

Change Request
September 10, 2014

Information Collection Request: Process Evaluation of “Teenage Pregnancy Prevention: Integrating Services, Programs, and Strategies through Community-Wide Initiatives”
(OMB no. 0920-0952, exp. date 12/31/2015)

Summary

CDC is currently approved to collect information from 9 state and community grantees funded under the cooperative agreement “*Teenage Pregnancy Prevention: Integrating Services, Programs, and Strategies through Community-Wide Initiatives.*” Paper-based collection instruments that are administered annually to the grantee organization include the “State and Community Awardee Performance Measure Reporting Tool” (Attachment 6). To improve usability, data quality, and respondent satisfaction in completing the assessment, CDC proposes to delete some fields that duplicate information in other assessments and to allow awardees to enter supplemental information in place of the deleted fields.

There are no changes to the number of respondents. The estimated burden per response will be reduced from 4.0 hours to 3 hours and 15 minutes. CDC plans to begin administering the revised instruments in 2014. OMB approval is requested, effective immediately.

Information Collection Instruments Affected by Changes

State and Community Awardee Performance Measure Reporting Tool
The revised paper version is included as Attachment 6 (rev2)

Background and Justification

CDC is approved to collect information needed for a process and intermediate outcome evaluation of awardees funded under the Teen Pregnancy Prevention (TPP) Initiative. An integral part of the process evaluation requires documenting implementation activities. In order to conduct this process evaluation, annual assessments of performance are conducted among the nine State and Community Awardees and their local partners. The collection of performance measures is critical to understanding the implementation practices associated with evidence-based programs and contraceptive access for each awardee community. Information is collected via questionnaires and a web-based data entry system.

Performance measures are collected annually via a paper questionnaire (“State and Community Awardee Performance Measure Reporting Tool,” see Attachment 6). CDC requests OMB approval to modify the questionnaire by deleting 4 tables that duplicate information collected in the “Community and Clinical Partner Clinical Partner Needs Assessment” (Attachment 4 electronic) and to include an additional question that asks respondents to confirm that the “Community and Clinical Partner Clinical Partner Needs Assessment” is current and updated.

One additional change will be made that will make it easier to reconcile entries in the Characteristics of Program Youth table. The previous version of the State and Community Awardee Performance Measure Reporting Tool allowed awardees to report Youth who did not report Gender but did not allow awardees to specify # served or # retained. In the revised version of this form, we have added the

subcategories for # served and # retained to the entry for Youth who did not report Gender. This will allow awardees to report the information for these youth consistently with the fields reported by gender. Awardees were already collecting the information but were not able to report it in the current form. The addition of the fields improves data quality as awardees are able to apply the same tabulation standards to all youth. This makes it easier to reconcile all numbers in the demographics table with the total numbers of youth served for awardees.

The proposed changes to the State and Community Awardee Performance Measure Reporting Tool reduce the estimated burden per response from 4.0 hours to 3 hours and 15 minutes. The addition of the specified fields for reporting youth # served and # retained does not change the burden. The total reduction in burden for all respondents is 37 hours. See itemized changes below.

Itemized Changes in Survey Content

The changes to the performance measure reporting tool include the addition of fields as indicated below.

Change 1. Added field to Table I.c. pages 3-4 for youth who did not report gender that specifies # served and # retained. The current field allows awardees to report youth who did not report gender and does not specify # served or # retained.

Characteristics of Program Youth ¹	Males		Females		Youth who did not report Gender	
	# served	# retained	# served	# retained	# served	# retained
Age (one response per participant)						
10 years or younger						
11-12 years						
13-14 years						
15-16 years						
17-18 years						
19 years or older						
Grade (one response per participant)						
6 th grade or lower						
7-8 th grade						
9-10 th grade						
11-12 th grade						
GED program						
Technical/vocational training						
College (any year)						
Not currently in school						
Ethnicity (one response per participant)						
Hispanic or Latino						
Not Hispanic or Latino						
Unknown/unreported						
Race (one response per participant)						
American Indian or Alaska Native						
Asian						
Black or African American						
Native Hawaiian or Other Pacific Islander						
White						
Other						
More than one race						
Unknown/unreported						
Primary language spoken at home (one response per participant)						
English						

¹ Characteristics may be obtained from attendance records or pre-/post-tests

Characteristics of Program Youth	Males		Females		Youth who did not report Gender	
	# served	# retained	# served	# retained	# served	# retained
Spanish						
Chinese						
Other						
Special populations (one response per participant)						
None						
Pregnant or parenting teens						
Youth in foster care						
Homeless youth						
Youth in the juvenile justice system						
Other (describe _____)						
Total						

Change 2. The following question is added to section II to address information that is now deleted in Tables 1 to 4 in section II.

