

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

TITLE OF INFORMATION COLLECTION:

Primary Care Provider - Stopping Elderly Accidents, Deaths, and Injuries (STEADI)

PURPOSE:

One in 4 older adults falls each year. Stopping Elderly Accidents, Deaths, and Injuries (STEADI) is a multifaceted initiative 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. A recent internal CDC analysis found that many providers are not changing medications that could cause falls even when prompted. The purpose of the data collection for the STEADI Primary Care Clinician Service Delivery Project is to understand how STEADI can deliver services and information to primary care providers that will influence their decisions to start, stop, or change medications appropriately to prevent falling among older adults. Current STEADI services do not appear to be effective in changing behavior; this project will collect information directly from providers to deliver more effective services.

DESCRIPTION OF RESPONDENTS:

Primary care physicians (internal medicine and family practice), nurse practitioners, and physician assistants whose patients include community-dwelling adults aged 65 and older.

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.
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 _____

^[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.

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. Information is collected only to determine and communicate location of the focus group and to assign respondents to the appropriate group. At no time will CDC have access to or receive any personally 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

Respondents who participate in the focus groups will receive a \$75 Amazon gift card. Phone interview respondents will receive a \$25 gift card. The amounts of these gifts align with the general limitations of the overarching Generic ICR 0920-1009. Providing incentives to respondents is necessary to successfully recruit individuals for qualitative research studies conducted in person and on the telephone ^{[1][2]}. The need for incentives is even greater among medical providers who are generally very busy and accustomed to being compensated well for their time.

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time (Hours)	Burden (Hours)
Recruitment/Screening Phone Call (Att. A)	120	5/60	10
Respondents participating in Focus Groups (Att. B)	32	90/60	48
Respondents participating in Phone Interviews (Att. C)	30	30/60	15
Totals	182		73

During each of four focus groups, responses will be elicited from up to 8 participants for a total of 32. We allow up to 90 minutes for each focus group. During the telephone interviews, responses will be elicited from only one person instead of a group, resulting in less time being required, and a lower number of burden hours for phone participants. We will cap interviews at 30 minutes.

FEDERAL COST: The estimated annual cost to the Federal government is \$10,687.

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

^[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.

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 PCPs. We will purchase member lists from professional associations to promote voluntary participation in the project. Providers who wish to respond to promotion materials (Attachment D) will contact the contractor to arrange their participation in focus groups. The contractor has language prepared for direct recruiting via telephone and for receiving inquiries (Attachment A).

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 and interviewers will conduct the focus groups and interviews in accordance with the STEADI Moderators Guide (Attachment B) and Interview Script (Attachment C). A note taker will assist the moderator.

^[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.