

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0920-1026)

TITLE OF INFORMATION COLLECTION:

Key Informant Interviews for Emergency Risk Communication Improvement during the Ebola Response

PURPOSE:

The Office of The Associate Director for Communication (OADC) and the National Center for Immunization and Respiratory Diseases (NCIRD) of the Centers for Disease Control and Prevention (CDC) is seeking feedback on the agency’s process and performance with respect to risk communication during public health emergencies. The primary objective of the data collection is to inform improvements in emergency risk communication plans, processes, structures, and outcomes.

When a public health emergency or disaster occurs, CDC must respond in a timely and effective manner to inform the public, provide actionable public health messages, and support national and international public health emergency response partners. A critical component of CDC's work during a public health emergency is effective crisis and emergency risk communication. In 2003, CDC established a dedicated, state-of-the-art Emergency Operations Center (EOC) to serve as CDC's command center for monitoring and coordinating CDC's emergency response activities to public health threats in the United States and abroad. Since being established, CDC’s EOC has responded to more than 50 national and international emergencies with public health implications, including foodborne disease outbreaks, Hurricanes Katrina and Sandy, the H1N1 influenza outbreak, the Haiti cholera outbreak, the global effort to eradicate polio, the multi-state outbreak of fungal meningitis, Middle East Respiratory Syndrome coronavirus, and most recently Ebola.

During public health emergencies, the EOC stands up as the Joint Information Center (JIC). The JIC is staffed by trained emergency risk communicators as well as communication personnel from across CDC. The JIC coordinates risk communication strategy to guide the development of messages that are timely, accurate, consistent and actionable; grounded in sound public health and risk-communication science; and written appropriately for the target audience. Ensuring the organization and processes of the CDC JIC are functioning at optimal capacity is critical to not only the effectiveness of CDC’s emergency response capabilities, but also for sustaining an exemplary model for other public health agencies to follow.

In 2013, the Office of Public Health Preparedness and Response (OPHPR) conducted an assessment of the mission and functions of the OPHPR Communications Office and the Division of Emergency Operations (DEO) Emergency Risk Communication Branch (ERCB), which houses the core staff for the JIC. As a result, in April of 2014, the JIC underwent a reorganization of staff and resources.

The Ebola response has been the largest response since this reorganization. This data collection will assess if the realignment effectively supports CDC’s emergency response capacity and ensures that CDC is capable of fulfilling its critical mission in emergency risk communication.

In particular, this data collection will assess the extent to which the JIC crisis and emergency risk communication activities provide guidance and materials for its partners that are timely,

accurate, consistent and actionable. A summary of findings and recommendations will be shared with internal stakeholders, and selected recommendations for changes in EOC/JIC operations may be shared with external partner organizations. Any reference to this data will be reinforced by the understanding that the information gathered yields qualitative information and that the collections are not designed or expected to yield statistically reliable results. Additionally, they will not be used as though the results are generalizable to the population of study.

DESCRIPTION OF RESPONDENTS:

Respondents are individuals working in organizations that have partnered with CDC in Ebola emergency risk communication efforts. Based on their experiences working with CDC staff, these individuals are in a position to provide informative feedback regarding the value and utility of the communication support they have received during the Ebola response. Respondents include are state/local health departments and hospital staff in states affected by the presence of Ebola cases in the United States. The identified states include and will be limited to:

- Georgia
- Maine
- New Jersey
- New York
- Ohio
- Texas

Additionally, individuals with communication responsibilities working in three West African countries affected by the Ebola outbreak are included in the respondent universe. Identified countries include and will be limited to:

- Guinea
- Liberia
- Sierra Leone

Respondent Category	Participant Job Function/capacity
Affected U.S. States	
State/local public health department	Health Commissioners
State/local public health department	Public Information Officers
Hospital staff	Hospital Administrators
West African Countries	
Ministries of Health	Public Information Officers
NGOs (e.g., WHO, UNICEF)	Primary CDC point of contact

TYPE OF COLLECTION: (Check one)

- Customer Comment Card/Complaint Form
- Usability Testing (e.g., Website or Software)
- Focus Group
- Customer Satisfaction Survey
- Small Discussion Group
- Other: key informant interviews

CERTIFICATION:

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: _____Kris Sheedy; kjs8@cdc.gov_____

To assist review, please provide answers to the following question:

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? Yes No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? Yes No
3. If Applicable, has a System or Records Notice been published? Yes No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? Yes No

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
State, local, or tribal governments	22	45 / 60	17
Private sector	14	45 / 60	11
Totals	36		28

FEDERAL COST: The estimated annual cost to the Federal government is:

The anticipated cost to the Federal Government is approximately \$4500. These costs are comprised of:

- .02 FTE for survey management = \$2500
- Contract staff labor = \$2000

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe? [] Yes [X] No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

Individual key informants will be identified by members of the CDC Emergency and Risk Communication Working Group. This working group was formed in March, 2014 and is chaired by the Office of the Associate Director for Communication (OADC) Director. The group includes communication leads from NCEH, NCEZID, NCIRD, NCIPC, CGH, one division-level ADCS, OADC's Divisions of Public Affairs and Communication Services, as well as representation from OPHPR ADC office and ERCB. The group works to determine the optimal process for the assessment of the agency's functioning ability before/during/after emergency risk communication responses to ensure standards are maintained at or above current quality levels.

The respondents are individuals working in organizations that have partnered with CDC in Ebola emergency risk communication efforts and are in a position to provide informative feedback regarding the value and utility of the communication support they have received during the Ebola response. Respondents will include staff from state/local health departments including but not limited to health commissioners and public information officers as well as hospital staff such as hospital administrators from Georgia, Maine, New Jersey, New York, Ohio and Texas. Additionally, individuals with communication responsibilities working in three West African countries, Guinea, Liberia and Sierra Leone, affected by the Ebola outbreak are included in the respondent universe. Those identified from West Africa will include Public Information Officers from Ministries of Health and CDC's primary points of contact from non-governmental organizations such as World Health Organization and UNICEF.

If additional expertise is needed, the CDC Emergency and Risk Communication Working Group will identify additional persons to participate within the states/countries listed.

Key informants will be contacted by project staff to request their participation in the following three steps:

- 1) Potential participants will receive an email invitation (see attachment B)
- 2) Individuals that choose to participate will indicate their availability for interviews via a doodle poll (see Attachment C)
- 3) Participants will receive an email confirmation with their chosen date and time available (see attachment D) as well as an information sheet describing the interview (see Attachment E)

Administration of the Instrument

1. How will you collect the information? (Check all that apply)
 - Web-based or other forms of Social Media
 - Telephone
 - In-person
 - Mail
 - Other, Explain

2. Will interviewers or facilitators be used? Yes No

Attachments

Attachment A: Emergency Risk Communication Evaluation Interview Guide_ External Partners

Attachment B: Participation Email Invitation

Attachment C: Interview Doodle Poll

Attachment D: Confirmation to External Partners

Attachment E: External Partner Interview Participant Information Sheet