

# **Cost Study of Trauma-Specific Evidence Based Programs used in the Regional Partnership Grants Program**

**OMB Information Collection Request**

**0970 - NEW**

## **Supporting Statement Part A**

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## INTRODUCTION

The Children's Bureau (CB) within the Administration for Children and Families (ACF) of the U.S. Department of Health and Human Services seeks approval to collect information for the *Regional Partnership Grants to Increase the Well-being of and Improve Permanency Outcomes for Children Affected by Substance Abuse* (known as the Regional Partnership Grants Program or "RPG") Cost-Study of Trauma-Specific Evidence Based Programs (the "RPG cost study of trauma-specific EBPs"). Since 2006, CB has awarded multiple rounds of competitive grants to state and local agencies and service providers under the RPG program. Grants are awarded to organizations such as child welfare agencies, substance abuse treatment providers, or family court systems to develop interagency collaborations and provide services designed to increase well-being, improve permanency, and enhance the safety of children who are in or are at risk of being placed in an out-of-home as a result of a parent's or caretaker's substance abuse. This cost study will focus on grantees participating in RPG rounds four and five that are implementing certain trauma-specific EBPs.

Consistent with the RPG program's focus on evidence, CB has undertaken a range of evaluation activities in collaboration with RPG grantees. Thirty-five grantees are participating in the ongoing RPG national cross-site evaluation, which examines implementation, partnerships, outcomes, and impacts. All grantees collect data on a uniform set of performance measures and report them to CB on a semi-annual basis through a web-based system. These ongoing data collection activities are approved under OMB #0970-0527. All grantees are also required to use a portion of their funding to conduct their own "local" program impact evaluation.

This information collection request is for a proposed cost study, which adds a new and unique contribution to CB's portfolio of evaluation activities. Although the RPG cross-site evaluation will provide evidence for the effectiveness of some interventions to address the emotional effects of trauma, more information is needed about the cost of implementing these EBPs. With this information collection request, CB seeks approval for two data collection instruments, to conduct a separate, but complimentary cost study of a subset of round four and round five grantees: (1) Cost Workbook, and (2) Staff Survey and Time Log.

CB has contracted with Mathematica to undertake this one-year study.

## **A1. Circumstances Making the Collection of Information Necessary**

RPG grantees select programs and services based on the needs of the families they serve and the grant requirements. Because grantees work with vulnerable groups who are likely to have experienced trauma—children at risk of or experiencing maltreatment, and adults with substance use disorders—they are encouraged under their grants to adopt and implement programs and services that are trauma-informed (HHS 2015). Trauma-informed services reflect an understanding of the prevalence and effects of trauma and avoid retraumatizing clients (Substance Abuse and Mental Health Services Administration [SAMHSA] 2014). RPG applicants also were required to propose specific, well-defined program services and activities that were evidence-based or evidence-informed. Evidence-based programs or practices are those that evaluation research has shown to be effective (HHS n.d.). Evidence-informed practices use the best available research and practice knowledge to guide program design and implementation (HHS 2011).

Although there is evidence on the effectiveness of some interventions designed to address the emotional effects of trauma, much less is known about the cost of implementing them. This set of trauma-specific EBPs vary in intensity, dosage, and delivery method and have different training requirements, so they require different resources for implementation. The cost study will gather information on the resources required to deliver the EBPs and produce estimates of the total, start-up, and per-participant costs. The RPG cost study will complement the cross-site evaluation (OMB #0970-0527). The cross-site evaluation will provide important information about the services participating families receive through the RPG program and the effectiveness of these services for selected grantees, not information on cost. The cost information gathered will be critical to informing decisions related to future federal and community investments in trauma-specific EBP services that meet the needs of children and families involved in the child welfare and substance abuse treatment systems.

## **A2. Purpose and Use of the Information Collection**

The key objective of the proposed study is to determine the cost of implementing three select trauma-specific EBPs: Parent-Child Interaction Therapy (PCIT), Seeking Safety, and Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). To carry out this objective, the study team will collect detailed cost information from nine RPG round four and five grantees who are implementing these EBPs. For each grantee, the study team will administer two data collection instruments: (1) a Cost Workbook used to collect comprehensive information on the cost of implementing of each program (Instrument #1); and (2) a Staff Survey and Time Log used to

collect information on how program staff allocate their time across different program activities (Instrument #2).

