

Print Date: 8/5/22

Title:	Improving Practices for T	racking and Reporting Disaster-Related	Deaths Guidance Knowledge	Assessment (NORC Task 3)
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**Project Id:** 0900f3eb81cf421c

Accession #: NCEH-HST-4/12/21-f421c

Project Contact: Arianna C Hanchey

Organization: NCEH/ATSDR/DEHSP/EMRCB/HST

Status: Project In Progress

Intended Use: Project Determination

Estimated Start Date: 04/12/2021

Estimated Completion Date: 12/31/2022

CDC/ATSDR HRPO/IRB Protocol #:

**OMB Control #**: 0920-0879

# **Determinations**

Determination	Justification	Completed	Entered By & Role
HSC: Does NOT Require HRPO Review	Research Not Involving Human Subjects 45 CFR 46.102(e)	7/29/22	Davis_Stephanie I. (sgd8) CIO HSC
PRA: PRA Applies		7/29/22	Davis_Stephanie I. (sgd8) CIO OMB / PRA

HRPO: Concur		8/5/22	Bass_Micah (zgi7) HRPO Reviewer
ICRO: PRA Applies	OMB Approval date: 1/13/21 OMB Expiration date: 1/31/24	8/1/22	Zirger_Jeffrey (wtj5) ICRO Reviewer

# **Description & Funding**

### **Description**

Priority: Standard

**Determination Start Date:** 04/15/21

The Centers for Disease Control and Prevention (CDC) has contracted with NORC (NOTE: this is not an acronym) at the University of Chicago to conduct several activities aimed at improving processes for identifying and reporting disaster-related deaths. For the CDC Guidance Knowledge Assessment, NORC will assess 1) current awareness, knowledge, and use of the 2017 CDC Disaster-Related Death Certification Reference Guide and the 2017 CDC Death Scene Investigation After Natural Disaster or Other Weather-Related Events Toolkit; and 2) current practices, challenges and capacity related to identifying and documenting disaster-related deaths among individual death certifiers and organizations who represent death certifiers. Data will be collected through an online

survey, focus groups, and in-depth interviews.

IMS/CIO/Epi-Aid/Lab-Aid/Chemical Exposure

Submission:

Description:

No

IMS Activation Name: Not selected

Primary Priority of the Project: Not selected

Secondary Priority(s) of the Project: Not selected

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

The purpose of this overall project is to improve ways in which death certification data are collected and reported after a natural or

human-induced disaster.

The objective is to conduct a mixed-methods approach to assess the awareness and use of the 2017 CDC Disaster-Related Death Certification Reference Guide and the 2017 CDC Death Scene Investigation After Natural Disaster or Other Weather-Related Events Toolkit. Using this approach, the study will benefit from the rigor of nation-wide participation in the survey while also obtaining detailed, in-depth information from the focus groups and interviews. The following overarching research questions will guide our data collection activities: 1. To what extent are medical examiners/coroners (ME/C) offices aware of the 2017 CDC

Objective: Disaster-Related Death Certification Reference Guide and the 2017 CDC Death Scene Investigation After Natural Disaster or Other Weather-Related Events Toolkit? 2. To what extent are ME/C offices using the 2017 CDC Disaster-Related Death Certification Reference Guide and the 2017 CDC Death Scene Investigation After Natural Disaster or Other Weather-Related Events Toolkit? 3. What practices and tools (aside from the CDC reference guide and toolkit specified above) are ME/Cs using to investigate and certify disaster-related deaths? 4. How do ME/C offices report death data to public health and/or emergency management agencies during and after a disaster? 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?: Project does not incorporate elements of health Yes equity science: Measuring Disparities: Not Selected Studying Social Determinants of Health (SDOH): Not Selected Not Selected Assessing Impact: Methods to Improve Health Equity Research and Not Selected Practice: Other: Not Selected **Activities or Tasks:** New Collection of Information, Data, or Biospecimens Target Populations to be Included/Represented: Other - Organizations that represent death certifiers; medical examiners; and elected death certifiers Tags/Keywords: Disasters; Death Certificates; Coroners and Medical Examiners Activity originated and designed by CDC staff, or conducted at the specific request of CDC, or CDC staff will approve study design CDC's Role: and data collection as a condition of any funding provided **Method Categories:** Focus Group; Individual Interviews (Qualitative); Survey

