Annual Survey of Colorectal Cancer Control Activities Conducted by States and Tribal Organizations

NEW

Supporting Statement - Section B

February 6, 2015

Program Official/Project Officer

Amy DeGroff, PhD, MPH
Lead Health Scientist
Division of Cancer Prevention and Control
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control and Prevention
4770 Buford Highway, Mailstop F-76
Atlanta, GA 30341
770-488-2415
770-488-3230
asd1@cdc.gov

TABLE OF CONTENTS

Section B - Data Collection Procedures

- 1. Respondent Universe and Sampling Methods
- 2. Procedures for the Collection of Information
- 3. Methods to Maximize Response Rates , Deal with Nonresponse
- 4. Test of Procedures or Methods to be Undertaken
- 5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing
 Data

Page 2 of 6

LIST OF ATTACHMENTS - Supporting Statement B

Note: Attachments are included as separate files as instructed.

Attachment A-1 CRCCP Framework

Attachment A-2 Simplified CRCCP Logic Model

Attachment B Public Health Service Act

Attachment C 60-Day Federal Register Announcement

Attachment D-1 CRCCP Grantee Survey of Program Implementation: Screen shots/Layout

Preview (All questions)

Attachment D-2 CRCCP Grantee Survey of Program Implementation: MS Word version

Attachment E Introductory Email for CRCCP Grantees

Attachment F CRCCP Survey FAQ

Attachment G Reminder Email for CRCCP Grantees

Attachment H Follow-up Email for CRCCP Grantees

Section B - Data Collection Procedures

1. Respondent Universe and Sampling Methods

The respondent universe comprises the 29 states and tribal Colorectal Cancer Control Program (CRCCP) grantees funded under Program Announcement CDC-RFA-DP14-1414. The purpose of the CRCCP is to promote colorectal cancer (CRC) screening to increase population-level screening rates to 80% and, subsequently, to reduce CRC incidence and mortality, (www.cdc.gov/cancer/crccp/). The data collection efforts described in this proposal concern the entire universe of potential respondents. As collecting data from the entire population of respondents is feasible, a sampling strategy will not be employed.

This data collection is being proposed in order to assess program implementation, particularly related to these expanded population-based efforts.

<u>Table B-1</u>: Potential Respondent Universe

State and Tribe and Tribal Health Depts.	Potential Respondent	N
Colorectal Cancer Control Program Directors or Program	Program Directors/Program Managers	29
Managers	Total Universe of Potential Respondents	29

2. Procedures for the Collection of Information

Data will be collected through an online data collection instrument (**Attachment D-1**) distributed to all individuals within the respondent universe. Eligible respondents include the CRCCP program director, program manager, or other designated official of the program performing day-to-day managerial activities (N=29). We anticipate only one response per state/tribe jurisdiction. An introductory email notification (**see Attachment E- Introductory Email for CRCCP Grantees)** will be sent to all CRCCP program directors informing them of the planned data collection, announcing the dates the data collection will remain open, and providing relevant links to the instrument, as well as an FAQ (**see Attachment F - CRCCP Survey FAQ**). Email recipients will be encouraged to have the person most familiar with the day-to-day operations of the program complete the data

collection instrument. We will collect respondent contact information (name, telephone number, email address) for follow-up purposes, i.e., if response clarification is necessary. Respondents will have a period of 21 days (15 business days) to complete the instrument. We estimate that the time burden to be no more than 75 minutes. A reminder email that notes the deadline for responding will be sent to program directors 7 days after the data collection begins (see Attachment G – Reminder Email for CRCCP Grantees). After data collection, analysis, and report writing is completed, a follow-up email (see Attachment H - Follow-up Email for CRCCP Grantees) will be sent to the program directors thanking them for their response. Results of the data collection, in the form of CRCCP grantee-specific and summary reports, will be provided to respondents.

The on-line data collection will be administered annually and the responses will be used to answer the following implementation questions regarding the program activities:

- 1. What colorectal cancer control activities are being implemented across CRCCP state/tribe grantees?
- 2. What implementation models have the potential to increase program impact?
- 3. What are current technical assistance and training needs of CRCCP grantees?

3. Methods to Maximize Response Rates , Deal with Nonresponse

Advance notification (**see Attachment E**) and a reminder via email (**see Attachment G**) will be utilized to maximize response rates. The notifications will be sent to the potential respondents via emails sent from the web-based software. These communications will be signed by the Branch Chief of the Program Services Branch.

4. Test of Procedures or Methods to be Undertaken

The instrument was pilot tested in two phases. In the first phase, public health professionals tested a paper version of the instrument to assess the clarity of the questions and response categories. In the second phase, the online (web) version of the instruments was tested to assess web survey functionality, usability, and to estimate the time to complete the survey.

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

A project team from CDC's Division of Cancer Prevention and Control, the National Association of Chronic Disease Directors (NACDD), and investigators from the University of Washington (UW) led by Dr. Peggy Hannon will lead the collection and analysis of data.

Peggy Hannon, PhD, MPH

Co-chair, Colorectal Cancer Working Group, Cancer Prevention and Control Research Network University of Washington

206-616-7859

peggyh@uw.edu

Amy DeGroff, PhD, MPH

Lead Health Scientist

Division of Cancer Prevention and Control

National Center for Chronic Disease Prevention and Health Promotion

Centers for Disease Control and Prevention

4770 Buford Highway, Mailstop F-76

Atlanta, GA 30341

770-488-2415

asd1@cdc.gov

Stephanie Melillo, MPH

Health Scientist

Division of Cancer Prevention and Control

National Center for Chronic Disease Prevention and Health Promotion

Centers for Disease Control and Prevention

4770 Buford Highway, Mailstop F-76

Atlanta, GA 30341

770-488-4294

bcu6@cdc.gov