Project Determination

# **Core State Injury and Violence Prevention Program (SIPP) Evaluation**

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| **Project ID:** | 0900f3eb81cb9553 |
| **Accession #:** | NCIPC-PIEB-3/3/21-b9553 |
| **Project Contact:** | Brandon Nesbit |
| **Organization:** | NCIPC/OD/OS |
| **Status:** | Pending Regulatory Clearance |
| **Intended Use:** | Project Determination |
| **Estimated Start Date:** | 08/01/21 |
| **Estimated Completion Date:**  | 07/31/26 |
| **CDC/ATSDR HRPO/IRB Protocol#:**  |  |
| **OMB Control#:**  |  |
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| --- |
| Description |
| Priority |
| Standard |
| Date Needed |
| 03/31/21 |
| Determination Start Date |
| 03/03/21 |
| Description |
| This Notice of Funding Opportunity (CDC-RFA-CE21-2101) supports health department infrastructure, data and partnerships to identify and respond to existing and emerging injury threats with data-driven public health actions. These actions are intended to increase protective factors and reduce risk factors using the best available evidence for injuries and death. Such an approach includes engaging in robust data and surveillance, strengthening strategic collaborations and partnerships, and conducting assessment and evaluation. The overall goal of this approach is to inform public health action for injury prevention. An enhanced funding component is available for recipients to implement and evaluate prevention strategies while incorporating novel surveillance activities, with the goal of contributing practice-based evidence to strengthen the overall evidence base for injury prevention. While all recipients will focus their strategic efforts on prevention of traumatic brain injury (TBI), transportation-related injury, and Adverse Childhood Experiences (ACES), recipients are also encouraged to examine their data and flex up to 25% of their award to address identified priority injury topics of local concern (i.e. drowning, older adult falls, or suicide). This project determination is specific to the Core SIPP evaluation only. The NOFO has already been cleared. |
| IMS/CIO/Epi-Aid/Lab-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 |
| Lab-Aid Name |
| Not selected |
| Assessment of Chemical Exposure Name |
| Not selected |
| Goals/Purpose |
| This evaluation is designed to assess recipients&apos; capacity to strengthen public health infrastructure, data, and partnership to identify and respond to existing and emerging injury threats with data-driven public health actions in their jurisdictions. The evaluation will measure a)changes in recipients capacity to implement public health actions b)leveraged funds and resources as a result of Core SIPP funding c)Impact of implementation and evaluation efforts. |
| Objective |
| Evaluate and describe the impact of Core SIPP funding on 1) Recipients&apos; capacity to strengthen public health infrastructure, data, and partnership to identify and respond to existing and emerging injury threats with data-driven public health actions in their jurisdictions. 2) Decrease injury related morbidity and mortality in priority topic areas (MV, TBI, ACEs) in funded jurisdictions. |
| Does this project include interventions, services, or policy change work aimed at improving the health of groups who have been excluded or marginalized and/or decreasing disparities? |
| Not Selected |
| Project does not incorporate elements of health equity science |
| Not selected |
| Measuring Disparities |
| Not selected |
| Studying Social Determinants of Health (SDOH) |
| Not selected |
| Assessing Impact |
| Not selected |
| Methods to Improve Health Equity Research and Practice |
| Not selected |
| Other |
| Not selected |
| Activities or Tasks |
| Programmatic Work |
| Target Population to be Included/Represented |
| General US Population |
| Tags/Keywords |
| Program Evaluation |
| CDC's Role |
| CDC provides technical assistance but does not specifically request or approve study design or data collection |
| Method Categories |
| Individual Interviews (Qualitative); Secondary Data Analysis; Surveillance Support; Technical Assistance |
| Methods |
| Mixed methods design including a)individual interviews with recipients b)annual reporting on activities, performance measures, evaluation indicators, leveraged resources and funds, and implementation capacity enhancements c)submission of jurisdiction level surveillance data. All analysis will be secondary analysis on data collected and submitted by recipients or primary analysis on data collected directly from funded recipients. |
| Collection of Info, Data, or Bio specimens |
| Qualitative data will be collected through in-person or virtual interviews and narrative forms on annual progress reporting. Interviews will occur once a year with individual recipients to capture information on a broad range of program efforts, challenges, and successes to inform continuous quality improvement, technical assistance administration, and program impact. Quantitative data will be collected via the Partners Portal (web-interface) or excel documents submitted as part of the annual progress reporting and evaluation requirements. Annually recipients will submit information on public health actions, evaluation indicators, and success stories. We will be collecting data on leveraged resources and funds through excel templates developed in collaboration with the Econ Team in DIP. Data on implementation capacity enhancements will be collected through rubric style reporting in the Partners Portal. Aggregate surveillance data will be collected via Injury Indicator and special emphasis reports submitted annually. |
| Expected Use of Findings/Results and their impact |
| Evaluation results will be used to inform programmatic improvement, technical assistance, and program impact. Programmatic improvements will be made within cycle and across funding cycles, both for individual recipients and across recipients. Findings will be used to inform technical assistance at both the recipient level and program level. Impact of program funding will be used to communicate with CDC leadership and other stakeholders and to inform the evidence base and future implementation efforts. |
| Could Individuals potentially be identified based on Information Collected? |
| No |

| ****Funding**** |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Funding Type | Funding Title | Funding # | Original Fiscal Year | # of Years of Award | Budget Amount |

| ****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 # |

| ****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 |
| Sally Thigpen | 05/16/2025 |  | 10/19/2024 |  | Project Coordinator | sti9@cdc.gov | 770-488-3892 | PROGRAM IMPLEMENTATION AND EVALUATION BRANCH |

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| ****DMP**** |  |
| ****Proposed Data Collection Start Date**** | **09/01/21** |
| ****Proposed Data Collection End Date**** | **07/31/26** |
| ****Proposed Public Access Level**** | **Public, Non-Public** |
| ****Reason for not Releasing the Data**** | **CIO conducting this project does not fund or own the data and is not responsible for making it available** |
| ****Public Access justification**** | **CDC will not publish data this is owned by funded jurisdictions. CDC may provide aggregate level data to the public that describes the program overall. Jurisdiction specific data will not be identified or released by CDC.** |
| ****How Access Will Be Provided for Data**** | **Only aggregate level data (at the recipient or program level) will be shared externally. No PII will be collected. Evaluation data will be published to the CDC website. Morbidity and mortality data will not be published to the CDC website. Jurisdictions will own this data and publish on their own websites. The jurisdiction data will be more timely and at a line level rather than analyzed/aggregate level data submitted to CDC.** |
| ****Plans for archival and long-term preservation of the data**** | **Will follow CDC records management guidelines** |

| ****Spatiality (Geographic Location)**** |  |  |
| --- | --- | --- |
| Country | State/Province | County/Region |

| ****Determinations**** |
| --- |
| Determination | Justification | Completed | Entered By & Role |
| HSC: Does NOT Require HRPO Review | Not Research / Other*45 CFR 46.102(l)*Program Evaluation | 09/17/21 | Angel\_Karen C. (idy6) CIO HSC |
| PRA: PRA Applies |  | 09/17/21 | Angel\_Karen C. (idy6) OMB / PRA |