Project Determination

# **Transportation Safety Resource for Action Tool Development**

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| **Project ID:** | 0900f3eb82453022 |
| **Accession #:** | NCIPC-ASB-9/27/24-53022 |
| **Project Contact:** | Rebecca Naumann |
| **Organization:** | NCIPC/DIP/ASB |
| **Status:** | Project In Progress |
| **Intended Use:** | Project Determination |
| **Estimated Start Date:** | 09/30/24 |
| **Estimated Completion Date:** | 09/29/25 |
| **CDC/ATSDR HRPO/IRB Protocol#:** |  |
| **OMB Control#:** | 0920-1154 |
| **End of Human Research Date:** |  |
|  |  |

|  |
| --- |
| Description |
| Priority |
| Standard |
| Date Needed |
| 10/15/24 |
| CDC Priority Area for this Project |
| Not selected |
| Determination Start Date |
| 09/27/24 |
| Description |
| Transportation crashes remain a leading cause of fatal and nonfatal injury, with persistent and growing disparities for certain road user types and segments of the population. While there is currently unprecedented recognition for the need to understand and intervene on transportation injury as a public health problem, there is an extreme gap and dearth of tools and resources available to states and local communities to help select and prioritize public health-focused programs, policies, and practices that are most likely to result in safety gains. This project directly responds to this gap by conducting formative work to eventually inform the development of a comprehensive, cohesive, and user-friendly tool for public health and transportation decision-makers to use in understanding and selecting equity-centered, evidence-based interventions for their states and communities. |
| IMS/CIO/Epi-Aid/Lab-Aid/Chemical Exposure Submission |
| No |
| IMS Activation Name |
| Not selected |
| Submitted through IMS clearance matrix |
| Not selected |
| Primary Scientific Priority |
| Not selected |
| Secondary Scientific Priority (s) |
| Not selected |
| Task Force Responsible |
| 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 |
| The purpose of this non-research project is to conduct formative evaluation work for a transportation safety evidence synthesis tool for public health and transportation decision-makers to use in understanding and exploring equity-centered, evidence-based interventions that may be of use in their states and communities. |
| Objective |
| Specific objectives will include formative tasks to help shape development of a tool, including identifying the specific types of programs, practices, and policies to be included in the new tool/resource, defining the types of information to present (e.g., injury prevention estimates, key implementation components, costs), and mocking-up a specific plan and flow for the tool, articulating specific inputs and outputs of the tool. Specifically, this work will involve: 1) Conducting an evaluation of CDC’s current Motor Vehicle Prioritizing Interventions and Cost Calculator for States (MV PICCS) tool and potential conceptualization of a future tool by collecting formative evaluation information via semi-structured interviews with state public health and transportation staff. Professional associations and organizations who frequently work with state public health and transportation partners, when providing technical assistance and advice about project prioritization, will also be included in this formative evaluation data collection. 2) Conducting a synthesis of effective and Safe System-consistent transportation safety programs, practices, and policies that could be embedded in the new tool. The emphasis of the synthesis will be to describe the effectiveness of each program, practice, or policy for reducing transportation injuries and deaths, including and importantly any effects that could address disparities and improve health equity. The scan might also include program, practice, and policy costs, potential organizations that would need to be involved for successful implementation (e.g., public health, engineers, policymakers), and other intervention characteristics that would be most useful to state agency staff and decisionmakers selecting potential transportation safety programs, practices, and policies for implementation. |
| Does your project measure health disparities among populations/groups experiencing social, economic, geographic, and/or environmental disadvantages? |
| No |
| Does your project investigate underlying contributors to health inequities among populations/groups experiencing social, economic, geographic, and/or environmental disadvantages? |
| No |
| Does your project propose, implement, or evaluate an action to move towards eliminating health inequities? |
| Yes |
| Activities or Tasks |
| New Collection of Information, Data, or Biospecimens |
| Target Population to be Included/Represented |
| Other-Transportation and public health professionals |
