**HIV Prevention Capacity Development Needs Assessments of Federally funded Health Departments and Community-Based Organizations**

Generic Information Collection Request under OMB #0920-new

Section B: Supporting Statement

ICRO DO Review

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# Respondent Universe and Sampling Methods

The HIV Prevention Capacity Development Needs Assessments of Federally funded Health Departments and Community-Based Organizations’ respondent universe includes two types of agencies: (1) CDC directly funded community-based organizations (CBOs), and (2) CDC directly funded health departments (HDs), collectively referred to as directly funded agencies. The CDC anticipates the population of eligible agencies will participate, not just a sample. The population will include approximately 200 agencies: 130 CBOs, and 70 HDs. The most recent funding mechanisms for CBOs totaled 126 agencies, and the most recent funding mechanism for HDs totaled 60 agencies; the CDC may increase these numbers under future funding mechanisms. This estimation of increased number of directly funded agencies is informed by the President of the United States announcing in 2019 the Ending the HIV Epidemic in the United States by 2030 initiative. Given the ambitious nature of the initiative, this application anticipates additional agencies may be funded under future mechanisms. As such, this application seeks approval for 200 participant agencies.

The entire universe is anticipated given the CDC is assessing the needs of individual agencies funded to provide HIV prevention and surveillance services. CDC would like to know each agency needs, thus why the CDC is targeting the entire population rather than a sample.

# Procedures for the Collection of Information

The CBO and HD needs assessments will collect data through the CDC’s Capacity Building Assistance (CBA) Tracking System (CTS). CTS is the online system directly funded agencies request training and technical assistance.

The three HIV-related funding mechanisms in which CBOs and HDs receive CDC dollars (PS18-1802 [expected replacement in 2023], PS21-2102, and PS23-2302 [currently funded under PS17-1704]) requires funded agencies to register a primary user in CTS. This registration includes agency name, agency’s primary CTS user’s name, and the primary user contact information, e.g., business telephone and email. This information is stored in CTS to follow up on submitted requests for training and technical assistance (TA). For this data collection application, this information will be used to identify the agency representative that will be asked to complete the needs assessment on behalf of their agency. Email notifications will be sent from CTS to each agency’s CTS primary user informing them of the needs assessments availability as well as one week prior to the close of data collection. When the agency’s primary CTS user logs into CTS during the data collection period (which will last no less than three weeks, and no more than one month) they will be prompted by the system to complete the needs assessment. Participating in the needs assessment data collection is voluntary, as such the agency’s primary CTS user will have the ability to decline the assessment.

In CTS, those agency primary CTS users voluntarily agreeing to participate will be asked to answer six to seven questions, depending on whether they represent a HD or CBO. The first three questions verify the agency they are completing the needs assessment on behalf of, they are the registered primary CTS user for that agency, and that the contact information currently housed in CTS is correct. In the latter case, if their contact information is incorrect, they will be asked to provide updated information. Question four asks the participant about their agencies training needs, and question five asks about TA needs. The response categories are content specific areas noted in the respective funding mechanism with respective trainings and TA areas the CDC offers at the time of the assessment. In other words, these questions ask if the participant’s agency would like training and/or TA in pre-defined content areas currently made available to them to meet their programmatic goals. Question 6 in the CBO needs assessment asks about a package of trainings and TA content specific to CBOs. This question will not be asked of HD respondents. The last question in both assessments is an open-ended question to understand if the agency has training or TA needs not covered in the assessment. This final question will provide the CDC information on content areas the CDC may want to consider for future training or TA development. All questions are designed as “Yes/No,” check a box, or very short answer responses.

Once the participating primary CTS user completes their assessment, they will be asked to submit their responses by selecting a button labelled “submit.” If the primary CTS user initiates a response, but needs to stop before completing the assessment, they can select to save their responses and return to the assessment during the data collection period. CTS will store their responses for later completion or adjustment. All submitted and saved responses will be reported at the end of data collection, and all CTS primary users initiating a response to the assessment will be informed that CTS will report saved and submitted responses.

This data collection activity was determined to be non-research for Institutional Research Board purposes, as such there is no consent process, though both instruments inform the participant that their participation is voluntary, and they can exit the instrument at any time.

Once the data collection period for each instrument expires, CDC staff will run automated data reports in CTS. CTS will generate these data reports in commercially available software, e.g., Microsoft Excel. The intended reports include a report on training needs, another on TA needs, another on the open-ended question about needs not currently addressed by existing training and TA content, and the final report is specific to the CBO package of specialized training and TA. These reports will include agency name, agency’s primary CTS user’s name, and primary CTS user’s contact information for each content area the agency is requesting training and/or TA. Given the inclusion of the CTS primary user’s name, their agency name, and professional contact information, these reports will only be accessible to CDC staff and the agencies in cooperative agreement with the CDC to provide training and technical assistance.

The data reports will be the only forms containing participating CTS primary usernames, agency name, and professional contact information.

CDC has also completed a Privacy Impact Assessment of the data system used by the contractor team (**Attachment 5**). The contractor team also completes an annual renewal process for their data system and has a current Authority to Operate approval. Public access to the data will not be provided.

# Methods to Maximize Response Rates and Deal with No Response

The CDC will use the following procedures to maximize participation and to achieve the desired response rate:

Marketing of the needs assessment will occur through webinars that welcome the agencies to their funding mechanism, i.e., welcome and orientation calls. In addition, the CDC conducts webinars to orient and train directly funded agencies primary CTS users on how to register for the CTS system, how to access and request training and TA through the system, and what to expect upon request. These webinars will include information about this data collection effort. In addition, the CDC will host a third series of webinars that introduces the directly funded agencies to the CBA providers that conduct training and TA on behalf of the CDC and walks them through the training and TA needs assessment, including what questions will be asked, so that the agencies CTS primary users can conduct any internal review to answer the needs assessments questions.

Nonresponses will not be addressed in this data collection. Agencies with primary CTS users that do not save or submit a response to the assessment will understand they can submit individual agency training and TA needs separate from this data collection effort.

# Tests of Procedures or Methods to be Undertaken

The agency, i.e., SeKON, contracted by the CDC to build and maintain CTS will build the needs assessment instruments and reporting functionality in the system and will test user access, data collection ease and navigation, and reporting accuracy as part of the system design and build process. This process occurs in conjunction with CDC oversight and input. The needs assessment instruments have been designed and reviewed by CDC staff that work directly with the agencies being asked to complete the assessments. In addition, CDC staff have piloted the ease of instrument completion, and this pilot informs the estimated burden time of this application.

# Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data

Exhibit 5.1 below lists the needs assessment team members consulted on the aspects of design and those who will be collecting and analyzing the information. Please note: this data collection effort does not involve the use of statistical procedures beyond descriptive statistics, i.e., response aggregation and frequencies.

Exhibit 5.1: Needs Assessment Consultants

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