## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0915-0379)

**TITLE OF INFORMATION COLLECTION:**

Interviews with National Hypertension Control Initiative (NHCI) Group 2 Participants

**PURPOSE:**

The goal of the NHCI Program Group 2 interviews is to virtually interview a select number of health center staff participating in the NHCI to learn more about their experiences with NHCI program implementation. Specific interview topics include: background information on interview participants, information on the NHCI patient population and motivation to enroll in the program; experiences with NHCI-specific staffing; patient engagement; patient acceptance and use of self-measured blood pressure (SMBP) devices and appropriate transfer of device data; hypertension management plans and implementation; and the perceived impact of NHCI on patient health.

Information gathered from the NHCI Group 2 virtual interviews will help the NHCI training and technical assistance contractor better understand how this program is being implemented and inform future technical assistance efforts.

**DESCRIPTION OF RESPONDENTS**:

The team will engage up to 30 NHCI Group 2 health centers that receive federal funds to implement the National Hypertension Control Initiative within their center. The team will sample 30 centers, stratifying the sample into two groups:

* + centers that have reported little or no progress in NHCI in the most recent semi-annual report; and,
	+ centers that have begun implementing NHCI.

From centers that have made little or no progress, we will learn about program implementation and maintenance challenges to better target the team’s technical assistance (TA) efforts.

From centers that have made substantial progress (e.g., they have fully implemented protocols for the SMBP program, or they are further along than most other centers in the implementation process), we will identify promising practices that the team can package and distribute across the learning community.

To the extent possible, within each of our two strata we will diversify the sample by proportion of patients with controlled hypertension, race/ethnicity and geographic diversity.

**TYPE OF COLLECTION:** (Check one)

[ ] Customer Comment Card/Complaint Form [ ] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software [X] Small Discussion Group

[ ] Focus Group [ ] Other: \_\_\_\_\_\_\_\_\_\_

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: Ayanna Williams

To assist review, please provide answers to the following question:

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected? [ ] Yes [X] No
2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? [ ] Yes [ ] No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? [ ] Yes [ ] No

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [ ] Yes [X] No

**BURDEN HOURS**

Interviews will be conducted with up to 4 staff from each health center. The team will engage up to 30 NHCI health centers.

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent**  | **No. of Respondents** | **Participation Time** | **Burden** |
| Individuals: Staff members representing health centers participating in the National Hypertension Control Initiative | 4 staff per health center30 health centers  | 1 hour | 1 hour for 4 participants = 4 hours per health center 4 hours per health center times 30 health centers = 120 |
| **Totals** | 120 respondents | 1 hour  | 120 hours |

**FEDERAL COST:** The estimated annual cost to the Federal government is approximately $230,766.44 which includes 1) $ 229,627 in contractor costs to conduct interviews, analyze results, and create a summary report, and 2) $1,139.44 in project management and oversights (1% from GS13 ($113,944).

The estimated annual cost to the Federal Government is approximately $69,832.85 which includes 1) $60,000 in configuration and testing, and 2) and $9,832.85 in project management and oversight (5% from GS12 ($89,834) and 5% from GS13 ($106,823)).

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

**The selection of your targeted respondents**

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe? [X] Yes [ ] No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

**See Below:**

The Altarum/Arbor team will sample 30 centers, stratifying the sample into two groups:

* + centers that have reported little or no progress in NHCI in the most recent semi-annual report; and,
	+ centers that have begun implementing NHCI.

From centers that have made little or no progress, we will learn about program implementation and maintenance challenges to better target the team’s technical assistance (TA) efforts.

From centers that have made substantial progress (e.g., they have fully implemented protocols for the SMBP program, or they are further along than most other centers in the implementation process), we will identify promising practices that the team can package and distribute across the learning community.

The team will select centers in the sample based upon their responses to the most recent semi-annual report data. Additionally, centers that did not respond to the most recent semi-annual report and whose level of progress is unknown will also be included in the sample. Engaging these centers enables the team to gather additional data on centers for which the Altarum/Arbor and HRSA teams have limited to no data.

To the extent possible, within each of the strata, the team will diversify the sample by the following characteristics:

1. ***Proportion of patients with controlled hypertension****:*

Centers that have high, medium, and low % controlled hypertension among their patient population based upon the most recent UDS data will be included. The proportion of patients with controlled hypertension is the primary outcome of NHCI and thus important to select sites at various stages of progress in achieving this goal.

1. ***Race/ethnicity:***

Centers that have high, medium and low % non-Hispanic White participants among their patient population will be included. Closing the gap in racial/ethnic differences in hypertension control is a key focus of this initiative and thus it is important to speak with staff at health centers serving different racial/ethnic demographics.

1. ***Geographic diversity:***

Centers from across the four major US census regions[[1]](#footnote-2). The team will capture perspectives from NHCI participants across the nation.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)

[ ] Web-based or other forms of Social Media

[X] Telephone

[ ] In-person

[ ] Mail

[ ] Other, Explain

1. Will interviewers or facilitators be used? [X] Yes [ ] No

**Please make sure that all instruments, instructions, and scripts are submitted with the request.**

## Instructions for completing Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback”

**TITLE OF INFORMATION COLLECTION:** Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

**PURPOSE:** Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

**DESCRIPTION OF RESPONDENTS**: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

**TYPE OF COLLECTION:** Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

**CERTIFICATION:** Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

**Personally Identifiable Information:** Provide answers to the questions. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

**Gifts or Payments:** If you answer yes to the question, please describe the incentive and provide a justification for the amount.

**BURDEN HOURS:**

**Category of Respondents:** Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households; (2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected per row.

**No. of Respondents:** Provide an estimate of the Number of Respondents.

**Participation Time:** Provide an estimate of the amount of time (in minutes) required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

**Burden:** Provide the Annual burden hours: Multiply the Number of Respondents and the Participation Time then divide by 60.

**FEDERAL COST:** Provide an estimate of the annual cost to the Federal government.

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

**The selection of your targeted respondents.** Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

**Administration of the Instrument:** Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

**Submit all instruments, instructions, and scripts are submitted with the request.**

1. <https://www2.census.gov/geo/pdfs/reference/GARM/Ch6GARM.pdf> [↑](#footnote-ref-2)