

Supporting Statement A

Rural Access to Emergency Devices Grant Program

OMB Control No. 0915-XXXX

A. Justification

1. Circumstances Making the Collection of Information Necessary

The Health Resources and Services Administration (HRSA)'s Federal Office of Rural Health Policy (FORHP) is requesting OMB approval to collect information on grantee activities and on new performance measures electronically through the HRSA Electronic Handbook (EHB). The EHB is a web-based portal that grantees use to submit information to HRSA. The Rural Access to Emergency Devices Grant Program Performance Measures form is a tool that allows FORHP to measure the impact of the grant funding.

It should be noted that in its authorizing language (SEC. 711. [42 U.S.C. 912]), Congress charged FORHP with "administering grants, cooperative agreements, and contracts to provide technical assistance and other activities as necessary to support activities related to improving health care in rural areas." FORHP's mission is to sustain and improve access to quality health care services for rural communities.

This activity will collect information for the FY15 Rural Access to Emergency Devices (RAED) Grant Program. The RAED Grant Program is funded under Public Health Improvement Act Title IV-Cardiac Arrest Survival Act of 2000, Subtitle B-Rural Access to Emergency Devices, Section 413, (42 U.S.C. 254c (Note)) and the Consolidated and Further Continuing Appropriations Act (P.L. 113-235). The goals for the RAED Grant Program are the following: 1) purchase automated external defibrillators (AEDs) that have been approved, or cleared for marketing, by the Food and Drug Administration; 2) provide defibrillator and basic life support training in AED usage through the American Heart Association, the American Red Cross, or other nationally recognized training courses; and 3) place the AEDs in rural communities with local organizations.

2. Purpose and Use of Information Collection

FORHP will collect data for the FY14 RAED Grant Program annually. The purpose of this data collection is to provide HRSA with information on how well each grantee is improving access to AEDs and providing training in rural communities. These measures cover the principal topic areas of interest to the FORHP including: (a) population and AED demographics; (b) placement location for AEDs; (c) trainings; (d) AED usage; (e) sustainability; and (f) project specific domains. Several measures will be used for the RAED Grant Program. All measures will speak to FORHP's progress toward meeting the goals set.

This assessment will provide useful information on the RAED Grant Program and will enable HRSA to assess the success of the grant funding. It will also ensure that funded organizations have demonstrated an impact on the cardiac arrest rate in their communities and those federal funds are being effectively used to support and sustain the program.

The type of information requested in the RAED Grant Program enables FORHP to assess the following characteristics:

- The number of individuals trained on how to use and AED and in BLS,
- AED usage outcomes, and
- The number of AEDs purchased and placed in rural communities.

The HRSA EHB is capable of identifying and responding to the needs of the grantees that receive the RAED Grant Program funding. The EHB:

- Provides uniformly defined data for major FORHP grant programs; and
- Facilitates the electronic transmission of data by the grantees, through the use of standard formats and definitions.

3. Use of Improved Information Technology and Burden Reduction

This activity is fully electronic. Data will be collected through and maintained in a database in the HRSA EHB, which is a website that the RAED Program grantees will use to submit their data for this funding. Grantees can email or call EHB staff for help with the website. As this database is fully electronic, burden is reduced for the grantee and program staff.

4. Efforts to Identify Duplication and Use of Similar Information

There is no other data source available that tracks the characteristics of rural entities that are purchasing and placing AEDs in rural areas and providing training.

5. Impact on Small Businesses Other Small Entities

The data collection activities will not have a significant impact on small entities.

6. Consequences of Collecting the Information Less Frequently

Respondents will respond to this data collection annually during their three-year budget period. This information is needed by the program, FORHP, and HRSA in order to measure the effective use of grant dollars and to report on progress toward strategic goals and objectives.

7. Special Circumstances Relating to the Guidelines of 5 CFR 1320.5

This project is consistent with the guidelines in 5 CFR 1320.5.

8. Comments in Response to the Federal Register Notice/Outside Consultation

Section 8A:

A 60-day Federal Register Notice was published February 20, 2015 (80 Fed. Reg34).

There were no comments.

Section 8B:

In order to create a final set of performance measures that are useful for the RAED grantees, a set of measures were vetted to nine or less participating grantee organizations in February 2015. The following seven grantees were consulted:

Deborah Sheets, RN
Project Director
Wellspan Health
Office: (717) 337-4264
Email: dsheets@wellspan.org

Joseph R. Biggs, Ph.D., HSSP
Executive Director
Richard G. Lugar Center for Rural Health
Union Hospital, Inc.
Office: (812) 237-3121
Email: bhjrb@uhhg.org

Benjamin Rackley
Project Director
Tuskegee Area Health Education Center
Office: (334) 727-0550
Email: bprack@bellsouth.net

Lacy Landrum
Project Director
City of Hammond
Office: (985) 277-5653

Email: Landrum_L@hammond.org

Sue Graftstrom
Project Director
Lifecare Medical Center
Office: (218) 463-4762
Email: sgraftstrom@lifecaremc.com

Terri Hanna
Project Director
Davis County Hospital
Office: (641) 666-2145
Email: thanna@daviscountyhospital.org

Kristina Kohn
Project Director
Fillmore County
Office: (507) 765-2809
Email: kkohn@co.fillmore.mn.us

9. Explanation of any Payment/Gift to Respondents

Respondents will not receive any payments or gifts.

10. Assurance of Confidentiality Provided to Respondents

The data system does not involve the reporting of information about identifiable individuals; therefore, the Privacy Act is not applicable to this activity. The proposed performance measures will be used only in aggregate data form for program activities.

11. Justification for Sensitive Questions

There are no sensitive questions.

12. Estimates of Annualized Hour and Cost Burden

Form Name	Number of Respondents	Number of Responses per Respondent	Total Responses	Average Burden per Response (in hours)	Total Burden Hours
Rural Access to Emergency Devices Grant Program	12	1	12	5.5	66
Total	12	1	12	5.5	66

These estimates were determined by consultations with seven (7) current grantees from the program. These grantees were sent a draft of the questions that pertain to their program. They were asked to estimate how much time it would take to answer the questions.

Estimated Annualized Burden Costs

Type of Respondent	Total Burden Hours	Hourly Wage Rate	Total Respondent Costs
Project Director	66	\$52.11	\$3,439.26
Total	66	\$52.11	\$3,439.26

Source of hourly wage rate: http://www.bls.gov/oes/current/oes_nat.htm

13. Estimates of other Total Annual Cost Burden to Respondents or Recordkeepers/Capital Costs

Other than their time, there is no cost to respondents.

14. Annualized Cost to Federal Government

Annual data collection for this program is expected to be carried out at a cost to the Federal Government of \$33,000. Staff at FORHP monitor the contracts and provide guidance to grantee project staff at a cost of \$3,759.84 per year (72 hours per year at \$52.22 per hour at a GS-13, Step 7 salary level). The total annualized cost to the government for this project is \$36,759.84.

15. Explanation for Program Changes or Adjustments

This is a new data collection.

16. Plans for Tabulation, Publication, and Project Time Schedule

There are no plans to publish the data. The data may be used on an aggregate program level to document the success of the program. This information might be used in the FORHP Annual Report produced internally for the agency.

17. Reason(s) Display of OMB Expiration Date is Inappropriate

The expiration date will be displayed.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

There are no exceptions to the certification.

