

Home Health and Hospice Survey and Interviews

ASPR TRACIE Generic Information Collection Request
OMB No. 0990-0391

Supporting Statement – Section A

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Program Official/Project Officer

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Section A – Justification

1. Circumstances Making the Collection of Information Necessary

In 2014, the United States Department of Health and Human Services' (HHS) Assistant Secretary of Preparedness and Response (ASPR) created the Technical Resources Assistance Center and Information Exchange (TRACIE) to meet the needs of regional ASPR staff, healthcare coalitions, healthcare entities, healthcare providers, emergency managers, public health practitioners, and others working in disaster medicine, healthcare system preparedness, and public health emergency preparedness. ASPR TRACIE supports timely access to information and promising practices, identifies and remedies knowledge gaps, and provides users with responses to a range of requests for technical assistance. ASPR TRACIE is comprised of three complementary domains: (1) a technical resources database; (2) a direct-service technical assistance center; and (3) an information exchange discussion board. This Generic Information Collection request aims to collect formative information that would add to the technical resources database. ASPR TRACIE would like to examine the role of home health care and hospice providers in offering medical surge assistance during emergencies.

We are seeking approval through the generic mechanism for this research to conduct a survey and one-on-one interviews with home health and hospice providers. We will only survey employees of home health care and hospice agencies that are covered by Hospital Preparedness Program (HPP) healthcare coalitions, funded through the HPP Cooperative Agreement. Many Americans experiencing chronic or terminal illnesses among other conditions rely on hospice or home health services for their care and for many issues that are experienced before, during, and after emergencies.

This exploratory quantitative and qualitative research uses a survey and interviews to better understand the role for home health and hospice providers during an emergency and any practical considerations to help these providers in their preparedness efforts. In addition, this research will provide insight on the scope and level of implementation of emergency management activities among home health and hospice agencies, including activities that some agencies may have initiated in response to the Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers Final Rule.

This research will provide critical insight into explorations of how this medical provider setting could benefit individuals during an emergency. It will also provide information with the potential to improve future emergency response although we understand the results are not generalizable to larger populations given the sample.

2. Purpose and Use of the Information Collection

The aim of this research is to understand the perspectives of leadership at home health and hospice agencies. We are seeking approval through this mechanism for 250 15-minute surveys and 25 30-minute one-on-one interviews with leadership of home health and hospice agencies. As hospice services can be provided in a variety of settings including private residences, residential facilities such as nursing homes, acute care hospitals, and skilled nursing and long-

term care facilities, the research will seek to include all settings. Topics of particular interest are: (1) perceptions of the role of home health and hospice providers in supporting the health and medical response to disasters and emergencies; (2) factors to consider if home health and hospice providers will be used during emergencies; and (3) perceived barriers to preparedness and response challenges and gaps faced by home health and hospice agencies. All participation is strictly voluntary.

This work is exploratory in nature. The findings from the survey and interviews will not be generalizable, as they are based on a convenience sample. The method of data collection was chosen due to the exploratory nature of this inquiry. Information gathered from the survey and interviews will inform our understanding of the strengths, weaknesses, and role of home health and hospice providers in emergency management and care.

Findings from this work will be summarized in one research brief and will be released publicly through ASPR TRACIE. The research may be submitted for publication in a peer-reviewed journal.

3. Use of Improved Information Technology and Burden Reduction

Data will be collected via an online survey and via telephone interviews. The sample for this data collection will be one of convenience. Participants will be identified through the National Association for Home Care and Hospice (NAHC) newsletters, emails, and outreach. If needed, outreach will be conducted through additional associations (e.g., American Academy of Home Care Medicine, Home Care Association of America).

The cross-sectional survey will be administered online. Participants will be provided a link to the survey via e-mail and will be able to complete the survey on a computer from a location where they feel most comfortable. Descriptive statistics will be used to analyze the quantitative data obtained using SPSS.

Interview participants will be individuals who completed the survey and indicated they were interested in participating in a follow-up interview and provided their contact information. Interviews will be scheduled for times that are convenient for the participant. A laptop computer will be used to take notes during the discussions. The discussions will be audio-recorded and later the notes will be coded and used to identify themes and patterns of responses. The discussions will follow a semi-structured discussion guide.

4. Efforts to Identify Duplication and Use of Similar Information

To our knowledge, there is no information of similar nature that has been or is currently being collected. This is an exploratory study to allow ASPR to better understand the perspectives and needs of home health and hospice providers related to emergencies.

