# National Survey of Substance Abuse Treatment Services (N‑SSATS)

# **SUPPORTING STATEMENT**

B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS

1. Respondent Universe and Sampling Methods

**Respondent Universe and Response Rates**

**N‑SSATS**: The universe for the N‑SSATS includes all known drug abuse and alcoholism treatment facilities in the United States, District of Columbia, and territories. The universe, derived from the I-BHS inventory of facilities, is shown in the table below as of April 30, 2012. The substance abuse treatment universe is subdivided into two categories: (1) facilities that have state-agency licensing or other approval as substance abuse treatment facilities, and (2) non-state-approved treatment facilities. Prisons, jails, detention centers. and solo practitioners are not included in the N-SSATS universe.

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| **SUBSTANCE ABUSE FACILITIES** | **TOTAL SUBSTANCE ABUSE TREATMENT FACILITIES ON I-BHS**  (as of April 30, 2012) | **STATE-APPROVED** | **NON-STATE-APPROVED** |
| I-BHS substance abuse facilities | 18,833 | 13,506 | 5,327 |

The overall response rates for the 2010 and 2011 N‑SSATS were 92 and 95 percent, respectively. The response rate for the 2013 N‑SSATS is expected to reach a similar level.

**Sampling**

**There is currently no sampling in N‑SSATS. A complete census is needed because N‑SSATS is the only source of information for the *National Directory* and online Locator.**

**Estimation Procedures**

Selected N‑SSATS data items are imputed for missing values using generally accepted methodologies.

2. Information Collection Procedures

**a. I‑BHS On-line, Facility Applications, and Augmentation**

**I‑BHS Online**: The I-BHS is designed to be continuously updated by states as they license or certify facilities, decertify or cancel licenses for facilities, and learn of facilities that have gone out of business or moved. The update process is online, so states can easily update information on the facilities in their states. The I-BHS Online update forms used by state representatives to enter or change facility registration are included as Attachment A1.

**I‑BHS Facility Applications**: New facilities can request to be included in I-BHS through an online facility application form. Facilities have the option to return the form to the I-BHS contractor by e-mail or mail. I-BHS staff will verify all facility requests to avoid duplication or the addition of inappropriate facilities to I-BHS. The information on new facilities will also be passed to the cognizant state agency for possible designation as state-approved. The I-BHS facility registration form is provided at Attachment A2.

**I‑BHS Augmentation**: The facility information provided by states is augmented by SAMHSA through searches of directories and other data bases. In 2011, the data bases searched included the ABI (American Business Information) file and the American Hospital Association (AHA) directory. All potential treatment facilities identified from these sources are matched to the I-BHS to identify duplicates. In addition, a processing step matches the potential new facilities against augmentation runs from prior years, to eliminate facilities that had been identified and screened out in earlier augmentation efforts. The remaining unmatched facilities are then screened by phone to identify those that provide substance abuse treatment services. These screening phone calls and the N-SSATS survey often generate reports of additional facilities, because respondents will volunteer that their parent organization has treatment facilities at several sites. The facilities identified in this way are also matched against the I-BHS, and the questionable matches and nonmatches are screened by phone. There will be an augmentation each year, several months prior to the start of the N-SSATS survey. The augmentation screener questionnaire used to screen the questionable matches and nonmatches is included as Attachment A3.

**b. N‑SSATS**

The 2013 full N‑SSATS will be conducted through an online web survey, with a mail questionnaire option and telephone follow-up of non-respondents. An advance letter will be mailed or faxed to the facility director six weeks before the March 29 reference date, notifying/reminding them of the survey. (Many Directors have participated in the N‑SSATS for years.) A cover letter, a set of on-line access instructions, and a list of frequently asked questions (FAQs), will be mailed on or about March 29. (See Attachment B5 for a copy of the advance letter, Attachment B6 for a copy of the cover letter, online questionnaire instructions, and FAQs, Attachment B1 for a copy of the 2013 questionnaire, Attachment B3 for a copy of the screens for the online response option, and Attachment B11 for a copy of the web pages for the N-SSATS information website.) Approximately four weeks after the initial mailing, a thank you/reminder letter will be faxed or mailed to all facilities (see Attachment B7 for a copy of the thank you/reminder letter). Facilities that have not responded by the last week in May will be sent a second packet including a cover letter and paper version of the questionnaire (see Attachment B8 for a copy of the second mailing cover letter.) Reminder calls will begin in mid-June. During the initial reminder call, respondents will be encouraged to respond by mail or web, but they may also respond by telephone. After every facility has received one reminder call, all telephone efforts will be directed toward completing the questionnaire by telephone through a CATI interview (see Attachment B4 for a copy of the 2013 N-SSATS CATI questionnaire.) The CATI follow-up will continue through the end of September. These procedures resulted in a response rate of 92 percent in 2010 and 95 percent in 2011. At the end of data collection, a final letter will be sent to all responding facilities thanking them for their completion of the N-SSATS questionnaire (see Attachment B9 for a copy of the completion thank you letter).