Methods:

Both quantitative and qualitative data will be collected from the target population. Quantitative data collection includes an online survey to collect data from a sample of medical examiners and coroners. Qualitative data collection will include 9 or fewer interviews with subject matter experts with knowledge about disaster deaths from organizations that represent death certifiers. Qualitative data collection will also include focus groups of death certifiers, with 10 total focus groups with six participants per group. NORC will use a two-phase triangulation study design. This also includes two phases of data analysis, with the goal of interpreting and mixing the quantitative and qualitative data to bolster and inform the overall study findings. (See Exhibit 1 in the Task 3 Draft Workplan in supplemental info for an illustrative study design demonstrating phases 1 and 2). - Phase 1: Qualitative data collection from in-depth interviews and qualitative data analysis of the in-depth interviews - Phase 2: Qualitative data collection from focus groups and quantitative data collection from surveys The first phase of analysis will be performed after the in-depth interviews are completed. Once Phase 2 data collection is complete, NORC will then independently analyze the quantitative and qualitative data, then combine them into a single overall interpretation. They will identify similarities in the results from each data set, and also identify and seek to explain any differences through further review of the data. All differences that cannot be reconciled will be presented as opportunities for further exploration in the final report.

NORC will collect data from participants to assess the awareness and use of the 2017 CDC Disaster-Related Death Certification

Collection of Info, Data or Biospecimen:

Reference Guide and the 2017 CDC Death Scene Investigation After Natural Disaster or Other Weather-Related Events Toolkit. # Interviews with SMEs will collect data from organizations representing key professionals and systems in the field of death certification. NORC will approach leadership at up to nine organizations that represent death certifiers and ask for support identifying people at their organization with subject matter expertise in disaster death certification. The goal will be to ensure interviewees represent a range of positions and backgrounds, including hospitalists or other physicians, justices of the peace, medical examiners, coroners, and others who may be called upon to sign a death certificate in a disaster. NORC will solicit input from the Technical Working Group (TWG) to ensure the list is comprehensive and appropriate for the scope of the activity. Questions will ask about their awareness, knowledge, and use of CDC guidance documents; challenges of identifying and documenting disaster-related deaths, and opportunities for improving identification and documentation of disaster-related deaths. Indepth interviews will last about 45 minutes and be conducted using Zoom video conferencing software using a semi-structured interview guide. One NORC staff member will conduct the interview by asking guestions and directing the conversation using the approved semi-structured interview guide. One additional NORC staff member will participate to take notes. Interviews will be recorded we will develop transcript-style notes for analysis. # Focus groups with a sample of death certifiers will collect data from priority medicolegal death investigation systems and geographical areas about their use of CDC guidance documents, and challenges with, and capacity related to identifying and documenting disaster-related deaths. The sample frame is a comprehensive list of medical examiners and elected death certifiers (justices of the peace, coroners, etc.) in the U.S. (same sample universe as the quantitative surveys described below). NORC has obtained this list from the National Public Safety Information Bureau. The focus groups will be segmented by size of population served and by geographic area of interest. The online focus groups will last about 60 minutes and will be conducted using Zoom. NORC will record the focus groups and develop transcript-style notes for analysis. # The online survey of death certifiers will collect nationally-representative data to describe current awareness, knowledge, and use of CDC guidance documents, and current practices, challenges with, and capacity related to identifying and documenting disaster-related deaths. NORC has procured the medical examiners and coroners segment of the National Directory of Law Enforcement Agencies (NDLEA) available from the National Safety Information Bureau. The NDLEA is a regularly updated directory of law enforcement agencies and departments throughout the nation, including medical examiners and coroners. The data elements in the database include name, title, email address (if available), department name, mailing address, phone number, and fax number. NORC will consent participants and CDC staff will have no involvement with consent process, will not interact with participants, and will not obtain or perform data analysis with PII.