5. Impact on Small Businesses or Other Small Entities

No small businesses will be impacted or involved in this data collection.

6. Consequences of Collecting the Information Less Frequently

This request is for a one-time data collection where the data have not previously been collected elsewhere.

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

There are no special circumstances with this information collection package. This request fully complies with the regulation 5 CFR 1320.5 and will be voluntary.

8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency

This data collection is being conducted using the Generic Information Collection mechanism through ASPR – OMB No. 0990-0391.

9. Explanation of Any Payment or Gift to Respondents

There will be no payments offered to respondents for this data collection.

10. Assurance of Confidentiality Provided to Respondents

The Privacy Act does not apply to this data collection. Participants will not be asked about, nor will they provide, individually identifiable information. Participant names and email addresses will not be connected to individual respondents. Participants will be asked to provide their consent before starting the survey or discussion that reiterates the voluntary nature of participation and their right to decline to respond to any discussion questions.

11. Justification for Sensitive Questions

We do not expect the questions to be considered sensitive, but survey and interview participants will be informed that they may decline to respond to any questions if they are not comfortable answering.

12. Estimates of Annualized Burden Hours and Costs

The estimate for burden hours is based on:

- (1) Fifteen-minute surveys will be completed by a total of 250 participating leadership staff. See survey in Attachment A.
- (2) Thirty-minute interviews will be conducted with a total of 25 participating leadership staff who completed the survey and indicated they were interested in participating in a follow-up interview. See semi-structured interview guide in Attachment B.

Estimates for cost per burden hour are based on the May 2017 Bureau of Labor Statistics National Occupational Employment and Wage Estimates. Based on these data, the mean hourly rate for general and operations managers is \$59.35.¹ Table A-12 shows estimated burden and cost information.

Table A-12: Estimated Annualized Burden Hours and Costs to Respondents

Type of Respondent	No. of Respondents	No. of Responses per Respondent	Average Burden per Response (in hours)	Total Burden Hours	Hourly Wage Rate	Total Respondent Costs
Survey						
Leadership	250	1	15/60	62.50	\$59.35	\$3,709.38
Interviews						
Leadership	25	1	30/60	12.50	\$59.35	\$741.88
TOTALS	250			75		\$4,451.25

13. Estimates of Other Total Annual Cost Burden to Respondents or Record Keepers

There will be no direct costs to the respondents other than their time to participate in the data collection.

14. Annualized Cost to the Government

Table A-14: Estimated Annualized Cost to the Federal Government

Staff (FTE)	Average Hours per Collection	Average Hourly Rate	Average Cost
Senior Contractor Staff	8	\$211.67	\$1,693.36
Research Staff	580	\$103.17	\$59,838.60
Subject Matter Expert	16	\$386.93	\$6,190.88
Estimated Total Cost of Information Collection			\$67,722.84

15. Explanation for Program Changes or Adjustments

This is a new data collection.

16. Plans for Tabulation and Publication and Project Time Schedule

The quantitative data collected by the survey from participants will be analyzed by contractor staff using SPSS. Descriptive statistics and inferential statistics may be used to analyze the data. No names or other personal information will be reported in the summaries.

¹ See https://www.bls.gov/oes/current/oes_nat.htm for national mean hourly wages.

The qualitative information shared by interview participants will be collected via typed notes and audio recording. After each interview is complete, contractor staff will review the written notes. Contractor staff will analyze the data qualitatively by reviewing the interview notes and pulling out the main themes from each set of discussions. These themes will be summarized. No names or other personal information will be reported in the summaries.

Timeline:

Completion Date	Major Tasks/Milestones
January 2019	Consultation with outside experts Develop survey and interview guide Submit request for OMB approval under existing generic PRA clearance Plan for recruitment Plan for survey Plan for interviews Submit request for IRB approval
February – March 2019	Receive OMB approval under existing generic PRA clearance Obtain IRB approval Begin recruiting survey participants Field survey Begin analyzing survey data Begin scheduling interview participants Conduct interviews Record and analyze interviews
April 2019	Produce summary and final reports
May 2019	Publish report on ASPR TRACIE website

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

We are requesting no exemption.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

There are no exceptions to the certification. These activities comply with the requirements in 5 CFR 1320.9.

LIST OF ATTACHMENTS – Section A

Note: Attachments are included as separate files as instructed.

- A. Survey
- B. Interview Discussion Guide