Please confirm that the information submitted in the most recently reported Clinical Partner Needs Assessment is complete with prior CDC approval for any incomplete or missing information.

Measure	YES, Complete and current	NO, Will submit a revised CPNA
Health Insurance Billing Practices and Revenue		
Number of staff trained on adolescent development		
Clinic use of performance measures		
Use of Health Care Services by Adolescents		

Change 3. Section II f. and all associated tables are deleted.

Use of health care services by adolescents

The following data may be collected via billing records, EMRs, and other methods. It is recommended that you collect these data for each month.

Data reporting period _____ indicate the date range for the data in all tables below.

FEMALE Adolescent Clients (Unduplicated) and Visits by Race/Ethnicity, Age Group, and Reporting Period

FEMALES	# Adolescent Clients (Unduplicated)	# Adolescent Visits ²	# Adolescent Visits in which Contraceptive, Reproductive, or Sexual Health Services are Provided ³
Hispanic/Latino(a) - All Races⁴			
12-14 years			
15-17 years			
18-19 years			
Total			
Black or African American (Non-Hispanic)			
12-14 years			
15-17 years			
18-19 years			
Total			
White (Non-Hispanic)			
12-14 years			
15-17 years			
18-19 years			
Total			
Other (Non-Hispanic)			
12-14 years			
15-17 years			
18-19 years			
Total			
Unknown Race and Ethnicity			
12-14 years			
15-17 years			
18-19 years			
Total			
All Races and Ethnicities			
12-14 years			
15-17 years			
18-19 years			
Total			

Table 2. MALE Adolescent Clients (Unduplicated) and Visits by Race/Ethnicity, Age Group, for each Reporting Period⁵

² Any visit where an adolescent is seen by a healthcare team member – not only visits designated as reproductive/sexual health visits.

³ Includes any health center visit where contraceptive, reproductive, or sexual health services are provided to the adolescent patient, regardless of the primary reason for the visit.

⁴ Count data for all clients that indicated Hispanic/Latino(a) ethnicity, regardless of race

⁵ Data should be pulled for unduplicated adolescents by hormonal contraception or IUD adopted or continued, at the time of exit from their last encounter (visit) to the health center in the given reporting period. If the client reports using more than one method of birth control, report the most effective one as the primary method (e.g., if a client is given the patch and emergency contraception as a backup method, only include information on the patch).

MALES	# Adolescent Clients (Unduplicated)	# Adolescent Visits ⁶	# Adolescent Visits in which Contraceptive, Reproductive or Sexual Health Services are Provided ⁷
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⁶ Any visit during which an adolescent is seen by a healthcare team member - not only visits designated as reproductive/sexual health visits.

⁷ Includes any health center visit at which contraceptive, reproductive, or sexual health services are provided to the adolescent patient, regardless of the primary reason for the visit.

Hispanic/Latino(a) - All Races⁸			
12-14 years			
15-17 years			
18-19 years			
Total			
Black or African American (Non-Hispanic)			
12-14 years			
15-17 years			
18-19 years			
Total			
White (Non-Hispanic)			
12-14 years			
15-17 years			
18-19 years			
Total			
Other (Non-Hispanic)			
12-14 years			
15-17 years			
18-19 years			
Total			
Unknown Race and Ethnicity			
12-14 years			
15-17 years			
18-19 years			
Total			
All Races and Ethnicities			
12-14 years			
15-17 years			
18-19 years			
Total			

⁸ Count data for all clients that indicated Hispanic/Latino(a) ethnicity, regardless of race

Table 3. FEMALE Adolescent Clients (Unduplicated) and Number Provided (i.e., dispensed on-site or by prescription) Contraception by Age Group, for each Reporting Period⁹