#### Expected Use of Findings/Results and their impact:

NORC will provide CDC with a comprehensive report. The report will include an executive summary and findings from the mixed-methods analysis. The report will also provide recommendations based on research questions, for example, how CDC can improve disaster-related death documentation and disseminate best practices. NORC will present the results of the assessment through a webinar using Zoom. NORC will oversee the development of the webinar and work closely with CDC to identify appropriate individuals or organizations to invite and disseminate information about the webinar to partners, as appropriate. This webinar will be a tool to ensure findings are shared with key stakeholders.

Could Individuals potentially be identified based on Yes Information Collected?

Will PII be captured (including coded data)?

Yes

Does CDC have access to the identifiers (including coded data)?:

Is this project covered by an Assurance of No Confidentiality?

Does this activity meet the criteria for a Certificate No of Confidentiality (CoC)?

Is there a formal written agreement prohibiting the

No

# **Funding**

Funding Type	Funding Title	Funding #	Original Budget Yr	# Years Award	Budget Amount
CDC Contract	Improving Processes for Identifying and Reporting Disaster-Related Deaths, \$306,011.61	75D30120F09747	2020	3	306011.61

# **HSC Review**

## **HSC Attributes**

Other - Data collected on coroner-medical examiner Yes practices related to death certificates and not on living human subjects.

# **Regulation and Policy**

Do you anticipate this project will be submitted to No the IRB office

Estimated number of study participants

Population - Children Protocol Page #:

Population - Minors Protocol Page #:

Population - Prisoners Protocol Page #:

Population - Pregnant Women Protocol Page #:

Suggested level of risk to subjects

Do you anticipate this project will be exempt research or non-exempt research

## Requested consent process waviers

Informed consent for adults No Selection

Children capable of providing assent No Selection

Parental permission No Selection

Alteration of authorization under HIPPA Privacy

Rule

# **Requested Waivers of Documentation of Informed Consent**

Informed consent for adults No Selection

Children capable of providing assent No Selection

Parental permission No Selection

### Consent process shown in an understandable language

Reading level has been estimated No Selection

Comprehension tool is provided No Selection

Short form is provided No Selection

Translation planned or performed No Selection

Certified translation / translator No Selection

Translation and back-translation to/from target

language(s)

No Selection

No Selection

Other method No Selection

#### Clinical Trial

Involves human participants No Selection

Assigned to an intervention No Selection

Evaluate the effect of the intervention No Selection

Evaluation of a health related biomedical or

behavioral outcome

No Selection

Registerable clinical trial

No Selection

### **Other Considerations**

Exception is requested to PHS informing those

bested about HIV serostatus

No Selection

Human genetic testing is planned now or in the

future

No Selection

Involves long-term storage of identfiable biological

specimens

No Selection

Involves a drug, biologic, or device

No Selection

Conducted under an Investigational New Drug exemption or Investigational Device Exemption

No Selection

# **Institutions & Staff**

### Institutions

Name	FWA#	FWA Exp Date	IRB Title	IRB Exp Date	Funding #
National Opinion Research Center	FWA00000142	07/19/23	National Opinion Rsch Ctr IRB #1	01/05/24	

### Staff

Staff Member	SIQT Exp. Date	CITI Biomedical Exp. Date	CITI Social & Behavioral Exp. Date	CITI Good Clinical Practice Exp. Date	Staff Role	Email	Phone	Organization
Arianna Hanchey	07/21/2025		09/27/2023		Co- Investigator	kye2@cdc.gov	770-488- 3436	HEALTH STUDIES
Jackie Sheridan	09/04/2023				Co- Investigator	Sheridan- jackie@norc.org	301-634- 9345	National Opinion Research Center
Kanru Xia	09/04/2023				Statistician	Xia-kanru@norc. org	312-759- 4033	National Opinion Research Center

