Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 0935-0179)

TITLE OF INFORMATION COLLECTION: Customer Satisfaction with the AHRQ Quality Indicators (QI) and QI Software, Documentation and User Support

PURPOSE:

An important part of AHRQ's mission is to disseminate information and tools that can support improvement in quality and safety in the U.S. health care community. In this regard, the AHRQ Quality Indicators (QI) were first developed and released in 2000. The initial version of the AHRQ QI was intended for the use of quality improvement and research. In recent years, there has been an increase in transparency of provider information in the U.S. through public reporting. In response, AHRQ adapted the use of the provider level AHRQ QIs for the public reporting of hospital performance.

The last several years has seen a steep increase in the use of the AHRQ QI for reporting hospital quality information. At the present time most of the States doing public reporting are opting to use AHRQ QI. The AHRQ QI are a transparent, evidence-based set of measures that are used in the CMS Hospital Compare and 26 states for public reporting and hundreds more for other purposes, such as quality improvement and research.

Use of the AHRQ QI has become even more diversified as there are recent instances of using the measures in value based purchasing / pay for performance and in the accreditation of programs. Given the varied uses of the AHRQ QI discussed above, it is both timely and necessary to identify the degree to which the wide ranging user needs are being met.

The goal of this project is to gather information on how users work with the AHRQ Quality Indicators (QI) and AHRQ QI software.

To achieve the goal of this project the following two data collections will be implemented:

1) AHRQ QI Software and Documentation Questionnaire (see Attachment A) -- The purpose of this questionnaire is to better understand the experience and satisfaction of past and present AHRQ QI users with the software and documentation, and determine additional enhancements to the software and documentation that they need to support their use of the AHRQ QI.

2) Adoption and Use of AHRQ QI Questionnaire (see Attachment B) -- The purpose of this questionnaire is to better understand how the measures are being utilized and satisfaction with the measures as well as user support services. The questionnaire has the additional purpose to identify enhancements that can be made to the measures and user support services.

The data collected from this survey will be used for multiple purposes, including:

(1) to improve the AHRQ QI measures in order to make them more useful to current users;

(2) to improve the AHRQ QI software tools (and associated software documentation) to make them more useful to current users;

(3) to improve the quality of AHRQ QI user support; and

(4) to plan a strategy for increasing the number of organizations using the AHRQ QI measures.

This study is being conducted by AHRQ through its contractor, Battelle Memorial Institute, pursuant to AHRQ's statutory authority to conduct and support research on health care and on systems for the delivery of such care, including activities with respect to the quality, effectiveness, efficiency, appropriateness and value of health care services and with respect to quality measurement and improvement. 42 U.S.C. 299a(a)(1) and (2).

DESCRIPTION OF RESPONDENTS:

The respondents will be users of the AHRQ QI software and/or hospitals that use the AHRQ QI or other healthcare quality measures. Members of these groups have a variety of backgrounds including data analysts, information technology analysts, state government staff members, health data organization leaders, quality improvement staff members, community health providers, epidemiologists, physicians, health care administrators, hospital association leaders, and health plan administrators.

TYPE OF COLLECTION: (Check one)

[ ] Customer Comment Card/Complaint Form   [X] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software   [ ] Small Discussion Group

[ ] Focus Group   [ ] Other:_____

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.
6. 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.

Name: Doris Lefkowitz

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 [ ] No
3. If Applicable, has a System or Records Notice been published? [ ] Yes [ ] No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?

[ ] Yes [X] No

Category of Respondent: Private Sector

The AHRQ Software and Documentation Questionnaire will be completed by 568 users of the AHRQ QI software and will take about 5 minutes to complete. The Adoption and Use of AHRQ QI Questionnaire will be completed by 1,150 users and non-users of the AHRQ QI and other healthcare quality measures and also takes about 5 minutes to complete. The total burden is estimated to be 143 hours.

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden hours
AHRQ QI Software and Documentation Questionnaire	568	5 minutes	47
Adoption and Use of AHRQ QI Questionnaire	1,150	5 minutes	96
Totals	**1,718**	na	**143**

FEDERAL COST: The estimated annual cost to the Federal government is $5,000 to develop, implement and analyze.

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 the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

Our sampling frame for the Adoption and Use of AHRQ QI Questionnaire will include U.S. hospitals who are users and non-users of the AHRQ QI. The source for the sample is the American Hospital Association's (AHA) Annual Hospital Survey. The AHA notes that there are 5,754 hospitals in the United States[1]. The questionnaire will be sent to all hospitals with an expected response rate of 20 percent (approximately 1,150 responses). The projected response rate is based on conducting one follow up reminder.

The sampling frame for the AHRQ QI Software and Documentation Questionnaire will include AHRQ QI users. The source for this sample will be the 2,841 members of the AHRQ QI listserv (the survey will also be posted to the QI website.) The questionnaire will be sent to all AHRQ QI listserv recipients with an expected response rate of 20 percent (approximately 568 responses). The projected response rate is based on conducting one follow up reminder.

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

List of attachments:

Attachment A: AHRQ QI Software and Documentation Questionnaire

Attachment B: Adoption and Use of AHRQ QI Questionnaire

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[1] American Hospital Association. (2012). Fast Facts on U.S. Hospitals. http://www.aha.org/research/rc/stat-studies/fast-facts.shtml.