

Drug and Alcohol Services Information System (DASIS) SUPPLEMENTAL SUPPORTING STATEMENT

The Substance Abuse and Mental Health Services Administration (SAMHSA) requests a revision and extension of OMB approval for the Drug and Alcohol Services Information System (DASIS) (OMB No. 0930-0106). The request for OMB approval is a supplement to the previous DASIS request (Attachment A), approved on November 8, 2005.

The supplemental submission requests extension and revision of DASIS, including approval to conduct a revised National Survey of Substance Abuse Treatment Services (N-SSATS.) (The previous approval included a pretest of the 2007 N-SSATS questionnaire. The N-SSATS questionnaire that is the subject of this request for approval incorporates changes based on the pretest findings.) Revisions are proposed only for the N-SSATS-related portion of DASIS. The following supplemental supporting statement describes and justifies the changes. There are no changes to the other DASIS components and therefore the remaining sections of the OMB clearance request submitted in 2005 for the full DASIS are unchanged (see Attachment A).

DASIS provides both national and State-level data on the numbers and types of patients treated and the characteristics of facilities providing substance abuse treatment services. It is conducted under the authority of Section 505 of the Public Health Service Act (42 U.S.C. 290aa-4) to meet the specific mandates for annual information about public and private substance abuse treatment providers and the clients they serve.

A. JUSTIFICATION

1. Circumstances of Information Collection

N-SSATS: The National Survey of Substance Abuse Treatment Services (N-SSATS) is an annual census of drug and alcohol treatment facilities in the United States. The list frame for the N-SSATS is comprised of all active treatment facilities on SAMHSA's Inventory of Substance Abuse Treatment Services (I-SATS), a listing of all known substance abuse treatment facilities in the United States. The primary purpose of the N-SSATS survey is to describe the location, scope, and characteristics of these facilities. In the previous clearance request, approval was requested to conduct a pretest of changes to the N-SSATS survey instrument. These revisions to N-SSATS will allow SAMHSA to better classify the major categories of treatment and capture more specific treatment practices used by facilities in the substance abuse treatment system. The pretest has been completed and the changes have been incorporated into the questionnaire, for use in N-SSATS in 2007 through 2009. (Attachment B1 includes a copy of the 2006 N-SSATS questionnaire annotated to show the proposed changes for 2007, and Attachment B2 includes the 2007 N-SSATS questionnaire with the changes incorporated.)

The N-SSATS survey is conducted through the mail with an on-line web survey option and with telephone follow-up of non-respondents. Experience with the on-line option, added in 2002, has been increasingly positive, with nearly 30 percent of facilities choosing to respond by web in the 2005 survey. The web option and the telephone follow-up utilize the same survey questions as the paper N-SSATS form and impose no additional burden for respondents. Attachment B3 includes a copy of the web screens for the 2007 N-SSATS on-line response option. Attachment B4 includes a copy of the questionnaire for the telephone follow-up, which is conducted by Computer Assisted Telephone Interview (CATI) telephone calls.

In addition to the main N-SSATS, a Mini-N-SSATS is conducted periodically as new facilities are identified. The Mini-N-SSATS is a procedure for collecting services data from newly identified facilities between main

cycles of the N-SSATS survey. Data from the Mini-N-SSATS are used to augment the listing of treatment facilities in the on-line Substance Abuse Treatment Facility Locator. The between-survey telephone calls to newly identified facilities allow facilities to be added to the Locator in a more timely manner. The questions that comprise the Mini-N-SSATS are a subset of the items on the main N-SSATS questionnaire. The 2007 Mini-N-SSATS questionnaire is included at Attachment B5.

Approval is requested to conduct the N-SSATS survey and the Mini-N-SSATS. Proposed revisions to the 2007 N-SSATS questionnaire, to be used in 2007 through 2009, are described in A.2.

