

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

TITLE OF INFORMATION COLLECTION:

Center for Substance Abuse Prevention (CSAP)
Program Evaluation, Effectiveness and Review Services (PEERS)
Harm Reduction Grantee Planning Tool

- INTERVIEWS
- SMALL DISCUSSION GROUPS
- FOCUS GROUPS
- QUESTIONNAIRES
- OTHER (EXPLAIN:)

DESCRIPTION OF THIS SPECIFIC COLLECTION

1. Intended purpose

As part of the evaluation of the Harm Reduction (HR) grant program, the contractor will develop protocols for a Point in Time Survey (PiT) of clients receiving HR services for which a Paperwork Reduction Act (PRA) package is forthcoming. The PiT survey aims to learn about the services and supports HR clients receive, their sociodemographic characteristics, and barriers to service access to guide program improvements. The PiT survey protocols will be co-developed with the HR grantees to ensure the protocols and approach are feasible and appropriate for HR grantees and the clients they serve.

To guide planning for the PiT survey, the contractor would like to solicit information from the HR grantee program directors via the Grantee Planning Tool. Its purpose is to obtain information about the HR delivery locations, the approximate number of clients served each week at these locations, the approximate percentage of clients that are English and non-English speakers, and each location's capacity to assist with recruiting and overseeing a client-administered online survey. The information obtained from the Grantee Planning Tool will help guide decisions about the approach and protocols for the PiT client survey.

2. Need for the collection

The information obtained from the Grantee Planning Tool is not available from existing secondary data sources from HR grantees. This on-line tool will collect information more efficiently than individual grantee interviews conducted by the evaluation contractor and will consequently be less burdensome for grantees.

3. Planned use of the data

As noted above, information gained from these data will be used to guide planning for the PiT survey. The data will be used to obtain information about the HR delivery locations, the approximate number of clients served each week at these locations, the approximate percentage

of clients that are English and non-English speakers, and each location’s capacity to assist with recruiting and overseeing a client-administered online survey.

4. Date(s) and location(s)

The data collection for the Grantee Planning Tool will happen as soon as clearance is granted. We hope this will be by February 2024. The data collection will occur online. Since this is an online survey, the location(s) will be the location of the respondent.

5. Collection procedures

The survey link will be sent electronically via email, and results will be collected online, following similar data collection protocols with online surveys. After the initial email invitation email is sent out to grantees, the contractor will send two reminder emails to the project directors to complete the survey.

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

There will be one (1) questionnaire sent to 25 grantees.

7. Description of respondents/participants

The HR grantee respondents will be HR grantee program directors who are part of community-based organizations (48 percent), clinics (16 percent), state and county agencies (12 percent), harm reduction programs (8 percent), large health care systems (12 percent) and housing organizations (4 percent). The HR grantees are spread across 14 states, with one grantee representing the Cherokee Nation in Oklahoma.

8. Description of how results will be used

Results from this data collection effort will be used to ensure that the protocols and approaches are feasible and appropriate for HR grantees and the clients they serve.

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

Results will be used by the contracted evaluation team and shared with SAMHSA staff. As these results have specific applicability and interest particular to this evaluation effort, there is no strong value in more broadly disseminating the results.

AMOUNT OF ANY PROPOSED STIPEND OR INCENTIVE – NONE

BURDEN HOURS COMPUTATION

Category of Respondents	Number of Respondents	Number of Responses	Total Responses	Hours per Response	Total Hours
HR Project Directors	25	1	25	35 min (.583)	14.58

Total			25		14.58
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FEDERAL COST: The estimated annual cost to the federal government is \$3,581.

Cost Estimate - Explanation: SAMHSA plans to allocate resources for the management, processing, and use of the collected information to enhance its utility to agencies. These estimated costs are for the tasks associated with the planning tool. It is estimated that the evaluation contract costs will be \$3,078 to monitor and collect the data.

The federal staffing costs associated with oversight of the Grantee Planning Tool involve three SAMHSA staff: (1) reviewing the tool: 30 minutes per staff, (2) staying informed of data collection across all sites: 15 minutes per staff, and (3) reviewing the results and providing feedback on the development of the PiT protocols that stem from this planning tool: 2 hrs. per staff. This totals 2.75 hrs. per staff or \$503.52 as the estimated costs to the federal government for oversight of the Grantee Planning Tool (2.75 hrs.* 3 staff *\$61.03 per hr. = \$503.52). The total estimated average cost to the government per year is \$3,581 (\$3,078 + \$503.52).