**Request for genIC Approval**
**CDC/ATSDR Formative Research and Tool Development**

**0920-1154**

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**CIO: National Center for Emerging and Zoonotic Infectious Diseases, Division of Healthcare Quality Promotion**

**PROJECT TITLE:** Core Elements of Antimicrobial Stewardship in Nursing Homes

**PURPOSE AND USE OF COLLECTION:**

The Centers for Disease Control and Prevention (CDC) requests Office of Management and Budget (OMB) approval for a new genIC entitled "Core Elements of Antimicrobial Stewardship in Nursing Homes." The goal of the formative research is to assess the knowledge, attitudes, practices, and perceived provider-level barriers to appropriate antibiotic prescribing in a sample of health care providers in nursing homes. The survey will be administered as part of a contract with Brown University (contract no. 200-2016-91773-0001).

This work will inform an intervention being developed in participating nursing centers which utilizes antibiotic-specific assessments within their data software system.

Information collected as part of this gen-IC will be used to provide descriptive analysis reports of the prescribing climate within long-term care settings. We will use these data to characterize the current antimicrobial stewardship environment with an effort to identify key elements based on staff interactions, perceived challenges, and any identifiable gaps in knowledge. The specific elements within the survey will be used to identify common needs shared across prescribers as areas for further training or intervention development e.g., identified barriers to education or training resources will result in a more robust education component to be included in future work.

The assessment of provider perceptions will generate qualitative data that will guide the subsequent implementation of the core elements and the development of quality improvement interventions to improve antibiotic prescribing in nursing homes.

**DESCRIPTION OF RESPONDENTS**:

- Healthcare Providers: Prescribers working in a nursing home setting in participating facilities, 992 prescribers

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does <u>not</u> raise issues of concern to other federal agencies.
4. Information gathered will not be used to substantially inform influential policy decisions.

5. The study is not intended to produce results that can be generalized beyond its scope.

Name: Sarah Kabbani

To assist review, please answer the following questions:

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected? [ ] Yes [ x] No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [ ] Yes [X] No
3. If Applicable, has a System or Records Notice been published? [ ] Yes [X] No Not applicable

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [ ] Yes [x] No

**BURDEN HOURS**

| Type of Respondent | Form Name | No. of Respondents | No. of Responses per Respondent | Average Burden Per Response (hours) | Total Burden Hours |
|---|---|---|---|---|---|
| Medical Prescriber | Assessment | 992 | 1 | 0.5 | 496 |

**FEDERAL COST:**

The estimated annual cost to the Federal government is $100,000

(contract no 200-2016-91773-0001)

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

**The selection of your targeted respondents**

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?

   [] Yes [x] No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

The group are the medical providers at the nursing homes where this project is being implemented.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)

    [x] Web-based or other forms of Social Media

    [ ] Telephone

    [ ] In-person

    [ ] Mail

    [ ] Other, Explain

2. Will interviewers or facilitators be used? [ ] Yes [x] No

**Please make sure all instruments, instructions, and scripts are submitted with the request.**

Instructions for completing genIC Request for Approval for

CDC/ATSDR Formative Research and Tool Development

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**TITLE OF INFORMATION COLLECTION:** Provide the name of the collection that is requested.

**PURPOSE and USE:** Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

**DESCRIPTION OF RESPONDENTS**: Briefly describe the targeted group/groups for this collection.

**CERTIFICATION:** Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

**Personally Identifiable Information:** Provide answers to the questions.

**Gifts or Payments:** If you answer yes to the question, please describe the incentive and provide a justification for the amount.

**BURDEN HOURS:**

**Category of Respondents:** Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households; (2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected.

**Form:** Provide the title of the information collection form.

**No. of Respondents:** Provide an estimate of the Number of respondents.

**Participation Time:** Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group).

**Burden in Minutes:** Multiply the Number of responses and the participation time and divide by 60.

**FEDERAL COST:** Estimate the annual cost to the Federal government for this collection.

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

**The selection of your targeted respondents.** Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

**Administration of the Instrument:** Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.