

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 2900-0770)

TITLE OF INFORMATION COLLECTION:

Project ARCH (Access Received Closer to Home) Patient Satisfaction Survey

PURPOSE:

Project ARCH (Access Received Closer to Home) is a congressionally mandated program under Section 403 of Public Law 110-387, amended by Section 308 of Public Law 111-163, to provide health care services through contractual arrangements with non-VA providers for three years. Project ARCH intends to improve access for eligible Veterans by connecting them to these local providers closer to where Veterans live.

Since Project ARCH is a new program intended to improve access for eligible Veterans while ensuring the high quality of care, it is important to receive participating Veterans’ opinions and satisfaction with the care provided. Responses will be valuable to VA in enhancing the program service. In addition, the statute enacting Project ARCH requires VA to provide annual reports to Congress for each year the *program* is conducted on various aspects including patient satisfaction.

For these reasons, VA has developed a patient satisfaction survey to understand participating Veterans’ satisfaction with Project ARCH and care they received under the program.

DESCRIPTION OF RESPONDENTS:

VA intends to survey Veterans who received care under Project ARCH. Project ARCH has specific eligibility criteria for Veterans to participate as outlined in the statute enacting the program. Only Veterans who satisfy the statutory eligibility criteria, have a clinical need for Project ARCH services, and have signed a consent form will be able to participate in Project ARCH. Participation in Project ARCH is voluntary and does not otherwise alter a Veteran’s VA health care coverage.

TYPE OF COLLECTION: (Check one)

- | | |
|-----------------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" 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 type="checkbox"/> 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.

- 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: Patricia Suh

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

Personally Identifiable Information:

- Is personally identifiable information (PII) collected? Yes No
- If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? Yes No
- If Yes, has an up-to-date System of Records Notice (SORN) 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

BURDEN HOURS

Category of Respondent	No. of Respondents	No. of Responses	Participation Time	Burden
Individuals or Households	3,600	2	12 minutes	1,440
Totals				

FEDERAL COST: The estimated annual cost to the Federal government is \$52,624

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

- 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?
 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?

VA intends to survey Project ARCH participants to monitor their satisfaction with the program services and care they received. The statute enacting Project ARCH (Section 403, Public Law 110-387) contains specific eligibility criteria for Veterans to participate in Project ARCH. Only Veterans who satisfy the statutory eligibility criteria, have a clinical need for Project ARCH services, and have completed the consent form will be able to participate in Project ARCH and receive care. The potential group of respondents for the Project ARCH patient satisfaction survey will be Veterans who received health care services under Project ARCH. Since participation in

the program is based on Veterans' eligibility, health care needs and voluntary consent to participate, VA currently does not have a list of targeted respondents.

A random sample will be selected from Veterans who have at least one visit with the Project ARCH contracted providers in the previous 30-day period, which is a similar methodology for VA surveys. VA intends that patients with multiple care events will be surveyed no more than once per six-month period to reduce Veterans' burden.

Administration of the Instrument

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

Instructions for completing Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback”

TITLE OF INFORMATION COLLECTION: Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

PURPOSE: Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

DESCRIPTION OF RESPONDENTS: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

TYPE OF COLLECTION: Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

CERTIFICATION: Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

Personally Identifiable Information: Provide answers to the questions. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

Gifts or Payments: If you answer yes to the question, please describe the incentive and provide a justification for the amount.

BURDEN HOURS:

Category of Respondents: Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households; (2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected per row.

No. of Respondents: Provide an estimate of the Number of respondents.

Participation Time: Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

Burden: Provide the Annual burden hours: Multiply the Number of responses and the participation time and divide by 60.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.

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. Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

Administration of the Instrument: Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

Submit all instruments, instructions, and scripts are submitted with the request.