**CDC/STSDR Generic Clearance  
Formative Research and Tool Development**

**Supporting Statement B**

*Building Resilience for State and Local Health Department Staff Responding to Public Health Emergencies*

March 21, 2024

Contact Information:

Sara Vagi, PhD CEM

Division of Emergency Operations, Office of Readiness and Response

Centers for Disease Control and Prevention (CDC)

404-639-0879

**Table of Contents**

Collection of Information employing Statistical Methods

1. Respondent Universe and Sampling Methods

2. Procedures for the Collection of Information

3. Methods to Maximize Response Rates and Deal with Nonresponse

4. Tests of Procedures or Methods to be Undertaken

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

**B. Collections of Information Employing Statistical Methods**

1. **Respondent Universe and Sampling Methods**

The respondent universe for the proposed data collection includes staff in health departments that are participating in a pilot intervention of strategies to improve employee wellness. This data collection includes both survey responses and interviews/focus groups. Each of these elements of the data collection will be sampled differently.

**Surveys:** For the pre- and post-implementation surveys, all employees participating in the intervention will be invited to complete the survey. We estimate that there will be approximately 600 employees invited to participate in the surveys based on their participation in a pilot activity. With an estimated survey response rate of 60%, we expect that approximately 360-400 participants will complete the survey.

**Interviews/Focus Groups:** For these qualitative data collections, a simple random sample of employees participating in the pilot interventions will be invited to participate. The exact number and percentage of employees who are invited to participate will be based on the number of employees who participated at the end of the pilot implementation.

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

For this effort, data will be collected via two separate methods: an online survey and web-based interviews/focus groups. For each of these data collection activities, informed consent will be collected. The consent will inform potential participants of the private and voluntary nature of the study and provide general information about the study, the topics to be covered in the surveys, and potential risks. The data collection procedures for each of these efforts are described separately.

**Surveys:** All staff participating in the pilot implementation of a strategy will be invited to complete both a pre- and post-implementation survey. They will receive this survey through an email that provides a link to the online survey; they will be informed of the voluntary nature of completing the surveys. Staff will be asked to complete both the pre- and post-survey of the pilot so that analysis can link their specific ratings before and after they participate in the pilot. This will allow for analysis to show the impact of the pilot on staff in the health departments.

**Interviews/Focus Groups:** Interviews/focus groups will occur after the completion of the pilot implementation. Participating health departments will provide contact information for their staff who are part of the pilot implementation. For the interviews/focus groups, the research team will randomly select staff to participate. These staff will receive an email invitation to participate in the qualitative data collection. This email will also indicate that participation is voluntary and the health department will not know who was selected to participate and chose to participate. It will also include a screening question to ensure that the employee did participate in the pilot implementation. CDC will not receive any personally identifiable information for participants, and no personally identifiable information will be stored with data from the interviews/focus groups.

The interviews/focus groups will be led by trained facilitators and follow a protocol with open-ended questions and associated probes for the participants to answer. The interview/focus group protocols have been submitted with this request.

**3. Methods to Maximize Response Rates and Deal with No Response**

To maximize participation and achieve desired high response rates, the research team will target participants who have participated in a specific intervention so that they understand the topic of the survey and why they are being asked to participate. Focusing on the value that their participation will bring to public health department support of their employees will also help to encourage participation. Survey instruments and interview/focus group protocols have been kept as brief as possible to be considerate towards the participants’ time and encourage completion. We will follow up with participants to encourage them to respond if desired response rates are not reached.

**4. Test of Procedures or Methods to Be Undertaken**

We will pre-test the data collection instruments with internal staff, and potentially with fewer than nine external colleagues who are familiar with health department needs and how strategies will be implemented. This pre-test will only be used to ensure the data collection tools are effective, applicable, available, and understood by potential participants.

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

CDC is working with a contractor, ICF, to conduct this data collection and analysis. ICF employs PhD level data scientists who provided input on these procedures and will lead data analysis efforts.