

# **Management Information System for Comprehensive Cancer Control Programs**

## **Supporting Statement B**

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## TABLE OF CONTENTS

<b>B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS.....</b>	<b>3</b>
<i>B1. Respondent Universe and Sampling Methods.....</i>	<i>3</i>
<i>B2. Procedures for the Collection of Information.....</i>	<i>3</i>
<i>B3. Methods to Maximize Response Rates and Deal with No Response.....</i>	<i>4</i>
<i>B4. Tests of Procedures or Methods to be Undertaken.....</i>	<i>5</i>
<i>B5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data.....</i>	<i>5</i>
<b>REFERENCES.....</b>	<b>6</b>

### ATTACHMENTS

1. Public Health Service Act [42 U.S.C. 241]
2. NCCCP Survey Instructions
  - a. Web-based survey Pre-notification Email
  - b. Web-based survey Invitation Email
  - c. Web-based survey First and Second Reminder Emails
  - d. Web-based survey Thank You Email
  - e. Word Document Survey
  - f. Web-based survey (screenshots)
3. NCCCP Annual Key Informant Interview
  - a. Key Informant Interview Introductory Letter
  - b. Key Informant Interview Informed Consent & Interview Script
4. Non-substantive Public Comment
  - a. Published Notice
  - b. Non-substantive public comment

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

### ***B1. Respondent Universe and Sampling Methods***

The National Comprehensive Cancer Control Program (NCCCP), which provides funding to 66 state health departments and the District of Columbia, US Territories and Freely Associated States, Federally Recognized American Indian Tribes, Tribal Organizations, Alaska Native Organizations, and Urban Indian Organization; or their Bona Fide Agents, to design, implement, and evaluate comprehensive cancer control plans to reduce the burden of cancer locally. Support for these programs is a cornerstone of Centers for Disease Control and Prevention (CDC) efforts to reduce the burden of cancer throughout the nation. Awards to individual applicants are made for a five-year budget period. Continuation awards for subsequent budget periods are made on the basis of satisfactory progress in achieving both national and program-specific goals and objectives, as well as the availability of funds. The information collection is authorized by the Public Health Service Act, Section 301, 241(a) (see Attachment 1). The assessment of the DP22-2202 cooperative agreement will consist of two data collection activities: 1) **NCCCP Survey (Attachments 2e and 2f)** 2) **NCCCP Annual Key Informant Interview (Attachment 3b)**. Table B-1 displays the expected number of respondents for each data collection activity.

**Table B-1. Number of NCCCP Programs Participating in Collection of Information**

Respondent Type	Instrument	No in response universe	Expected response
Program Director for State-, Tribal-, or Territorial-based Cancer Prevention and Control Program	NCCCP Annual Key Informant Interview	54	100%
<b>Program Director for State-, Tribal-, or Territorial-based Cancer Prevention and Control</b>	NCCCP Survey	132	100%

<b>Program</b>			
<b>Total</b>		186	

**B2. Procedures for the Collection of Information**

**NCCCP Survey**

The web-based survey will be administered at two time points, once in Year 2 and again in Year 4 of the cooperative agreement. To generate the initial sample for the web-based survey, contract information for all 66 NCCCP recipients program directors will be gathered from official CDC reporting systems. CDC staff will engage all NCCCP recipient program directors to participate in the survey and identify/recruit a NCCCP partner.

For the web-based survey, all potential respondents will receive the following rounds of communication: a pre-notification email informing them of the web-based survey (**Attachment 2a**); an invitation email with the survey link (**Attachment 2b**); a first reminder email sent 1 week after the invitation email (**Attachment 2c**) if they have not yet responded to the survey a second reminder email will be sent 1 week after the first reminder (**Attachment 2c**); and a thank you email sent within 1 week of completion of the survey (**Attachment 2d**).

