

Project Determination

Assessment of the National Learning Community for HIV CBO Leadership

Project ID: 0900f3eb81bcc932

Accession #: NCHHSTP-PCCT-8/27/20-cc932

Project Contact: Grace Hall
Organization: OS/OS/OSI

Status: Pending Regulatory Clearance

Intended Use: Project Determination

Estimated Start Date: 02/01/21
Estimated Completion Date: 03/29/24

CDC/ATSDR HRPO/IRB Protocol#:

OMB Control#:

Description

Priority

Standard

Date Needed

09/21/20

Determination Start Date

08/27/20

Description

This project determination is for a non-research program evaluation that is planning to get OMB/PRA review and approval. For the purposes of program improvement, data will be collected from participants of the National Learning Community for HIV CBO Leadership eLearning short courses and a 6-week synchronous creative problem-solving intensive. Data will be used to improve outreach efforts; to improve the short courses and the creative problem-solving intensive sessions which are not rated highly by program participants; and to improve access to technology platforms used to deliver these services throughout the program's duration. In the end, the data collected by the funded recipient, Asian & Pacific Islander American Health Forum (APIAHF), will be used to evaluate the overall effectiveness of the National Learning Community for HIV CBO Leadership.

IMS/CIO/Epi-Aid/Chemical Exposure Submission

No

IMS Activation Name

Not selected

Select the primary priority of the project:

Not selected

Select the secondary priority(s) of the project:

Not selected

Select the 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 is to assess improved management practices of HIV prevention service delivery and enhanced organizational capacity.

Objective

The National Learning Community for HIV CBO Leadership objectives are to: • Describe the National Learning Community for HIV CBO Leadership participants • Assess relevance and utility of offerings • Assess implementation of learnings • Assess barriers to implementation

Activities or Tasks

New Collection of Information, Data, or Biospecimens

Target Population to be Included/Represented

General US Population: American Indian or Alaska Native: Asian: Black or African American: Hispanic or Latino: Native Hawaiian or Other Pacific Islander: White:

Female: Male: Transgender: Healthcare Provider-

Tags/Keywords

HIV Workforce: Capacity Building

CDC's Role

Activity originated and designed by non-CDC staff (awardee or external collaborator): CDC employees or agents will obtain or use anonymous or unlinked data or biological specimens: CDC employees will participate as co-authors in presentation(s) or publication(s): CDC is NOT a recipient or provider of private data, specimens, materials or services: CDC is providing funding

Method Categories

Individual Interview (Quantitative): Individual Interviews (Qualitative)

Methods

A mixed-model data collection approach, utilizing qualitative telephone interviews and quantitative web-based surveys. We anticipate an annual total of 270 HIV CBO leaders (executive directors and program managers) from community-based organizations (CBOs) will register for the National Learning Community, will complete the program's foundational courses, coaching sessions, and other optional supplemental courses on managing people, programs, and organizations, and will complete a post-participation survey three-months after registering. Participants who complete the foundational courses can participate in the optional National Learning Community's guided creative problem-solving intensive, a 6-week component made up of 1-2-hour weekly sessions. Because of the additional time commitment, we anticipate that half of all those who register for the National Learning Community will participate in the creative problem-solving intensive component. Therefore, we estimate an annual total of 135 HIV CBO leaders (executive directors and program managers) who participated in the program's foundational courses will participate in the creative problem-solving intensive and complete the semi-structured phone interview. Leaders from CDC directly funded CBOs will be invited to join the Learning Community by their CDC Prevention Program Branch project officer. National Learning Community for HIV CBO Leadership marketing and advertisement will be conducted by the CBA Provider Network and will reach CDC-funded and non-CDC funded CBOs. Registration is required to participate in the Learning Community. Participation in the post-participation survey and the post creative problem-solving intensive phone interview is voluntary. In the email invitation to complete the post-participation survey and in the opening script that is read for the phone interview, potential participants will be informed that participation is voluntary and during the phone call participants will be asked to give verbal consent to being recorded or for written no

