**Assess Breast and Cervical Cancer Screening Program Activities to**

**Expand Access to Screening**

OSTLTS Generic Information Collection Request

OMB No. 0920-0879

**Supporting Statement – Section B**

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**Section B – Data Collection Procedures**

1. **Respondent Universe and Sampling Methods**

The respondent universe comprises the 67 state, tribal and territorial National Breast and Cervical Cancer Early Detection Program (NBCCEDP) grantees funded under Program Announcement CDC-RFA-DP12-1205. Grantees provide screening services for breast and cervical cancer to low-income, uninsured, and underinsured women who otherwise would not have access to screening. The data collection efforts described in this proposal concern the entire universe of potential respondents. As collecting data from the entire population of respondents is feasible, a sampling strategy will not be employed.

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

|  |  |  |
| --- | --- | --- |
| **State/Tribe/Territory Health Depts.** | **Potential Respondent** | **N** |
| Breast and Cervical Cancer Program Directors  |  Program Directors/Program Coordinators | 67 |
| **Total Universe of Potential Respondents** | **67** |

1. **Procedures for the Collection of Information**

Data will be collected through an online data collection instrument distributed to all individuals within the respondent universe. Eligible respondents include the NBCCEDP program director, program coordinator, or other designated official of the program performing day-to-day managerial activities (N=67). We anticipate only one response per state/tribe/territory/jurisdiction. An introductory email notification (**see Attachment G – Introductory Email**) will be sent to all NBCCEDP program directors informing them of the planned data collection, announcing the dates the data collection will remain open, and providing relevant links to the instrument. Grantees will be encouraged to have the person most familiar with the day-to-day operations of the program complete the data collection instrument. We will not collect personal information on the respondent. We only collect the name of the state/tribe/territory in which the responder is employed. Respondents will have a period of 21 days (15 business days) to complete the instrument. The time burden is estimated to be approximately 28 minutes. A reminder email that notes the deadline for responding will be sent to program directors in non-responder states 10 days after the data collection begins (**see Attachment H –Reminder Email**). After data collection, analysis, and report writing is completed, a follow-up email (**see Attachment I - Follow-up Email**) will be sent to the program directors thanking them for their response. Results of the data collection, in the form of grantee-specific and summary reports, will be attached.

The on-line data collection will be administered one time and the responses will be used to answer the following implementation questions regarding the program activities:

1. What activities are being implemented across NBCCEDP state/tribe/territory grantees?
2. Are these activities being implemented in ways that are likely to reach women beyond program-eligible women in order to maximize the program’s impact?
3. What implementation models have the potential to increase program impact?
4. What are current technical assistance and training needs of NBCCEDP grantees?
5. **Methods to Maximize Response Rates , Deal with Nonresponse**

Advance notification (**see Attachment G**) and a reminder via email (**see Attachment H**) will be utilized to maximize response rates. The notifications will be sent to the potential respondents via emails generated by the web-based software. These communications will be signed by the Branch Chief of the Program Services Branch.

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

The instrument was pilot tested by 11 public health professionals in two phases. In the first phase, 8 public health professionals tested a paper-version of the instrument to assess the clarity of the questions and response categories. In a second pilot, the instrument was tested with 3 public health professionals to assess the estimated time required to complete the data collection. The average time required to complete the responses during pilot testing was 28 minutes.

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

The data collection was designed by a project team from CDC’s Division of Cancer Prevention and Control. Consultants from Information Management Services (IMS) will lead the collection and analysis of data. Statistical consultation will be provided by Bill Helsel.

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**LIST OF ATTACHMENTS – Supporting Statement B**

Note: Attachments are included as separate files as instructed.

**Attachment G –Introductory Email**

**Attachment H – Reminder Email**

**Attachment I – Follow-up Email**