The cost study will address the following research questions:

1. What resources are necessary to deliver trauma-specific EBP services at a steady state and how are costs allocated across resource categories?
2. What are the start-up costs associated with trauma-specific EBP services? What types of resources are necessary to plan for and initiate service delivery?
3. What is the average cost to implementing agencies of providing trauma-specific EBP services to a participant enrolled in an RPG program?

These estimates will help CB better understand how program costs compare to the number of individuals and families served by the programs, potential factors driving program costs, and variation in program costs across grantees. The cost estimates will also help CB and other organizations prepare for possible future funding opportunities by providing benchmark cost estimates that may be useful in preparing future budgets.

Information will be collected using the following two instruments.

### ***Cost Workbook (Instrument #1)***

The Cost Workbook will collect cost information for the grantee organization during the most recently completed fiscal year and are organized by resource categories: staff salaries and fringe benefit rates; subcontracted service providers or other consultants; volunteer labor; materials, supplies, and equipment purchased for the program; facilities used to house program staff or deliver program activities, and indirect or shared costs. The workbook also provides space for grantees to enter information on start-up costs related to the planning and initial implementation of the trauma-specific EBP.

### ***Staff Survey and Time Log (Instrument #2)***

There are three versions of the staff survey and time log, one for each of the trauma-specific EBPs. All three versions include sections covering the following topics: (1) the respondent's job and typical working hours, (2) the amount of time the respondent has spent in initial and ongoing training related to delivering the trauma-specific EBP, and (3) the amount of time the respondent spends on activities related to implementing the trauma-specific EBP each day during the data collection period. Specific questions on training

and the descriptions of activities related to implementing the program are tailored for each EBP. In addition, the time logs are formatted to include space for recording time spent in individual and group sessions, when applicable.

The time log provides space for staff to record how they spent their time during the week using categories for commonly conducted activities related to the EBP. Staff will be asked to estimate the amount of time they spend on various activities, such as case management and clinical service delivery.

While the cost study will fill important gaps about the costs of implementing the three trauma-specific EBPs, it will not be broadly generalizable. For instance, it will not address how these therapies are provided within RPG or how effective they are for participating families. RPG grantees deliver trauma-specific EBPs to individuals and families with a range of needs and circumstances, and the EBPs may be woven into or delivered at the same time as multiple other services. For example, parents participating in trauma-specific EBPs are also likely to be receiving substance use disorder treatment in residential or nonresidential programs. The other services provided through RPG grantees and their partners will not be considered in this study. Similarly, this study is not designed to assess the effectiveness of the trauma-specific EBPs as delivered by RPG grantees and their partners. Therefore, while the results of this study will be helpful for CB and other RPG grantees, these cost data might not represent the costs to providing these EBPs in other settings. The limitations to the generalizability of these data will be acknowledged in the final publication.

### **A3. Use of Technology to Reduce Burden**

To help minimize the level of burden on participating grantees, all study data collection instruments will be administered in electronic format. The study Cost Workbook (Instrument #1) will be formatted as an electronic spreadsheet and distributed to grantees via email. Respondents will be instructed to enter the requested cost information directly in the spreadsheet and return the completed file by e-mail. The Staff Survey and Time Log (Instrument #2) will be formatted as a PDF and distributed to grantees via e-mail. Respondents will be instructed to complete the PDF electronically -- or print, complete, and scan -- and return the completed file by e-mail. Depending on grantee preferences, we will mail copies of the instruments if they prefer that method to electronic means. Neither instrument collects personally identifiable information (PII) and both can be transferred over email.

#### **A4. Efforts to Avoid Duplication**

This study is the first and only effort to systematically collect and analyze cost data for trauma-specific EBPs. Although CB currently has information on grantee budgets, these budgets may not reflect the breakdown of costs by EBP or participant, and actual costs may differ from the original budget. The data collection proposed for this study is thus essential for CB and federal policymakers to understand the costs for RPG grantees implementing these EBPs.

#### **A5. Methods to Minimize Burden on Small Entities**

We do not anticipate that small entities will be involved in this study. If any of the program providers or their partners are small entities, the study team will reduce the number of Staff Survey and Time Logs (Instrument #2) requested of the site.

#### **A6. Consequences of Not Collecting Data**

Understanding the costs of implementing and offering these trauma-specific EBPs will help other RPG grantees determine whether they can afford to provide these services by providing the range and average cost of implementation to multiple organizations. The cost estimates will also help CB and other federal organizations prepare for future funding opportunities by providing benchmark cost estimates for each of these programs.

