



# REQUEST FOR DETERMINATION OF RESEARCH STATUS

To be completed by the staff member with lead responsibility for the project and approved by branch chief (if applicable) and Division ADS. A separate PGO funding memo is required if project is research and involves human subjects regardless of the CDC staff role.

- Instructions:**
- (1) Use this form to declare: (a) the research status of any project, (b) role or roles of CDC staff
  - (2) A short summary should be attached offering specific details about the project and the role of staff.
  - (3) Be sure to complete all applicable items, obtain appropriate signatures and submit this form for approval.

**Tracking Number:** TO BE DETERMINED

(Use PGO number if cooperative agreement, grant, etc.)

**Date submitted:** 02/18/2016

**Title of Project:** Monitoring Changes in Attitudes and Practices among Family Planning Provider and Clinics – Phase III

**Dates for project period:**

**Dates for funding (if applicable):**

**Beginning:** 08/01/2016

**Beginning:** \_\_\_\_\_

**Ending:** 07/31/2018

**Ending:** \_\_\_\_\_

**Project is (choose one):**

*NOTE: Revision, as used below, refers to any substantive change made to the project including scope of project, funding restrictions, personnel, role of CDC staff member, determination of research status, etc.*

**New**

**Revision**

**Continuation, without revision(s)**

**Continuation, with revision(s)**

**Lead staff member:**

**Contact information:**

**Please indicate your role(s) in this project:**

**Name:** Lauren Zapata

**Division:** DRH

**Project officer**

**Technical monitor**

**User ID:** DVQ8

**Telephone:** 770-488-6358

**Principal investigator**

**Investigator**

**Scientific Ethics number:** 410

**Mailstop:** F74

**Consultant**

**Other (please explain)**

**1. Are any or all of the activities within this project DESIGNED to contribute to generalizable knowledge (i.e., research)?**

**YES**       **NO**

**If YES, list those activities which are research:**

**2. Is this CDC project research or public health practice (check all that apply)?**

**Research**

**Public health practice**

*Check one:*

*Check all that apply:*

**Human subjects involved**

**Emergency Response**

**Surveillance**

**Human subjects not involved**

**Program evaluation**

**Other (please explain)**

**3. If RESEARCH involving human subjects, has the project or research activities been reviewed by the CDC IRB for human subjects protection?**

a.  **NO, New project, not yet reviewed**

d.  **YES, Reviewed and approved by CDC**

b.  **NO, Existing project, not ready to submit**

**If YES, please list protocol number and**

c.  **NO, Submitted for approval**

**expiration date** \_\_\_\_\_

e.  **NO, RESEARCH, no CDC investigators (CDC IRB not required)**

f.  **N/A (Not Applicable)**

**If RESEARCH, list any other CDC staff involved in this project, please include the name, role, and scientific ethics number**

Name	Role (project officer, investigator, consultant, etc.)	Scientific ethics number Prin
Lauren Zapata		410

**IF YOU THINK THE RESEARCH PROJECT MIGHT QUALIFY AS EXEMPT RESEARCH (as identified in 45CFR46.101), PLEASE ANSWER questions 4-6, OTHERWISE SKIP TO question 7.**

4. Does the proposed research involve prisoners?  
 YES If YES, this research cannot be exempted and must be reviewed by an IRB (skip to question 7).  
 NO
5. Does the proposed research involve fetuses, pregnant women, or human in vitro fertilization as targets (such that Subpart B would apply)?  
 YES If YES, this research cannot be exempted and must be reviewed by an IRB (skip to question 7).  
 NO

**Educational Research**

- 6.1 Is this research conducted in established or commonly accepted educational settings, AND does the research involve normal educational practices (e.g., research on regular and special education strategies or research on the effectiveness of, or comparison among instructional techniques, curricula or classroom management methods)?  
 YES  NO

**Research Involving Surveys, Interview Procedures (including Focus groups), Observation of Public Behavior, or Educational Tests**

- 6.2 Will this research use educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior?  
 YES  NO If NO skip 6.3

Will children (<18 years of age) be research subjects?