| Tags/Keywords |
| Transportation; Policy; Decision Making; Health Equity |
| CDC's Role |
| CDC employees will provide substantial technical assistance or oversight; CDC is providing funding |
| Method Categories |
| Individual Interviews (Qualitative) |
| Methods |
| For the formative evaluation data collection, we will interview no more than 20 non-federal partners (approval will be sought under a Gen IC package to conduct this data collection). The sampling strategy will include a purposive snowball sampling approach. It will be purposive in that we will engage known contacts whose role at least partly involves designing, administering, or evaluating transportation safety practices, programs, policies. Specifically, respondents will include people from state transportation and public health agencies, who currently use the MV PICCS Tool or may use a revised version in the future. UNC, ASTHO, and CDC will all provide suggestions to the initial list of participants that will be contacted. We will also reach out to professional associations and organizations who frequently work with state public health and transportation partners when providing technical assistance and advice about project prioritization. The interviews will be virtual and will not exceed 50 minutes. Data will be analyzed using qualitative thematic analysis of semi-structured interview data. Any data transmitted to CDC will be free of personally identifying information (PII). For the formative task of synthesizing effective and Safe System-consistent transportation safety programs, practices, and policies that could be embedded in the new tool, the search will include peer-reviewed publications but may also involve reputable sources from the “grey” literature. These interrelated objectives will ultimately constitute formative work to help inform tool development. |
| Collection of Info, Data, or Bio specimens |
| Data collection will include purposive selection of key informants, as noted above. Respondents will be contacted up to three times by email to inquire about their willingness to participate. The email will provide general information about the study, that there are no known risks to participating, and the completely voluntary nature of the data collection. We will let potential respondents know that the purpose of the data collection is to gather information on the features and elements of MV PICCS that should be retained and integrated into a new transportation safety tool, as well as to gather information on new features and elements that end users desire in a new tool to help inform their transportation safety decision-making. Project staff conducting the data collection will have access to PII, specifically names and email address, in order to contact potential participants. PII will be accessible only to the project-specific research staff. Data collection will occur via a web-based interview (e.g., over Microsoft Teams or Zoom) using a semi-structured interview guide. UNC will lead the development of the interview guide with CDC and ASTHO providing input and edits. The interview guide is composed of questions with corresponding probes to allow for open-ended verbal responses and feedback. Interviewers will take notes during the interview, and respondents will be asked if the interview can be recorded to support filling in any gaps in notetaking. If they agree, the interview will be recorded. If they do not agree to be recorded but agree to be interviewed, the interview will be conducted and only notes will be taken. UNC will conduct the interviews. Data collected, including notes and any recordings, will be kept on secure computer servers with access restrictions to only project staff (not at CDC). UNC will analyze the data using qualitative thematic analysis of semi-structured interview data. Any data transmitted to CDC will be free of PII. |
| Expected Use of Findings/Results and their impact |
| Information from the formative semi-structured interviews and literature synthesis will be used to inform the eventual design of a Transportation Safety Resource for Action Tool that best meets the needs of partners. The project will gather information on the features and elements of an older tool that should be retained and integrated into the new tool, as well as new features and elements that end users desire in the new tool to help inform their transportation safety decision-making. |
| Could Individuals potentially be identified based on Information Collected? |
| Yes |
| Will PII be captured (including coded data)? |
| Yes |
| Does CDC have access to the Identifiers (including coded data)? |
| No |
| Is this project covered by an Assurance of Confidentiality? |
| No |
| Does this activity meet the criteria for a Certificate of Confidentiality (CoC)? |
| No |
| Is there a formal written agreement prohibiting the release of identifiers? |
| No |