The RPG round five grantees are currently in the second year of projected three-year grant. If the proposed cost data are not collected in 2021, it will be too late for CB and other federal agencies to learn about the cost experience and return on investment of the current federal RPG grantees. In addition, the data will not be available to federal, state, and local agencies interested in efficiently implementing the same or similar programs in the future.

#### **A7. Special Circumstances**

There are no special circumstances associated with this information collection.

#### **A8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency**

##### **a. Federal Register Announcement**

In accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104-13) and Office of Management and Budget (OMB) regulations at 5 CFR

Part 1320 (60 FR 44978, August 29, 1995), ACF published a notice in the Federal Register announcing the agency’s intention to request an OMB review of this information collection activity. This notice was published on June 29, 2020, Volume 85, Number 125, page 38898, and provided a sixty-day period for public comment. During the notice and comment period, one comment was received, which is attached. The comment did not address the information collection’s utility, estimated number of burden hours associated with the collection of the information, or other issues pertinent to the information collection.

**b. Consultation Outside the Agency**

CB received consultation on the study from members of an advisory work group (AWG) comprising grantee representatives and local evaluators who volunteered to participate, staff from the National Center on Substance Abuse and Child Welfare (which provided programmatic technical assistance to RPG grantees), and representatives of CB. Members of the AWG (see Table A.1) convened three times between October 2015 and April 2016 to provide input on the cost study data collection plans and instruments were included in a pilot study under the RPG National Cross-Site Evaluation<sup>1</sup> rounds two and three.

**Table A.1. Members of the Cost Study Advisory Working Group**

<b>Name</b>	<b>Role and Affiliation</b>
Edwina Chappell	Principal Investigator, Ties Grant Project
Laura Denton	Coordinator of Research and Evaluation, Helen Ross McNabb Center
Will Giebert	Program Evaluator, Helen Ross McNabb Center
Anita Jose	Director, UBA Family Treatment/Rehabilitation Program
Meg Knight	Project Evaluator, Pima Prevention Partnership
Bev Long	Evaluator, Preferred Family Healthcare
Linda Newton-Curtis	Research Associate, Human Services Research Institute
Brenda Roche	Director of Clinical and Evaluation Services, The Center for Children and Families
Clare White	Program Evaluator, The Center for Children and Families
Anne Wells	Director of Research, Children’s Research Triangle
Joy Zacharia	Senior Research Associate, Metis Associates

**A9. Explanation of Any Payments or Gifts to Respondents**

No payments to respondents are proposed for this information collection.

<sup>1</sup> OMB approval number 0970-0444

## **A10. Assurance of Confidentiality Provided to Respondents**

The cost data will be reported only in aggregate for each grantee, without reference to any PII. For example, reports may show the proportion of total costs attributed to staff salaries, but without naming or referencing individual staff members. The data collection instruments follow a similar approach of collecting data without PII--for example, asking grantees to report salary information by staff title and initials, not personal name.

All electronic data will be transmitted and stored according to the level of security necessary for the sensitivity and identifiability of the data. Responses to all data collection instruments will be stored by the evaluation contractor, Mathematica, on secure network servers, with access to limited to project staff on a “need-to-know” basis.

As specified in the contract, the Contractor shall protect respondent privacy to the extent permitted by law and will comply with all Federal and Departmental regulations for private information. The Contractor has developed a Data Safety and Monitoring Plan. The Contractor shall ensure that all its employees, subcontractors (at all tiers), and employees of each subcontractor, who perform work under this contract/subcontract, are trained on data privacy issues and comply with the above requirements.

## **A11. Justification for Sensitive Questions**

Calculating accurate cost estimates requires collecting information on staff salaries and grantee operating costs. The importance of this information will be explained to study respondents and we will ask sites to report salary information only by staff title and initial, not personal name. Neither instrument collects PII.

## **A12. Estimates of Burden Hours and Costs**

### **a. Annualized Burden Estimates**

Table A.2 summarizes the total estimated reporting burden for the Cost Study of Trauma-Specific EBPs. Data collection will take place over a 4-week period. We assume that all 9 eligible grantees will participate in the cost study. Assuming the maximum number of staff participate, the total annualized burden is estimated to be 402 hours. Figures are estimated as follows:

- **Cost Workbook.** Nine total surveys, or one per grantee participating in the cost analysis, are estimated. Each grantee will complete the survey once and we estimate each response will take 8 hours per grantee.

- **Staff Survey and Time Log.** Up to ninety responses are anticipated: ten respondents for each of nine grantees participating in the analysis. Each response will total 220 minutes, or 3.67 hours: no more than 20 minutes for the one-time survey, and up to 10 minutes each day during the data collection period of four weeks (20 business days) to complete the time log.