- YES If YES, this research cannot be exempted and must be reviewed by an IRB (skip to item 7)  
 NO

- 6.2.1 Is the information obtained recorded in such a manner that human subjects can be identified directly or indirectly through identifiers (such as a code) linked to the subjects;  
 YES  NO

- 6.2.2 Will any disclosure of the human subjects' responses outside of the research setting have the potential to place the subjects at risk of criminal or civil liability, or be damaging to the subjects' financial standing, employability or reputation? (Examples here may include: the collection of sensitive data regarding the subjects' (or relatives' or associates') possible substance abuse, sexuality, criminal history or intent, medical or psychological condition, financial status, or similarly compromising information).  
 YES  NO

- 6.3 Will this research use educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior but the research is not exempt under paragraph 6.2 of this section:  
 YES  NO If NO skip to 6.4

- 6.3.1 Will this research involve human subjects that are elected or appointed public officials or candidates for public office?  
 YES  NO

- 6.3.2 Does federal statute(s) require(s) without exception that confidentiality of the personally identifiable information will be maintained throughout the research and thereafter? (Note: CDC can use this exemption criterion only in the case where a 308(d) Assurance of Confidentiality has been obtained to cover the research).  
 YES  NO

**Existing Data Which Is Publicly Available or Unidentifiable**

- 6.4 Does this research involve only the collection or study of existing\* data, documents, records, pathological or diagnostic specimens? (\* 'existing' means existing before the study begins)?  
 YES  NO If NO skip to 7

- 6.4.1 Is this material or information publicly available?  
 YES  NO

**6.4.2 Is this material or information recorded in such a manner by the investigator that the subjects cannot be identified directly or indirectly through identifiers linked to the subjects?**

**(Note: If a link is created by an investigator even temporarily, for research purposes, this criterion is not met. If a temporary link is created by clinical staff who already have access to the data, this criterion is met).**

**YES** (there are no identifying information and no unique identifiers or codes)YES

**NO** (there are identifiers (including codes))

**7. Please prepare and attach a short summary paragraph (<1 page); if this is new:**

**a. Be sure to include the purpose of the project, specific details about the project and the role of the CDC staff member(s) in the project. In explaining one's role as a consultant be particularly careful to identify involvement in things like: study design decisions, oversight of protocol development, participation in review of data collection procedures, and participation in data analysis and/or manuscript preparation, as well as whether there will be access to identifiable or personal data.**

**b. Explain your project status selection (research--non-exempt, exempt, no CDC investigator or not involving human subjects; public health practice). If you selected research not involving human subjects be sure to indicate if the data includes any personal information (e.g., name, SSN), linkable study identification numbers or codes, or geographical information.**

The US Medical Eligibility Criteria for Contraceptive Use (US MEC) was published by CDC in 2010. The US Selected Practice Recommendations for Contraceptive Use (US SPR) was published by CDC in 2013. Providing Quality Family Planning Services (QFP) was published by CDC and the Office of Population Affairs (OPA) in 2014. These national guidance documents include evidence-based or evidence-informed recommendations to improve family planning services. To monitor diffusion and perceived utility of the guidance, as well as changes in provider attitudes and practices and clinic practices over time, we initiated a multi-phase assessment. Phase I was initiated in December 2009 (collected baseline information related to US MEC) and Phase II was initiated in June 2013 (collected follow-up information related to US MEC and baseline information related to US SPR and QFP). Phase I and Phase II were approved as public health practice. This summary describes Phase III. The purpose of Phase III is to 1) understand the current use of contraceptive guidance in practice and valued sources of contraceptive information, including awareness and use of the US MEC/SPR and QFP; 2) describe current provider attitudes and practices and clinic practices related to content included in the US MEC/SPR and QFP and assess changes from baseline; and 3) identify targeted training needs in use of guidance and family planning service delivery (e.g., provider tools, continuing education modules). The Phase III evaluation will consist of surveys mailed to sampled providers (provider survey) and clinics (provider survey and administrator survey). Surveys will contain a unique identification number; only the contractor will have access to a list matching providers/clinics with unique identification numbers. CDC and OPA will receive de-identified data. We seek to sample 2,000 office-based physicians specializing in obstetrics/gynecology, family medicine, and adolescent medicine; and 2,000 Title X and 2,000 non-Title X clinics. The surveys will include content related to recommendations included in the US MEC/SPR and QFP (e.g., attitudes about the safety of intrauterine devices for postpartum women; required exams and tests prior to contraception initiation). Phase III is non-research/public health practice (as was Phase I and II) given its primary intent to monitor changes over time and provide data needed to improve family planning-related public health practice. Information will be used to inform activities supporting dissemination and uptake of the guidance, including evaluation of its use and effectiveness over time, tailoring of dissemination activities, and development and targeting of provider tools to those in greatest need. CDC will collaboratively work with OPA on survey development, data collection procedures, data analysis, manuscript preparation, dissemination activities, and development of provider tools.

