

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 AHRQ’s Patient-Centered Outcomes Research (PCOR) Educational Materials

PURPOSE:

Since 2005, the Agency for Healthcare Research and Quality’s (AHRQ) Effective Health Care (EHC) Program has been conducting patient-centered outcomes research (PCOR), also known as comparative effectiveness research, and translating it into a variety of formats for health care decision makers. Patient and clinician research summaries help patients and clinicians compare treatment options to make informed health care decisions. However, providing the evidence in this format does not ensure that it is used in clinical decision-making.

AHRQ recognizes the important role health care providers play in educating patients about their diagnoses and treatment options and involving the patient in their health care decisions. AHRQ also recognizes that clinicians need to be educated about how to use this evidence with patients in a shared decisionmaking context. This project aims to supplement existing EHC Program products with tools, materials, and a workshop curriculum to educate health educators across several disciplines to use EHC Program research products in shared decisionmaking with their patients.

This information collection is designed to better understand health educators’ need for PCOR information from the EHC Program and how they may use it to educate patients and caregivers. We will employ three different strategies to collect information from health educators:

- 1) A Web-based survey
- 2) Six focus groups, each consisting of 8-12 participants (average=10 per focus group)
- 3) Pre-focus group questionnaire for focus group participants

This mixed-methods approach to data collection will be used to seek health educators’ feedback and opinions on available EHC Program products such as relevance of topic areas covered by the EHC Program, types of tools and resources available, mechanisms for obtaining the information, and the value and relevance of these tools and products to their work and to their patients. The information gathered will be used to help us better understand how AHRQ might customize new EHC Program products/tools/materials to better fit health educators’ needs in shared decisionmaking with patients and caregivers.

The Web-based survey (Attachment A, Health Educator Needs Assessment Survey) will use a variety of Likert-style, categorical, and open-ended questions to collect quantitative data from a large number of health educators across several disciplines. Included in the survey will be selected AHRQ PCOR educational materials. The survey will be useful for collecting the largest amount of information from health educators about AHRQ’s PCOR educational materials, the various approaches utilized in educating patients, and the gaps that exist in availability of PCOR information from AHRQ’s Effective Health Care Program. We will administer the survey to approximately 4,000 individuals and expect to achieve the acceptable response rate for a convenience sample survey of 25% or 1000 responses.

Using an online system for data collection rather than paper-based survey system will make completing and submitting the survey less time-consuming for respondents and will facilitate data analysis. Skip patterns included in the survey (i.e. questions that are only appropriate for a portion of the respondents) will be automatically programmed into the Web-based form of the survey, thereby reducing the number of irrelevant questions to which a given respondent may be subject to and making the overall survey more concise and brief. The Web-based survey will be accessible to our target audience 24 hours a day for a total of 4 weeks. During the data collection period, invited respondents will be contacted via email to remind them of the opportunity to participate and the importance of their feedback. The email notice will provide the hyperlink to access the survey, the estimated time (in minutes) it will take to complete the survey, and the impending deadline for submission of their responses.

The focus groups will be used for collecting qualitative data from a smaller group of participants (approximately 60 participants); specifically health educators who are involved in patient education and helping patients make clinical care/treatment decisions. Focus group discussions will provide context, details, and an explanation for behavior patterns and facilitate examining sources of agreement and disagreement, value, and barriers specifically related to the practice of shared decisionmaking.

Various focus group instruments have been developed for the qualitative data collection efforts. A screening instrument (Attachment B, Focus Group Screening Questionnaire) will help identify potential participants who fit the specific inclusion/exclusion criteria for either one of the following two focus group categories:

- **Group 1:** Health care practitioners only involved in educating patients and caregivers about treatment/intervention options.
- **Group 2:** Health care practitioners involved in educating patients and caregivers about treatment/intervention options; also engaging the patient/caregiver in the process shared decisionmaking and responsible for prescribing, diagnosing and/or delivering treatment/intervention.

The screening instrument will be completed by as many as 320 persons to reach the desired focus group sample size and mix of participants. In order to participate, potential participants must be willing to answer questions and meet certain criteria such as:

- What type of health care practitioner are you?
- In what kind of setting do you practice?
- Are you familiar with the approach of shared decisionmaking in healthcare?

For each category of focus group participants, pre-focus group questionnaires (Attachments C1 and C2, Pre-Focus Group Questionnaire) will be used to collect necessary information that does not require discussion. A trained focus group moderator will use a semi-structured moderator guide (Attachments D1 and D2, Focus Group Moderator Guide) to guide discussion. Before entering the focus group room, respondents will read and sign a consent form (Attachment E – Focus Group Consent) and have an opportunity to ask questions.

There will be four topic categories to engage focus group participants in discussion, each with a set of questions to collect data on the related topic (see Table 1, below). With participant feedback, AHRQ can determine answers to the following major study questions:

1. How do health educators access information for PCOR products?
2. How do health educators incorporate PCOR products into their current activities?
3. What other PCOR products do health educators need for their patients?

