

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0920-1009)

TITLE OF INFORMATION COLLECTION:

Stopping Elderly Accidents, Deaths, and Injuries (STEADI) Formative Service Delivery Focus Groups

PURPOSE:

One in 3 older adults falls each year. Stopping Elderly Accidents, Deaths, and Injuries (STEADI) is a multifaceted toolkit created by the Division of Unintentional Injury Prevention (DUIP) to assist clinicians in reducing falls in adults 65 and over (older adults). The toolkit includes information on how to conduct fall risk screening and risk assessments, how to review medications for their potential fall risk, and guidance on evidence-based interventions. Online training modules for healthcare providers have been created.

Many falls result from the side effects or inappropriate use of medications. Pharmacists, who are already involved in other prevention activities (immunizations, smoking cessation) are ideally positioned to review medications for potential fall risk. To help incorporate pharmacists as members of the fall prevention team, DUIP will be expanding STEADI to include pharmacists, and creating a pharmacist-specific online STEADI training module and a medication safety sheet, SAFE (Attachment A). The focus groups will help us determine the best way to modify STEADI to meet future services for pharmacists’ training needs, and to determine obstacles for the future adoption of STEADI toolkit. Up to 10 phone interviews may be conducted to collect information from pharmacists groups that were under represented in the focus groups. Participants in phone interviews will be recruited after the focus group participants have been identified, targeting the under-represented groups. During the focus groups responses will be elicited from 10 participants. During the telephone interviews, responses will be elicited from only one person, resulting in less time being required, and a lower number of burden hours.

DESCRIPTION OF RESPONDENTS:

Practicing pharmacists in the U.S.

TYPE OF COLLECTION: (Check one)

- | | |
|---|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software | <input type="checkbox"/> Small Discussion Group |
| <input checked="" type="checkbox"/> Focus Group | <input checked="" type="checkbox"/> Other: <u>Phone interviews</u> |

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.

^[1] National Cancer Institute. (2001) *Making Health Communication Programs Work*, http://www.cancer.gov/cancertopics/cancerlibrary/pinkbook/Pink_Book.pdf

^[2] Krueger, RA and Casey, MA. (2008). *Focus Groups: A Practical Guide for Applied Research*, 4th ed. Sage Publications, Inc., Thousand Oaks, CA.

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: _____ Karen Angel _____

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

During data collection, the contractor will collect name, phone, email, and practice location of those respondents who wish to participate. Personally identifiable information (PII) is collected only to determine and communicate location of the focus group, and to assign pharmacists to the appropriate group, based on their practice setting (Attachment C). At no time does CDC have access to, or will receive, potentially identifiable information. At no time is this information linked or linkable to survey information. Privacy Act does not apply.

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? Yes No

Pharmacists who participate in the focus groups will receive \$40 Amazon gift card. The amount aligns with the general limitations of the overarching Generic ICR 0920-1009. It is necessary to explicitly recruit respondents who are practicing pharmacists, and thus likely are working full-time, and will have to participate on their own time. Providing incentives to respondents is necessary to successfully recruit individuals for qualitative research studies conducted in person and on the telephone ^{[1][2]}

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time (Hours)	Burden (Hours)
Recruitment/Screening Phone Call	180	5/60	15
Pharmacists participating in Focus Groups	80	90/60	120
Pharmacists participating in Phone Interviews	10	30/60	5
Totals	270		140

During the focus groups responses will be elicited from 10 participants per session (Att. E). Meanwhile, during the telephone interviews responses will be elicited from only one person at a time, resulting in less time being required for the interview (Att. F), and thus lowering the number of burden hours for phone participants.

^[1] National Cancer Institute. (2001) *Making Health Communication Programs Work*, http://www.cancer.gov/cancertopics/cancerlibrary/pinkbook/Pink_Book.pdf

^[2] Krueger, RA and Casey, MA. (2008). *Focus Groups: A Practical Guide for Applied Research*, 4th ed. Sage Publications, Inc., Thousand Oaks, CA.

FEDERAL COST: The estimated annual cost to the Federal government is \$5,484.60

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?

No, we do not have a list with the universe of all practicing pharmacists. We will collaborate with pharmacists associations to promote voluntary participation in the study. The American Pharmacy Association has agreed to distribute focus group recruiting materials (Attachment B) via their mailing list. Pharmacists who wish to respond to promotion materials will contact the contractor to arrange their participation in focus groups and provide their perspectives on STEADI service delivery. The contractor will make Recruitment/Screening phone calls (Attachment C) and participation confirmation calls (Attachment D) to participants. Ten pharmacists will be selected for each of 8 focus groups, to be conducted in Atlanta, GA; Washington D.C./Baltimore, MD area; Ann Arbor, MI; and San Diego, CA. If needed, participants for phone interviews will be recruited using the same methods, but targeting under-represented groups. Phone participant recruiting will be conducted after the focus group participants have been selected, and underrepresented groups identified.

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

A team of trained moderators will conduct the focus groups in accordance with the STEADI Moderators guide (Attachment E). A note taker will assist the moderator. The focus groups will be held in four different geographic regions. Two separate focus groups of 90 minutes each will be held at each geographic location. Some groups will consist of pharmacist all practicing in the same setting (community, managed care, or healthcare system), and others will be a mix of all pharmacists type. The same instrument, modified for use on the telephone (Attachment F) will be used to conduct up to 10 phone interviews for underrepresented groups of pharmacists.

^[1] National Cancer Institute. (2001) *Making Health Communication Programs Work*, http://www.cancer.gov/cancertopics/cancerlibrary/pinkbook/Pink_Book.pdf

^[2] Krueger, RA and Casey, MA. (2008). *Focus Groups: A Practical Guide for Applied Research*, 4th ed. Sage Publications, Inc., Thousand Oaks, CA.