**Table A.2. Estimate of Burden and Costs for the Cost Study of Trauma-Specific EBPs**

Activity/ Respondent	Annual Number of Respondents	Number of Responses Per Respondent	Average Burden Per Response (hours)	Total Annual Burden Hours	Average Hourly Wage	Total Annualized Cost
Cost Workbook	9	1	8	72	\$34.65	\$2,494.80
Staff Survey and Time Log	90	1	3.67	330	\$23.67	\$7,811.10
Total				402		\$10,305.90

## **b. Estimates of Annualized Costs**

Table A.2 also provides the total estimated annualized cost of the burden for the current information collection request of \$10,305.90. The Cost Tool and Staff Survey and Time Log will be completed by staff at the grantee organizations and their partners. The Cost Tool will be completed by a manager or director at the organization. The average hourly wage for these staff (\$34.65) is the average hourly wage of “social and community service managers” taken from the U.S. Bureau of Labor Statistics, National Compensation Survey, 2018. The Staff Survey and Time Log will be completed by frontline staff at the grantee organization. The average hourly wage for these staff (\$23.67) is the average hourly wage of “community and social service occupations” taken from the U.S. Bureau of Labor Statistics, National Compensation Survey, 2018. This proposed information collection does not impose an additional financial burden on respondents other than the time spent answering the questions contained in the instruments.

### **A13. Estimates of Other Cost Burden to Respondents**

There are no start-up costs for respondents.

### **A14. Annualized Cost to the Federal Government**

Data collection will be carried out by the evaluation contractor, Mathematica. The total estimated cost to the government is \$245,364, which covers the cost of administering the data collection instruments to selected sites, analyzing the data, and drafting results for the Congressional Report.

## **A15. Explanation for Program Changes or Adjustments**

This is a new data collection.

## **A16. Plans for Tabulation and Publication of Results and Project Time Schedule**

The study will be conducted over a one-year period. Data collection will occur over a 4-month period from January 2021 to April 2021 (pending OMB approval). Findings will be presented in a final report to Congress scheduled for release in fall 2022. The report will be disseminated to RPG grantees and partners. All publications will acknowledge limitations of the data, including the limitations to generalizability.

The report will present findings from the cost analysis. For each trauma-specific EBP, three estimates will be produced: (1) total steady-state costs, (2) start-up costs, and (3) cost per participant.

**Estimating Total Steady-State Costs.** For each grantee, an estimate of total cost for one trauma-specific EBP will be calculated by summing the costs of individual resources reported by the grantee. This will include personnel costs and non-personnel costs (for example, supplies and materials, facilities, equipment and other direct and indirect costs). These estimates will not include start-up costs. Averages, median values, and ranges for total trauma-specific EBP costs will be reported.

Analysis may require estimates of some reported costs. A dollar value will be assigned to each resource identified by the grantee, either directly from accounting records or by estimating the value using market prices (for example, the average national wage rate for a comparable position for donated labor and the market value for comparable rental space). Estimated costs will be adjusted to account for inflation (for example, using the Consumer Price Index), as necessary

**Estimating Start-Up Costs.** Start-up cost estimates will capture grantee expenditures related to planning and launching the EBP (for example personnel time spent planning and training, and initial purchases of supplies and materials). Averages, median values, and ranges of program start-up costs will be reported. The findings will note any likely start-up costs not captured in the estimates.

**Estimating Per-Participant Costs.** For each grantee, an estimate of the average cost for one program participant will be calculated. The approach to estimating per-participant cost may differ depending on how a participant is defined and how dosage of services or length of participation is

accounted for. As a basic approach, participants will be defined as any individual or parent-child dyad (in the case of PCIT) who was served by the program during the cost study period. Total program costs would then be divided by the number of participants to produce an estimated cost per participant. The estimates of per-participant program costs will be reported by EBP, as well as range of estimates across grantees, if applicable. Per-participant costs are critical for any comparisons across grantees or EBPs because of potential differences in the programs and scale of operations.

#### **A17. Display of Expiration Date For OMB Approval**

The expiration date for OMB approval will be displayed on all data collection instruments.

#### **A18. Explanation of Exceptions**

There are no exceptions to the certification statement.

## References

Substance Abuse and Mental Health Services Administration. "SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach." HHS Publication No. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.

U.S. Department of Health and Human Services. "2012 Regional Partnership Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Substance Abuse: Second Report to Congress." Washington, DC: Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, 2015.

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