2. Purpose and Use of Information

Major products and uses of the N-SSATS are shown below:

N-SSATS: For two decades, N-SSATS has provided national data on the nature and distribution of the drug and alcohol treatment resources in the United States and territories, and on the number of the clients treated and services provided. The N-SSATS has three primary purposes: to produce the annual *National Directory of Drug and Alcohol Abuse Treatment Programs* and its web-based counterpart, the on-line Treatment Locator (<http://findtreatment.samhsa.gov>); to provide facility characteristics to the I-SATS for use as stratification variables for those using the I-SATS as a sampling frame; and to prepare an annual report and public use data file describing the substance abuse treatment system in the United States. The N-SSATS public use files are available for analysis on an interactive website called SAMHDA (Substance Abuse and Mental Health Data Archive) (<http://www.icpsr.umich.edu/SAMHDA>).

Planned Changes:

The changes below are proposed to the N-SSATS facility questionnaire.

Recent interest in N-SSATS as a tool to assess more detailed information on treatment practices along with changes in the terminology used in the substance abuse treatment field have prompted changes in the N-SSATS questions. A pretest of N-SSATS was carried out in 2006 to test the changes, resulting in the following final set of proposed changes to the questionnaire:

- the modification of the detoxification question, including the addition of a follow-up question on whether the facility uses drugs in detoxification and for which substances;
- the addition of questions on specific clinical/therapeutic approaches used by the facilities;
- the addition of a question on quality control procedures used by the facilities;

- the modification of the treatment categories to incorporate terminology currently used in the substance abuse treatment field;
- the addition of a question on co-occurring substance abuse and mental health disorders;
- the addition of a question on the number of annual treatment admissions funded by state Access to Recovery (ATR) vouchers;
- the addition of a question on whether the facility has a National Provider Identifier (NPI.)

The chart below describes the major substantive changes in the N-SSATS questionnaire:

Currently approved	Proposed	Comments
Whether detoxification is offered by the facility. (Q.1b in 2006)	Question expanded to ask whether the facility detoxifies clients from alcohol, opiates, or cocaine, and whether medications are used during detoxification. (Q2)	The information was requested by SAMHSA's Center for Substance Abuse Treatment (CSAT.)
New – nothing currently approved.	Whether facility offers – – Marital/couples counseling (Q16) – Substance abuse counseling – 12-step approach – Brief intervention – Cognitive-behavioral therapy – Contingency management – Motivational interviewing – Trauma-related counseling – Anger management – Relapse prevention (Q18)	The information was requested by SAMHSA's Center for Substance Abuse Treatment (CSAT).
New – nothing currently approved.	Whether facility offers – – Required continuing education for staff – Periodic drug testing of clients – Regularly scheduled case review with a supervisor – Case review with an appointed quality review committee – Outcome follow-up after discharge – Periodic utilization review – Periodic client satisfaction surveys by a facility (Q17)	The information was requested by SAMHSA's Office of Applied Studies (OAS.)
List of the types of substance abuse treatment services. (Q16-18 and Q25-27 in 2006)	N-SSATS treatment service categories are further defined by a notation of the ASAM level-of-care category that each N-SSATS category represents (Q24-26 and Q33-35, in the main N-SSATS instrument) (Also to be included in the Mini-N-SSATS questionnaire.)	The information was requested by State representatives at several regional meetings, to assist treatment facilities in categorizing their treatment. Another version of this question, completely replacing the N-SSATS treatment categories with the corresponding ASAM level of care, was pretested, but it was found to be too difficult for respondents who were not familiar with the ASAM terminology.
New – nothing currently approved.	Question added on the percent of substance abuse treatment clients with a diagnosed co-occurring substance abuse and mental health	The information was requested by SAMHSA's Center for Substance Abuse Treatment (CSAT).

Currently approved	Proposed	Comments
	disorder (Q37)	
New – nothing currently approved.	Question added on the number of annual treatment admissions funded by state ATR vouchers (Q38a)	The information was requested by the Office of National Drug Control Policy (ONDCP.)
New – nothing currently approved.	Question added on whether the facility has received a National Provider Identifier (NPI) (Q43)	The information was added by program for use in the I-SATS facility inventory.