So that state-approved facilities identified after the N-SSATS survey do not have to wait a full year to be added to the online Locator, the N‑SSATS BC survey will be conducted during the year, using a subset of the N‑SSATS questions. An advance letter will be sent to the new facility describing the *National Directory/Locator* and inviting the facility to call a toll-free number to schedule a brief interview. (See Attachment B10 for a copy of the N‑SSATS BC advance letter and Attachment B2 for a copy of the N‑SSATS BC questionnaire (same as the 2014 abbreviated N-SSATS questionnaire.)) If the facility does not call, the N‑SSATS survey contractor will make one attempt to contact the facility by telephone. Facilities that complete the N‑SSATS BC and those that do not will be included in the next full N‑SSATS survey.

3. Methods to Maximize Response Rates

**I‑BHS**: The universe of behavioral health treatment facilities is not static. Experience with the N-SSATS and former I-SATS has shown that in a 12-month period, approximately 12 to 15 percent of facilities close and roughly the same number of “new” facilities are identified. Additionally, another 20 percent of facilities change their basic contact information (name, address, telephone number) each year. Aware of this turnover, SAMHSA takes all reasonable measures to ensure that the I-BHS is as complete as possible. Since no other comprehensive listing of treatment facilities exists against which to judge the completeness of the Inventory, the only avenues available are to collaborate with State agencies to maintain the listings and to do regular augmentations to identify new facilities that state agencies may not have authority over. Facilities remain on the I-BHS until SAMHSA receives evidence that the facility is no longer providing treatment services or is otherwise ineligible. Thus a facility that does not respond to the N-SSATS stays on the I-BHS until there is evidence that it no longer exists.

**N‑SSATS**: The methods to maximize response rates will be those that proved successful in the 2011 N‑SSATS. They include:

* Advance letters to alert facility directors to the upcoming N‑SSATS mailing;
* State letters of support mailed with the N‑SSATS packet;
* An online survey with the option to request a paper questionnaire if preferred;
* Pre-filled responses in the online survey for selected questions that have little year-to-year change (e.g., public versus private ownership, hospital type, etc.) The pre-filled responses help reduce burden and improve survey response without impairing the integrity of the data;
* A second mailing packet providing a paper questionnaire to all nonrespndents;
* Reminder telephone calls, e-mails, faxes, and remailings as needed;
* A toll-free N‑SSATS hotline that facilities may call with questions about the survey;
* An N‑SSATS e-mail address that enables facilities to e-mail questions about the survey;
* An N-SSATS informational website that provides N‑SSATS history and other material to respondents;
* Tracing and locating efforts to determine whether a facility is still in business, closed, or has merged with another facility;
* Telephone interviews to collect the information from those not responding online or by mailed paper questionnaire.

4. Tests of Procedures

No large-scale pretests (more than 9 respondents) of N‑SSATS are proposed for the next three years. Most items in the questionnaire have been in place for some years. New items have been used in other similar surveys such as N-MHSS and the N-SSATS Opioid Treatment Program (OTP) supplemental survey, If rewording or small changes in questions are required during the period of approval, the N‑SSATS questionnaire would be tested on a small number of facilities (9 or fewer facilities), and the respondents would be debriefed by telephone to verify that they were interpreting the items as intended.

5. Statistical Consultants

The data are collected under a contract with Synectics for Management Decisions, Inc., which has a subcontract with Mathematica Policy Research, Inc., for the N‑SSATS forms design, field work, and data entry and cleaning. The project directors for the two contractors are:

**Synectics** **Mathematica Policy Research**  
Leigh Henderson, Ph.D. Karen CyBulski  
703-807-2328 or 410-292-5623 609-936-2797

Synectics is also responsible for the management of the I‑BHS systems, the statistical aspects of the N‑SSATS (primarily imputation of missing data), and preparation of the *National Directory/Locator* and the annual N‑SSATS report and state profiles.

The SAMHSA Project Officer and Co-Project Officer are:

Cathie Alderks Laura Milazzo-Sayre  
Statistician Statistician  
240-276-1269 240-276-1764

**LIST OF ATTACHMENTS**

Attachment A1 I‑BHS Online state add/update forms

Attachment A2 I‑BHS facility application form

Attachment A3 Augmentation screener questionnaire

Attachment B1 N‑SSATS 2013 full questionnaire

Attachment B2 N‑SSATS 2014 abbreviated questionnaire (and N-SSATS BC)

Attachment B3 N‑SSATS 2013 screens for online questionnaire

Attachment B4 N‑SSATS 2013 CATI questionnaire

Attachment B5 N‑SSATS 2013 advance letter

Attachment B6 N‑SSATS 2013 cover letter; online questionnaire access instructions; and frequently asked questions sheet

Attachment B7 N‑SSATS 2013 thank you/reminder letter

Attachment B8 N-SSATS 2013 second mailing cover letter

Attachment B9 N-SSATS 2013 completion thank you letter

Attachment B10 Between Cycle N‑SSATS (N-SSATS BC) advance letter

Attachment B11 Web pages for the 2013 N-SSATS information website

Attachment C1 List of expert panel members, November 2011

Attachment C2 Participant list, March 2011