

**Health Resources and Services Administration**  
**SUPPORTING STATEMENT**  
**Healthy Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB) Health Literacy Project**

**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. On behalf of HRSA HAB, JSI will obtain customer satisfaction feedback from participants of the Health Literacy Training program. This program, the Health Literacy Training Program, has explicit requirements develop and implement a training curriculum to improve the organizational health literacy of health care organizations that serve young and adult Black/African American Men Who Have Sex with Men and the individual health literacy of those patients. To do this, JSI will recruit and train 100 people to be health literacy trainers. Once trained, each of those 100 trainers will go into their communities and to conduct *at least* 5 health literacy trainings for health professionals. Thus, the health literacy trainers will conduct *at least* 500 health literacy trainings.

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".

Thus, JSI intends to collect customer satisfaction data from participants of the two sets of trainings: (1) a Training of Trainers (ToT) and (2) trainings of health care professionals.

The objectives of data collection are to:

1. Ensure that the training was satisfactory
2. Determine the satisfaction of trainees with training materials
3. Identify aspects of the training that were well received
4. Identify aspects of the training that could be improved
5. Determine the satisfaction of trainees with the trainer's skills

2. Purpose and Use of the Information

Data collection will be used to support these objectives. The data collected from the trainers will

assess trainees' satisfaction with the delivery of the training. Data will be collected through post-training customer satisfaction surveys. Copies of the survey instruments are attached. Participation in evaluation activities will be voluntary for both ToT participants and health professionals.

JSI/BAI staff will use a survey script that will ensure that program participants are aware that participation in evaluation activities is voluntary and the information provided will only be shared internally with members of the project team. The information obtained from the satisfaction surveys will provide important feedback regarding trainees' satisfaction and will provide insight into ways the delivery of HAB's Health Literacy training program and materials could be improved.

The data will be used for the ongoing improvement of training program implementation. Areas identified through the evaluation as best practices or areas of weakness in training delivery will be addressed in future training sessions.

The results of the satisfaction surveys will also be used to enhance future implementations of the training curriculum. Results will also be used by HAB to inform possible future scale-ups or adaptations of the health literacy project.

### 3. Use of Improved Information Technology

The ToT customer satisfaction surveys will be administered online. This modality was chosen because it is consistent with the training delivery (online). Participants will be linked directly to the survey tool at the conclusion of the final training session. One hundred percent (100%) of the ToT customer satisfaction surveys will be completed online. Online administration will also reduce burden by eliminating printing and postage costs. Only the minimum amount of data necessary will be collected from the trainers.

Customer satisfaction surveys for the health professionals' trainings will be conducted at the conclusion of each of the in-person trainings and will be administered on paper in order to reduce the possibility of participant non-response and to decrease the potential for burden that would be associated if participants had to complete the evaluation after the training. Only the minimum amount of data necessary will be collected from the health professionals. Completed surveys will be collected by the trainers and sent to the central JSI/BAI team for analysis.

### 4. Efforts to Avoid Duplication

Data collection on satisfaction with the trainings is essential because the Health Literacy Training Program is a novel endeavor, so satisfaction data have not yet been collected. No other attempts have been made to develop, implement, and/or track satisfaction of a health literacy training program for Black/African American Men Who Have Sex with Men. No similar data collection activities have been conducted to date.

5. Involvement of Small Entities

No small businesses will be involved in this data collection effort. All training participants will register for trainings as self-representing individuals and are not considered small business entities. Only the minimum number of questions will be collected from these individuals.

6. Consequences if Information Collected Less Frequently

If customer satisfaction surveys were to be completed less frequently than once at the end of the ToT and once at the end of each health professional training, one would have to collect data from only a subset of trainees. As this is a novel training program, it is essential to collect information on the satisfaction of all participants so that future endeavors meet the needs of participants and their patients. If customer satisfaction information was only collected from only a subset of training participants, HRSA would not have knowledge of the degree to which different types of health care providers were satisfied with the training or the degree to which the training was appropriate for different regions in the country.

