Understanding How Families Access and Use Long-Term Care Services

ASPE Generic Information Collection Request
OMB No. 0990-0421

Supporting Statement – Section B

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Section B – Data Collection Procedures

1. Respondent Universe and Sampling Methods

This is a sample of convenience. Four focus groups will be conducted in-person in three different Pennsylvania communities in order to explore how characteristics of the community public sector and private resources impact family decision-making and access to information.   Participants will be a demographically balanced group of adults ages 40-70 who have had a family member who has used long term care within the past two years. Participants will self-select to participate. We chose this mechanism in order to get insights into this process across different types of people, care situations and within different communities.   We anticipate no more than 10 (ten) participants in each of the four focus groups.

2. Procedures for the Collection of Information

The data collection will be conducted through four moderated in-person focus groups, each lasting two (2) hours.   The focus groups will be structured with an experienced Focus Group Moderator who is also a subject matter expert in long term care. Participation in the focus groups (and any information provided by participants) will be completely voluntary.   No personal identifying information will be collected. The questions to be posed by the moderator will be developed by the Contractor and revised and approved by ASPE prior to the session. A draft discussion guide is included (Attachment A). ASPE staff will oversee the focus groups by digital video capture (live streaming), in-person viewing, or review of audio transcripts. This will enable them to help direct the areas of inquiry and ask for additional probing questions or details on the information provided by the participants as needed. The data will be collected qualitatively from the video/audio and print transcripts of the focus groups. After the focus groups, the Contractor will prepare a topline summary and full report by reviewing the transcripts and any notes, and identifying the main themes from the discussion. ASPE will provide input, direction, review and final approval for the reports.

3. Methods to Maximize Response Rates Deal with Nonresponse

Respondents are recruited from a large panel of participants, using the recruitment parameters and focus group participation time limits outlined in the Recruitment Screener. From this known sample, individuals are identified fulfill the participation requirements (most notably having a family member who used long term care within the past two years) and who consents to participate in one of the focus groups.   Therefore, the sample for this data collection will be a sample of convenience. This method was chosen to reduce the overall burden on respondents and to gather as many perspectives as possible in the shortest amount of total time. The benefit of an in-person focus group compared with online research, is the ability to delve more fully on key topics, provide a more supportive environment in which participants can open up about difficult personal issues regarding their long term care experience and at the same time design the groups to be representative of the specific communities in which they are being convened. Because of the small sample size, focus groups are not nationally representative but the information they provide is directional and informative.

Recruitment follows a strict screening protocol to ensure that participants meet the quota requirements for having a balanced representation. Sessions will be held at a time and place that is convenient for those interested in attending. A confirmation letter and detailed logistical instructions will be provided following recruitment. Participants will receive complimentary parking and a light snack. As is customary with in-person focus groups, they will also receive an incentive payment of approximately $125. The amount is based on prevailing area rates. It is intended to recognize the time spent by participants, encourage cooperation and convey our appreciation for their time and knowledge. The day prior to the group session, the facility will call each participant to remind them of the session and address any concerns.

4. Test of Procedures or Methods to be Undertaken

The focus groups build upon prior research on this topic, conversations with subject matter experts, and key themes from ASPE’s July 2015 online focus groups which were approved using this mechanism. The draft discussion guide for the focus groups draws on prior best practices for enabling consumers to open up and stay focused when discussing these very personal topics. Specific components of the discussion guide will flow from the insights from prior work on key factors such as the nature of the care need, family dynamics, income and education, and others. ASPE will review, revise and approve the final discussion guide prior to its use. Additionally, there will be a de-brief after the first group (and each thereafter) to discuss which questions worked and did not, and the guide will be modified if needed based on how it performs in each group.

5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data

ASPE subject matter experts with statistical and technical expertise were consulted on the development of this exploratory data collection. This includes: (1) Helen Lamont, PhD, Social Science Analyst at HHS/ASPE, email: Helen.Lamont@hhs.gov, phone: 202-260-6443; and (2) William Marton, PhD, Director, Division of Disability and Aging at HHS/ASPE, email: william.marton@hhs.gov, phone: 202-690-6443.

LIST OF ATTACHMENTS – Section B

Note: Attachments are included as separate files as instructed.

A. Draft Focus Group Discussion Guide
B. Recruitment Screener