Other sections of the N-SSATS questionnaire will remain unchanged except for minor modifications to wording. (Attachment B1 includes a copy of the 2006 N-SSATS questionnaire annotated to show the proposed changes for 2007, and Attachment B2 includes the 2007 N-SSATS questionnaire with the changes incorporated.) No changes are planned for the other components of DASIS.

[Items 3-7: No Change]

8. Consultation Outside the Agency

A Federal Register Notice published on June 9, 2006 (Volume 71, No. 111, page 33475) solicited comments on DASIS. A copy of the notice is included in Attachment C1. No comments were received in response to that notice.

Also outside of the agency, Janie Dargan, Policy Analyst (subsequently retired), Office of National Drug Control Policy (phone: 202-395-6714), had input into the DASIS data collection, requesting a count in N-SSATS of clients whose treatment was funded through ATR vouchers. In addition, survey staff received approval from Joanne Gartenmann, Consultant, American Society of Addiction Medicine (ASAM), (phone: 703-533-0876), for our use of the ASAM treatment service levels and definitions in N-SSATS. Within the Department of Health and Human Services, the Office of the Assistant Secretary for Planning and Evaluation (ASPE) reviewed this OMB request and had no comments. The program also obtained input from respondents in the N-SSATS pretest, conducted concurrently with the 2006 N-SSATS survey. The 2007 questionnaire was pretested in 191 facilities, and direct input was provided by 100 facility administrators who provided a follow-up debriefing about the clarity of the questions and were asked for their comments and suggestions on the survey. A list of the 100 pretest debriefing participants is provided in Attachment C2.

[Items 9-11: No Change]

12. Estimates of Annualized Hour Burden

The estimated annual burden for the DASIS activities is as follows [note – only the estimates for the N-SSATS-related activities have changed]:

Type of Respondent and Activity	Number of Respondents	Responses per Respondent	Total Responses	Hours per Response	Total Burden Hours	Wage Rate	Total Hour Cost
STATES							
TEDS Admission	52	4	208	6	1,248	\$27	\$33,696

Data							
TEDS Discharge Data	40	4	160	8	1,280	\$27	\$34,560
TEDS Discharge Crosswalks	5	1	5	10	50	\$27	\$1,350
I-SATS Update	56	67	3,752	.08	300	\$13	\$3,900
State Subtotal ¹	56		4,125		2,878		\$73,506
FACILITIES							
I-SATS Update	100	1	100	.08	8	\$11	\$88
N-SSATS questionnaire	17,000	1	17,000	.67	11,390	\$27	\$307,530
Augmentation screener	1,000	1	1,000	.08	80	\$11	\$880
Mini-N-SSATS	700	1	700	.42	294	\$27	\$7,938
Facility Subtotal	18,800		18,800		11,772		\$316,436
TOTAL	18,856		22,925		14,650		\$389,942

¹ The burden for the listed State activities is unchanged from the currently approved level. Only the burden for facilities in the N-SSATS and Mini-N-SSATS has changed; and the burden for the N-SSATS pretest, which is now complete, has been removed.

Basis for Burden Hour Estimates:

Only the burden associated with preparing for and conducting the N-SSATS and the Mini-N-SSATS will change.

N-SSATS Survey: The burden for conducting N-SSATS is estimated to be 40 minutes, or about .67 hours per respondent. This is based on experience in the recent pretest with the revised version of the questionnaire. There will be about 17,000 facilities included in the annual N-SSATS, for a total annual burden of 11,390 hours.

Mini-N-SSATS: The Mini-N-SSATS is a procedure for collecting services data from newly identified facilities between main cycles of the N-SSATS survey and will be used to augment the listing of treatment facilities in the on-line Treatment Locator. The between-survey telephone calls to about 700 newly identified facilities per year will allow facilities to be added to the Locator in a more timely manner. The calls are expected to take an average of about 25 minutes to complete, or about .42 hours per respondent, for an annual average burden of 294 hours.

[Basis for Hour Cost Estimates : No change in the hourly wage rate.]

