DOCUMENTATION FOR THE GENERIC CLEARANCE FOR THE COLLECTION OF QUALITATIVE RESEARCH & ASSESSMENT

TITLE OF INFORMATION COLLECTION:
[X] INTERVIEWS
[] SMALL DISCUSSION GROUPS
[] FOCUS GROUPS
[X] QUESTIONNAIRES
[] OTHER (EXPLAIN)

DESCRIPTION OF THIS SPECIFIC COLLECTION

1. Intended purpose

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.

2. Need for the 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.

3. Planned use of the data

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.

4. Date(s) and location(s)

Data will be collected via an online survey and via telephone interviews in February and March 2019.

5. Collection procedures

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.

The survey was reviewed by nine ASPR and ICF contractor staff with expertise in this field. Four SMEs were engaged in the development and review of the survey. The interview guide was reviewed by ASPR and contractor staff. Following the first interview, we will debrief and make minor adjustments to improve the interviewing techniques.

6. Number of collections (e.g., focus groups, surveys, sessions)

Collections will include:

(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.

7. Description of respondents/participants

The sample for this data collection will be one of convenience. Participants include leadership at home health and hospice agencies that are covered by Hospital Preparedness Program (HPP) healthcare coalitions. 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.

8. Description of how results will be used

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.

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.

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.

9. Description of how results will or will not be disseminated and why or why not

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.

AMOUNT OF ANY PROPOSED STIPEND OR INCENTIVE

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

BURDEN HOUR & COST COMPUTATION (Number of responses (X) estimated response or participation time in minutes (/60) = annual burden hours):

Type of Respondent	No. of Respondent s	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

OTHER SUPPORTING INFORMATION

REQUESTED APPROVAL DATE:

January 25, 2019

NAME OF CONTACT PERSON

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