

**Health Resources and Services Administration
Bureau of Health Professions
Division of Nursing**

Supporting Statement

A. Justification

1. Circumstances of Information Collection

This is a request from the Health Resources and Services Administration (HRSA) to the Office of Management and Budget (OMB) for approval of an information collection activity to collect data for two separate and distinct formula-based grant programs: the Advanced Education Nursing Traineeship (AENT) and Nurse Anesthetist Traineeship (NAT). These two programs are part of the Nurse Traineeship Data (NTD) Project.

These tables have been in use without approval. The program was unaware of the clearance requirements for the tables. During the process of transitioning from the use of a paper form to an electronic format, the program was informed that this activity required OMB review and approval. The program immediately took steps to bring the forms into compliance and is submitting this request as a result.

The approved AENT and NAT tables will be used in the Nurse Traineeship Database System. This is a new automated NTD System which will allow grant applicant institutions a single access point to download and submit the AENT/NAT grant application and tables electronically through Grants.gov.

The information on the tables which require OMB approval will be completed by grant applicant institutions submitting grant applications for the AENT and NAT programs. The information collected includes number of enrollees, number of graduates, and the types of programs from which students are enrolling and/or graduating.

This information collection is essential in order to make decisions in the award determination process. Additionally, the data will be used to ensure programmatic compliance and to formulate and justify budget requests.

The AENT and NAT Programs support the mission of HRSA which is to improve the health status of the population by providing national leadership and resources to develop, distribute and retain a diverse, culturally competent health workforce that provides the highest quality health care for all, especially the underserved.

The purpose of the AENT Program is to make a critical difference in today's increasingly complex health care environment. Nurse Practitioners, Nurse-

Midwives, Nurse Anesthetists and Clinical Nurse Specialists must be able to competently deliver preventive care to all individuals as well as complex care to individuals with acute and chronic illnesses, and disabilities. Nurse Executives, Public Health Nurse Leaders, and other advanced practice nurses provide essential services requiring advanced practice clinical, public health and management expertise to address health care in the 21st century.

The purpose of the NAT Program is to address the need for Certified Nurse Anesthetists (CRNA). CRNAs deliver over 65 percent of the 26 million anesthetics administered annually to patients in the United States. CRNAs are the sole providers of anesthesia in more than 70 percent of rural hospitals and a major provider of anesthesia in inner cities. Without immediate access to nurse anesthetists, rural and underserved populations are at risk for delays or for a total absence to anesthesia services in local areas. By 2010 there is an expected shortfall of at least 15,000 FTE CRNAs.

History of the AENT and NAT Programs

“The Professional Nurse Traineeship Program (currently known as the Advanced Education Nursing Traineeship Program) was originally established in the 1956 Health Amendments Act. It was continued and expanded under the Nurse Training Act (NTA) Of 1964 signed by President Lyndon Johnson. The Nurse Training Act (P.Law 88-581) added Title VIII to the Public Health Service Act. The Professional Nurse Traineeship Program was subsequently funded under the Health Manpower Act of 1968 which carried the program through June 30, 1971. The Nurse Training Act of 1971 (P.Law 92-158) broadened Title VIII authority. The 1975 Nurse Training Act continued the provisions contained (previously funded programs were continued) in Title VIII of P.Law 94-63 and provided separate authorities for advanced nurse education.

The Nurse Training Amendments of 1979 (P.Law 96-76) authorized Nurse Anesthetist Traineeships.

The Nurse Training Act of 1985 included legislative changes. Funding for Nurse Anesthetist Programs was one amendment to the law.

The 1985 and 1988 amendments to the NTA extended Title VIII and specified funding for geriatric nursing education curricula, faculty development and student support.

The Nurse Education and Practice Improvement Amendments of 1992 (P.Law 102-408) were enacted. Funds were granted to increase nursing school enrollment, long-term care fellowships to practical nurses, continuing education for nurses in underserved communities, and support to promote primary health care in underserved communities. Programs that improve minority representation and care to minority or vulnerable populations were continued.

The Health Professions Education Partnerships Act of 1998 (Subtitle B – Nursing Workforce Development), P.Law 105-392, signed November 13, 1998 amended Title VIII of the Public Health Service Act included:

- Section 811 – Advanced Education Nursing (to enhance advanced education and practice, and traineeship support for advanced education)
- Section 821 – Nursing Workforce Diversity (to increase nursing educational opportunities for individuals from disadvantaged backgrounds)
- Section 831 – Basic Nurse Education and Practice (to strengthen basic nurse education and practice)

The Nurse Reinvestment Act (NRA) of 2002 amended the Public Health Service Act with respect to health professions programs regarding the field of nursing. The NRA (P.Law 107-205) amended the existing Title VIII legislation (Nursing Workforce Development) as follows:

- Section 831 Basic Nurse Education and Practice
 - Re-named Nurse Education, Practice, and Retention Grants
 - Retained 6 of the original purposes
 - Added grants or contracts for internship and residency programs to encourage mentoring and the development of specialties
 - Modified the existing career ladder program by expanding the scope of nursing personnel and focusing on mentoring and career counseling
 - Added grants and contracts for enhancing patient care delivery systems (improve retention of nurses and enhance patient care directly related to nursing activities)
- Section 846 Loan Repayment Program
 - Modified the definition of eligible facility for service payback
 - Added a Nurse Scholarship Program with a service commitment

P. Law 107-205 added the following to the Title VIII legislation:

- Section 846A Nurse Faculty Loan Program
- Section 851/852 Public Service Announcements
- Section 855 Comprehensive Geriatric Education

2. Purpose and Use of Information

Information from the AENT and NAT tables is used in making determinations for training grants to educational institutions to increase the numbers of advanced education nurses. Award amounts are based on enrollment, traineeship support, graduate data and two statutory funding preferences (awarded to institutions who meet one or both of the statutory funding preferences).

