Syndromic Surveillance: Success Stories from the Field Guide from Not CDC Funded State & Local Health Departments

OSTLTS Generic Information Collection Request
OMB No. 0920-0879

Supporting Statement – Section B

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Section B – Information Collection Procedures

1. Respondent Universe and Sampling Methods

Data will be collected from 34 state and local health departments that have syndromic surveillance (SyS) programs independent of CDC's NSSP funding, but still submit data to NSSP and have access to the NSSP's tools and services. **(Please see Attachment A).** No sampling strategy will be used. Each respondent will submit one response annually. A separate but related information collection request will be submitted for 31 state and local health departments that receive CDC funding through the National Syndromic Surveillance Program (NSSP).

2. Procedures for the Collection of Information

DHIS will post an electronic downloadable version of the *Syndromic Surveillance: Success Stories from the Field* form on its website[1] **(Please see Attachments B and C)**. State and local health department respondents will have access to this form allowing them the opportunity to share their successes using syndromic surveillance data to identify infectious and non-infectious diseases, public health issues and priorities. This form will provide respondents a standardized structure for writing their success stories to be shared amongst public health partners and with the general public. In addition this tool will be used by NSSP cooperative agreement awardees who are required to elaborate on their NSSP successes in their annual reports and annual continuation funding applications.

NSSP state and local health department staff will be introduced to the *Syndromic Surveillance: Success Stories from the Field* form during SyS webinars; NSSP awardee monthly and quarterly meetings and site visits; and the annual NSSP Grantee Meeting. All messaging to respondents will be consistent and standardized across all meetings **(Please see Attachment D).** Each venue will provide direction on how to complete the form, value to the respondent and public health community, expected time to complete the form, and the NSSP email address. The form will be posted online allowing timely and ease of access to the form. Completion and submission of this form is voluntary for non-funded NSSP users, as explained in **Attachment D**. For NSSP awardees, this form will be incorporated into the NSSP FOA guidance and introduced and distributed during the SyS webinars, NSSP awardee monthly and quarterly meetings and site visits, and the annual NSSP Grantee Meeting. All respondents (funded and non-funded) will be able to download, complete and then submit the form via email to the NSSP mailbox. In addition, respondents can email the NSSP mailbox and request the form.

This instrument will be used to collect standardized information on the SyS user, collaborative efforts across agencies and partners, programmatic activities, accomplishments, outcomes and lessons learned.

Once respondents are ready to submit their success story, they will email the data collection instrument to nssp@cdc.gov.

3. Methods to Maximize Response Rates Deal with Nonresponse

NSSP funded and non-funded state and local health department staff will be introduced to the *Syndromic Surveillance: Success Stories from the Field* form during SyS webinars, meetings and conferences. Each venue will provide information on how to complete form, value to the respondent and public health community, expected time to complete template, and the NSSP email address. The form will be posted online allowing timely and ease of access to the form. In addition, this form will be incorporated into the NSSP FOA guidance and introduced and distributed during awardee meetings (webinars, teleconferences and in person meetings). Respondents will be able to download, complete and then submit the form via email to the NSSP mailbox. In addition, respondents can email the NSSP mailbox and request the form. This method was chosen to reduce the overall burden on respondents. The information collection instrument was designed to collect the minimum information necessary with a particular focus on streamlining questions, to allow for a standardized and structured sharing process. Skipping questions based on responses to previous questions will minimize response burden.

4. Test of Procedures or Methods to be Undertaken

The estimate for burden hours is based on a pilot test of the information collection instrument by three public health professionals. In the pilot test, the time to complete the instrument including time for reviewing instructions, gathering needed information and completing the instrument was on average 83 minutes with a range of 60-100 minutes. For the purposes of estimating burden hours, the upper limit of this range (i.e., 100 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

A. Attachment A: Table A-1 Respondent Universe
B. Attachment B: Word Version SySSSFFTemplate
C. Attachment C: Web Version SySSSFFTemplate
D. Script for announcing Success Stories From the Field_NotCDCfunded

REFERENCE LIST

1. Centers for Disease Control and Prevention. National Syndromic Surveillance Program. NSSP Overview. Available at http://www.cdc.gov/nssp/overview.html. Accessed on April 5, 2016.