**Evaluation of Core Violence and Injury Prevention Program**

**(Core VIPP)**

**OMB# 0920-0916**

**Supporting Statement B**

**March 12, 2014**

**Department of Health and Human Services**

**Centers for Disease Control and Prevention**

**National Center for Injury Prevention and Control**

**Division of Injury Response**

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**B. Collections of Information Employing Statistical Methods**

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

Safe States Alliance and CDC will work together through the cooperative agreement to conduct the annual web-based survey (SOTS) and telephone interviews. All 20 Core-funded state health department’s VIPP management and staff will complete the web surveys. The 20 Core-funded states will participate in telephone interviews with the Safe States Alliance and CDC. It is anticipated that 100% of the Core-funded state health departments will participate in the web-based survey. The Safe States Alliance State of the States survey (SOTS) has been deployed biennially since 2005 with response rates of 96% in 2005, 100% in 2007, and 98% in 2009. It is anticipated that 100% of the Core-funded states will participate in the telephone interview.

**B.2. Procedures for the Collection of Information**

Data collection will use the following techniques: annual, web-based surveys (Attachments C, E, and F); follow-up telephone interviews to all 20 Core VIPP Base IC funded states (Attachment D); two web-based surveys related to the RNL expanded component (Attachments H and I); and interviews with the states receiving supplemental funding for SQI (n=4), RNL (n=5), and MVP (n=4) (Attachment D and G). The primary respondents will be the SHD Injury Program directors and associated staff. Data will be collected by the CDC and the Safe States Alliance (cooperative agreement CDC RFA CE11-1106 award date: September 30, 2011). All data will be used to determine the amount of progress a state has made towards meeting its injury and violence prevention (IVP) objectives. Overall program effectiveness will be determined by the ability of states to meet and/or exceed their objectives. Data will also be used to indicate areas for programmatic improvement. Data will be kept through the end of the Core VIPP funding period (July 31, 2016) plus two additional years for analysis purposes. Thus, all data will be discarded in July, 2019. Data will be initially housed with the Safe States Alliance and shared with the CDC; however, at the end of the cooperative agreement all data will be transferred to CDC by September 30, 2016.

**B.3. Methods to Maximize Response Rates and Deal with Nonresponse**

Safe States Alliance will send, via email, the invitation to complete the web survey to the state health departments. Safe States Alliance will send a follow-up email to respondents encouraging participation in the survey two weeks after the invitation is sent. Safe States Alliance will also use follow-up telephone calls to encourage participation for respondents who do not submit the web survey. CDC staff will also encourage survey participation during their regular contact with project areas.

Safe States Alliance will send, via email, the invitation to participate in the telephone interviews to the Core funded states. The interviews will be scheduled with the states using a web-based scheduling assistant (e.g., Doodle). Safe States Alliance will send a confirmation email and subsequent reminder email to the Core funded states. Safe States will also provide the interview schedule to CDC and CDC will encourage interview participation during their regular contact with project areas.

**B.4. Tests of Procedures or Methods to be Undertaken**

The SOTS is an existing web-based survey that has been pilot tested by Safe States Alliance (The STIPDA 2007 State of the States Report. Atlanta (GA): State and Territorial Injury Prevention Directors Association; 2008).

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

*Data collection design*

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*Data collection*

* Safe States Alliance: Amber Williams, Jamila Porter, Shenee Bryan

*Data analysis*

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