

**Ethics Consultation Feedback Tool (ECFT)**  
**OMB FORM 2900-0750**  
**VA FORM 10-10065**

**A. JUSTIFICATION**

**1. Explain the circumstances that make the collection of information necessary. Identify legal or administrative requirements that necessitate the collection of information.**

Legal authority for this data collection is found under 38 USC, Part I, Chapter 5, Section 527 that authorizes the collection of data that will allow measurement and evaluation of the Department of Veterans Affairs (VA) Programs, the goal of which is improved health care for veterans.

Ethics consultation is a service provided in all Veterans Health Administration (VHA) facilities. We define ethics consultation as a *service provided by an individual ethics consultant, ethics consultation team, or ethics committee to help patients, providers, and other parties resolve ethical concerns in a health care setting*. The overall goal of ethics consultation is to *improve health care quality by facilitating the resolution of ethical concerns*. By providing a forum for discussion and methods for careful analysis, effective ethics consultation:

- promotes practices consistent with high ethical standards
- helps foster consensus and resolve conflict in an atmosphere of respect
- honors participants' authority and values in the decision-making process
- educates participants to handle current and future ethical concerns

Ensuring the success of the ethics consultation service also requires ongoing evaluation, by which we mean systematic assessment of the operation and/or outcomes of a program compared to a set of explicit or implicit standards, as a means of contributing to the continuous improvement of the program. Evaluation is an important strategy to improve the process of ethics consultation (i.e., how ethics consultation is being performed) as well as its outcomes (i.e., how ethics consultation affects participants and the facility).

**2. Indicate how, by whom, and for what purposes the information is to be used; indicate actual use the agency has made of the information received from current collection.**

An important aspect of offering a high quality consultation service is to satisfy the needs and expectations of the customer. The ethics consultation feedback tool provides a quick and easy means of systematically surveying staff, Veterans, and family members who participate in a consultation. It has been adapted from an instrument developed for use by the Ethics Consultation Service of the National Center for Ethics in Health Care (NCEHC). Patients and family members bring a unique and important perspective to the consultation service and should not be excluded from participating in the feedback process.

This application is to request continued approval that the *Ethics Consultation Feedback Tool* be used to collect data from patients and family members about their experience during ethics consultations. There are approximately 2,000 consultations performed across all VHA facilities and NCEHC per year.

The tool is currently being used to assess feedback from all participants (e.g., staff, veterans and family) about the consultation experience. This feedback has been used to develop plans to improve the service,

e.g., faster response time, provision of more literary resources about ethical concerns expressed during the consultation.

**3. Describe whether, and to what extent, the collection of information involves the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g. permitting electronic submission of responses, and the basis for the decision for adopting this means of collection. Also describe any consideration of using information technology to reduce burden.**

The information will be entered in ECWeb – a software program that captures ethics consultation activity for the entire VHA – and used by the Ethics Consultation Coordinator and facility leadership to assess the satisfaction of patients and family members with the performance of facility staff in the area of ethics consultation. Patients and family members are welcome to provide their feedback in person, over the phone, or by completing and submitting the ECF Tool in hard copy. Improved information technology will not decrease the burden on the public.

**4. Describe efforts to identify duplication. Show specifically why any similar information already available cannot be used or modified for use for the purposes described in Item 2 above.**

This activity is unique to ethics consultation and the work of the ethics consultation services at VHA facilities. There is no duplication in any other program in VHA.

**5. If the collection of information impacts small businesses or other small entities, describe any methods used to minimize burden.**

This activity is related to quality improvement activities within VHA and is undertaken to improve the quality of care provided to all veterans in our system. The questions are simple and kept to an absolute minimum to achieve an understanding of the patient's or family member's satisfaction and feedback about the consultation experience. There is no impact on small businesses.

**6. Describe the consequences to Federal program or policy activities if the collection is not conducted or is conducted less frequently as well as any technical or legal obstacles to reducing burden.**

VA would not be responsive to the needs of the patient and to the legal requirement to release of information if information were collected less frequently. VA would not fulfill its duty to include feedback from all key ethics consultation participants in the quality improvement process if non-staff are excluded.

**7. Explain any special circumstances that would cause an information collection to be conducted more often than quarterly or require respondents to prepare written responses to a collection of information in fewer than 30 days after receipt of it; submit more than an original and two copies of any document; retain records, other than health, medical, government contract, grant-in-aid, or tax records for more than three years; in connection with a statistical survey that is not designed to produce valid and reliable results that can be generalized to the universe of study and require the use of a statistical data classification that has not been reviewed and approved by OMB.**

To be of value, it is essential that the feedback be requested shortly after the each ethics consultation. Generally, only a single ethics consultation is called regarding an individual patient so it would be rare for

a member of the public to be asked to complete the instrument more than once. Participation is voluntary and there is no deadline placed on the patient in terms of response date.

