## MONITORING AND REPORTING SYSTEM FOR THE NATIONAL STATE-BASED TOBACCO CONTROL PROGRAMS **COOPERATIVE AGREEMENT**

PART B: STATISTICAL METHODS

August 07, 2015

Contact: Christopher J. Kissler, MPH Telephone: 770.488.5374

E-mail: cpk2@cdc.gov

**National Center for Chronic Disease Prevention and Health Promotion Centers for Disease Prevention and Control** Atlanta, Georgia

#### TABLE OF CONTENTS

- 1. Respondent Universe and Sampling Methods
- 2. Procedures for the Collection of Information
- 3. Methods to Maximize Response Rates and 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

### **List of Attachments**

- 1. a. Public Health Service Act 42 U.S.C. 247b (k)(2), Section 317(k)(2)
  - b. Comprehensive Smoking Education Act of 1984
  - c. Comprehensive Smokeless Tobacco Health Education Act of 1986
- 2. List of Awardees
- 3. a. Federal Register Notice
  - b. Summary of Public Comments
- 4. a. Work Plan Tool
  - b. Budget Tool

## **B.** Collections of Information Employing Statistical Methods

## 1. Respondent Universe and Sampling Methods

Respondents are 53 current awardees funded under two cooperative agreements, DP15-1509, National State-Based Tobacco Control Programs and DP14-1410PPHF14, Public Health Approaches for Ensuring Quitline Capacity. Awardees consist of state health departments in all 50 states, District of Columbia, Puerto Rico and Guam (Attachment 2) and are funded to implement evidence-based environmental, policy, and systems strategies and activities to reduce tobacco use, secondhand smoke exposure, tobacco-related disparities and associated disease, disability, and death.

No statistical sampling method will be used.

#### 2. Procedures for the Collection of Information

Information will be collected from awardees on an annual basis. Awardees will report progress on their work plan objectives, activities, and performance measures. Two tools have been developed to collect this information: an Excel-based Work Plan Tool (Attachment 4a) and an Excel-based Budget Tool (Attachment 4b). Awardees will submit their continuation application for funding, which will include completed Excel spreadsheets, tailored for their specific work plans, and Word documents by uploading them at <a href="www.grants.gov">www.grants.gov</a> on an annual basis. Instructions and training will be provided to users for completing the templates.

Upon receipt of information from each awardee, CDC's contractor will enter the information into an Access database. The database will only be available to authorized CDC program staff and contractors. Responses will be stored on secure network servers subject to the agency's computer security measures. CDC staff will have the capacity to query the database to extract individual or aggregate awardee-related data. CDC staff will generate reports for each of their assigned states on an annual basis.

### 3. Methods to Maximize Response Rates and Deal with Nonresponse

Annual reports are a requirement for each state department of health awarded in order to continue to funding. Hence, response rates are expected to be 100%.

#### 4. Test of Procedures or Methods to be Undertaken

Beta-testing of the Workplan tool and Budget Tool with no more than nine awardees from select states will occur prior to full scale implementation of the reporting tool for annual data collection with all awardees. CDC staff will send the Work Plan Tool and Budget Tool with an explanatory email to pilot testers. CDC staff will also train testers on collecting

information using the tools. Beta-testing will assess the content of the reporting tools, the design of the tool including skip patterns and drop-down menus, the time needed to complete the tool and the ease of completing the tool. Awardees and will provide feedback via completion of a questionnaire and limited participation in focus groups.

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

A workgroup has been established to assist in the development of the reporting tool. The CDC members provided input on content, functionality, and usability of the database, and work with the contractor in the design of the tool.

The individuals responsible for design and management of the data collection system include:

Stephanie Fraser, Deloitte LLC, <a href="mailto:stefraser@deloitte.com">stefraser@deloitte.com</a>

Scott Klisures, Deloitte LLC, <a href="mailto:sklisures@deloitte.com">sklisures@deloitte.com</a>

Kaitlin Porter, Deloitte LLC, <u>kaiporter@deloitte.com</u>

Colin Regan, Deloitte LLC, coregan@deloitte.com

Rene Lavinghouze, Team Lead, OSH, NCCDPHP, CDC, shl3@cdc.gov

Erica Fulmer, Health Scientist, OSH, NCCDPHP, CDC, duj2@cdc.gov

Nicole Kuiper, Health Scientist, OSH, NCCDPHP, CDC, nik4@cdc.gov

Karla Sneegas, Branch Chief, OSH, NCCDPHP, CDC, hri0@cdc.gov

Monica Eischen, Team Lead, OSH, CDC, mhe1@cdc.gov

Susan Brown, Public Health Advisor, OSH, NCCDPHP, CDC, <u>ilc2@cdc.gov</u>

Christopher Kissler, Public Health Advisor, OSH, NCCDPHP, CDC, cpk2@cdc.gov