In addition, the data collected from the applicant institutions will be used to ensure compliance with legislative mandates and to generate the award amount.

3. Use of Improved Information Technology

This activity is fully electronic. The Federal Financial Assistance Management Improvement Act of 1999 (P. Law 106-107) and the President's Management Agenda aim to simplify Federal financial assistance application process and create a single website to apply for Federal assistance. AENT and NAT grant applicant institutions download and submit their grant application package, including AENT / NAT tables electronically via <http://www.grants.gov/>. The goal of the NTD Project is to provide grant applicants a one-stop grant application submission process, improve data quality, reduce data entry costs, run electronic validation checks on applicants, and reduce staff burden.

4. Efforts to Identify Duplication

There is no duplication of reporting with this activity. The information that is requested in the tables is unique to the nursing traineeship programs.

5. Involvement of Small Entities

This project will not have a significant impact on small entities.

6. Consequences If Information Collected Less Frequently

Annual information is required in order to make funding determinations. Without the submission of AENT/NAT tables, grants management and program staff will not have the necessary data to determine the award amount, provide program specific information, generate reports, and/or provide an archive of fiscal year data for analysis and trending.

7. Consistency with the Guidelines in 5 CFR 1320.5(d)(2)

This information collection fully complies with 5 CFR 1320.5(d)(2).

8. Consultation Outside the Agency

The notice required in 5 CFR 1320.8(d) was published in the *Federal Register* on Tuesday, June 13, 2006 (71 FR 34140-34141). No comments were received. In addition, the following individuals were contacted and reviewed the instructions and tables for burden and clarity.

AENT

Rhonda D. Hensley, EdD, APRN, BC
MSN Program Director
Grambling State University

Telephone Number: 318-274-2897
E-Mail Address: hensleyr@gram.edu

Lois Magnussen, EdD, APRN
Director of Faculty Development and Associate Professor
University of Hawaii at Manoa
Telephone Number: 808-956-8744
E-Mail Address: magnusse@hawaii.edu

Nalini Jairath RN PhD,
Dean, School of Nursing
Gowan Hall
The Catholic University of America
620 Michigan Avenue
Washington, DC 20064
Telephone: 202-319-5403
E-Mail Address: jairath@cua.edu

NAT

Nancy Tierney, CRNA
Program Director
CAMC Health Education and Research Institute
Charlestown, West Virginia
Telephone Number: 302-388-9950
E-Mail Address: nancy.tierney@camc.org

Bernadette Henrichs, PhD, CRNA, CCRN
Director, Nurse Anesthesia Program
Barnes-Jewish College
MS: 90-30-625
306 S. Kingshighway Blvd
St. Louis, MO 63110
Telephone Number: (BJC): 314-454-8910 or (Anes Dept): 314-362-2334
E-Mail Address: bmh0869@bjc.org

Barbara J Jochman CRNA, MS
Program Director
Franciscan Skemp Healthcare
School of Anesthesia
700 West Ave
La Crosse, WI 54601
Telephone Number: 608-785-0940 (Pager # 0750)
E-Mail Address: Jochman.Barbara@mayo.edu

9. Remuneration of Respondents

Respondents will not be remunerated.

10. Assurance of Confidentiality

The Privacy Act of 1974 (5 U.S.C. 522a) is not applicable to this request, as this information collection will not obtain personal information on individuals. The AENT and NAT grant applicants are institutions and personal information is not obtained.

AENT: Eligible applicants are collegiate schools of nursing, academic health centers, and other public or private entities accredited by a recognized body or bodies or State agency, approved for the purpose of nursing education by the Secretary of Education.

NAT: Eligible applicants are education programs in schools of nursing, academic health centers, and other private or public entities that provide registered nurses with full-time nurse anesthetist education and are accredited, or have initial accreditation, by the Council on Accreditation of Nurse Anesthesia Educational Programs.

11. Questions of a Sensitive Nature

There are no questions of a sensitive nature.

12. Estimates of Annualized Hour Burden

This activity is not expected to add significantly to grantees reporting burden, as the information requested is already routinely maintained. The proposed data collection instruments complement the grantees internal automated reporting mechanisms.

Form Name	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden	Wage Rate	Total hour cost
AENT	500	1	500	1	500	\$12	\$4,800
NAT	100	1	100	1	100	\$12	\$1,200
Total	600		600		600		\$6,000

Basis for Burden: In the NTD Project it is estimated that there will be 500 AENT grant institution applicants that will complete the AENT tables annually and 100 NAT grant institution applicants that will complete the NAT tables annually.

13. Estimates of Annualized Cost Burden to Respondents

There are no capital or start-up costs because NTD grant applicant institutions already collect and maintain the required information such as number of enrollees, number of graduates and the types of programs from which they are enrolling and/or graduating.

14. Estimates of Annualized Cost to the Government

The cost to the Government consists of the contract costs for the project and project monitoring by HRSA staff. First year contract costs are approximately \$400,000 for system development. Second and third year costs are \$70,000 for operation and maintenance of the system. Annualized contract cost is estimated at approximately \$157,000. In addition, there is the cost for 10% time for one FTE at a GS 14 level for approximately \$9,500.

15. Changes in Burden

There are no burden hours for this activity in the OMB inventory. This is a new project.

16. Time Schedule, Publication and Analysis Plans

Applicant institutions submit information on an annual basis. There are no plans for statistical analyses or publication.

17. Exemption for Display of Expiration Date

The expiration date for the AENT and NAT tables will be displayed. No exemption is being requested.

18. Certifications

This information collection fully complies with the guidelines set forth in 5 CFR 1320.9. The required certifications are included in the package.

