

Print Date: 5/12/21

Title:	Public Health Emergency Preparedness Cooperative Agreement Operational Readiness Review 2.0
Project Id:	0900f3eb81b1f212
Accession #:	CPR-PSB-4/13/20-1f212
Project Contact:	Molly Sanborn
Organization:	CPR/DSLR/PIB
Status:	Project In Progress
Intended Use:	Project Determination
Estimated Start Date:	07/01/2021
Estimated Completion Date:	07/01/2024
CDC/ATSDR HRPO/IRB Protocol #:	

Determinations

OMB Control #:

Determination	Justification	Completed	Entered By & Role
HSC: Does NOT Require HRPO Review	Not Research / Other 45 CFR 46.102(l) Program Evaluation	5/19/20	Garcia_Albert D. (asg9) CIO HSC
PRA:			

PRA Applies	plies		Garcia_Albert D. (asg9) OMB / PRA
HRPO: Returned with No Decision		5/29/20	Logan_Marinda D. (mwl8) HRPO Reviewer
ICRO: Returned with No Decision		5/29/20	Zirger_Jeffrey (wtj5) ICRO Reviewer

Description & Funding

Description

Description:

Priority: Standard

Date Needed: 06/01/2021

Determination Start Date: 04/13/20

To help evaluate the country's public health emergency preparedness and response capacity, the Centers for Disease Control and Prevention's Division of State and Local Readiness (DSLR) administers the Public Health Emergency Preparedness (PHEP) cooperative agreement. The PHEP program is a critical source of funding for 62 state, local, and territorial jurisdictions to build and strengthen their ability to respond to and recover from public health emergencies. The Operational Readiness Review (ORR) is a rigorous, evidence-based assessment used to evaluate PHEP recipients' planning and operational functions. The previous version of the ORR evaluated a jurisdiction'??s ability to execute a large emergency response requiring medical countermeasure (MCM) distribution and dispensing. The purpose of this new ORR 2.0 is to expand measurement and evaluation to all 15 Public Health Emergency Preparedness and Response Capabilities, which serve as national standards for public health preparedness planning.

IMS/CIO/Epi-Aid/Chemical Exposure Submission: No

IMS Activation Name: Not selected

Primary Priority of the Project: Not selected

Secondary Priority(s) of the Project: Not selected

Task Force Associated with the Response: Not selected

CIO Emergency Response Name: Not selected

Epi-Aid Name: Not selected

Assessment of Chemical Exposure Name: Not selected

Goals/Purpose

The purpose of this ICR is to expand the ORR to include all 15 PHEP capabilities so DSLR can better monitor program impact and

support program analysis and improvement across all hazards impacting public health.

The ORR 2.0 will have three modules: descriptive, planning, and operational, which will allow DSLR to analyze the data for the development of descriptive statistics and to monitor the progress of each recipient towards performance goals. It is intended to promote accountability, track recipient progress towards achieving desired programmatic outcomes, and provide key insights into recipients# planning and operational strengths, areas of improvement, and technical assistance needs.

Objective:

Does this project include interventions, services, or Not Selected policy change work aimed at improving the health of groups who have been excluded or marginalized and /or decreasing disparities?: Project does not incorporate elements of health Not Selected equity science: Not Selected Measuring Disparities: Studying Social Determinants of Health (SDOH): Not Selected Assessing Impact: Not Selected Methods to Improve Health Equity Research and Not Selected Practice: Not Selected Other: **Activities or Tasks:** New Collection of Information, Data, or Biospecimens Target Populations to be Included/Represented: No Human Population Public Health Emergency Preparedness and Response Tags/Keywords: Activity originated and designed by CDC staff, or conducted at the specific request of CDC, or CDC staff will approve study design CDC's Role: and data collection as a condition of any funding provided **Method Categories:** Survey As part of the PHEP cooperative agreement, the 62 recipients are required to submit information via the ORR that will describe their Methods: activities and progress towards defined preparedness goals/standards. This information will be submitted via forms housed in the ORR online system. Collection of Info, Data or Biospecimen: The information will be submitted via the ORR online system or fillable PDF forms. The findings will be collected to analyze how recipients are progressing towards defined program goals/objectives. The findings will **Expected Use of Findings/Results:** be aggregated to create an annual public health preparedness and response national snapshot that presents aggregated national data and specific recipient data. Could Individuals potentially be identified based on Yes Information Collected? Will PII be captured (including coded data)? Yes Does CDC have access to the identifiers? Yes Is an assurance of confidentiality in place or Yes planned? Is a certificate of confidentiality in place or planned? No Is there a formal written agreement prohibiting the No

release of identifiers?

