

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-02]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Office on (404) 639-3453.

The following requests have been submitted for review since the last publication date on November 29, 1995.

Proposed Projects

1. National Home and Hospice Care Survey—(0920-0298)—Reinstatement—

The National Home and Hospice Care Survey (NHHCS) was conducted in 1992, 1993, and 1994. It is part of the Long-Term Care Survey. Section 306 of the Public Health Service Act States that the National Center for Health Statistics "shall collect statistics on health resources * * * [and] utilization of health care, including utilization of * * * services of hospitals, extended care facilities, home health agencies, and other institutions." NHHCS data are used to examine this most rapidly expanding sector of the health care industry. Data from the NHHCS are widely used by the health care industry and policy makers for such diverse analyses as the need for various medical supplies; minority access to health care; and planning for the health care needs of the elderly. The NHHCS also reveals detailed information on utilization patterns, as needed to make accurate assessments of the need for and costs

associated with such care. Data from earlier NHHCS collections have used by the Congressional Budget Office, the Bureau of Health Professionals, the Maryland Health Resources Planning Commission, the National Association for Home Care, and by several newspapers and journals. Additional uses are expected to be similar to the uses of the National Nursing Home Study. NHHCS data cover: Baseline data on the characteristics of hospices and home health agencies in relation to their patients and staff, Medicare and Medicaid certification, costs to patients, sources of payment, patient's functional status and diagnoses, and categories of staff employees. Data collection is planned for the period July- October, 1996. Survey design is in process now.

Sample selection and preparation of layout forms will precede the data collection by several months.

Respondents	No. of respondents	No. of responses/respondent	Avg. burden/response (in hrs.)
Facility	1200	1	0.333
Current Patient	8400	1	0.19
Discharged Patient	8400	1	0.214

The total annual burden is 3,792. Send comments to Allison Eydt; Human Resources and Housing Branch, New Executive Office Building, Room 10235; Washington, DC 20503.

2. National Hospital Discharge Survey—(0920-0212)—Extension—The National Hospital Discharge Survey (NHDS), which has been conducted continuously by the National Center for Health Statistics, CDC, since 1965, is the principal source of data on inpatient utilization of short-stay, non-Federal hospitals and is the only annual source of nationally representative estimates on the characteristics of discharges, the lengths of stay, diagnoses, surgical and

non-surgical procedures, and the patterns of use of care in hospitals in various regions of the country. It is the benchmark against which special programmatic data sources are compared. Data collected through the NHDS are essential for evaluating health status of the population, for the planning of programs and policy to elevate the health status of the Nation, for studying morbidity trends, and for research activities in the health field. NHDS data have been used extensively in the production of goals for the Year 2000 Health Objectives and the subsequent monitoring of these goals. In addition, NHDS data provide annual

updates for numerous tables in the Congressionally-mandated NCHS report, Health, United States. Data from the NHDS are collected annually on approximately 250,000 discharges from a nationally representative sample of Federal hospitals. The data items collected are the basic core of variables contained in the Uniform Hospital Discharge Data Set (UHDDS). Data for approximately half of the responding hospitals are abstracted from medical records while the remainder of the hospital supply data through commercial abstract service organizations, state data systems, in-house tapes of printouts.

Respondents	No. of respondents	No. of responses/respondent	Avg. burden/response (in hrs.)
Primary Procedure Hospitals	77	251	0.083
Alternate Procedure Hospitals	136	250	0.016
Update (Abstract Service Hospitals)	150	2	0.033
Quality Control Forms (Hospitals)	50	40	0.016
Induction Forms (Hospitals)	40	1	2

The total annual burden is 2,269. Send comments to Allison Eydt; Human Resources and Housing Branch, New

Executive Office Building, Room 10235; Washington, DC 20503.

3. Functional Outcome and Use of Services Following Firearm Injuries—New—Patients admitted to an urban

hospital for treatment of a firearm injury will be followed in order to: (1) Examine the nature and extent of functional limitations and disability following a