

# **Public Health Improvement Trainings (PHIT) Assessment**

OSTLTS Generic Information Collection Request  
OMB No. 0920-0879

## **Supporting Statement – Section B**

Submitted: October 22, 2014

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

Amanda Raudsep  
Public Health Advisor  
Health Department & Systems Development Branch  
Division of Public Health Performance Improvement  
Office of State, Tribal, Local and Territorial Support  
Centers for Disease Control and Prevention  
1825 Century Center  
Tel: 404.498.0263  
Email: [araudsep@cdc.gov](mailto:araudsep@cdc.gov)

## Section B – Data Collection Procedures

### 1. Respondent Universe and Sampling Methods

Data will be collected from 165 staff within state (51), local (95), tribal (14), and territorial (5) health departments that are acting in their official capacities working on performance improvement within their organization that attended the Public Health Improvement Training (PHIT) in Atlanta on April 24-25<sup>th</sup>, 2014.

This respondent universe depends on the work functions rather than specific job title to broadly encompass all personnel in health departments engaged in these efforts. The functions include:

- Coordinating efforts to prepare and apply for national voluntary accreditation
- Leading state or community health assessment and improvement planning processes
- Developing an agency strategic plan
- Implementing agency-wide performance management systems
- Engaging in QI to gain process efficiencies or improve health outcomes
- Selecting and implementing evidence-based public health strategies to address health priorities outlined in a state or community health improvement plan

Common titles of respondents include, but are not limited to: accreditation coordinator, performance improvement manager, program manager, program coordinator, health planner, Health Assessment and Improvement Coordinator, quality improvement coordinator/manager.

Assessing PHIT 2014 participants aims to capture information in two ways:

- a. assesses gains in knowledge, skills and actions 6-8 months post-PHIT
- b. informs a participant driven agenda for PHIT in 2015

Through online data collection tool software (Qualtrics), we seek to invite the 165 participants to participate in the assessment by email, providing them at least two weeks to complete. The data collection tool was developed by NNPHI in partnership with CDC.

### 2. Procedures for the Collection of Information

An email invitation to participate in the online assessment will be emailed to the 165 contacts described above. (**see I\_Notification Email**) Email recipients will be invited to complete the assessment by clicking on a provided link that will open the assessment in a web browser in an easy to use form. Information respondents submit loads directly into a database that can be exported into MS Excel or an automatic report in MS Word. At the end of the assessment, there is an optional question where respondents can provide their name and contact information if they would be willing to share more input later on. If respondents do provide their identifying information, NNPHI lists it in aggregate form in the report shared only with CDC.

The data collection tool will be open for 10 business days to allow ample time for respondents to complete the assessment. A reminder email (**see J\_ Reminder Email**) will be sent out on Day 7 for non-respondents.

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

We will notify respondents through email and send a reminder email (**see J\_Reminder Email**) as noted above. If the response rate is less than 25% we will extend the deadline to participate in the assessment to three additional days.

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

The data collection instrument was pilot tested by five 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 data collection instrument.

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

Amanda Raudsep  
Public Health Advisor  
Health Department & Systems Development Branch  
Division of Public Health Performance Improvement  
Office of State, Tribal, Local and Territorial Support  
Centers for Disease Control and Prevention  
1825 Century Center  
Tel: 404.498.0263  
Email: [araudsep@cdc.gov](mailto:araudsep@cdc.gov)

Liljana Johnson, MPH  
Program Manager  
National Network of Public Health Institutes  
1515 Poydras St., Suite 1490  
New Orleans, LA 70112  
Direct: 504.301.9845  
Fax: 504.301.9820  
Email: [ljohnson@nnphi.org](mailto:ljohnson@nnphi.org)

Breonne DeDecker  
Program Associate  
National Network of Public Health Institutes  
1515 Poydras St., Suite 1490  
New Orleans, LA 70112  
504.301.9800

Fax: 504.301.9820

Email: [bdedecker@nnphi.org](mailto:bdedecker@nnphi.org)

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

Note: Attachments are included as separate files as instructed.

I\_ Notification Email

J\_Reminder Email