SUPPORTING STATEMENT: PART B

OMB# XXX

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MONITORING AND REPORTING SYSTEM FOR THE PRESCRIPTION DRUG OVERDOSE PREVENTION FOR STATES COOPERATIVE AGREEMENT

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COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS

- B.1. Respondent Universe and Sampling Methods
- B.2. Procedures for the Collection of Information
- B.3. Methods to Maximize Response Rates and Deal with Nonresponse
- B.4. Tests of Procedures or Methods to be Undertaken
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LIST OF ATTACHMENTS

- 1. Public Health Service Act (PHSA) 42 U.S.C. 241(a), Section 301(a)
- 2. Published 60-Day Federal Register Notice
- 3. Information Collection Tools
 - a. Annual Progress Report Tool
 - b. Plan Tool
- 4. IPC Research Determination
- 5. List of Awardees

B.1. Respondent Universe and Sampling Methods

Respondents will be the 29 awardees funded through FOA CE15-1501, Prescription Drug Overdose Prevention for States ("PDO Prevention for States"). A list of awardees is provided (**Attachment 5).** If additional funding is made available to the program, CDC will submit a Change Request to increase the number of awardees participating in the program and to adjust the burden table as needed.

No statistical sampling method will be used.

B.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 related tools have been developed to collect this information: an Excel-based Annual Progress Report Tool (Attachment 3a) and a Word-based Plan Tool (Attachment 3b). Information will be transmitted to CDC electronically through Grant Solutions and to their Project Officer via email. The Annual Report Progress Tool is an Excel-based tool that will be pre-populated by CDC staff to the extent possible and completed by awardees. The second tool, also to be pre-populated by CDC staff and completed by awardees is the Plan Tool, which is a Word-based reporting tool to be used for assessment and performance monitoring purposes only. The contractor will enter the reported information into the Monitoring and Evaluation Tool (MET) to facilitate awardee-specific and aggregate review. The MET is an internal portal available only to CDC staff and contractors. It serves as the clearinghouse and secure storage site for information reported by awardees. This procedure satisfies the routine cooperative agreement reporting requirements. Progress reports are required once per year, but data entry into the MET can occur on a real-time basis. As a result, the reporting tools can also be used for ongoing program management, and support more effective, data-driven technical assistance between NCIPC and awardees. The two tools described above will facilitate reporting by awardees. Using these tools, awardees are required to provide an Annual Progress Report and Evaluation Plan. Specific information

included in each includes:

- Activities and timelines to support achievement of FOA outcomes (Annual Progress Report)
 - O Performance Measures and indicators initial baseline and targets; progress reported annually
 - O Work Plan– initial work plan and annual updates; annual progress
 - O Successes –reported annually as part of the Annual Progress Report
 - O Challenges reported annually as part of the Annual Progress Report
- A Plan Tool that includes an initial performance monitoring and quality improvement plan and annual progress reports to monitor program. This is reported on the Evaluation Plan Tool (attachment 3b).

The tools support the collection and reporting of information that will be used by CDC to help examine and monitor program implementation and performance indicators. The information collected will be used to describe, appraise, and enhance opportunities for collaborative efforts and partnerships. Having all this information in a single and secure database will allow CDC Project Officers to search across multiple programs, help ensure consistency in documenting progress and technical assistance, enhance accountability of the use of federal funds, and provide timely reports as frequently requested by HHS, the White House, and Congress. Requests may come in from these agencies for descriptions of program activities (e.g., how many funded states are working toward real-time reporting to their Prescription Drug Monitoring Program?; Provide a success story on academic detailing to curb inappropriate prescribing behavior.). Tracking this information and program activities and progress in one secure location will facilitate faster and more accurate responses without having to reach out to awardees or take up extra CDC staff time.

Upon receipt of information from each awardee, the contractor will enter the information into an Access database called the Monitoring and Evaluation Tool (MET). 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.

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

Annual reports are a requirement for each program awarded funding under the FOA in order to continue to receive cooperative agreement funding. Hence, response rates are expected to be 100%.

B.4. Tests of Procedures or Methods to be Undertaken

The reporting tool was beta-tested with fewer than 10 awardees from a small grant program, Prescription Drug Overdose: Boost for State Prevention (funding opportunity announcement FOA CE14-1404; referred to as "Boost"). Therefore, additional beta-testing will not be necessary for awardees of this FOA (FOA CE15-1501). Beta-testing under the Boost cooperative agreement assessed the content of the reporting tool, 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. Beta-testing consisted of submission of data and feedback sessions.

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

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

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

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