

**Supporting Statement for Indian Health Service**  
**Sharing What Workings – Best Practice, Promising Practice,**  
**and Local Effort Form**  
**(OMB Form No. 0917-0034)**

**Background**

This is a request to the Office of Management and Budget (OMB) for an extension of a previously approved collection, OMB Form No. 0917-0034. The mission of the Indian Health Service (IHS) is to raise the physical, mental, social and spiritual health of American Indians and Alaska Natives (AI/ANs) to the highest possible level by providing comprehensive health care and preventive health services. To support the IHS mission, the Office of Clinical and Preventive Services (OCPS) and programs (i.e., Behavioral Health, Health Promotion/Disease Prevention, Nursing, and Dental) have developed a centralized program database consisting of best practices, promising practices, local efforts (BPPPLE), resources, and policies to increase access and submissions of effective strategies, practices, and policies for the IHS, Tribal and Urban Indian Health (I/T/U) programs. The purpose of this collection is to further the development of a database of BPPPLE, resources, and policies which are available to the public on the IHS.gov website. This database will be a resource for program evaluation and for modeling examples of various health care projects occurring in AI/AN communities.

## **A. JUSTIFICATION:**

### **1. Circumstances making the collection of information necessary:**

This is a request for an extension of a previously approved collection (OMB Form No. 0917-0034), which promotes the submissions of BPPPLE among the I/T/Us. This collection of data is authorized by the United States (U.S.) Public Health Service Act (42 U.S.C. § 241). All information submitted is on a voluntary basis, and there are no legal requirements for collection of this information.

The information collected will enable Indian Health systems/programs to:

- a. Identify evidence based approaches to prevention programs among the I/T/Us when no system is currently in place, and
- b. Allow the program managers to review BPPPLEs occurring among the I/T/Us when considering program planning for their community.

### **2. Information Users**

In an effort to provide comprehensive health services to AI/AN people, the IHS will be conducting a best and promising practice inventory in order to assess I/T/U program services in the areas of health promotion, disease prevention, and behavioral health. The purpose of the inventory is to gather program information in order to:

- a. Achieve the mission of the IHS;
- b. Encourage I/T/U programs to implement best and promising practices to support evidence based approaches in promotion and preventive efforts;
- c. Provide products/services to I/T/Us;
- d. Assist AI/AN communities with accessing needed information and health services; and
- e. Act as a resource of external and internal collaboration and communication.

### **3. Improved Information Technology**

This form is available through electronic technology on the IHS.gov website, at:

<http://www.ihs.gov/bppple/>. This form is fillable and fileable; the I/T/U staff may complete and submit the electronic form (OMB Form 0917-0034) to the IHS database referred to as BPPPLE. Automated information technology is used to collect and process information from this form. Submissions are reviewed by IHS staff, then posted to the IHS BPPPLE website for review by the I/T/Us, and the public in general. The public may search the BPPPLE database by using the feature on the left menu bar.

### **4. Duplication of Similar Information**

The information collected is not duplicated by any other Federal entity and no similar information is available to fulfill the required uses for this collection. The information collected is the minimum needed for the intended purpose. IHS has determined, through researching

evidenced based websites and discussion that no system exists for the collection and reporting of BPPPLEs among the I/T/Us. Additionally, OCPS program areas are working together to use a common approach for collecting and reporting this information.

## **5. Small Businesses**

This information collection will not solicit information from small businesses or other small entities and is therefore deemed to have no impact on small business. However, to minimize burden, the electronic submission form requests minimal pertinent information from those who voluntarily agree to participate.

## **6. Less Frequent Collection**

No frequent collection will be involved. IHS solicits participation from the I/T/Us on a voluntary basis. If the collection is not conducted or is conducted less frequently, the Agency would be unable to collect and share information regarding best and promising practices, and local efforts with I/T/Us. As a result, I/T/Us would be unable to access and build upon established evidence based practices which are working in Indian Country. There are no technical or legal obstacles to reduce the burden.

## **7. Special Circumstances**

The data will be collected in a manner consistent with 5 C.F.R. Part 1320.5.

