

**Health Resources and Services Administration**  
**SUPPORTING STATEMENT**  
**HRSA Bureau of Clinician Recruitment and Service (BCRS)**  
**Collegiate Health Service Corps Survey**

**A. Justification**

1. Circumstances of Information Collection

The Health Resources and Services Administration (HRSA) currently has approval under the generic clearance, Office of Management and Budget (OMB) Control No. 0915-0212, to conduct customer satisfaction surveys and focus groups. This collection of information helps fulfill the requirements of:

- a. Executive Order 12862, "Setting Customer Service Standards," which directs Agencies to continually reform their management practices and operations to provide service to the public that matches or exceeds the best service available in the private sector.

This is a request for OMB approval of a qualitative voluntary customer satisfaction survey under HRSA's generic clearance. HRSA's Bureau of Clinician Recruitment and Service (BCRS) will obtain feedback from participants of a BCRS Collegiate Health Service Corps (CHSC) pilot program that was recently funded through the National Health Service Corps (Section 338 of the Public Health Service Act, 42 USC 254d).

Executive Order 12862 directs agencies that "provide significant services directly to the public" to "survey customers to determine the kind and quality of services they want and their level of satisfaction with existing services". The objective of surveying the primary care training participants is to gain insight regarding their opinions, experiences, and perceptions of the CHSC program and their opinions and perceptions regarding whether these experiences would lead to positive experiences in primary care careers in underserved areas.

2. Purpose and Use of the Information

The mission of BCRS is to improve the health of the Nation's underserved communities and vulnerable populations by coordinating the recruitment and retention of caring health professionals in the health care system and supporting communities' efforts to build more integrated and sustainable systems of care. Partnering with the National AHEC Organization, the CHSC pilot program is designed to serve as a National Health Service Corps (NHSC) pipeline program to expose students to working in primary care and underserved populations earlier in their educational careers. There are five CHSC pilot sites at various locations throughout the country. Upon completion of the program, each pilot site must survey their participants and determine if they are any more interested in pursuing a career in primary care, underserved areas or the NHSC.

The primary use for information that will be gathered through the Colligate Health Service Corps

Survey (CHSC Survey) will be to evaluate whether the pilot program will have an impact on participants' desires to practice in primary care, underserved areas, and/or NHSC. It is estimated that a total of 375-500 participants will complete the program. The NAO or their subcontractors will administer and compile the survey results. The survey will be voluntary and the information provided will only be shared internally with the evaluation team at NAO working on CHSC, its CHSC pilot sites, and HRSA.

3. Use of Improved Information Technology

The surveys will employ an online survey to collect data from CHSC pilot program participants.

4. Efforts to Avoid Duplication

Each survey is designed to reflect the specifics of the type of primary care provider training program. Surveys have been reviewed carefully to avoid potential duplication. The proposed surveys are unique to this activity and the information is not found elsewhere.

5. Involvement of Small Entities

These surveys will not have a significant impact on small businesses or other small entities.

6. Consequences if Information Collected Less Frequently

These surveys will be conducted three times at different points throughout the program to help evaluate delivery of funding of a NHSC pipeline pilot program. The surveys will be conducted at the three different time periods to evaluate participant opinions and perceptions as they move through the CHSC pilot program and to determine any change in opinions and perceptions at each stage.

7. Consistency With the Guidelines in 5 CFR 1320.5(d)(2)

These surveys will be implemented in a manner fully consistent with 5 CFR 1320.5(d)(2).

8. Consultation Outside the Agency

No regulation or notice was published in the *Federal Register*. No consultation outside the agency was received.

9. Remuneration of Respondents

Not Applicable.

10. Assurance of Confidentiality

The CHSC Survey will collect personally identifiable information from respondents. This

information collection of information will involve names, phone numbers, email addresses, addresses, date of birth, gender, and race and ethnicity. These personal identifiers were requested per the contract and will be needed for the contractor to conduct follow-up evaluations, i.e., track them throughout and after they complete the program. The survey includes a statement that their information is held in strict confidence and the participant may chose to withdraw their permission at any point. Respondents will be assured that neither their participation/non-participation nor any responses to items will have any effect on their participation in HRSA programs.

The CHSC – AHEC database is a closed database. All members complete an online application, receive a user id and password, and member information can only be accessed with the correct user id and password.

11. Questions of a Sensitive Nature

Race and ethnicity data is also collected for demographic data purposes and respondents are not required fill out that section.

12. Estimates of Annualized Hour Burden

*Respondents*

Throughout and after completion of the program, student participants from each of the five sites will be asked to complete the CHSC Survey.

*Annual burden estimates*

The total respondent burden for the electronic survey is estimated to be 750 hours. We expect a total of roughly 500 respondents to participate in the CHSC survey: 75-100 student participants from one of the five site locations.

Type of Collection	Number of Respondents	Responses per Respondent	Total Responses	Hours per Respondent	Total Burden Hours	Wage Rate	Total Hour Cost
CHSC Survey	500	3	1500	0.50	750	\$7.25/hr	\$5438
Total	500	--	1500	--	750		\$5438

*Planned frequency of information collection*

This is a one-time project. The students will complete the survey at defined intervals throughout the project in order to determine how the program is meeting the needs of the student and the NHSC approved sites.

13. Estimates of Annualized Cost Burden to Respondents or Recordkeepers/Capital Costs

The only associated cost to respondents is their time to provide the requested information. The Contractor is the Recordkeeper and will bear all Capital Cost associated with the survey. It will cost each site \$1,200 per year to access the records database (totaling \$9,000 for the life of the contract).

14. Estimates of Annualized Cost to the Government

All survey work will be done by the contractor. It is not anticipated that any work will be done by Federal staff. All associated cost of data collection and analysis were calculated as part of the IGCE before for the contract was awarded.

15. Change in Burden

Not Applicable. This is a new activity under HRSA's generic clearance and will be included in the total burden currently approved by OMB under OMB Control No. 0915-0212.

16. Plans for Analysis and Timetable of Key Activities

BCRS and NAO will prepare, organize and consolidate their notes from the surveys. Narrative information from the surveys will be summarized and examined using descriptive analysis. Findings will only be used for internal service improvement and will not be generalized to the public. There are no plans for publication of any survey results.

17. Exemption for Display of Expiration Date

No exemption is being requested. The expiration date will be displayed.

18. Certifications

This information collection activity will comply with the requirements in 5 CFR 1320.9.