OMB Control Number 0920-1282

Performance Measures Project

Request for genIC Approval (for data collection in 2023 and 2024)

CIO: National Center for STLT Public Health Infrastructure and Workforce

PROJECT TITLE: TARGETED EVALUATION PROJECTS (TEPs): SUPPLEMENT to the Performance Measures for Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems Grant (PHIG) (2023)

PURPOSE AND USE OF COLLECTION: The purpose of this collection is to provide oversight of Targeted Evaluation Project (TEP) reporting requirements established for funding recipients under CDC Notice of Funding Opportunity (NOFO) OE22-2203, Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems (the "Public Health Infrastructure (PHI) Grant Program"). The PHI grant program currently provides cross-cutting support to 107 public health agencies (recipients) for critical infrastructure needs. Recipients are units of government in state and local jurisdictions, special districts, U.S. territories, and Freely Associated States. Funding from this multi-component grant will help ensure that recipients have the people, services, and systems needed by their jurisdictions to promote and protect health.

<u>Background</u>: In 2023, CDC obtained approval for 3 years to monitor recipient performance of activities funded under NOFO Component A (see OMB No. 0920-1282, [OADPS / NCSTLTPHIW] Performance Measures for Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems Grant OE22-2203 2023-2025), <u>View Information Collection (IC) (reginfo.gov)</u>. CDC is currently collecting information needed to describe and monitor activities in the following areas of emphasis:

- Strategy A1: Workforce (Recruit, retain, support, and train the public health workforce).
- Strategy A2. Foundational Capabilities (Strengthen systems, processes, and policies).

No performance measure data are being collected for Strategy A3: Data Modernization (Deploy scalable, flexible, and sustainable technologies) through the PHI grant.

Recipient jurisdictions are expected to achieve a number of key outcomes by the end of the 5-year period of performance. In the short term, expected outcomes include: (1) Increased hiring of diverse public health staff and (2) Improved organizational systems and processes, among other outcomes. In the long term, expected outcomes include: (1) Increased size and capabilities of the public health workforce; (2) Stronger public health foundational capabilities; (3) Increased availability and use of public health data; and (4) Improved sharing of lessons learned.

CDC and public health partners use the performance measures collected under Component A: Strategy A1 and Strategy A2 to:

• Track and report progress consistently across recipients on priority outcomes

- Inform CDC and Partners' technical assistance activities such as site visits, training opportunities, and peer-to-peer sharing activities, to support recipients with advancing their work through this grant
- Inform partners and CDC on progress and gaps to ultimately identify actions to improve performance over time
- Stimulate discussions between CDC Project Officers and recipients.

<u>Supplemental TEP Data Collection</u>: The PHI grant requires each recipient to choose 1-2 specific funded activities or strategies – aligned with their priority performance measures – for further evaluation. CDC instituted this requirement to stimulate focused approaches to infrastructure investment and evaluation that can ultimately be shared and inform future investments. The definition of what constitutes a Targeted Evaluation Project is broad and may encompass process evaluations, outcome evaluations, or quality improvement initiatives pertaining to expected outcomes. TEPs are recipient-driven, i.e., recipients should propose TEPs that are useful and meaningful within the context of their infrastructure enhancement goals. Recipients are encouraged to use the findings from their TEPs to improve the implementation and/or understand the effectiveness of their activities. CDC does not determine the recipients' individualized infrastructure goals, evaluation priorities, or the methods for conducting targeted evaluations, and CDC is not collecting the data described in the recipients' TEPs. However, CDC is requiring recipients to report which performance measure(s) they have selected for targeted evaluation and to describe their evaluation approaches, as outlined in the attached template (see **Appendix A**).

CDC will use the supplemental TEP information to:

- Ensure appropriate stewardship of PHI grant funds by monitoring recipient progress on a key grant requirement, i.e., the development and implementation of a Targeted Evaluation Project selected from the recipient's overall performance measures.
- Facilitate continuous quality and program improvement throughout the period of performance and determine the applicability of evidence-based approaches to different populations, settings, and contexts.
- Inform the provision of programmatic support and proactive training and technical assistance.
- Create an inventory of TEPs that can be used to
 - Facilitate communication and collaboration among recipients and public health partners regarding the scope of recipient-driven approaches to evaluating investments in public health infrastructure;
 - Understand what other recipients are planning to evaluate which will be helpful in making peer-to-peer connections to facilitate learning and cross-collaboration;
 - Facilitate discussions with HHS and Federal partners regarding recipients' perspectives, expressed in their evaluation priorities and strategies, about the public benefit of Federal investment in public health infrastructure.