Sarah Hodge	09/04/2023		Co- Investigator	Hodge- sarah@norc.org	301-634- 9561	National Opinion Research Center
Sarah Redman	09/04/2023		Principal Investigator	redman- sarah@norc.org	404-240- 8406	
Shanice Williams	03/04/2024	10/26/2024	Co- Investigator	qqz3@cdc.gov	770-488- 6635	HEALTH STUDIES
Stephanie Poland	09/04/2023		Co- Investigator	Poland- stephanie@norc. org	312-759- 4261	National Opinion Research Center
Teresea Tuft	09/04/2023		Co- Investigator	Tufte-teresa@norc. org	217-372- 0817	National Opinion Research Center
Terri Head	09/04/2023		Contract Official	iio1@cdc.gov	770-488- 5341	SAFETY PROMOTION TEAM
Tesfaye Bayleyegn	01/18/2025		Principal Investigator	bvy7@cdc.gov	770-488- 3476	HEALTH STUDIES

## **Data**

### **DMP**

Proposed Data Collection Start Date: 6/1/21

Proposed Data Collection End Date: 12/31/22

Proposed Public Access Level: Non-Public

Non-Public Details:

Reason For Not Releasing Data: Other - Protect confidentiality of participants. Please see further explanation below.

Transcripts from the interviews and focus groups will not be made publicly available to protect the confidentiality of participants.

Public Access Justification:

Also, because both methods are qualitative in nature and we will encourage free discussion, it is possible that identifying information

may be included in the transcripts. The database from the quantitative surveys also be non-public. We anticipate few participants

from the entire sampling universe and need to protect their personal identifying information.

How Access Will Be Provided for Data: N/A

Plans for Archival and Long Term Preservation:

# Spatiality

Country	State/Province	County/Region
United States		

# **Dataset**

Dataset	Dataset	Data Publisher	Public Access	Public Access	External	Download	Type of Data	Collection	Collection End
Title	Description	/Owner	Level	Justification	Access URL	URL	Released	Start Date	Date
Dataset yet to be added									

# **Supporting Info**

Current	CDC Staff Member and Role Date Added		Added Description Supporting Info Type		Supporting Info
	Zirger_Jeffrey (wtj5) ICRO Reviewer	08/01/2022	NOA 0920-0879 (2021)	Notice of Action	NOA 0920-0879.pdf
	Hanchey_Arianna (kye2) CIO HSC	07/29/2022	Clean GenIC files	Other	Clean GenIC July 2022.zip
	Davis_Stephanie I. (sgd8) CIO HSC	04/29/2022	GenIC zip file with commented documents	Paperwork Reduction Act Form	Cleaned Final Draft rev OS.zip
	Hanchey_Arianna (kye2) CIO HSC	04/25/2022	GenIC final files	Other	Cleaned Final Draft_zip.zip

Hanchey_Arianna (kye2) CIO HSC	04/23/2021	Survey instrument	Data Collection Form	Appendix C Draft_Survey Instrument_revisions 041421- CLEAN_OS rev.docx
Hanchey_Arianna (kye2) CIO HSC	04/23/2021	Key informant interview guide	Other	Appendix A Draft_Key Informant Interview Guide_CLEAN_4.15.21_OS rev.docx
Hanchey_Arianna (kye2) CIO HSC	04/23/2021	Focus group guide	Other	Appendix B Draft_Focus Group Discussion Guide_CLEAN_4.15.21_OS rev.docx
Lawler_Tameka (giq3) CIO HSC	04/22/2021	NORC Task 3 Zip file proposal	Other	NORC Task 3 Improving Processes for Identifying and Reporting Disaster-Related.zip
Hanchey_Arianna (kye2) Project Contact	04/15/2021	Survey instrument	Data Collection Form	Appendix C Draft_Survey Instrument_revisions 041421- CLEAN.docx
Hanchey_Arianna (kye2) Project Contact	04/15/2021	Focus group discussion guide	Other-Focus Group Guide	Appendix B Draft_Focus Group Discussion Guide_CLEAN_4.15.21.docx
Hanchey_Arianna (kye2) Project Contact	04/15/2021	Key informant interview guide	Other-Key informant interview guide	Appendix A Draft_Key Informant Interview Guide_CLEAN_4.15.21.docx
Hanchey_Arianna (kye2) Project Contact	04/15/2021	Workplan	Other-Workplan	Task 3 Workplan_Final.docx



U.S. Department of Health and Human Services

Centers for Disease Control and Prevention