[Items 13-14: No Change]

15. Changes in Burden

The OMB Inventory currently contains 6,491 hours for DASIS activities. The estimated annual burden for DASIS for the next three years is 14,650 hours, for a net increase of 8,159 hours. The increase is due to program changes, including:

Program Changes: (Total increase of 8,159 hours)

- N-SSATS pretest (Facilities): The previous request included a pretest of 200 facilities with an average burden of 34 hours per year. The pretest has been completed and the burden has been removed. No large-scale pretests (more than 9 respondents) are proposed for the next three years. The burden will decrease from 34 to zero hours per year, for a decrease of 34 hours per year.
- N-SSATS questionnaire (Facilities): The previous request sought approval to conduct the N-SSATS survey in only one year, 2006, while a pretest of a new instrument was being conducted. That one year request for N-SSATS was for a survey of 17,000 facilities with a burden of .6 hours per respondent (a 35 minutes survey), spread across the 3-year approval period, resulting in an annual average of .2 hours per respondent or an average annual burden of 3,400 hours. This current request seeks approval to conduct N-SSATS in each year of the three year approval period, in 17,000 facilities, with a slightly longer questionnaire (estimated to take about 40 minutes, or a burden of .67 hours per respondent), for an average annual burden of 11,390 hours. The increase to 3 full years of N-SSATS would increase the annual average burden from 3,400 to 11,390 hours, or an increase of 7,990 hours.
- Mini-N-SSATS (Facilities): The previous request included the Mini-N-SSATS for only one

year, 2006, with the survey burden of .4 hours per respondent (25 minutes) in 700 facilities spread over the three years of request, for an annual average burden per respondent of .13 hours and a total annual average of 91 hours. The current request seeks approval for the Mini-N-SSATS for each year of the three year approval period. With 700 facilities expected to take part in the Mini-N-SATS each year of the three year approval period, with an average burden per respondent of .42 hours, the average annual burden will increase from 91 hours to 294 hours, for an increase of 203 hours.

[Items 16-18: No Change]

B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS

C. Respondent Universe and Sampling Methods

[Respondent Universe and Response Rates – No change.]

Sampling:

The only activity that involved sampling was the proposed pretest. Now that the N-SSATS pretest is complete, there will be no pretests requiring sampling in the next three years.

[Estimation Procedures:– No change.]

2. Information Collection Procedures

There are no changes in the DASIS data collection procedures, other than the use of the revised N-SSATS questionnaire. The N-SSATS data collection will be carried out by mail, with an on-line response option, and with follow-up of nonrespondents by CATI telephone calls. The N-SSATS survey instruments incorporating the pretested changes are included in Attachments B1 through B5; the letters to facilities describing the survey are included in Attachments B6 through B10.

3. Methods to Maximize Response Rates

The methods to maximize response rates that proved successful in the 2003 through 2005 N-SSATS will again be used. They include:

- Advance letters to alert facility directors to the upcoming N-SSATS mailing;
- State letters of support mailed with the N-SSATS questionnaires;
- An on-line response option which allows respondents to complete the survey on the Internet;
- Reminder phone calls and remailings as needed;
- An N-SSATS toll-free hotline for facilities to call with questions about the survey;

- Tracing and locating efforts to determine whether a facility is still in business, closed, or merged with another facility;
- Telephone interviews to collect the information from those not responding by mail or web.

In addition, an N-SSATS information website was pretested and will be incorporated into N-SSATS to make N-SSATS history and other material available to respondents. Attachment B11 includes a copy of the web pages for the 2007 N-SSATS information website.

4. Tests of Procedures

A pretest of the 2007 N-SSATS questionnaire revisions was completed with 191 facilities in April through June 2006. Two versions of the pretest questionnaire were used to test different versions of several of the revised questions (pretest Version A and pretest Version B questionnaires are included within Attachment A). Fifty-one (51) Version A facilities and 49 Version B facilities underwent a full pretest debriefing. Their responses to the debriefing questions along with an analysis of error levels and data consistency for all pretest participants helped survey staff assess the respondents' understanding of the survey questions and were influential in program's refinement of the questions. The revised 2007 N-SSATS questionnaire is included as Attachment B2.

