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

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TITLE OF INFORMATION COLLECTION: Crisis Re-Entry Questionnaire Survey

[ ] INTERVIEWS
[ ] SMALL DISCUSSION GROUPS
[ ] FOCUS GROUPS
[X] QUESTIONNAIRES
[ ] OTHER (EXPLAIN)

DESCRIPTION OF THIS SPECIFIC COLLECTION

1. **Intended purpose**

   The National Infrastructure Protection Plan provides a framework of sixteen critical sector areas of US assets whose protection from man-made and natural disasters must be planned and prepared for. One of these is the Healthcare and Public Health (HPH) Sector for which the Critical Infrastructure Protection (CIP) program within ASPR OEM's Division of Resilience is the designated lead. CIP is engaged in a variety of methods to protect critical healthcare and public health assets by working with the public and private members of the HPH Sector to identify, communicate, and prepare for potential risks in order to develop measures that would minimize their negative impacts.

   It is essential that CIP is able to communicate formally with its Sector members in advance, to gain insights that help plan for potential risks before they happen. The ability for local responders to gain access to a disaster area after a crisis was identified as a challenge if proper credentials were not in place. The surveys that CIP intends to distribute widely will:
   • Be a comprehensive questionnaire to understand the current state of crisis reentry issues across the US and what programs/mechanisms/service providers exist to try to address the issues
   • Be used to inform the follow-up interviews with key contacts
   • Become part of the findings summarized in a final report on crisis reentry credentialing

2. **Need for the collection**

   The surveys will help define, develop, and implement a problem statement and strategy to address crisis re-entry issues. Information obtained through this timely data collection process will help inform:

   • Methods/mechanisms used by the public sector to prevent re-entry to crisis areas
   • Methods/mechanisms used by the private sector to attempt to gain re-entry

   The data collected through this survey will result in a report to identify the different crisis reentry credentialing mechanisms available across the country -- the report will establish a baseline of existing mechanisms and will include analysis of mechanisms discovered, highlighting any noted similarities as well as differences. The report will offer high level analysis results to be briefed to executive level audiences.

3. **Planned use of the data**

   Results from this data collection will help CIP and its contractor team to understand and identify crisis re-entry credentialing issues and strategies to overcome those issues, and encourage information sharing about these issues among important stakeholders. They will also influence the development of follow-on face-to-face interviews with selected individuals who are considered key contacts.

4. **Date(s) and location(s)**

   The survey will be distributed by the CIP program via an online Survey Monkey. Data will be collected during the two weeks following distribution. All data will be collected and analyzed by the Deloitte contractor team and shared with CIP for dissemination to Sector members.

5. **Collection procedures**

   The data collection will be conducted through an online survey. The survey will remain open for two weeks following distribution to allow respondents requisite time to complete it. Responses will be voluntary. When the survey is closed, the ASPR/OEM CIP team and Contractor staff will analyze the data by compiling descriptive statistics and looking for overarching themes in the responses. Additional follow up interviews may be conducted to expound on ambiguous responses.

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

   The collection will consist of an online questionnaire followed by face-to-face interviews.

7. **Description of respondents/participants**

   The population will be comprised of a group of approximately 50 - 75 individuals representing a diverse group of health care organizations that are members of the HPH Sector community and membership.

   The anticipated response rate is 70 percent.

8. **Description of how results will be used**

   The information gathered from the responses will be summarized by the CIP and Contractor teams. Contract staff will pull out the main themes from the responses and provide a summary to CIP.

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

   The data from the completed surveys will be directed to appropriate divisions in ASPR to allow for situational knowledge and ability to tailor partnership engagement strategies based on current stakeholder needs.

AMOUNT OF ANY PROPOSED STIPEND OR INCENTIVE – None

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	Total Burden Hour
Healthcare and Public Health Community Members	75	30/60	37.5 hours

BURDEN COST COMPUTATION

Category of Respondent	Total Burden Hour	Wage Rate	Total
Healthcare and Public Health Community Members	37.5	$36.54	$1,370.25

OTHER SUPPORTING INFORMATION

REQUESTED APPROVAL DATE: March 25, 2016
NAME OF CONTACT PERSON: Donna Boston, Interim CIP Branch Chief, ASPR/OEM
TELEPHONE NUMBER: 202- 205-8259
DEPARTMENT/OFFICE/BUREAU: HHS/OS/ASPR/OEM/RICD

Background Questions

1) **Organization Name and Specialty.**
    a. (Optional) Please add your name and a phone number or email addresses if you would like to be contacted for a follow-up interview.

2) **Please provide your state and the list of all states in which your organization operates.**

3) **Affiliation: Please indicate the best description of your organizational affiliation?** (Select all that apply)
    a. Public Sector – Federal
    b. Public Sector – State
    c. Public Sector – Local
    d. Private Sector – National
    e. Private Sector – Regional
    f. Private Sector – Local
    g. Nonprofit – National
    h. Nonprofit – Local
    i. Healthcare Coalition
    j. Other

Disaster response programs

4) **How much of an issue is gaining access to restricted areas following a disaster to you or your organization?**
    a. A major issue and concern
        i. If it is a major concern:
            1. please describe the challenges and the organizations and groups which have worked on this issue (to your knowledge)
    b. A minor concern
    c. Not a concern

5) *One of the ways that states (and cities) have worked around this issue is by including language in emergency declarations that governs how access will be managed.*

    Are you aware of any states that include emergency declaration language on allowing private sector personnel into restricted areas?
    a. Yes
        a. **If "yes":**
            i. Please share any additional details
    b. Unsure of any such language existing

6) **Are you aware of programs currently operating that have a way to allow private sector personnel into a disaster-stricken area? (i.e. by law, credentialing program, informal program run locally or by the state, etc.)**
   a. Yes
      i. **If "yes":**
         1. **Is this mechanism a law, formal program or informal program?** (Drop down)
            a. Law
            b. Formal program
            c. Informal program
            d. Unsure
         2. **Does this program operate at the state or local level?**
            a. State
            b. Local
            c. Unsure
            d. Other (comment box)
         3. **Does the program require pre-registration?**
            a. Yes
            b. No
            c. Unsure
         4. **What challenges have you experienced (observed) with the program?**
   b. No
      ii. **If "no":**
         1. **Do you know if any laws, formal programs or informal programs are currently in development?**
            a. Yes
            b. No
            c. Unsure
         2. **Would this program require pre-registration?**
            a. Yes
            b. No
            c. Unsure

7) **Do you believe your current program is capable of providing sufficient access to critical personnel at the local level?**
   a. Yes – the program is able to address the demand
   b. Somewhat – The current program meets some of the demand
   c. No – it is unable to meet the current demand
   d. Unsure – it has not yet been used

8) **Are there any types of events you do not believe the program can support?**
    a. Yes
        i. If yes, please describe: _____
    b. No
    c. Unsure – it has not yet been used

9) **What recommendations do you have to improve the challenges faced with access to disaster sites? (Please include any best practices, partnerships or contacts.)**
    a. Please provide references (web links, articles, or best practice information) to describe the program(s). If more appropriate, please email to ContactUs@healthcareready.org.
    b. Is there a POC which we should contact for additional information about the program? If so, please provide here:

   10) This space has been left intentionally blank in case you would like to add additional resources, details or links that would be useful to us in our research to define the best suited recommendations and potential solutions to the problem of crisis re-entry in our nation.

Form Approved