

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

TITLE OF INFORMATION COLLECTION: Hospital Preparedness Program (HPP) –PHEP 2017 FOA and Aligned Application Process “Hotwash”

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

DESCRIPTION OF THIS SPECIFIC COLLECTION

1. Intended purpose

The Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Aligned Cooperative Agreements support the U.S. public health and healthcare systems' ability to prepare for and to respond effectively to public health emergencies within the United States and associated territories and freely associated states. HPP and PHEP awardees are expected to use their cooperative agreement funding to build and sustain their public health and healthcare preparedness capabilities, ensuring that federal preparedness funds are directed to priority areas within their jurisdictions as identified through their strategic planning efforts.

The HHS Office of the Assistant Secretary for Preparedness and Response (HPP) and the Centers for Disease Control and Prevention (PHEP) are soliciting awardee feedback on the recent HPP-PHEP application process to help improve the process in future years. Specifically, we are seeking feedback so that we can:

- Assess components of the FOA
- Assess components of the application process that may need further clarity or refinement
- Assess guidance on requirements, instructions, and Supplemental Guidance
- Assess the effectiveness of the systems utilized to complete the application (i.e., PERFORMS, grants.gov)
- Assess the effectiveness of the TA and training provided, and learning what needs further clarity, refinement, or improvement
- Assess areas where changes / innovations are possible

2. Need for the collection

The data collected in the hotwash is needed to:

- Assist HPP and PHEP leadership, FPOs, and awardees to improve:
 - time spent completing funding applications;
 - technology platforms;
 - improved HPP-PHEP coordination; and
 - coordinated HPP-PHEP planning

3. Planned use of the data

Results from these data analyses help HPP/PHEP to better coordinate effective communication, share information, and monitor progress of its healthcare emergency preparedness and progress of national preparedness goals.

In addition to the uses cited in #2 above, the data will be used to:

- Inform HPP/PHEP decision-making, help communicate progress to stakeholders, and respond to various stakeholder inquiries
- Inform HPP/PHEP use of joint application tools and technical assistance to identify strengths, benefits, and improvements

4. Date(s) and location(s)

The hotwash is scheduled to begin June 2017. For participant convenience, three hotwashes will be scheduled, with each awardee only requested to participate in one. The hotwash dates are: June 19th, 21st, and 22nd.

5. Collection procedures

The awardee feedback will be collected via webinar survey, facilitated group discussions, and awardee follow-up calls with designated Project Officers.

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

There will be approximately 124 responses from HPP (62) and PHEP (62) combined.

7. Description of respondents/participants

The HPP and PHEP programs provide cooperative agreement funding to 62 awardees (state, local and tribal government) to bolster health care delivery system readiness, improve patient outcomes, minimize the need for federal and supplemental state resources during emergencies, and enable rapid recovery.

The applicable population (universe) for this collection will include: 62 HPP and 62 PHEP Coordinators, and/or their designated respondents, directly involved with the cooperative agreement application process.

The anticipated response rate is 90-100 percent.

8. Description of how results will be used

As described above, the results will be used to:

- Assess components of the FOA
- Assess components of the application process that may need further clarity or refinement
- Assess guidance on requirements, instructions, and Supplemental Guidance
- Assess the effectiveness of the systems utilized to complete the application (i.e., PERFORMS, grants.gov)
- Assess the effectiveness of the TA and training provided, and learning what needs further clarity, refinement, or improvement
- Assess areas where changes / innovations are possible

9. Description of how results will or will not be disseminated and why or why not
 HPP/PHEP may use submitted (and awardee/FPO verified), de-identified data to respond to various stakeholder inquiries (e.g., Questions for the Record), but does not intend to disseminate results outside of the immediate programs. Results will also be available to be shared as situational knowledge to any respondent who indicates interest in receiving an aggregate summary of findings when completing the query.

AMOUNT OF ANY PROPOSED STIPEND OR INCENTIVE - None

BURDEN HOUR & COST 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
Joint HPP/PHEP Awardee	124	45/60	93 hours

BURDEN COST COMPUTATION

Category of Respondent	Total Burden Hour	Wage Rate	Total
Joint HPP/ PHEP Awardee	93	\$36.54	\$3,398.22

OTHER SUPPORTING INFORMATION

REQUESTED APPROVAL DATE: June 9, 2017

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DEPARTMENT/OFFICE/BUREAU: ASPR Office of Emergency Management, Division of National Healthcare Preparedness Programs (NHPP)