

**DOCUMENTATION FOR THE GENERIC CLEARANCE
FOR THE COLLECTION OF QUALITATIVE RESEARCH & ASSESSMENT**

TITLE OF INFORMATION COLLECTION:

- INTERVIEWS
- SMALL DISCUSSION GROUPS
- FOCUS GROUPS
- QUESTIONNAIRES
- OTHER (EXPLAIN)

DESCRIPTION OF THIS SPECIFIC COLLECTION

1. Intended purpose

Little is known about the processes that families and older adults go through to gather information, make decisions, and access long-term care when a loved one needs assistance. The purpose of this project is to gather qualitative information about where families gather information, how they make decisions, how well these arrangements work, and how useful government resources are in these processes. It will be the first step toward understanding how useful existing federal resources are and how they can be improved to better meet the needs of older adults and their families. This Generic Information Collection request will cover electronic focus group to gather this information from individuals who have gone through the processes of looking for information, finding services, and using long-term care.

2. Need for the collection

Individuals and their families may turn to many places for information, including friends, geriatric case managers, hospital discharge planners, or providers. Long-term care decisions are complex and multi-layered (Maloney & Finn, et al, 1996), involve numerous cost and quality assessments (Castle, 2003) and are often made at a time of crisis with little advance thought to preferences (Kane & Kane, 2001). Consequently some researchers have concluded that consumers are decidedly at a disadvantage when it comes to choosing a long-term care setting that best meets their needs (Lubalin and Harris-Kojetin, 1999, Hibbard and Peters, 2003).

The federal government provides some information on long-term care. The Administration on Aging (AOA) within the Administration for Community Living (ACL) supports a national network of area agencies on aging (AAAs) that are designed to provide information on services and supports available in each community and assist in decision making. The [Eldercare Locator](#) can help families find the nearest AAA. Information on nursing facilities or home healthcare agencies, including information on the quality of services, is available from Center for Medicare and Medicaid Services' [Nursing Home Compare](#) or [Home Health Compare](#) websites.

In 2005, ASPE undertook a study to understand how families choose a nursing home. The resulting study (available at: <http://aspe.hhs.gov/daltcp/reports/2006/chooseI.htm>) found that location is the most important factor families consider when searching for a

nursing home for a loved one. Additional important factors include experiences of family and friends, cost, and appearance of the facility.

This data collection is needed for a few reasons. First, it will provide information that is not otherwise available on where families go for long-term care information for all types of long-term care (e.g., home health, caregiver supports, assisted living, etc.). Secondly, it will help us understand how useful existing federal resources are and how they can be improved to better meet the needs of older adults and their families.

3. Planned use of the data

ASPE staff will analyze the data qualitatively by reviewing the transcript and any notes, and identifying the main themes from the discussion. ASPE staff will note if particular issues (for example, challenges in finding information on home health aides) seemed to be raised more often, or of greater importance, to the focus group participants. The information will be used to inform future ASPE research projects.

4. Date(s) and location(s)

Data will be collected through a series of electronic focus groups on June 23, 24, 25 & 30 from 7-8pm EST. The moderator will be in Washington, DC and the participants will be in their homes throughout the country.

5. Collection procedures

The data collection will be conducted through four electronic focus groups meetings convened through the KnowledgePanel® kept by GfK. KnowledgePanel® is an established Internet panel that consists of about 55,000 U.S. residents, aged 18 and older, who were selected probabilistically and invited to participate. The panel is based on a sampling frame which is not limited to current Internet users or computer owners and does not accept self-selected volunteers.

The focus groups will be informal, moderated, online discussions where participants will be offered the opportunity to respond to various topics and instant polls in a group environment. Participation is completely voluntary. The questions that will be posed by the facilitator have been developed and are attached (Attachment A). No personal identifying information will be shared. After the conference session, ASPE staff will analyze the data by reviewing the transcript and other notes and identifying themes from the focus groups.

6. Number of collections (e.g., focus groups, surveys, sessions)

There will be four focus groups with 10 participants each.

7. Description of respondents/participants

ASPE will work with GfK to identify KnowledgePanel® participants between the ages of 40 and 70 who have previously indicated that they had an adult family member who used

long-term care. Participants will be screened so that only those who sought long-term care in the past two years will be included so that recollection is better.

8. Description of how results will be used

The qualitative information gathered from the focus groups will be summarized by ASPE staff, who will identify common themes, common processes, and unique situations. This information will also be shared with the contractor for a future ASPE project (expected to begin September 2015) that will examine the processes in four communities.

9. Description of how results will or will not be disseminated and why or why not

Findings will be shared with leadership in ASPE, ACL, and CMS. The focus group transcripts will not be made public.

AMOUNT OF ANY PROPOSED STIPEND OR INCENTIVE

Focus Group participants will be offered a small noncash incentive by GfK to complete the focus group. GfK uses a “points”-based incentive system to thank panel members for completing surveys and focus groups of any length. For these focus groups, each panelist will be provided 50,000 points, the monetary equivalent of \$50. This honorarium is intended to recognize the time spent by participants in participating in this focus group, encourage their cooperation, and convey appreciation for contributing to this important study.

BURDEN HOUR COMPUTATION (*Number of responses (X) estimated response or participation time in minutes (/60) = annual burden hours*):

Category of Respondent	No. of Respondents	Participation Time	Burden
Focus Group Participants	40	1 hour	40 hours

BURDEN COST COMPUTATION

Category of Respondent	No. of Respondents	Hourly Rate	Response Time	Burden Total
Focus Group Participants	40	\$22.71	1 hours	\$908.40

OTHER SUPPORTING INFORMATION

REQUESTED APPROVAL DATE: Jun 23, 2015

NAME OF CONTACT PERSON: Helen Lamont, Social Science Analyst; Samuel Shipley, Social Science Analyst

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DEPARTMENT/OFFICE/BUREAU: HHS /ASPE