STD Prevention and Control: Work plan Template Pilot

OSTLTS Generic Data collection Request
OMB No. 0920-0879

Supporting Statement – Section B

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Program Official/Project Officer
Marion Carter
Program Evaluation Team Lead
CDC/NCHHSTP/ Division of STD Prevention
1600 Clifton Rd NE, MS E-80
404-639-8035
Acq0@cdc.gov
FAX: 404-639-8622

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Section B – Data collection Procedures

1. Respondent Universe and Sampling Methods

The respondent universe includes STD program principal investigators across 59 (50 state, 2 territorial, and 7 local) health department STD programs eligible to apply for funding from CDC/DSTDP under cooperative agreement PS19-1901: Strengthening STD Prevention and Control for Health Departments (STD PCHD) (**Attachment A - List of eligible applicants to PS19-1901 STD PCHD).**

To identify the respondent universe (n=59), investigators collaborated with the National Coalition of STD Directors to obtain a list of STD program principle investigators in state, local, and territorial public health departments eligible for funding under PS19-1901 STD PCHD.

Sampling methods will not be used, as the entire universe will be included in this collection.

CDC/DSTDP is responsible for all data collection. Given that all applicants are also current recipients of STD program funding, CDC/DSTDP maintains a current list of STD principal investigators and their email addresses. CDC/DSTDP will use this list to communicate with applicants.

2. Procedures for the Collection of Information

Data will be collected via two MS Excel-based templates. Respondents will be recruited through an email notification (**Attachment E – Notification Email**) to the respondent universe. The notification email will explain:

- The purpose of the data collection, and why their participation is important
- Instructions for participating
- Method to safeguard their responses
- That participation is voluntary
- The expected time to complete the instrument
- Contact information for the project team

Respondents will be allowed a total of twenty weeks to complete the instruments (**Attachment C – Instrument 1: STD Applicant Work Plan Template_5 Year Plan** and **Attachment D – Instrument 2: STD Applicant Work Plan Template_1 Year Plan**) to allow ample time for completion and provide respondents the opportunity to complete in multiple sessions, if necessary.

Respondents will initially be asked to complete the instruments within the 12-week Notice of Funding Opportunity (NOFO) application period.

At the end of that 12-week application period, a reminder email (**Attachment F – Reminder Email**) will be sent to those who did not submit their work plans via the MS Excel templates, urging them to complete the instruments and providing an additional 4 weeks to do so.

Applicants who do not respond to the reminder email will receive a final reminder email (**Attachment G – Final Reminder Email**) and will be granted an additional 4 weeks to complete and submit the instruments. Those who do not respond to the final reminder email within that 4-week period, or the end of the twenty-week information collection period, will be considered non-responders.

As applicants submit work plan templates, CDC/DSTDP will upload the files into an internal CDC/DSTDP grants management database. The information will be analyzed for key themes, similarities, differences among applications. As part of their assessment of the pilot templates, CDC/DSTDP staff will assess the extent to which the templates facilitated these functions, in comparison to prior years when the templates were not used. CDC/DSTDP staff also will assess applicants' experiences with the templates by monitoring questions asked about the templates and reviewing the quality of their work plan submissions.

All information collected will be stored in a secure environment maintained by CDC/DSTDP's Program Development and Quality Improvement Branch (PDQIB). To foster communication and collaboration among recipients after award, some information from the applicant work plans may be summarized and shared with recipients.

3. Methods to Maximize Response Rates Deal with Nonresponse

Although participation in the data collection is voluntary, the project team will make every effort to maximize the rate of response. The data collection instruments were designed with particular focus on streamlining and limiting the amount and type of information requested.

Following the distribution of the invitation to participate in the data collection (**Attachment E – Notification Email)**, respondents will have 12 weeks to complete and submit the data collection instruments.

Those who do not respond within the 12-week period will receive a reminder by email, urging them to complete and submit the instruments within the next four weeks (**Attachment F – Reminder Email**).

Those who do not respond within that four-week period will receive a second and final reminder (**Attachment G – Final Reminder Email**) urging them to complete and submit the instruments within the next 4 weeks. Those who do not respond to the final reminder email within that 4-week period, or the end of the 20-week information collection period, will be considered non-responders.

4. Test of Procedures or Methods to be Undertaken

The estimate for burden hours is based on a pilot test of the data collection instrument by 9 public health professionals. In the pilot test, the average time to complete each template including time for reviewing instructions and completing the instrument was approximately 16 minutes for the 5-year work plan template (range 12-20 minutes) and approximately 170 minutes for the 1-year work plan template (range 85 -255 minutes). For the purposes of estimating burden hours, the upper limits of these ranges (i.e., 20 minutes and 255 minutes, respectively) are used.

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

All staff are with the CDC/DSTDP's Program Development and Quality Improvement Branch:

- Marion Carter, Team lead for Program Evaluation, (404) 639-8035, acq0@cdc.gov
- Dayne Collins, Senior Public Health Analyst, zvl1@cdc.gov
- Kenya Taylor, Senior Public Health Advisor, kft8@cdc.gov
- Britney Johnson, Epi Prevention Specialist, mwq4@cdc.gov
- Tawanda Asamowei, Junior Public Health Advisor, lhy0@cdc.gov
- Nina Johnson, Senior Public Health Advisor, wvi3@cdc.gov
- Shaunta Wright, Health Scientist/Evaluator, vjv7@cdc.gov
- Brandy Maddox, Health Scientist/Evaluator, ftn6@cdc.gov
- Mary McFarlane, Senior Behavioral Scientist, xzm3@cdc.gov

LIST OF ATTACHMENTS – Section B

Note: Attachments are included as separate files as instructed.

E. Attachment E – Notification Email
F. Attachment F – Reminder Email
G. Attachment G – Final Reminder Email