



# 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:** CIOSP 2305

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

**Date submitted:** 02/05/2020

**Title of Project:** Comprehensive Cancer Control Branch Management Information System

**Dates for project period:**

**Beginning:** 03/01/2019

**Ending:** 03/30/2022

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

**Beginning:**

**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:**

**Name:** Angela Moore

**Contact information:**

**Division:** DCPC

**User ID:** CYQ6

**Telephone:** 770-488-3094

**Scientific Ethics number:** 6803

**Mailstop:** K57

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

☐ **Project officer**

☒ **Technical monitor**

☐ **Principal investigator**

☐ **Investigator**

☐ **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:*

☐ **Human subjects involved**

☐ **Human subjects not involved**

*Check all that apply:*

☐ **Emergency Response**

☐ **Program evaluation**

☐ **Surveillance**

☒ **Other (please explain)**

Reporting of submission of continuation applications for ongoing cancer control program

**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

Angela Moore

6803

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 (&lt;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)

☐ NO6.2.1 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 purpose of this project is to continue using an electronic information system (Management Information System [MIS] for Comprehensive Cancer Control Programs). The collection of this information is approved under OMB No. 0920-0841, and a reinstatement application has been submitted to continue data collection. The CDMIS maintains grantee-specific information for the National Comprehensive Cancer Control Program (NCCCP).

a. The CDC staff role is as a technical monitor to provide oversight to the contractor.

b. This is public health practice (not research). The project is designed to collect information from an ongoing CDC program (the NCCCP), for use in monitoring program progress and to use for program improvement. The collection of this data is not systematic, and it is not intended to produce generalizable results. Since January 2010, NCCCP awardees have submitted progress and activity information to CDC twice per year using this system. New cooperative agreements were awarded to all NCCCP programs in 2017, which place emphasis on policy and environmental approaches to cancer prevention and control.

c. As the technical monitor, CDC staff will oversee the contractor in making minor changes to the existing data elements to reflect the 2017 cooperative agreement performance requirements. The MIS data collection instrument does not collect personally identifiable information or sensitive data.

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

**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
Angela Moore - Lead Public Health Advisor	02/05/2020	<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>
staff member completing this form		

-	MM/dd/yyyy	<input 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
Division ADS		<u>Comments:</u>