

Information Collection Request

Revision

Minimum Data Elements (MDEs) for the National Breast and Cervical Cancer Early Detection Program (NBCCEDP)

Supporting Statement: PART B

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- ATT 1. Authorizing Legislation
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- ATT 3. NBCCEDP Logic Model
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B. COLLECTION OF INFORMATION EMPLOYING STATISTICAL METHODS

B1. Respondent Universe and Sampling Methods

The respondent universe is comprised of the 70 grantees of the Centers for Disease Control and

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sampling strategy will not be employed.

Table B.1. Potential Respondent Universe

State or Tribe Health Departments/University Grantees	Potential Respondent	N
NBCCEDP Grantees	Data Managers	70
Total Universe of Potential Respondents		70

B2. Procedures for the Collection of Information

NBCCEDP grantees are funded by the CDC to report aggregate screening and diagnostic follow-up data MDEs, for the breast and cervical services they provide. The collection, reporting, and processing procedures for these data have not changed since approval of the current information collection (OMB 0920-0571) that will expire in 12/31/2018. MDE reporting operates on an ongoing cycle with data submitted semiannually (April and October of each program year). As a longstanding program, the majority of grantees are familiar with the cyclical process involved in MDE data collection and reporting.

Grantees submit a MDE data file and an accompanying submission narrative semi-annually to the CDC through its data management contractor on April 15 and October 15. Each MDE submission should include cumulative data from the date the program began screening through

the screening cut-off date. In the future, grantees may be asked to only submit recent data (2010 to present), which would further reduce burden. Each submission dataset replaces the previous submission in its entirety. The screening cutoff date is three and a half months prior to the submission date. For example, if MDE data are due to be submitted on 4/15/2017, then the data file should include screening tests performed from the onset of the screening program through 12/31/2016. The accompanying submission narrative has two main sections. In Section I, grantees respond to action items, which are written questions from the CDC and data contractor based on a review of the previous MDE submission. In Section II, grantees respond to six standard questions that requires grantees to conduct a prospective review of their MDE data prior to submitting to the data contractor. Additional questions regarding data management staffing changes or data collection software changes are also included.

All MDE submission files must be submitted electronically using the secure nbccedp.org web site. Grantees must run their data through the MDE Edits Application supplied by the data contractor prior to submission. The MDE Edits Application performs basic validation routines and reports on invalid values, missing items, and cross-item edits. The MDE Edits Application can only be run on an MDE data file. The MDE file must first be sorted by the unique Patient ID. Grantees are reminded that data should be edited on a routine basis (weekly, monthly, etc.), not solely at the time of submission. An explanation of problem areas should be highlighted in the Submission Narrative. A current version of the MDE Edits Application is available for grantees to download from the nbccedp.org web site.

B3. Methods to Maximize Response Rates, Deal with Nonresponse

As previously stated, the CDC requires that all NBCCEDP grantees report data as a stipulation of the Program Announcement and the cooperative agreement notice of grant award. The schedule for MDE data reporting remains consistent each year and is not expected to change.

Grantees collect and report screening and diagnostic follow-up data using a data management system developed and maintained by the CDC, or by alternate grantee-specific data management systems. In either method, the exported MDE data are transmitted to CDC electronically as an ASCII text file, which is a common format for data interchange. The data definitions for version 7.0 of the MDE data set are provided in Attachment 5.

B4. Test of Procedures or Methods to be Undertaken

The data management reporting system and the submission Web site developed and maintained by the CDC data contractor have been internally tested by NBCCEDP staff and the data contractor. In addition, the revised MDE version 7.0 variables were shared with all NBCCEDP grantees, and grantees were provided one month to provide voluntary, unstructured feedback on variable utility and clarity. A total of 23 grantees responded with feedback, which was incorporated into the final variables. The processes of developing the master and analysis files, editing and formatting the reported data, and generating the standardized reports have been thoroughly tested by the CDC and the data contractor. It is expected that only minor changes will be required to the analysis files, formatting procedures, and the standardized reports to address the proposed changes to the MDE data set.

B5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data

The data collection was designed by the Division of Cancer Prevention and Control (DCPC), National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention. The CDC Project Officer for the data management contract is Jacqueline Miller, MD, NBCCEDP Medical Officer in the Program Services Branch (PSB). Data analysis is performed by CDC's data contractor, Information Management Services, Inc. NBCCEDP data collection and data quality standards are formulated and recommended by the PSB/DCPC and the Division's NBCCEDP data working group.