FEMALES	# Adolescent Clients (Unduplicated)
All Unduplicated Clients (Total)	
12-14 years	
15-17 years	
18-19 years	
Total	
Provided Hormonal Contraception¹⁰ (not including IUDs or Implants)	
12-14 years	
15-17 years	
18-19 years	
Total	
Provided the Pill	
12-14 years	
15-17 years	
18-19 years	
Total	
Provided Injectable Contraception (e.g., Depo Provera)	
12-14 years	
15-17 years	
18-19 years	
Total	
Provided IUD	
12-14 years	
15-17 years	
18-19 years	
Total	
Provided Contraceptive Implants (e.g., Implanon)	
12-14 years	
15-17 years	
18-19 years	
Total	
Provided Emergency Contraception (EC)¹¹	
12-14 years	
15-17 years	
18-19 years	
Total	

⁹ Data should be pulled for unduplicated adolescents by hormonal contraception or IUD adopted or continued, at the time of exit from their last encounter (visit) to the health center in the given reporting period. If the client reports using more than one method of birth control, report the most effective one as the primary method (e.g., if a client is given the patch and emergency contraception as a backup method, only include information on the patch).

¹⁰ Hormonal contraception here includes the pill, patch, ring, and injectable contraception

¹¹ Including the provision of EC as a backup method along with another contraceptive method

% Contraceptive Coverage¹²	
12-14 years	
15-17 years	
18-19 years	
Total	
% LARC Coverage¹³	
12-14 years	
15-17 years	
18-19 years	
Total	

¹² Calculated as the proportion of all unduplicated adolescent female clients provided hormonal contraception, contraceptive implants, or IUD.

¹³ Calculated as the proportion of all unduplicated adolescent female clients provided contraceptive implants, or IUD.

Table 4. FEMALE Adolescent Clients (Unduplicated) and Number Provided (i.e., dispensed on-site or by prescription) Contraception by Race/Ethnicity Group, for each Reporting Period¹⁴

FEMALES	# Adolescent Clients (Unduplicated)
All Unduplicated Clients (Total)	
Hispanic/Latina (all races)	
Black or African American (non-Hispanic)	
White (non-Hispanic)	
Other (non-Hispanic)	
Unknown/unreported	
Total	
Provided Hormonal Contraception¹⁵ (not including IUDs or Implants)	
Hispanic/Latina (all races)	
Black or African American (non-Hispanic)	
White (non-Hispanic)	
Other (non-Hispanic)	
Unknown/unreported	
Total	
Provided the Pill	
Hispanic/Latina (all races)	
Black or African American (non-Hispanic)	
White (non-Hispanic)	
Other (non-Hispanic)	
Unknown/unreported	
Total	
Provided Injectable Contraception (e.g., Depo Provera)	
Hispanic/Latina (all races)	
Black or African American (non-Hispanic)	
White (non-Hispanic)	
Other (non-Hispanic)	
Unknown/unreported	
Total	
Provided IUD	
Hispanic/Latina (all races)	
Black or African American (non-Hispanic)	
White (non-Hispanic)	
Other (non-Hispanic)	
Unknown/unreported	
Total	
Provided Contraceptive Implants (e.g., Implanon)	

¹⁴ Data should be pulled for unduplicated adolescents by hormonal contraception or IUD adopted or continued, at the time of exit from their last encounter (visit) to the health center in the given reporting period. If the client reports using more than one method of birth control, report the most effective one as the primary method (e.g., if a client is given the patch and emergency contraception as a backup method, only include information on the patch).

¹⁵ Hormonal contraception here includes the pill, patch, ring, and injectable contraception

Hispanic/Latina (all races)	
Black or African American (non-Hispanic)	
White (non-Hispanic)	
Other (non-Hispanic)	
Unknown/unreported	
Total	
Provided Emergency Contraception (EC)¹⁶	
Hispanic/Latina (all races)	
Black or African American (non-Hispanic)	
White (non-Hispanic)	
Other (non-Hispanic)	
Unknown/unreported	
Total	
% Contraceptive Coverage¹⁷	
Hispanic/Latina (all races)	
Black or African American (non-Hispanic)	
White (non-Hispanic)	
Other (non-Hispanic)	
Unknown/unreported	
Total	
% LARC Coverage¹⁸	
Hispanic/Latina (all races)	
Black or African American (non-Hispanic)	
White (non-Hispanic)	
Other (non-Hispanic)	
Unknown/unreported	
Total	

¹⁶ Including the provision of EC as a backup method along with another contraceptive method

¹⁷ Calculated as the proportion of all unduplicated adolescent female clients provided hormonal contraception, contraceptive implants, or IUD.

¹⁸ Calculated as the proportion of all unduplicated adolescent female clients provided contraceptive implants, or IUD.