Supporting Statement B

Ready CDC

New

Centers for Disease Control and Prevention
Office of Public Health Preparedness and Response

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List of Attachments

B. Collections of Information Employing Statistical Methods

The Ready CDC Program will focus on the aggregate outcomes of the Ready CDC Program participants and not individuals. As described in Part A of the Supporting Statement, CDC will employ three related data collection instruments to gather information to inform the Ready CDC Program. These are: (1) Pre-Workshop Survey (Attachment C and M), (2) Workshop Evaluation (Attachment D and N), and (3) Follow-Up Survey (Attachment E and O).

1. Respondent Universe and Sampling Methods

The potential respondent universe for Ready CDC includes staff (Federal employees or contractors) from all of the CDC Centers, Institutes and Offices in the Atlanta Metropolitan Area and at major CDC campuses across the country.

All samples will be samples of convenience. It is expected that Ready CDC workshops will be conducted monthly. Ready CDC Workshops will be scheduled and participants will be determined in advance by responses from Email solicitations sent to the organization targeted for that date. All participants that sign the informed consent to participate (Attachments F, L) will receive the pre-workshop survey (Attachment I,M) and if a participant attends the in-person workshop, he/she will receive the workshop evaluation (Attachment D,N) and the follow-up survey (Attachment E, O). Expected response rates by instrument are outlined in part 3.

2. Procedures for the Collection of Information

As previously described, the surveys will be primarily administered on-line, but a paper copy will also be available to potential respondents upon request. This flexibility should increase response rates and minimize perceived burden. The web administration option also should contribute to maximizing the timeliness, efficiency, and response rate of data collection. All data collection will be completed by CDC employees. Potential respondents for the Ready CDC survey instruments include the universe of CDC employees.

3. Methods to Maximize Response Rates and Deal with Nonresponse

Following OMB approval, Ready CDC Workshops will be scheduled and participants determined in advance by responses from Email solicitations (Attachment H) sent to the organization targeted for that date. All Ready CDC Workshop participants will receive survey materials displaying the OMB approval number and expiration date (Attachments M,N, and O) by using a link provided in the survey invitation, sent electronically to all participants (Attachments I, J, and K). Thus, given that we are collecting information from volunteer attendees, it is reasonable to expect that 100% of the Ready CDC s workshop attendees will participate in the Pre-Workshop Survey. Experience with pilot

cohorts shows that the Workshop Evaluation will be completed approximately 70% of the time, and the Follow-up Survey is completed approximately 50% of the time.

With respect to the Ready CDC survey instruments, the introduction to the survey will contain the purpose of the information collection and directions for accessing the web-based survey. This introduction will emphasize the importance of input from Ready CDC workshop participants. Each correspondence with the respondents will be personalized to improve response and ensure that the correct respondent is the recipient of the survey. The web-based format is also expected to increase the response rate because it will ease administration of the survey.

4. Test of Procedures or Methods to be Undertaken

CDC is presently conducting a pilot program that will include at least three cohorts of participants, chosen from federal CDC employees that are designated as public health responders. This allowed CDC to obtain an estimate of the burden associated with the information collection instruments.

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

The plans for statistical analyses for this study were developed by CDC staff in the OPHPR Learning Office (LO). Data collection will be supported by CDC OPHPR LO staff and by its supporting contractors. The following individuals support this effort.

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