Funding

Funding Type	Funding Title	Funding #	Original Budget Yr	# Years Award	Budget Amount
CDC Cooperative Agreement	Public Health Emergency Preparedness Cooperative Agreement	CDC-RFA-TP19-1901	2019	5	

HSC Review

HSC Attributes

Program Evaluation

Yes

No

Regulation and Policy

Do you anticipate this project will be submitted to the IRB office

Estimated number of study participants

Population - Children

Population - Minors

Population - Prisoners

Population - Pregnant Women

Population - Emancipated Minors

Suggested level of risk to subjects Do you anticipate this project will be exempt research or non-exempt research

Requested consent process waviers

Informed consent for adultsNo SelectionChildren capable of providing assentNo SelectionParental permissionNo SelectionAlteration of authorization under HIPPA Privacy
RuleNo Selection

Requested Waivers of Documentation of Informed Consent

 Informed consent for adults
 No Selection

 Children capable of providing assent
 No Selection

 Parental permission
 No Selection

Consent process shown in an understandable language

No Selection

Reading level has been estimated

Comprehension tool is provided

No Selection

Short form is provided

No Selection

Translation planned or performed

Certified translation / translator

Translation and back-translation to/from target language(s)

Clinical Trial

Other method

Involves human participants

Assigned to an intervention

Evaluate the effect of the intervention

No Selection

Evaluation of a health related biomedical or behavioral outcome

Registerable clinical trial

No Selection

Other Considerations

Exception is requested to PHS informing those No Selection bested about HIV serostatus

Human genetic testing is planned now or in the

future

No Selection

Involves long-term storage of identfiable biological

specimens

No Selection

Involves a drug, biologic, or device

No Selection

Conducted under an Investigational New Drug exemption or Investigational Device Exemption

No Selection

Institutions & Staff

Institutions

Institutions yet to be added

Staff

Staff Member	SIQT Exp. Date	CITI Biomedical Exp. Date	CITI Social & Behavioral Exp. Date	CITI Good Clinical Practice Exp. Date	Staff Role	Email	Phone	Organization
Molly Sanborn	03/22/2023				Program Official	qbo4@cdc. gov	404-718- 5058	DLSR PROGRAM SERVICES BRANCH

Data

DMP

Proposed Data Collection Start Date: 7/31/21

Proposed Data Collection End Date: 7/31/24

Proposed Public Access Level: Public

Public Access Justification:

An annual public health preparedness and response national snapshot occurs each year that presents aggregated national data

and specific recipient data. This will continue and will reflect data collected in the proposed system.

Although CDC will collect some individually identifiable information (IIF) related to the official roles of respondents, including name,

How Access Will Be Provided for Data: phone number, email, and PHEP awardee jurisdiction, all information will be kept on the HHS Secure Access Management Services

(SAMS) system and will only be accessible to project team members.

Plans for Archival and Long Term Preservation:

Recipient data will be kept on the HHS Secure Access Management Services (SAMS) system.

Spatiality

Country	State/Province	County/Region
United States	Montana	
United States	Nebraska	
United States	Nevada	
United States	New Hampshire	
United States	New Jersey	
United States	New Mexico	
United States	New York	
United States	Alabama	
United States	Alaska	
United States	Arizona	
United States	Arkansas	
United States	California	
United States	Colorado	
United States	Connecticut	
United States	Delaware	
United States	Florida	
United States	Georgia	
United States	Hawaii	

United States	Idaho	
United States	Illinois	
United States	Indiana	
United States	lowa	
United States	Kansas	
United States	Kentucky	
United States	Louisiana	
United States	Maine	
United States	Maryland	
United States	Massachusetts	
United States	Michigan	
United States	Minnesota	
United States	Mississippi	
United States	Missouri	
United States	North Carolina	
United States	North Dakota	
United States	Ohio	
United States	Oklahoma	
United States	Oregon	
United States	Pennsylvania	
United States	Rhode Island	
United States	South Carolina	
United States	South Dakota	

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United States	Tennessee	
United States	Texas	
United States	Utah	
United States	Vermont	
United States	Virginia	
United States	Washington	
United States	Washington, D.C.	
United States	West Virginia	
United States	Wisconsin	
United States	Wyoming	
United States	New York	New York
United States	Illinois	Cook
United States	California	Los Angeles
American Samoa		
Guam		
Micronesia		
Northern Mariana Islands		
Puerto Rico		
Palau		
Palau Marshall Islands		

Dataset

Dataset	Dataset	Data Publisher	Public Access	Public Access	External	Download	Type of Data	Collection	Collection End
Title	Description	/Owner	Level	Justification	Access URL	URL	Released	Start Date	Date
Dataset ye	t to be added								



U.S. Department of Health and Human Services

Centers for Disease Control and Prevention