

***SUPPORTING STATEMENT: PART B***

**November 4, 2021**

**Comprehensive Suicide Prevention Performance Monitoring**

**OMB# 0920-**

Point of Contact:

Deb Stone

Contact Information:

Centers for Disease Control and Prevention  
National Center for Injury Prevention and Control  
4770 Buford Highway NE MS F-64  
Atlanta, GA 30341-3724  
Phone: 770-488-3942  
Email: [zaf9@cdc.gov](mailto:zaf9@cdc.gov)

## **B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS**

### **B.1. Respondent Universe and Sampling Methods**

Respondents will include all grantees funded under the Comprehensive Suicide Prevention Program (CE20-2001). Funded partners will report progress and activity information to CDC using a web-based Partners' Portal. No research design or human subjects involved. 100% of the population will report, so sampling is unnecessary. Data will be reported annually by funded recipients per the terms of the Notice of Award (NOA) and the Funding Opportunity Announcement (FOA).

### **B.2. Procedures for the Collection of Information**

NCIPC has developed the web-based Partners' Portal Annual Progress Report (Attachment D). The Partners' Portal is a user-friendly interface which will be quicker, easier, and more intuitive for awardees to use than excel templates or word documents. Use of the Partners' Portal will require very little training and awardees will use the tools provided to record and update grant information.

There are significant advantages to collecting information using the Partners' Portal:

- The Partners' Portal has work plan and progress reporting fields for: program-specific activities, strategy title, strategy description, sub-strategy title, sub-strategy description, priority population, indicators, geographic areas, key deliverables/outputs, successes, and barriers and challenges. In addition, the Partners' Portal allows for reporting of details within each of these to aide in analysis and aggregation.
- The data structures and business rules will help awardees formulate performance measures that are specific, measurable, achievable, relevant and time-framed (SMART). This formulation is intended to facilitate successful achievement of performance measures and is integral to CDC's program evaluation strategy for the program.
- The information being collected provides crucial information about each awardee's work plan, activities, partnerships, successes, challenges and progress over the award period.
- The Partners' Portal contains built in data validation, calculations, and guidance to allow for easy entry, review, and reporting of indicator data.
- Capturing the required information uniformly will allow CDC to formulate ad hoc analyses and reports for program evaluation and manuscript development.
- The relational database structure in which the data are stored allows for CDC to gain immediate access to data for reporting, thereby improving timeliness. In addition, it allows for multiple awardees from each state to simultaneously enter information, which reduces the amount of collective time spent providing updates.

Awardees will complete simple information fields in a web-based data entry form, tailored for their specific work plans, and submit to assigned NCIPC staff on an annual basis.

### **B.3. Methods to Maximize Response Rates and Deal with Nonresponse**

This is required reporting for recipients of CE20-2001. Annual reports are a requirement for each grantee awarded funding under the FOA in order to continue to receive grant funding. Hence, response rates are expected to be 100%.

### **B.4. Tests of Procedures or Methods to be Undertaken**

The Partners' Portal has been in use for two funding cycles of several funded programs across NCIPC. The 2021 Partners' Portal for Comprehensive Suicide Prevention was pilot tested by 9 current recipients and revisions to the portal made per feedback received (e.g. better connect parts of the portal together to allow for a more complete narrative).

### **B.5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data**

CDC Performance Consultation

- Brandon Nesbit, lead health scientist, vxw6@cdc.gov
- Sally Thigpen, health scientist, sti9@cdc.gov
- Allison Gately, health scientist, yoy4@cdc.gov

CDC Programmatic Consultation

- Deb Stone, lead behavioral scientist, zaf9@cdc.gov
- Audrey Moffitt, public health advisor, hin4@cdc.gov
- Melissa Brown, behavioral scientist, oth2@cdc.gov
- Ellen Yard, epidemiologist, igf8@cdc.gov
- Laura Welder, behavioral scientist, qmk4@cdc.gov
- Elizabeth Gaylor, behavioral scientist, [hzx4@cdc.gov](mailto:hzx4@cdc.gov)
- Eva Trinh, health scientist, nyv8@cdc.gov