The deadline for reporting the first TEP to CDC is **November 15, 2023**. If recipients make sufficient progress on implementing their TEPs in 2023-2024, CDC may request submission of an additional TEP in 2025-2026.

The information to be collected in the TEP is related to, but distinct from, the performance measures currently reported under CDC generic 0920-1282.

NUMBER AND TITLE OF NOFO: CDC-RFA-OE22-2203 Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems Grant Program

NUMBER OF PARTICIPATING RECIPIENTS: 107 public health jurisdictions (50 states, Washington, D.C., 48 local, 8 territories/freely associated states), or their bona fide agents

DESCRIPTION OF NOFO (check all that apply):

X___ Funds all 50 states

- X___ Has budget higher than \$10 million per year
- X___ Has significant stakeholder interest (e.g. partners, Congress)

Please elaborate:

The PHI grant program provides \$3.685 billion under Component A to help state, local, and territorial and freely associated health agencies across the U.S. strengthen their public health workforce and infrastructure. CDC awarded Component A grant funding to 107 recipient jurisdictions, including public health agencies in all 50 states, Washington D.C., 8 territories/freely associated states, and 48 large localities (cities serving a population of 400,000 or more and counties serving a population of 2,000,000 or more based on the 2020 U.S. Census). Recipient award amounts were based on a funding formula that included population size and community resilience.

PERFORMANCE METRICS USED & JUSTIFICATIONS:

The Targeted Evaluation Project (TEP) template provides detailed information about a recipient's selection and approach to evaluating one of the activities described in its overall performance measures. The template is organized into sections:

- A. Background Details (date submitted, recipient name, and evaluation POC)
- B. Evaluation Users and Focus (project description, purpose, intended users, applicable strategies, type of evaluation, and evaluation product)
- C. Evaluation Questions, Methods, and Implementation Plan (evaluation questions, methods, and timeline)
- D. Optional Activities (technical assistance, community of practice, and participation in the PHIG National Evaluation Plan)

CDC is not requiring submission of TEP evaluation data. CDC is requiring submission of the TEP template in order to monitor recipient progress on a key performance requirement of the grant, to describe activities and outcomes funded under the PHI grant and respond to inquiries, and to provide technical assistance to recipients, as requested.

CERTIFICATION:

I certify the following to be true:

- 1. The collection is non-controversial and does <u>not</u> raise issues of concern to other federal agencies.
- 2. Information gathered is meant primarily for program improvement and accountability; it is not intended to be used as the principal basis for policy decisions

Name:_____

ANNUALIZED BURDEN HOURS:

This is a one-time collection. Recipients will upload a completed Excel template to Grants.gov.

The estimated burden per response for completing the TEP template is 2 hours. The estimated total burden for 107 recipients is 214 hours.

Type of Respondent	Form Name	No. of Respondents	No. of Responses per Respondent	Avg. Burden Per Response	Total Annualized Burden Hours
Public health agency (state, local, territorial/freely associated state) or bona fide agents	Targeted Evaluation Project (TEP) Template	107	1	2 hours	214 hours

TOTAL BURDEN HOURS FOR THIS GENIC:

This table specifies the calendar years in which information will be collected and calculates the total burden hours requested over the approved timeframe of the generic.

Data Collection Timeframe (List up to 3 Years)	No. Years	Annualized	Total Burden Hours
	Requested	Burden Hours	for this GENIC
2023	1	214 hours	214 hours

FEDERAL COST: The estimated annual cost to the Federal government is <u>\$92,426</u>

The cost estimate reflects salaries of CDC FTEs and contractors during data collection and analysis activities, including building and maintaining the data reporting tool, data cleaning and quality assurance, data analysis, and reporting of data. Estimated costs for CDC FTEs and contractors are:

- GS13, Step 1: \$99,595 x 0.10 FTE x 1 staff = \$9,595 (building/maintaining data reporting tool)
- GS13, Step 6: \$121,342 x 0.50 FTE x 1 staff = \$60,671 (data management, cleaning, quality assurance)
- GS11, Step 1: \$74,950 x 0.20 FTE x 1 staff = \$14,990 (data cleaning, quality assurance)
- GS14, Step 6: \$143,390 x 0.05 FTE x 1 staff = \$7,170 (oversight of process, including data collection and analysis)

ADMINISTRATION OF THE INSTRUMENT:

- 1. How will you collect the information? (Check all that apply)
 - [X] Web-based
 - [] Email
 - [] Postal Mail
 - [] Other, Explain

Please make sure all instruments, instructions, and scripts are submitted with the request.

Attachments:

- Appendix A: TEP template
- Appendix B: Notification Email