

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

TITLE OF INFORMATION COLLECTION: Hospital Preparedness Program (HPP) Ebola / OSP Preparedness Measures

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

DESCRIPTION OF THIS SPECIFIC COLLECTION

1. Intended purpose

The National Healthcare Preparedness Programs (NHPP) / Hospital Preparedness Program (HPP) data collection for Ebola / OSP is intended to assure that patients with Ebola and other special pathogens are safely and well cared for in the U.S. health care system and that frontline providers are protected and trained to recognize and isolate a person with suspected Ebola and other pathogens.

The Beginning in March of 2014, West Africa experienced the largest Ebola virus disease (Ebola) outbreak on record. Unlike many smaller preceding outbreaks of Ebola, this particular outbreak spread to multiple African countries and caused (as of April 2017) more than 28,000 suspected human cases and resulted in over 11,000 deaths. In August 2014, the first American citizen with Ebola was flown to the United States (U.S.) for treatment. Additional patients have subsequently been medically-evacuated to the U.S. and two returned travelers were diagnosed and treated in Dallas, Texas and New York City, New York. In addition to these experiences, the secondary infections of two health care workers in a Dallas hospital identified opportunities to improve preparedness for and treatment of suspected and confirmed patients with Ebola. In response, Congress appropriated emergency funding, in part to ensure that the health care system is adequately prepared to respond to future patients infected with Ebola. In doing so, Congress directed the Department of Health and Human Services (HHS) to develop a regional approach to caring for future patients with Ebola.

The Hospital Preparedness Program (HPP) Ebola Preparedness and Response Activities is intended to ensure the nation's health care system is ready to safely and successfully identify, isolate, assess, transport, and treat patients with Ebola or patients under investigation for Ebola, and that it is well prepared for a future Ebola outbreak. While the focus will be on preparedness for Ebola, it is likely that preparedness for other novel, highly pathogenic diseases will also be enhanced through these activities. In line with ensuring that healthcare systems are ready to treat patients with Ebola and other special pathogens, HPP has developed the performance measures to provide support data in the planning, response and recovery of related incidents and outbreaks.

2. Need for the collection

The nation's hospitals must be prepared to handle one or more simultaneous clusters of Ebola or other special pathogens. Further, all hospitals must be able to identify, diagnose, and treat a patient with suspected Ebola or other special pathogen until they can be transferred to a facility that can provide definitive care. This data collection aims to ensure the health care system is well prepared in the event of future Ebola or other special pathogen outbreaks. The Ebola Survey is needed to substantiate HPP's impact for the purposes of communicating with stakeholders and responding to various inquiries; as well as to provide NHPP insight regarding trauma centers' interest in potentially serving as HPP awardees in the future.

3. Planned use of the data

The data will be used to inform:

- HPP's support during an incident
- HPP awardee planning, response and recovery
- HPP's budget justification documents
- NHPP's TA efforts: responses to various stakeholder inquiries and policy updates

4. Date(s) and location(s)

The Ebola / OSP Survey is anticipated to be open for response in Spring 2018. This will be an electronic survey.

5. Collection procedures

The data will be collected via an electronic reporting tool. Each HPP Awardee will receive an instruction and an implementation guidance manual to complete the survey.

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

Each HPP Awardee (62) will have the opportunity to submit one response to the survey.

7. Description of respondents/participants

HPP provides cooperative agreement funding to 62 awardees 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 respondent will be the HPP Awardees.

8. Description of how results will be used

The results of this survey will be used to inform and substantiate communications and responses to inquiries from a range of stakeholders regarding HPP's impact. As described above, the results will also be used to provide support in the planning, response, and recovery phases of the incident.

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

NHPP may use aggregated, de-identified data in communications (e.g., presentations, talking points, one-pagers, etc.), responses to various stakeholder inquiries (e.g., Questions for the Record, etc.), and stakeholder engagement materials highlighting HPP's impact, as well as for policy proposals and internal grant administration efforts.

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 (hours)	Total Burden Hour
HPP Awardee	62	1	62 hours

BURDEN COST COMPUTATION

Category of Respondent	Total Burden Hour	Wage Rate	Total
HPP Awardee	62	\$36.54	\$2,265.48

OTHER SUPPORTING INFORMATION

REQUESTED APPROVAL DATE: April 6, 2018

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