

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0920-1050)

Instruction: This form should be completed by the primary contact person from the Program sponsoring the collection.

DETERMINE IF YOUR COLLECTION IS APPROPRIATE FOR THIS GENERIC CLEARANCE MECHANISM:

Instruction: Before completing and submitting this form, determine first if the proposed collection is consistent with the scope of the Collection of Routine Customer Feedback generic clearance mechanism. To determine the appropriateness of using the Collection of Routine Customer Feedback generic clearance mechanism, complete the checklist below.

*If you select “yes” to all criteria in Column A, the Collection of Routine Customer Feedback generic clearance mechanism **can** be used. If you select “yes” to any criterion in Column B, the Collection of Routine Customer Feedback generic clearance mechanism **cannot** be used.*

| Column A | Column B |
|--|--|
| The information gathered will only be used internally to CDC. [X] Yes [] No | Information gathered will be publicly released or published. [] Yes [X] No |
| Data is qualitative in nature and not generalizable to people from whom data was not collected. [X] Yes [] No | Employs quantitative study design (e.g. those that rely on probability design or experimental methods) [] Yes [X] No |
| There are no sensitive questions within this collection (e.g. sexual orientation, gender identity). [X] Yes [] No | Sensitive questions will be asked (e.g. sexual orientation, gender identity). [] Yes [X] No |
| Collection does not raise issues of concern to any other Federal agencies. [X] Yes [] No | Other Federal agencies may have equities or concerns regarding this collection. [] Yes [X] No |
| Data collection is focused on determining ways to improve delivery of services to customers of a current CDC program. [X] Yes [] No | Data will be used to inform programmatic or budgetary decisions, for the purpose of program evaluation, for surveillance, for program needs assessment, or for research. [] Yes [X] No |
| The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future. [X] Yes [] No | |

Did you select “Yes” to all criteria in Column A?

If yes, the Collection of Routine Customer Feedback generic clearance mechanism may be appropriate for your investigation. You may proceed with this form.

Did you select “Yes” to any criterion in Column B?

*If yes, the Collection of Routine Customer Feedback generic clearance mechanism is **NOT** appropriate for your investigation. Stop completing this form now.*

Note: Use OMB format when asking race/ethnicity as well as gender questions.

TITLE OF INFORMATION COLLECTION: Feedback web-survey on forensic toxicology testing

PURPOSE: In response to the growing severity of the opioid overdose epidemic, the US government declared the opioid overdose epidemic a public health emergency on October 26, 2017. The emergency declaration remained in effect throughout 2019 and continues into 2020. Since 2013, a primary driver of increases in opioid overdose deaths in the United States have been deaths involving synthetic opioids (e.g., fentanyl and fentanyl analogs) illicitly distributed in the United States. The increasing number of synthetic opioid overdose deaths have required medical examiners and coroners (ME/C) agencies to expand toxicologic testing to detect new fentanyl analogs such as carfentanyl (a sedative for large animals and not authorized for human use).

In order to enhance forensic toxicology testing of suspected drug overdose deaths, in 2017 the Centers for Disease Control and Prevention’s National Center for Injury Prevention and Control (NCIPC) provided supplemental funding to 32 states and the District of Columbia to conduct expanded toxicologic testing of suspected drug overdoses via the Enhanced State Opioid Overdose Surveillance (ESOOS) Program. In 2019, as part of CDC’s Overdose Data to Action (OD2A), the program was expanded and now includes 47 states and the District of Columbia. NCIPC’s service is to provide support to ME/C agencies or forensic laboratories to conduct comprehensive forensic toxicologic testing or improve investigation of suspected drug overdose deaths if comprehensive testing is available.

A major obstacle to implement NCIPC’s service effectively is determining the current capacity of ME/C agencies (i.e., our customers) to conduct comprehensive toxicologic testing of drug overdose deaths. Previous data are available from 2016, or before CDC began funding toxicology testing. The proposed feedback web-survey (Att. 1 and 1a.) will provide CDC critical information to improve its services to ME/C agencies by capturing current strengths and gaps in ME/C toxicologic testing of suspected drug overdose deaths across states. CDC will ask about how ME/C agencies perform toxicology testing so CDC can provide better technical assistance.

Findings will be used internally by CDC to improve CDC services. Information gathered will not be used for the purpose of substantially informing influential policy decisions. Without this type of feedback, the Centers for Disease Control and Prevention’s National Center for Injury Prevention and Control will not have timely information to adjust its services to meet customer needs.

DESCRIPTION OF RESPONDENTS: Participation in this feedback web-survey is voluntary. All medical examiners and coroner agencies in jurisdictions funded as part of CDC’s Overdose Data to Action (OD2A) (47 states and District of Columbia) will be invited to participate in the survey (Att. 2).

TYPE OF COLLECTION: (Check one)

Instruction: Please sparingly use the Other category

- | | |
|---|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input checked="" type="checkbox"/> Other: <u>Customer feedback</u> |

CERTIFICATION:

I certify the following to be true:

- 1. The collection is voluntary.
- 2. The collection is low-burden for respondents and low-cost for the Federal Government.
- 3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
- 4. The results are not intended to be disseminated to the public.
- 5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.

Name: _____ Karen Angel _____

To assist review, please provide answers to the following question:

Personally Identifiable Information:

- 1. Is personally identifiable information (PII) collected? [] Yes [X] No
- 2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [] Yes [X] No
- 3. If Applicable, has a System or Records Notice been published? [] Yes [X] No

This submission has been reviewed by the CDC NCIPC’s Information Systems Security Officer, who has determined that the Privacy Act does not apply. (Att. 3). Information of participants was previously collected. All medical examiners and coroner agencies belong to jurisdictions funded as part of CDC’s Overdose Data to Action (OD2A). CDC will not have access to or receive any personally identifiable information (PII) about participants.

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [] Yes [X] No

If Yes: Please describe the incentive. If amounts are outside of customary incentives, please also provide a justification.

BURDEN HOURS

| Category of Respondent | Form | No. of Respondents | Participation Time | Burden |
|---------------------------------------|----------------------------|--------------------|--------------------|--------|
| Medical examiner and coroner agencies | Invitation email (Att. 2) | 2,128 | 5/60 | 177 |
| | Customer Feedback (Att. 1) | 1,490 | 30/60 | 745 |
| Totals | | | | 922 |

Previous surveys have identified 2,128 medical examiner and coroner agencies in the United States. Response rates are expected to be between 40 and 70% based on previous surveys. Thus, current respondent estimate is calculated by multiplying total number of medical examiner and coroner agencies (2,128) by the highest expected response rate of 70%. Conversely, a minimum of 30% of ME/C agencies are expected to not respond to the survey, or 638 ME/C agencies.

FEDERAL COST: The estimated annual cost to the Federal government is \$52,000.

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?
[X] Yes [] No

If Yes: Please provide a description of both below (or attach the sampling plan)

If No: Please provide a description of how you plan to identify your potential group of respondents and how you will select them or ask them to self-select/volunteer

There is no sampling plan and all medical examiners and coroner agencies in jurisdictions funded as part of CDC’s Overdose Data to Action (OD2A) (47 states and the District of Columbia) will be invited to participate in the survey.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)
[X] Web-based or other forms of Social Media
[] Telephone
[] In-person
[] Mail
[] Other, Explain
2. Will interviewers or facilitators be used? [] Yes [X] No

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