

Preexposure Prophylaxis (PrEP): Local Health Department Assessment

OSTLTS Generic Information Collection Request
OMB No. 0920-0879

Supporting Statement – Section B

Submitted:

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Section B – Information Collection Procedures

1. Respondent Universe and Sampling Methods

A total of 500 HIV/STI Program Manager respondents will be invited to participate in this information collection. These respondents were pulled from NACCHO’s 2013 Profile Study survey, which is a nationwide study investigating relevant topics on local public health infrastructure and practice. Two thousand (2,000) out of 2,527 LHDs completed the 2013 NACCHO Profile Study survey. Of these, 1,433 responded yes to providing or contracting out “HIV/AIDS or other STDs screening” or yes to providing or contracting out “HIV/AIDS or other STDs treatment.” For this information collection, a sample of 500 LHDs was drawn from these 1,433 LHDs by random selection within 4 regions and 3 categories of population size, a total of 12 strata.

To arrive at the 500 person sample, the following procedures were used.

The first step was to use the 1,433 local health departments (LHDs) as the total respondent universe and calculate the number of sample LHDs in each region (defined by CDC/DHAP for HIV reporting) based on the HIV surveillance percentages in the 2011 HIV surveillance report (the most recent data available at the time). The second step was to calculate the number of LHDs selected from each population size category within each region using a combination of two approaches: (a) probability proportion to number of LHDs in a population stratum, and (b) equal number of LHDs from each stratum. This method was to ensure that the large LHDs are oversampled. Table 1 shows the number of LHDs selected in each stratum. Excel was used to generate random numbers to randomly get the needed number of LHDs from the 12 strata.

Table 1. Number of LHDs Selected for PrEP Assessment, by Region and Population Size

Region	3-level Population			Total
	<50,000	50,000-499,999	500,000+	
1 - Northeast	33	47	22	102
2 - Midwest	29	22	12	63
3 - South	106	90	50	246
4 - West	33	35	21	89
Total	201	194	105	500

The estimated required overall sample size with an 80% response rate, and a 95% CL and 0.05 margin of error is 380. We selected 500 LHDs as our final sample size because it allows a sufficient number of LHDs in each stratum to permit subgroup analysis with meaningful results.

2. Procedures for the Collection of Information

Data will be collected through a one-time web-based questionnaire provided through the Qualtrics® platform.

Respondents will be recruited through a notification email sent to the 500 LHDs selected by the above sampling method (see **Att. D—Notification Email**). The notification email will explain:

- The purpose of the assessment, and why their participation is important
- Method to safeguard their responses
- That participation is voluntary
- The expected time to complete the assessment
- Contact information for the assessment team

The email will also state instructions for participating and will include a link to the online assessment. Respondents will be asked for their response to the assessment within a 3-week period to allow ample time for respondents to complete it. Respondents may complete the assessment in multiple sessions, if necessary.

Data from the web-based instrument will be downloaded, cleaned, and analyzed in STATA 12.1. Descriptive statistics such as frequency, percentage, and mean/median will be conducted for all responses to the web assessment questions. Cross-tabulations will be done for important subgroups (e.g., by region, types of engagement in PrEP). Multivariable analysis methods (e.g., logistic regression) will be applied to assess correlates of current and planned engagement in PrEP implementation. Study findings will be reported in aggregated form and no individual or LHD identifiers will be included in the reporting of results.

3. Methods to Maximize Response Rates and Deal with Nonresponse

Although participation in the assessment is voluntary, the project lead will make every effort to maximize the rate of response. The assessment tool was designed with particular focus on streamlining questions to allow for skipping questions based on responses to previous questions, thereby minimizing response burden. An e-mail reminder will be sent on the first day of the second week to those who have not yet responded and on the first day of the third week to non-respondents to urge them to complete the assessment (see **Att. E—Reminder Emails**). A final reminder phone call will be sent to non-responders on the last day of the third week (see **Att. F—Reminder Phone Call Script**).

4. Test of Procedures or Methods to be Undertaken

The data collection instrument was pilot tested by 6 LHD HIV/STI program managers. The purpose of the pilot test was to estimate the time it took to complete the assessment and identify any potential challenges to completing the assessment. The very few problems identified with wording or skip patterns were then adjusted.

In the pilot test, the average time to complete the instrument including time for reviewing instructions, gathering needed information and completing the instrument, was approximately 22 minutes. Based on these results, the estimated time range for actual respondents to complete the instrument is 14 to 28 minutes. For the purposes of estimating burden hours, the upper limit of this range (i.e., 30 minutes) is used.

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

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LIST OF ATTACHMENTS – Section B

Att. D: Notification Email
Att. E: Reminder Emails
Att. F: Reminder Call Script