Territorial Epidemiologists (CSTE), National Association of County and City Health Officials (NACCHO), and the National Public Health Information Coalition (NPHIC). Organizations have identified the appropriate respondents based on the nature of the survey. All respondents in the potential respondent universe will receive the web-based survey (see table B-1). There are further screening questions that will screen out those to which the survey is not applicable. This is the first time this data collection has been performed, so there are no data on response rates from any previous data collection.

**Table B-1:** Potential Respondent Universe

Entity	Potential Respondent	N
Association of State and Territorial Health Officials (ASTHO)	State/Territorial Directors of Public Health Preparedness, Immunization Managers, and/or Pandemic Coordinators	57
Council of State and Territorial Epidemiologists (CSTE)	State Epidemiologists	63
National Association of County and City Health Officials (NACCHO)	Pandemic Influenza or Emergency Preparedness Officials	14
National Public Health Information Coalition (NPHIC)	State and Local Risk Communicators	250
<b>Total Universe of Potential Respondents</b>		<b>384</b>

## 2. Procedures for the Collection of Information

Data will be collected through a one-time Web-based survey sent to the entire potential respondent universe. The survey will be delivered using IBM (formerly SPSS) mrInterview™. Eligible respondents include STLs in all 50 states and territories and their correlates in the District of Columbia (N=384) who are members of one of the following organizations: ASTHO, CSTE, NACCHO, and NPHIC. An advance e-mail notification (see **Attachment E**) will be sent by CDC to 1 contact person at each of the partner organizations informing them of the planned survey and announcing the dates the survey will be administered. A second e-mail will be sent to those contact persons at each of the partner organizations that includes a link to the online survey, survey instructions, and additional information (see **Attachment F**). The survey will remain open for 10 business days. Respondents will have to complete the survey in a single session. Reminders will be e-mailed on day 5 and day 8 of the survey (see **Attachment G**).

The survey will be administered only one time. Data will be collected and stored in survey software maintained by the CDC Informatics Office as respondents submit their completed surveys. Data will be transferred to SPSS and shared with ORISE for conducting basic descriptive analyses, producing data charts and tables for reporting, and drafting a final report.

## 3. Methods to Maximize Response Rates and to Deal with Nonresponse

Advance notification and reminder e-mails will be utilized to maximize response rates (see **Appendices E, F, and G**). The notification and e-mails will be sent by CDC to the contacts at the organizations to forward to the respondents identified by each organization. The initial email with the link will inform the respondents the survey will be open 10 days and they will be informed that the results of the survey will help determine the best methods for

communicating information about pandemic influenza NPIs to them so that they can effectively implement, communicate, and monitor NPI-related information in their communities. They will also be informed that the results will directly inform a pandemic influenza and NPI training. Reminder emails will be sent on day 5 and day 8 of the survey.

**4. Test of Procedures or Methods to be Undertaken**

The web-based version of the survey was pilot tested by 8 CDC public health professionals. 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. In the pilot test, the average time to complete the survey including time for reviewing instructions, gathering needed information, and completing the survey was 22 minutes (min: 16, max: 31). Depending on the responses selected, some questions may be skipped or follow-up questions may be asked of participants. Therefore, it may take slightly more or less time to complete the survey, but not by a great amount. Based on these results, the estimated time for actual respondents to complete the survey is 25 minutes.

**5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data**

The data collection was designed by the CDC Community Interventions for Infection Control Unit (CI-ICU) and Oak Ridge Institute for Science and Education (ORISE) project team. CDC will collect the data. ORISE staff will provide statistical consultation and analyze data.

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## **LIST OF ATTACHMENTS – Section B**

Note: Attachments are included as separate files as instructed.

- E. Advance E-mail Survey Notification E-mail for Partners**
- F. Survey Notification E-mail**
- G. E-mail Reminders**