Collection of Info, Data, or Bio specimens

Because CDC has funded and co-designed the data collection that will be used for program evaluation, the data collection is covered by the Paperwork Reduction Act and will require OMB review and approval. There will be no paper data collection for this study; all data will be electronic. No data will be sent to CDC, so CDC will not be responsible for providing access to these data. Program registration information will contain business information (business addresses and business phone numbers), demographic information, and participants will create a code which will link to the post-participation survey and phone interview. Business emails only used for the purposes of communications, will be kept in electronic files separate from the post-survey responses, post creative problem-solving intensive interview responses, and general registration demographics. Full participant names will not be collected or recorded. To minimize risks, data will be securely transferred, stored, and accessed according to existing protocols and data security and confidentiality standards at APIAHF (which are written to adhere to all standards of the CDC/NCHHSTP data security and confidentiality guidelines). To minimize the risks to participant confidentiality, data will be securely stored on APIAHF servers and access to the data will be limited to authorized project staff meeting security training requirements. For post-participation semi-structured interviews, after the potential participant has given verbal consent to either phone recordings or notes, the recordings or call notes will be immediately transcribed into a Word document and then the recordings or notes will be destroyed so only the transcriptions exist. These transcriptions will subsequently be securely transferred, stored, and accessed in accordance to existing APIAHF protocol standards. All data analyses will be conducted by the funded recipient, APIAHF. Potential participants for the semi-structured interviews will be advised to find a quiet and private location to participate in the phone call should they so choose for their privacy, and will be informed that the interviewer will be in a secure and private location during the phone call. All participants must meet the following eligibility criteria: (a) work at a community-based organization that provides HIV prevention, treatment, and/or care services, (b) have programmatic oversight over at least one HIV program, and (c) supervise at least one staff member. All interested and eligible participants will be asked to register in the National Learning Community for HIV CBO Leadership program (registration data collection). All participants who complete the registration will be granted access to the National

Learning Community for HIV CBO Leadership resources. Participants who complete the registration will also be asked to complete a post-participation survey three months after registration (linked data collection, survey). Participants who complete the Creative Problem-Solving Intensive will be asked to schedule a phone interview after they have completed the intensive (linked data collection, interview). Communications to invite participants to complete the registration, post-participation survey, and phone interviews will be conducted through participants' work emails.

Expected Use of Findings/Results and their impact

Primarily the data will be used for evaluation purposes to improve the overall program, materials, and educational offerings. Eventually the information will be used to describe the overall successes of PS19-1904.

Could Individuals potentially be identified based on Information Collected?

No

Will PII be captured (including coded data)?

No

Does CDC have access to the Identifiers (including coded data)?

No

Is an assurance of confidentiality in place or planned?

No

Is a certificate of confidentiality in place or planned?

No

Is there a formal written agreement prohibiting the release of identifiers?

No

Funding						
Funding Type	Funding Title	Funding #	Original Fiscal Year	# of Years of Award		
CDC Cooperative Agreement	Capacity Building Assistance for High Impact HIV Prevention Program Integration	PS-19-1904	2019	5		

HSC Review

HSC Attributes

Program Evaluation

Yes

Regulation and Policy

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

No

Institutions					
Institution	FWA #	FWA Exp. Date	IRB Title	IRB Exp. Date	Funding #
Asian & Pacific Islander					PS-19-1904
American Health Forum					
(APIAHF)					

Staff								
Staff Member	SIQT Exp. Date	Citi Biomedical Exp. Date	Citi Social and Behavioral Exp. Date	Citi Good Clinical Exp. Date	Staff Role	Email	Phone #	Organization/ Institution
A D Mcnaghten	02/28/2023				Principal	aom5@cdc.	404-639-	CAPACITY
					Investigator	gov	4493	BUILDING BR
Grace Hall	12/11/2021				Co-Investigator	glh6@cdc.g ov	404-639- 5224	PREVENTION AND CLINICAL CARE TEAM
Holly Avery	n/a	n/a	n/a	n/a	Principal Investigator	havey@api ahf.org		Asian & Pacific Islander American Health Forum (APIAHF)
Jamila Shipp	n/a	n/a	n/a	n/a	Co-Investigator	jshipp@api ahf.org		Asian & Pacific Islander American Health Forum (APIAHF)

DMP	
Proposed Data Collection Start Date	02/01/21
Proposed Data Collection End Date	03/29/24

Proposed Public Access Level	Non-Public
Reason for not Releasing the Data	Other- CDC will not recieve the data
Public Access justification	Not applicable.
How Access Will Be Provided for Data	There will be no paper research data for this study; all data will be electronic. All data analyses will be conducted by the funded recipient, Asian & Pacific Islander American Health Forum (APIAHF). To minimize risks, data will be securely transferred, stored, and accessed according to existing protocols and data security and confidentiality standards at APIAHF (which are written to adhere to all standards of the CDC/NCHHSTP data security and confidentiality guidelines). To minimize the risks to participants, data will be securely stored on APIAHF servers and access to the data will be limited to authorized study staff meeting security training requirements. No data will be sent to CDC.
Plans for archival and long-term preservation of the data	No data will be sent to CDC. All electronic data will be archived after the funding cycle is completed and stored for no more than 5 years after the funding cycle is completed. Data can be made available to the public in aggregate and with no identifying information included.

Spatiality (Geographic Location)				
Country	State/Province	County/Region		
United States				

Determinations						
Determination	Justification	Completed	Entered By & Role			
HSC:	Not Research / Other	12/10/20	Dodson_Janella R. (jhd7) CIO HSC			
Does NOT Require HRPO						
Review	45 CFR 46.102(I)					
	Program Evaluation					
PRA:		12/30/20	Bonds_Constance (akj8) CTR OMB/PRA			
PRA Applies			Coordinator			
ICRO:		12/30/20	Zirger_Jeffrey (wtj5) ICRO Reviewer			
Returned with No Decision						