Request for Approval under the "Generic Clearance for the Collection I-Catalyst Program (OMB Control Number: 0920-1158)

TITLE OF INFORMATION COLLECTION: CDC I-CATALYST PROGRAM: PROJECT ICU/NCIRD RESPIRATORY PROTECTIVE DEVICE STOCKPILES

PURPOSE: The CDC I-Catalyst program teaches CDC teams a "customer discovery" process aimed at helping teams with a new solution to identify their customers. This is done by taking a team's main assumptions about who their customer is, the exact problem they are solving for the customer, and how the customer wants to receive or use the solution from the team—and turning those assumptions into hypotheses which the teams will then test (mainly through interviews with potential customers).

Respiratory protective devices (RPDs) for use by healthcare workers are projected to be in significant short supply during the next pandemic influenza event. Lack of RPDs may expose healthcare workers to infection and decrease their willingness to come to work during a pandemic. In order to address this issue and increase preparedness, CDC in collaboration with HHS, is exploring strategies to increase supply and decrease demand of these critical countermeasures needed to protect health care workers. Unlike other medical countermeasures, it is not feasible to address this gap through a centralized federal stockpiles due to costs, logistics, and operational considerations (e.g. having the right make and model used by facilities). Creation of decentralized stockpiles (stockpiles of RPDs held in or nearby healthcare facilities) are part the overall strategy to ensure that RPD supplies are available when needed. However, it is unclear at this time if decentralized RPD stockpiles are feasible or acceptable for healthcare facilities. Therefore our problem statement for this innovation effort is: Are decentralized RPD stockpiles a feasible and acceptable option for stakeholders to improve access to these products during a pandemic?

DESCRIPTION OF RESPONDENTS: Emergency planners from hospitals, hospital organizations, and clinics with greater than 500 beds.

TYPE OF COLLECTION: (Check one)

[ ] Customer Comment Card/Complaint Form
[ ] Usability Testing (e.g., Website or Software
[ ] Focus Group
[ ] Customer Satisfaction Survey
[ ] Small Discussion Group
[x] Other: one-on-one informal interviews

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 not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

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To assist review, please provide answers to the following question:

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 [ ] No **[X] N/A**

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 Respondents	**Form Name**	**No. of Respondents**	**No. of Responses per Respondent**	**Avg. Burden per Response (in hrs.)**	**Total Burden (in hrs.)**
Epidemiologists, statisticians, Health Scientist	Interview Guide	50	1	30/60	25
Total					25