Information will be collected, stored, and maintained and protected under data privacy policies. Both quantitative and qualitative analyses will be performed. Quantitative analyses will involve using descriptive statistics to determine frequency distributions and corresponding variances for responses to each web-based survey question and will be conducted using a statistical software package for data management and analysis. Qualitative thematic analyses will be conducted on open-ended questions. Analysis will focus on describing: 1) Participant Characteristics; 2) Comprehensive Cancer Control (CCC) Plan; 3) EBIs and their responsiveness to the CCC Plan Priorities; 4) CCC Partnerships’ contributions to the CCC Plan Priorities Implementation and 5)

program accomplishments. Collectively, the information collected will be used to identify how CDC can make program improvements.

### **NCCCP Annual Key Informant Interview**

Interview guides tailored for each specific audience will be used to collect information from participants. All participants (program directors or managers, program evaluators, and partners) will be interviewed annually during the cooperative agreement program year. Interviews with program directors or managers, program evaluators, and partners will explore CCC program implementation, partnership engagement, and sustainability efforts. All interviews will be conducted virtually or via telephone.

Upon OMB approval, an Introductory Email to each program director or manager to provide them with information about the interview and confirm their interest and willingness to participate (**Attachment 3a**) will be distributed. Within one month, CDC staff will engage all NCCCP recipient program directors to participate in the survey and identify/recruit a NCCCP partner for each interview. The program director or manager will be asked to identify and additional individual, from a partner who will be willing to participate in the case study.

Two project team members will lead each interview, one as the lead interviewer and the other as the primary transcriber. Each interviewer will be trained in the full project protocol, including each of the tailored interview guides, and will review pertinent program materials. At the start of each interview, the interviewer will read aloud the informed consent and ask the respondent to give verbal consent to participate and for the interview team to audio record the interview for analysis purposes. The interviewer will use the appropriate tailored interview guide to generate questions and probes for gathering information throughout the interview (see **Attachments 3b**). Each interview will be audio recorded to serve as a backup to interview notes.

### ***B3. Methods to Maximize Response Rates and Deal with No Response***

To maximize response, the contractor will send multiple communications to each DP22-2202 program director or manager to provide them with information about the case studies and

confirm their interest and willingness to participate (**Attachment 3a**). The contractor will also provide support for identifying and scheduling interviews with appropriate respondents. In the event that one or more is unable or unwilling to participate, that organization will be substituted with an alternate organization and the total number of case studies will remain the same.

The web-based survey (**Attachments 2e and 2f**) is based on a previous web-based survey that was used for the last data collection. Multiple notifications will be sent: a pre-notification email informing them of the web-based survey (Attachment 2a); an invitation email with the survey link (Attachment 2b); a first reminder email sent 1 week after the invitation email (if they have not yet responded to the survey) and a second reminder email sent 1 week after the first reminder (if they have not yet responded to the survey).

***B4. Tests of Procedures or Methods to be Undertaken***

CDC staff and contractors, who comprise the study team, were involved in the development, review, and approval of data collection instruments and other supporting documents. The data collection will undergo rigorous application testing, including usability testing of system design, and accuracy and comprehension testing of proposed data elements. In addition, this testing is the basis for the estimated burden per response

***B5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data***

CDC provides overall direction for all data collection planning and implementation activities, including overseeing the data collection protocol and data reporting. The CDC members, including NCCCP program consultants and epidemiologists, have provided input on content, functionality, and usability of the database. The principle contact for each organization are listed below in table B-2.

**Table B-2 Principal Contacts for Each Organization**

<b>Name</b>	<b>Contact Info</b>	<b>Organization</b>	<b>Role</b>
Trey Bonner	kfz5@cdc.gov, 770-488-2799	Comprehensive Cancer Control Branch, Centers for Disease Control and Prevention	Public Health Advisor
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<b>Name</b>	<b>Contact Info</b>	<b>Organization</b>	<b>Role</b>
	3094	Cancer Control Branch, Centers for Disease Control and Prevention,	Health Advisor
Trina Pyron	dfo4@cdc.gov, 770-488-0971	Comprehensive Cancer Control Branch, Centers for Disease Control and Prevention	Data collection/ Public Health Advisor
Karmarcha Martin	Sxv6@cdc.gov	Comprehensive Cancer Control Branch, Centers for Disease Control and Prevention	Evaluation and Statistical Support