No large-scale pretests (more than 9 respondents) are proposed for the next three years, since a formal pretest of the revised questionnaire has recently been completed. If rewording or small changes in questions are required during that time, the N-SSATS questionnaire would be tested on a small number of facilities (nine or fewer facilities), and the respondents would be debriefed by phone to verify that they were interpreting the items as intended.

[Item 5: No Change]

The SAMHSA Project Officer and Co-Project Officer are:

Deborah Trunzo
DASIS Team Leader
240-276-1267

Anita Gadzuk
Public Health Analyst
240-276-1266

LIST OF ATTACHMENTS

Attachment A Previous clearance request

[Includes:]

Attachment A - A	Authorizing legislation
Attachment A - B1	I-SATS On-line State update forms and instructions
Attachment A - B2	I-SATS facility registration form
Attachment A - B3	Augmentation screener questionnaire
Attachment A - C1	Mark-up of 2005 N-SSATS questionnaire, to show changes for 2006
Attachment A - C2	N-SSATS 2006 questionnaire
Attachment A - C3	N-SSATS 2006 screens for on-line questionnaire
Attachment A - C4	N-SSATS 2006 CATI questionnaire
Attachment A - C5	N-SSATS 2006 advance letter
Attachment A - C6	N-SSATS 2006 cover letter; on-line questionnaire access instructions; and frequently asked questions sheet
Attachment A - C7	N-SSATS 2006 thank you/reminder letter
Attachment A - C8	N-SSATS 2006 second mailing cover letter
Attachment A - C9	Mini-N-SSATS advance letter
Attachment A - C10	Mini-N-SSATS CATI questionnaire
Attachment A - C11a	N-SSATS 2007 pretest questionnaire Version A
Attachment A - C11b	N-SSATS 2007 pretest questionnaire Version B (w/ note delineating the differences between Version A and Version B)
Attachment A - C12	N-SSATS 2007 pretest advance letter
Attachment A - C13	N-SSATS 2007 pretest cover letter
Attachment A - C14	N-SSATS 2007 pretest debriefing guide
Attachment A - D1	TEDS admission and discharge data elements (existing)
Attachment A - D2	TEDS national outcome measures (NOMS) data elements (new)
Attachment A - D3	Table of TEDS reporting practices by State
Attachment A - D4	SAPT Block Grant Application tables 7A and 7B and forms T1-T5
Attachment A - E1	<u>Federal Register</u> notice (April 22, 2005), with comments received
Attachment A - E2	Participant list - DASIS regional meetings, February 2003 - March 2005

Attachment A - E3	Participant list - SAMHSA NOMS State meeting, December 2004, Washington D.C.
Attachment A - E4	Participant list - CSAT DSCA regional workshop, May 2005, Bloomington, MN
Attachment A - E5	SAMHSA CSAT/CSAP letter to States (NY version) and accompanying NOMS attachment, May 2, 2005
Attachment B1	Mark-up of 2006 N-SSATS questionnaire, to show changes for 2007
Attachment B2	N-SSATS 2007 questionnaire
Attachment B3	N-SSATS 2007 web screens for on-line questionnaire
Attachment B4	N-SSATS 2007 CATI questionnaire
Attachment B5	Mini-N-SSATS 2007 CATI questionnaire
Attachment B6	N-SSATS 2007 advance letter
Attachment B7	N-SSATS 2007 cover letter; on-line questionnaire access instructions; and frequently asked questions sheet
Attachment B8	N-SSATS 2007 thank you/reminder letter
Attachment B9	N-SSATS 2007 second mailing cover letter
Attachment B10	Mini-N-SSATS 2007 advance letter
Attachment B11	Web pages for the 2007 N-SSATS information website
Attachment C1	<u>Federal Register</u> notice (June 9, 2006)
Attachment C2	List of N-SSATS pretest respondents who participated in the questionnaire debriefings