Table 1: Discussion Topics and Related Focus Group Questions

| Discussion Topics | Questions are Designed to Solicit Information about: |
|--|---|
| Patient Education and/or Shared Decisionmaking Knowledge and Practice | <ol style="list-style-type: none"> 1. How often participants engage their patients in discussions about shared decisionmaking process. 2. What participants attempt to achieve during shared decisionmaking discussions with their patients. 3. Challenges that participants face in the shared decisionmaking process. 4. Different approaches utilized by participants and how the approaches vary for different groups of populations. 5. Any training participants' might have received on ways to engage patients in making decisions about their health care- including discussing risks and benefits of available health care options 6. What they would find most valuable to them in a training program about making informed health decisions on treatments, medicines, or procedures |
| Awareness of and Use of Tools/Products in Decisionmaking with Patients | <ol style="list-style-type: none"> 1. How participants engage patients in the process of shared decisionmaking. 2. Products/tools/materials that participants currently use when engaging patients in the process of shared decisionmaking; including information about where they obtain the products/tools/materials, and how useful they find the products/tools/materials to be. 3. How often participants would utilize products/tools/materials in the process of shared decisionmaking, if the products/tools/materials they needed were available to them. |
| Awareness of PCOR/CER to Support Patient Decisionmaking | <ol style="list-style-type: none"> 1. Participants' knowledge and awareness of patient centered outcome research (PCOR) or comparative effectiveness research (CER) 2. Participants' knowledge and awareness of AHRQ and the Effective Health Care Program (EHC) 3. Participants' awareness and use of AHRQ/EHC products |
| PCOR Information and/or Product Gaps | <ol style="list-style-type: none"> 1. PCOR products that would be of interest to participants that are not currently on the list of AHRQ/EHC products 2. Health conditions or diseases that participants see the greatest need for more shared decisionmaking products, tools, or programs 3. Types of products, tools or programs that participants believe are most likely to be adopted and integrated into regular practice |

Each focus group will last about one hour and forty five minutes. Four focus groups will be held as in-person sessions; and two focus groups will be held using Webinar technology.

DESCRIPTION OF RESPONDENTS:

Respondents will be a mix of health educators who have been in clinical practice for a mixed number of years. A health educator is defined herein as someone who educates patients/caregivers about treatment options and/or engages patients in treatment decisions. The health educator may also be involved in educating future health educators. Key health educator groups include: Physicians, Nurse Practitioners, Physician Assistants, Pharmacists, Nurses/Case Managers/Care Coordinators, Psychologists, and Certified Health Education Specialists.

Health educator focus groups will be segmented based on their health educator discipline (e.g. physician, nurse, psychologist, etc); and further segmented into one of two groups depending on whether or not their job responsibilities include diagnosing and/or treating illness, ordering interventions, making referrals to other health care professionals, and/or writing prescriptions as seen below:

Group 1: Health care practitioners **only** involved in educating patients and caregivers about treatment/intervention options (e.g., Nurses, Pharmacists, Certified Health Educator Specialists, Care Coordinators, etc.).

Group 2: Health care practitioners involved in educating patients and caregivers about treatment/intervention options; also engaging the patient/caregiver in the process shared decisionmaking and responsible for prescribing, diagnosing and/or delivering treatment/intervention (e.g., Physician, Physician Assistant, Nurse Practitioner).

TYPE OF COLLECTION: (Check all that apply)

- Customer Comment Card/Complaint Form Customer Satisfaction Survey
 Usability Testing (e.g., Website or Software Small Discussion Group
 Focus Group Other: Screening Questionnaire

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: _____

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

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? Yes 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 No

AHRQ will offer eligible persons \$50 as an incentive to participate in the focus groups.

Category of Respondent: Private Sector

BURDEN HOURS

Web-based Survey: The Web-based survey will be completed by approximately 1000 health care professionals and will require 2-15 minutes (depending on the branch of the survey taken) to complete. It is estimated to take an average of 10 minutes across all survey participants for the purpose of the burden calculation.

Focus Groups: The focus group screening questionnaire will be completed by approximately 320 health care professionals; 60 (i.e., average of 10 per focus group) are expected to both screen-in and agree to participate in the focus groups. The screening questionnaire is estimated to take 1 minute to complete. The pre-focus group questionnaire is estimated to take 2 minutes to complete. The focus groups will last one hour and 45 minutes.

| Form Name | Number of respondents | Number of responses per respondent | Hours per response | Total burden hours |
|-------------------------------|-----------------------|------------------------------------|--------------------|--------------------|
| Web-based Survey | 1000 | 1 | 10/60 | 125 |
| Screening Questionnaire | 320 | 1 | 1/60 | 5 |
| Pre-Focus Group Questionnaire | 60 | 1 | 2/60 | 2 |
| Focus Groups | 60 | 1 | 1.75 | 105 |
| Total | 1,440 | na | na | 237 |

FEDERAL COST: The estimated annual cost to the Federal government is \$57,180

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?

We will recruit participants from membership lists from professional affiliations. The project's Technical Expert Panel (TEP) will be an invaluable asset by providing input and suggestions for participant recruitment. Recruitment methods will include advertisements on major discipline specific association Web pages, as well as E-mail alerts to association members through list-servs. The recruiters will use the screening questionnaire to further select the appropriate respondents for focus groups and ensure that selected respondents meet study criteria (see Attachment B).

Administration of the Instrument

1. How will you collect the information? (Check all that apply)
 Web-based or other forms of Social Media (for the Web-based survey)

 Telephone (for two telephone/webinar focus groups)

 In-person (for four in-person focus groups)

 Mail

 Other, Explain
2. Will interviewers or facilitators be used? Yes No

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

List of Attachments:

Attachment A – Web-based Survey

Attachment B – Screening Questionnaire

Attachment C1 – Pre-Focus Group Questionnaire – Group1

Attachment C2 – Pre-Focus Group Questionnaire – Group2

Attachment D1 – Focus Group Moderator Guide – Group1

Attachment D2 – Focus Group Moderator Guide – Group2

Attachment E – Focus Group Consent Form