

Questions for Eligible Applicants, Applied and Not Funded

I want to thank you for taking the time to speak with us today. Before we begin, we would like to ask your permission to tape record this conversation. This recording will not be shared and will only used to verify our notes for accuracy; once we have verified our notes the tape will be destroyed. Do we have your permission to tape our conversation?

IF ANSWER IS “YES”:

(Press Record) Thank you, we have begun recording.

IF ANSWER IS “NO”:

(Do not press record) Thank you for being willing to talk with us, we will not be recording this conversation.

We have the following people on the phone _____ and we would like to talk to you about your organization’s knowledge and experience with the Primary Care Residency Expansion (PCRE) grant program.

Did you have an opportunity to read the one-pager that described the purpose of the evaluation?

IF ANSWER IS “YES”:

Do you have any questions regarding the one-pager?

IF ANSWER IS “NO”:

Since you didn’t have an opportunity to review the one-pager we would like to provide you with some background information regarding this evaluation.

As you may know, the goal of the PCRE program is to expand the primary care workforce. Through this study HRSA is evaluating the PCRE funding strategy which requires grantees to create new health profession training slots. Specifically, HRSA is interested in learning the strengths and weaknesses of this funding strategy. We want to determine the level of satisfaction of eligible organizations with various aspects of this funding opportunity. Additionally, we are interested in your perceptions of the impact of adding new trainees on organizations.

The telephone survey should take approximately 30 minutes. After we have written up our notes, we will email them back to you so you can verify that we have accurately captured your comments.

All responses will be kept private unless we have your explicit approval to share something you say. This means that your telephone survey responses will only be shared with the evaluation team members and we will ensure that any information we include in our internal report does not identify you as the respondent. If there is a statement that you make that we would like to use in the final report of our findings, we will ask your permission to use this statement. You don’t have to talk about anything you don’t want to and you may end the telephone survey at any time. Are there any questions about what I have just explained?

First, thank you for taking the time to submit an application. We are very interested in hearing your feedback and would first like to ask you a few questions about your organization's experience regarding the PCRE program application. We will be using these results to inform the program of any future steps HRSA could take to improve the grant process.

1. **How did your institution find out about the PCRE Funding Opportunity Announcement?**
 - a. *Are there any grant information resources your institution monitors on a regular basis? Does your residency program subscribe to any listserves that send out federal funding opportunity announcements?*
 - b. *Did your residency program have plans to expand before you learned about the PCRE Funding Opportunity Announcement?*
2. **What factors within your institution enabled you to get the application submitted in the allotted time? Were there factors in your institution that could have been enhanced or expedited through specific efforts of the PCRE program? [IF YES] What are those factors and how could the PCRE program have supported your application process?**
 - a. *Prompt if not already covered: availability of resources—grant writers, business/budget office support; prior experience applying for BHPPr FOAs-know what type of information to include.*
3. **Please describe your experience working with the PCRE program guidance. Which aspects were challenging? Which aspects were particularly useful? What suggestions do you have to improve the PCRE program guidance?**
4. **Did you use any other HRSA resources to assist you in preparing and submitting your application?**
 - a. *Participating in the technical assistance call, listening to a recording of the technical assistance call, contacting the program officer, technical assistance from another bureau or office [NOTE: If these are not identified by the respondent, please be sure to probe on each one to jog the respondent's recall of these varied resources.]*
 - b. **[FOR EACH RESOURCE IDENTIFIED BY RESPONDENT]** *What was your experience with this HRSA resource? Did this resource enhance your ability to prepare and submit your application? Why or why not?*
5. **Describe your experience when submitting the application through the HRSA Electronic Hand Books (EHBs) and grants.gov. How would you characterize your experience?**
 - a. **[IF THERE WERE CHALLENGES]** *Did you take advantage of the EHBs help desk? Why or why not?*
 - b. *What suggestions do you have for improving the HRSA Electronic Hand Books?*
 - c. *What about grants.gov?*
6. **Besides what we've discussed to this point, what other factors affected your institution's ability to complete and submit the application?**
7. **What additional information or services could the PCRE program have made available to support your program during the grant preparation and grant application process?**
8. **Compared to other programs similar to yours, did you feel that your application had an equal, greater than or less than chance of receiving the award? Why?**
9. **Has your residency program ever applied for a federal grant or payment program before?**
 - a. *Has the academic department in which your program resides ever applied for a federal grant or payment before?*

b. *[IF YES] Was your program's past experience with the federal grant process helpful to you in preparing your application to the PCRE program? Why or why not?*

10. Is your residency program currently receiving funding from a federal grant or payment program?

a. *Is your academic department currently receiving funding from a federal grant or payment program?*

11. Did the amount of Medicare GME payments already made to your residency program play a role in deciding the number of additional resident positions your application requested?

12. Did accreditation requirements or your accreditation status play a role in deciding the number of residents your institution wanted to add to your program?

a. *Were there any other factors that played a role in the number of residents your institution wanted to add to your program? [FOR EVERY FACTOR IDENTIFIED BY RESPONDENT] Please describe this factor and how the factor affected your decision about the number of residents you wanted to add to your program.*

13. If a funding opportunity similar to the PCRE were announced in the future, would you apply?

a. *If so, what would you do differently?*
b. *If not, why?*

14. What plans, if any, does your residency program have for expansion at this time?

a. *How many residents do you plan to add?*
b. *When or over what period of time?*
c. *How will you fund this expansion?*

15. Do you have any additional comments about the application process? The review process? Future expansion of your program? Anything else?

Thank you for your comments as they will help inform the continued development of our grant programs moving forward.

We appreciate your time.