

Request for Approval under the  
“The Hospital Preparedness Program-  
Generic HPP”  
(OMB Control Number: 0990-0391)

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TITLE OF INFORMATION COLLECTION: Healthcare System Stress Pulse

PURPOSE:

This data collection effort is crucial to the Hospital Preparedness Program’s information sharing and decision-making capabilities for its awardees. Healthcare professionals and the organization they work with may experience increased levels of stress because of an incident or situation creating a lack of resources. Results from these data analyses help HPP to better coordinate effective communication, share information, and monitor progress of its healthcare emergency preparedness and progress of national preparedness goals. Both traditional and innovative approaches to situational awareness are needed to enable transmission of data and to develop timely public risk communications. This data collection effort will improve coordination and enhance integration to help create a better common operating picture among our HPP awardees.

The HPP supports priorities outlined by the National Preparedness Goal (the Goal) established by the Department of Homeland Security (DHS). The Goal guides entities at all levels of government in the development and maintenance of capabilities to prevent, protect against, respond to and recover from major events. Emergency response efforts are sometimes disparate; and effective coordination is often lacking across governmental jurisdictions, communities, and the health and emergency response systems. Disasters and public health emergencies can stress health care systems to the breaking point and disrupt delivery of vital medical services. During such incidents, the healthcare system may experience significant shortfalls of trained staff, ambulances, medical supplies, pharmaceuticals and anti-virals; and medical surge strategies may need to be implemented and alternate care facilities may need to be used. The data collection tool and subsequent analysis will aid HPP, and its awardees to better plan for these situations as necessary to provide the best possible health care during incidents, which will help mitigate resource depletions.

The data collected through this survey will help HPP define, develop, and implement a tiered process to assess what impact an incident is having on the healthcare delivery system, assess stress and appropriately treat patients via appropriate standards of care. Information obtained through this data collection process will help inform:

- Situational awareness of HPP awardees
- Strategies for surge, preparedness, mitigation, resource allocation and best practices that can be shared with awardees

DESCRIPTION OF RESPONDENTS:

Survey respondents will be healthcare professionals working within hospitals and other healthcare organizations, which are the type of entities directly involved with HPP. All awardees participate in progress reporting because data on each entity are integral for monitoring progress and measuring national preparedness. The anticipated response rate is 100 percent.

TYPE OF COLLECTION: (Check one)

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

Personally Identifiable Information:

- Is personally identifiable information (PII) collected?  Yes  No
- If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974?  Yes  No
- 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

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Healthcare Professionals POC's	90	10 minutes	15 mins

FEDERAL COST: The estimated annual cost to the Federal government is approximately- \$780.00.

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?  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? Sample is attached to submission.

The applicable population (universe) is the entire healthcare professional’s volunteer’s s for the data collection process (i100 healthcare delivery professionals). The anticipated response rate is 90-100 percent. An email containing a link to the healthcare professional will be distributed to all POCs. POCs will be responsible for completing the survey. However, POCs may discuss with and gather information from other healthcare professionals working within the same healthcare organization in order generate the most accurate and objective responses. Healthcare professionals will have no more than 4 days to return the survey. The data from the completed surveys will be directed to HPP Division within ASPR.

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.

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