**8. a. If applicable, provide a copy and identify the date and page number of publication in the Federal Register of the sponsor's notice, required by 5 CFR 1320.8(d), soliciting comments on the information collection prior to submission to OMB. Summarize public comments received in response to that notice and describe actions taken by the sponsor in responses to these comments. Specifically address comments received on cost and hour burden.**

The notice of Proposed Information Collection Activity was published in the Federal Register on 11/15/2017, Vol. 82, No. 52972, page 52972-52973. VA received no comments in response to this notice.

**b. Describe efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, clarity of instructions and recordkeeping, disclosure or reporting format, and on the data elements to be recorded, disclosed or reported. Explain any circumstances which preclude consultation every three years with representatives of those from whom information is to be obtained.**

Outside consultation is conducted with the public through the 60- and 30-day Federal Register notices.

**9. Explain any decision to provide any payment or gift to respondents, other than remuneration of contractors or grantees.**

No payment or gift is provided to respondents.

**10. Describe any assurance of privacy provided to the extent permitted by law, to respondents and the basis for the assurance in statute, regulation, or agency policy.**

Participants will be assured that all data will be kept private and that no identifying information will be used in any dissemination activities. Completion of the survey implies consent. Consistent with VHA policy, confidentiality of responses is maintained by entering response information into ECWeb.

**11. Provide additional justification for any questions of a sensitive nature (Information that, with a reasonable degree of medical certainty, is likely to have a serious adverse effect on an individual's mental or physical health if revealed to him or her), such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private; include specific uses to be made of the information, the explanation to be given to persons from whom the information is requested, and any steps to be taken to obtain their consent.**

There are no questions of a sensitive nature.

**12. Estimate of the hour burden of the collection of information:**

**a. The number of respondents, frequency of responses, annual hour burden, and explanation for each form is reported as follows:**

VA Form ECFT	No. of respondents	x No. of responses 1	x 5 minutes	÷ by 60	Number of Burden Hours
10-10065	569	569	2845	47	47

**b. If this request for approval covers more than one form, provide separate hour burden estimates for each form and aggregate the hour burdens in Item 13 of OMB 83-I.**

This request covers only one form.

**c. Provide estimates of annual cost to respondents for the hour burdens for collections of information. The cost of contracting out or paying outside parties for information collection activities should not be included here. Instead, this cost should be included in Item 14.**

Legally, respondents may not pay a person or business for assistance in completing the information collection and a person or business may not accept payment for assisting a respondent in completing the information collection. Therefore, there are no expected overhead costs for completing the information collection. VHA estimates the total cost to all respondents to be \$1,143.98 (47 burden hours x \$24.34 per hour).

May 2017 National Occupational Employment and Wage Estimates United States:  
[https://www.bls.gov/oes/current/oes\\_nat.htm#00-0000](https://www.bls.gov/oes/current/oes_nat.htm#00-0000)

**13. Provide an estimate of the total annual cost burden to respondents or recordkeepers resulting from the collection of information. (Do not include the cost of any hour burden shown in Items 12 and 14).**

Cost estimates are not expected to vary widely. The only cost is that for the time of the respondent.

**14. Provide estimates of annual cost to the Federal Government. Also, provide a description of the method used to estimate cost, which should include quantification of hours, operation expenses (such as equipment, overhead, printing, and support staff), and any other expense that would not have been incurred without this collection of information. Agencies also may aggregate cost estimates from Items 12, 13, and 14 in a single table.**

The estimated annual cost of VA Form ECFT to the Federal Government is \$544

Processing 569 forms x 5 min each / 60 min/hr = 47 hours x \$39/hr (GS 6/10) = \$1,833.

**15. Explain the reason for any burden hour changes since the last submission.**

Actual data 4<sup>th</sup> quarter FY 16 through 3<sup>rd</sup> quarter FY 17 indicates that more people are completing the tool which is providing valuable feedback needed to improve ethics consultation services to Veterans, families and staff. In addition, the hour salary rate has increased.

**16. For collections of information whose results will be published, outline plans for tabulation and publication. Address any complex analytical techniques that will be used. Provide the time schedule for the entire project, including beginning and ending dates of the collection of information, completion of report, publication dates, and other actions.**

We do not plan to publish this data.

**17. If seeking approval to omit the expiration date for OMB approval of the information collection, explain the reasons that display would be inappropriate.**

VA seeks to minimize the cost to itself of collecting, processing and using the information by not displaying the expiration date. We seek an exemption that waives the displaying of the expiration date on this VA Form. The VA Form may be reproduced by the respondents and VA field facilities from the Internet and then stocked. If we are required to display an expiration date, it would result in unnecessary waste of existing stock of the forms. Inclusion of the expiration date would place an unnecessary burden on the respondent (since they would find it necessary to obtain a newer version, while VA would have accepted the old one).

**18. Explain each exception to the certification statement identified in Item 19, "Certification for Paperwork Reduction Act Submissions," of OMB 83-I.**

There are no exceptions.

**B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS**

No statistical methods are used in this data collection.