| ****Funding**** |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Funding Type | Funding Title | Funding # | Original Fiscal Year | # of Years of Award | Budget Amount |
| CDC Cooperative Agreement | Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nations Health | 24-0080 | 2024 |  |  |

| ****HSC Review**** |
| --- |
| HSC Attributes |
| Other - formative evaluation data collection |
| Yes |

| ****Regulation and Policy**** |
| --- |
| Do you anticipate this project will require review by a CDC IRB or HRPO? |
| No |

| Will you be working with an outside Organization or Institution? Yes |
| --- |

| ****Institutions**** |  |  |  |  |
| --- | --- | --- | --- | --- |
| Institution | FWA # | FWA Exp. Date | Funding | Funding Restriction Amount |
| Association of State and Territorial Health Officials | FWA00026823 | 08/25/28 | Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nations Health - 24-0080 |  |
| University of North Carolina at Chapel Hill | FWA00004801 | 02/12/29 | Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nations Health - 24-0080 |  |

| Institution | Funding Restriction Percentage | Funding Restriction Reason | Funding Restriction has been lifted |
| --- | --- | --- | --- |
| Association of State and Territorial Health Officials |  |  |  |
| University of North Carolina at Chapel Hill |  |  |  |

| Institution | Institution Role(s) | Institution Project Title | Institution Project Tracking # | Prime Institution |
| --- | --- | --- | --- | --- |
| Association of State and Territorial Health Officials | Receiving Direct HHS Support (Prime Awardee); Providing Technical Assistance |  |  |  |
| University of North Carolina at Chapel Hill | Obtaining Consent; Designing or Developing Project and/or Data Collection Instrument(s); Recruiting Subjects |  |  |  |

| Institution | Regulatory Coverage | IRB Review Status |
| --- | --- | --- |
| Association of State and Territorial Health Officials | IRB Review is Not Required |  |
| University of North Carolina at Chapel Hill | IRB Review is Not Required |  |

| Institution | Registered IRB | IRB Registration Exp. Date | IRB Approval Status |
| --- | --- | --- | --- |
| Association of State and Territorial Health Officials |  |  |  |
| University of North Carolina at Chapel Hill |  |  |  |

| Institution | IRB Approval Date | IRB Approval Exp. Date | Relying Institution IRB |
| --- | --- | --- | --- |
| Association of State and Territorial Health Officials |  |  |  |
| University of North Carolina at Chapel Hill |  |  |  |

| ****Staff**** |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Staff Member | SIQT Exp. Date | Citi Biomedical Exp. Date | Citi Social and Behavioral Exp. Date | Citi Good Clinical Exp. Date | Citi Good Laboratory Practice Exp. Date | Staff Role | Email | Phone # | Organization/  Institution |
| AaronGrober | 07/24/2026 | 05/08/2020 | 07/12/2021 |  |  | Contract Officer Representative | xih7@cdc.gov | 770-488-0787 | APPLIED SCIENCE BRANCH |
| BethanyWest | 03/16/2026 |  | 10/07/2027 |  |  | Individual Investigator | hzv5@cdc.gov | 770-488-0602 | TRANSPORTATION SAFETY TEAM |
| CaitlinLanghorne Griffith | n/a | n/a | n/a | n/a | n/a | Institution Primary Contact | clanghorne@astho.org |  | Association of State and Territorial Health Officials |
| RebeccaNaumann | 06/22/2026 |  |  |  |  | Individual Investigator | emo9@cdc.gov | 770-488-3688 | APPLIED SCIENCE BRANCH |
| SethLaJeunesse | n/a | n/a | n/a | n/a | n/a | Institution Primary Contact | lajeune@hsrc.unc.edu |  | University of North Carolina at Chapel Hill |

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| ****DMP**** |  |
| ****Proposed Data Collection Start Date**** | **11/01/24** |
| ****Proposed Data Collection End Date**** | **09/30/25** |
| ****Proposed Public Access Level**** | **Public, Non-Public** |
| ****Reason for not Releasing the Data**** | **Other- For the interviews-- too few respondents will participate; the data are solely being used to improve the next generation of a tool, and therefore would not be useful to the public** |
| ****Public Access justification**** | **For semi-structured interviews: the data will be used to inform new resource tool. Information will be limited to a small number of interview respondents, and we would not want individual interviewees to be identified. Findings from the interviews will be summarized and presented in aggregate. For the literature review, the content (e.g., report, spreadsheet of reviews) can be made available upon request. The tool will be shared broadly once designed.** |
| ****How Access Will Be Provided for Data**** | **N/A** |
| ****Plans for archival and long-term preservation of the data**** | **De-identified data will be saved and stored on the CDC share drive after data collection. No PII will be included, and the data will be used for the development of a new transportation safety tool.** |

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

| ****Determinations**** | | | |
| --- | --- | --- | --- |
| Determination | Justification | Completed | Entered By & Role |
| HSC:  Does NOT Require HRPO Review | Not Research / Other  *45 CFR 46.102(l)*  Other - formative evaluation data collection | 10/22/24 | Halstead\_Mary (ygg9) CIO HSC |
| PRA:  PRA Applies |  | 10/22/24 | Halstead\_Mary (ygg9) OMB / PRA |
| ICRO:  PRA Applies | OMB Approval date: 03/03/23 OMB Expiration date: 03/31/26 | 10/22/24 | Zirger\_Jeffrey (wtj5) ICRO Reviewer |