

**MONITORING AND REPORTING SYSTEM FOR
CHRONIC DISEASE PREVENTION AND CONTROL PROGRAMS**

**REVISION
OMB APPROVAL NUMBER 0920-0870**

PART B: STATISTICAL METHODS

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List of Attachments

1. Authorizing Legislation
 - a. Public Health Service Act
 - b. Comprehensive Smoking Education Act of 1984
 - c. Comprehensive Smokeless Tobacco Health Education Act of 1986
2. Federal Register Notice
3. List of Awardees
4. Chronic Disease Management Information System Screenshots

B. Statistical Methods

1. Respondent Universe and Sampling Methods

Respondents are state-based tobacco control programs awarded funding through *CDC-RFA-DP14-1415 (formerly DP09-901, Collaborative Chronic Disease, Health Promotion and Surveillance Program Announcement: Healthy Communities, Tobacco Control, Diabetes Prevention and Control, and Behavioral Risk Factor Surveillance System (BRFSS))*. Awardees are health departments in all 50 states and the District of Columbia, (see **Attachment 3**). Each awardee will submit a final report on its progress and activities.

Statistical sampling methods are not applicable to this data collection and cannot be used to accomplish the functions of the proposed system.

2. Procedures for the Collection of Information

Information will be collected electronically once (progress report) during the remainder of the cooperative agreement which ends March 28, 2015. Each awardee has access to its own information in the Web-based Management Information System (MIS) and decides the level of access for other users (e.g., local partners). Users log into the system at their worksite computer and provide progress reporting information through prompted data entry points.

Instructions to users for completing information collection are built into each the MIS Web page. Awardees will be informed of the reporting deadline via a notification letter (Notice of Award).

The MIS produces progress reports that can be downloaded which meet the reporting requirements at www.Grants.gov. However, awardees will continue to submit financial status reports only through www.Grants.gov. The MIS enables awardees to complete a number of cooperative agreement tasks electronically, including reviewing the completeness of data necessary to submit required reports, entering basic summary information for required reports, and finalizing and saving required reports for upload to www.Grants.gov. The MIS supports the automatic generation of progress reports. Awardees are able to transfer data from one year to another to minimize data re-entry. CDC staff have the capacity to query the database to extract awardee-related information. A copy of the data collection instrument may be found in **Attachment 4**.

3. Methods to Maximize Response Rates and Deal with Nonresponse

Each awardee will be required to file one progress report covering March 29, 2014 – March 29, 2015, the remainder of the cooperative agreement. CDC's Procurement and Grants Office will notify the awardee in writing if required reporting has not been completed in accordance with the Funding Opportunity Announcement.

4. Test of Procedures or Methods to be Undertaken

The design of the MIS was informed by experience with two Web-based management information systems developed for tobacco control programs (OMB No. 0920-0601, exp. 5/31/2010) and diabetes prevention and control programs (OMB No. 0920-0479, exp. 4/31/2013). These previous systems were phased out and replaced by the MIS. Every component of the MIS has undergone rigorous application testing, including usability testing of system design, and accuracy and comprehension testing of proposed data elements. During the past three cooperative agreement reporting cycles, grantees have utilized the MIS to report on progress, challenges, and accomplishment of programmatic activities.

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

CDC established and convened a workgroup to develop the MIS, including content, functionality, and usability of the database. The workgroup comprised of representatives from CDC's National Comprehensive Cancer Control Program and epidemiologists.

Members of the MIS workgroup and lead persons responsible for design of the data collection system include:

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