**8. Please list the primary project site and all collaborating site(s).**

	<b>Site Name</b>	<b>Site Location</b>	<b>Assurance Number (FWA, MPA or SPA) if applicable</b>
Primary Site	Centers for Disease Control and Prevention/DRH	Atlanta, GA	

**Explanation of project components:**

**9. If project involves research that is funded extramurally, list amount of award that should be restricted pending IRB approval and describe which project components will be affected, if known:**

Approvals (signature and position title)	Date	Research Determination / Remarks
Lauren Zapata - SENIOR RESEARCH SCIENTIST       staff member completing this form	02/19/2016	<input checked="" type="checkbox"/> Public health practice <input type="checkbox"/> Research not involving human subjects <input type="checkbox"/> Research involving human subjects, no CDC investigators <input type="checkbox"/> Research involving human subjects, CDC investigators, exempt <input type="checkbox"/> Research involving human subjects, CDC investigators, not exempt  (check if applicable) <input type="checkbox"/> Local IRB <input type="checkbox"/> CDC Exemption <input type="checkbox"/> CDC IRB  <u>Comments:</u>
Suzanne Folger - EPIDEMIOLOGIST       Team Lead	02/19/2016	<input checked="" type="checkbox"/> Public health practice <input type="checkbox"/> Research not involving human subjects <input type="checkbox"/> Research involving human subjects, no CDC investigators <input type="checkbox"/> Research involving human subjects, CDC investigators, exempt <input type="checkbox"/> Research involving human subjects, CDC investigators, not exempt  (check if applicable) <input type="checkbox"/> Local IRB <input type="checkbox"/> CDC Exemption <input type="checkbox"/> CDC IRB  <u>Comments:</u> Approved for WHFB
Shanna Cox - Associate Director for Science       Division ADS	03/07/2016	<input checked="" type="checkbox"/> Public health practice <input type="checkbox"/> Research not involving human subjects <input type="checkbox"/> Research involving human subjects, no CDC investigators <input type="checkbox"/> Research involving human subjects, CDC investigators, exempt <input type="checkbox"/> Research involving human subjects, CDC investigators, not exempt  (check if applicable) <input type="checkbox"/> Local IRB <input type="checkbox"/> CDC Exemption <input type="checkbox"/> CDC IRB  <u>Comments:</u>
Joan Redmond Leonard - PUBLIC HEALTH ANALYST       CUC ADS, Deputy ADS, or Human Subjects Contact	03/08/2016	<input checked="" type="checkbox"/> Public health practice <input type="checkbox"/> Research not involving human subjects <input type="checkbox"/> Research involving human subjects, no CDC investigators <input type="checkbox"/> Research involving human subjects, CDC investigators, exempt <input type="checkbox"/> Research involving human subjects, CDC investigators, not exempt  (check if applicable) <input type="checkbox"/> Local IRB <input type="checkbox"/> CDC Exemption <input type="checkbox"/> CDC IRB  <u>Comments:</u>