Date: June 18, 2014

TO: Office of Management and Budget (OMB)

Through: Darius Taylor, Reports Clearance Officer, HHS

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Subject: Response to OMB Review Requests for Changes to SSA for

TIME-SENSITIVE Review of Reinstatement with Change for “Next Series of Tobacco Use Supplements to the Current Population Survey (TUS-CPS),”

OMB No. 0925-0368, Expiration Date: 3/31/2013

This memo consists of a summary of the changes we have made to the SSA requested by OMB and discussed during our June 12th, 2014 telephone conference call. Further, we summarize the subsequent discussions between NCI/FDA and the Office on Smoking and Health (OSH)/Centers for Disease Control and Prevention (CDC) staff, concerning future partnerships in developing post-2014-15 TUS-CPS series, other future national surveys, and coordination with HHS/ASPE.

* On last page of SSA: We provide a revised time-line for 2014-15 TUS-CPS information collection and publication, to reflect shorter turnaround time and release to the public of all 3 data collection files, such that this is to be accomplished within 24 months of OMB approval (about 12 months after the last wave of data collection). Further, within the text of Section A2d, 3rd paragraph, we specify details concerning time-frame for public release, and dates at which data are expected to be available to share with other HHS agencies prior to public release.
* Based on conversation with OSH/CDC staff, Section A4b now contains a paragraph describing how NCI, FDA, and CDC will partner to develop future (post 2014-15) TUS-CPS series. NCI and FDA will also coordinate closely with CDC around future periodic NATS and other CDC and HHS surveys.
* We accepted most of OMB’s editorial changes, and modified one to enhance accuracy (Section A1b, paragraph on “Linkages to health and other data”).
* In the spirit of future partnership with CDC, we collaborated with OSH staff to modify the SSA to reflect both CDC’s past use of TUS-CPS data and expected use of the proposed and future data collection series. We also now include mention of broader stakeholder use of the TUS-CPS series.
* Further, in order to facilitate the development of a future collaborative relationship between, NCI, CDC, FDA, and HHS/ASPE, Gordon Willis (NCI/DCCPS), Sam Posner (Associate Director for Science, CDC/NCCDPHP), Ben Apelberg (FDA/CTP), and Susan Queen (Office of the Assistant Secretary for Planning and Evaluation) have initiated a conversation to plan further meetings, and a system for further coordination of efforts between Agencies.

Finally, we further summarize here our overall response to CDC’s comments on the 2014-15

TUS-CPS questionnaire that they have now shared with us:

* A few comments advocate coverage of the topic of cessation methods/advice. We agree that this topic is important, but will be more appropriate within the next TUS-CPS series, as we alternate a policy/attitude–focused series (e.g., 2014-15) with one emphasizing cessation methods/aids, due to the time constraints of TUS. Further, based on our discussions with NCHS, OSH, and other NCI staff, we believe that information on cessation will be available from fielding of the planned 2015 NHIS Cancer Control Topical Supplement.
* OSH also provided comment pertaining to decisions we made to emphasize attitudes toward smoke-free air laws, rather than the second-hand smoke exposure itself. Given space restrictions, we chose to leverage the TUS-CPS’ strength in assessing long-term social norms that stakeholders (e.g., Grantees) other than NCI, CDC, or FDA rely on, and have proved to be useful measures related to tobacco policy. Further, we chose to complement, rather than duplicate, the information already collected in the PATH and 2013-14 NATS, thus extending depth of information available to all stakeholders.
* Three OSH comments related to e-cigarettes. One of these described a question wording that was in fact an error, which we also recently discovered through review of the CAPI instrument during the past month. We will therefore correct this error in the final instrument version. A second comment mentioned adding new questions to the TUS, and we will explore this further within the Department in consultation with Census for future waves of the survey. Finally, a third comment from OSH, calling for the addition of information on e-cigarette use, also seemed to us a valid request, but is unfortunately beyond the limited scope and burden of the TUS-CPS.

Please let us know if you have any further questions or requests pertinent to us receiving clearance in order to commence the July fielding of the 2014-2015 TUS-CPS. Thanks again for your accommodating our request for expedited review due to the inflexible schedule of CPS fielding.