## **8. Federal Register Notice/Outside Consultations**

In accordance with 5 C.F.R. 1320.8(d), a 60-day notice to solicit public comment was published in the *Federal Register* (80 Fed. Reg. 61215) on October 9, 2015. No comments were received. Also, a 30-day notice for public comment was published in the *Federal Register* (80 Fed. Reg. 71813) on (November 17, 2015) to allow for public comment to be submitted directly to OMB, as required by 5 C.F.R. § 1320.10(a). Additionally, a Correction Notice for the 30-day notice was published in the *Federal Register* (80 Fed. Reg. 77646) on December 15, 2015 to extend the comment period until January 9, 2016, as the 30-day notice was published before the 60-day notice had concluded.

## **9. Payment/Gift to Respondents**

No payment or gift will be provided to respondents.

## **10. Confidentiality**

All information collected will be related to programs/projects and business contact (e.g., name, phone number, address); **no** personally identifying information will be collected.

## **11. Sensitive Questions**

No questions of a sensitive nature will be collected

**12. Burden Estimates** (Total Hour & Wages)

All cost estimates will be costs associated to voluntary participation (i.e., in-kind) of the I/T/U.

A. Estimate Annualized Burden Hours

We expect that I/T/U program Administrators will complete OMB Form No. 0917-0034. We estimate that 8-9 forms will be completed in each of the 12 service areas, 1 form per respondent, for a total of 100 completed forms annually. We expect that the form will take less than 20 minutes to complete for a total of 33.3 total hours annually.

<b>Type of Respondent</b>	<b>Form Name</b>	<b>No. of Respondents</b>	<b>No. Responses per Respondent</b>	<b>Average Burden per Response (in hours)</b>	<b>Total Burden Hours</b>
IHS Service Unit, Tribal, and Urban Indian Center Administrators	OMB Form No. 0917-0034	100	1	20/60	33.3
<b>Total</b>		100	1	20/60	33.3

B. Annualize hourly burden to respondents:

There is no cost to respondents other than their time to agree to complete and submit the electronic form. We estimate that, on average, a person at the GS-12 pay-grade will be completing these forms. Therefore, the total cost will be 33.3 hours (100 forms x 20 minutes /60 minutes) x \$29.46 per hour = \$981. IHS used the 2015 Office of Personnel Management's (OPM) 2015 General Schedule (GS) Locality Pay Tables GS- 12 hourly pay to estimate this pay rate cost, found at Website:

[http://www.federaljobs.net/salarybase.htm#Hourly\\_Rates](http://www.federaljobs.net/salarybase.htm#Hourly_Rates).

<b>Type of Respondent</b>	<b>Total Burden Hours</b>	<b>Hourly Wage Rate</b>	<b>Total Respondent Costs</b>
I/T/U Health Program Administrators	33.3	\$ 29.46	\$ 981
Total			\$ 981

**13. Capital Costs (Maintenance)**

There are no capitals, operating and/or maintenance costs to respondents or record keepers to report for this collection.

**14. Cost to the Federal Government**

The staff (Area coordinators/consultants and subject matter experts) time to review the online submissions is approximately 5 minutes (\$2.45 for 5 minutes - based on \$29.46 per hour/ 60 = \$ .49 per minute) per submission. Annually, there are approximately 24 staff personnel that will review approximately 300 forms for 5 minutes at \$2.45 (24 staff x 300 forms x \$2.45 per 5 minutes) each = \$17,640 per year. IHS used the GS 12 hourly and annual pay grade to estimate this pay rate.

<u>Item</u>	<u>Time per Evaluation (minutes)</u>	<u>Cost</u>
24 staff to review/evaluate x 300 responses	5 (\$2.45)	\$ 17,640

Total annual cost to the government = \$ 17,640 per year

**15. Program or Burden Changes**

This is a request for approval of an extension without program or burden changes for a previously approved collection (OMB Form No. 0917-0034). However, there were a number of changes to the form to make it easier for the user to complete the submission.



## **16. Publication and Tabulation Dates**

Once content is approved, submissions will be published on the IHS.gov website. The review process will consist of spelling and grammar checking, and if appropriate, review of evaluation methods and materials. No complex analyses will be performed as part of this information collection.

## **17. Expiration Date**

The OMB information will be displayed on the data collection instrument accordingly. The expiration date will be 3 years from the date of OMB approval. IHS is not seeking approval to not show the expiration date.

## **18. Certification Statement**

There are no exceptions to the certification.