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

In accordance with 5 CFR 1320.8(d), on June 5, 2012, a 30 day notice was published in the Federal Register for HRSA's generic clearance, OMB Control No. 0915-0212 (Vol. 77, Page 33224). No public comments were received.

9. Remuneration of Respondents

Respondents to the ToT customer satisfaction survey will not be compensated for the completion of the survey. However, they will be provided with a \$500 stipend intended to cover costs associated with health professionals' trainings that they will go on to conduct in the future. Receipt of the stipend is not tied to their completion of the post-ToT customer satisfaction survey.

Respondents to the Health Professionals Training customer satisfaction survey will not be compensated for their completion of the survey or for the time spent in the training.

10. Assurance of Confidentiality

To date, the HRSA customer satisfaction surveys have not collected personally identifiable information from respondents. Trainers' names, contact, and demographic (race/ethnicity, gender, sexual identity) information will be known as they are participants of the training program. The names, organizations, emails, phone numbers, race/ethnicity, and gender of health professionals will be collected during registration and this collection of information will fully comply with all aspects of the Privacy Act. Data will be kept private to the extent allowed by law. However, names and contact information for all post-training customer satisfaction surveys

will not be linked to individual or aggregate responses. Responses will be tracked using a confidential identifier.

Participation in any and all evaluation activities is fully voluntary and responses are not linked to the training participant. Respondents will be assured that neither their participation/non-participation nor any responses to items will have an effect on their participation in future HRSA programs.

#### 11. Questions of a Sensitive Nature

The surveys do not contain questions of a sensitive nature, other than the required race and ethnicity questions. Race and ethnicity data will be collected as is required and will provide insight into the cultural identities of program participants, which is relevant given the population of interest.

#### 12. Estimates of Annualized Hour Burden

##### *Respondents:*

Respondents to the ToT training evaluation will include the 100 potential trainers selected from a pool of applicants recruited from RWHAP-funded clinics, federally qualified health centers, AIDS Service Organizations, national partner organizations, and other relevant organizations based on their qualifications as a health literacy trainer for Black/African American MSM.

Respondents to the health professionals training evaluation will be participants of the health literacy training for health professionals. Health professionals may include but are not limited to healthcare support staff, case managers, registered nurses, and physicians

##### *Annual burden estimates:*

The total annual burden expected as a result of the Health Literacy Program Customer Satisfaction Surveys is 225 hours. This estimate is explained in the narrative below and in the Burden Table.

**Online Health Literacy Project Training of Trainers Satisfaction Survey:** We expect a total of 100 respondents to participate in a post-ToT customer satisfaction survey. It is expected that this online customer satisfaction survey will take each respondent 0.25 hours to complete.

**Paper Health Literacy Project Health Professionals Satisfaction Survey:** Each of the 100 trainers will then go on to train at least 5 health professionals. Therefore, *at least* 500 Health Professionals' Health Literacy trainings will occur. Thus, it is expected that *at least* 500 health professionals will complete the post-training knowledge transfer and training satisfaction survey. The annual burden estimate of this table is overestimated in order to account for well-attended trainings and projects that 2500 health professionals will participate in the paper Health Literacy Project Health Professionals Satisfaction Survey and that each response will take 0.08 hours to complete.

##### *Summary of Burden Table*

**Online Health Literacy Project Training of Trainers Satisfaction Survey:** The respondents to this survey will be the trained health literacy trainers. Thus, 100 respondents responding 1 time each at 0.25 hours per response is a total of 25 burden hours.

**Paper Health Literacy Project Health Professionals Satisfaction Survey:** Since trainers will be contracted to provide *at least* 5 trainings each (minimum 500 total), but will be encouraged to train more than 5 health professionals, the burden table has been over-estimated by assuming that each trainer will train 5 times the minimum ( total of 2500 respondents). This burden table assumes an equal distribution of health professionals from each category (500 per category). It is expected that each paper customer satisfaction survey will take each respondent 0.08 hours to complete for a total of 200 burden hours.

**Total:** The total burden hours of all customer satisfaction survey responses is estimated to be 225 hours.

Type of Collection	Number of Respondents	Responses per Respondent	Total Responses	Hours per Respondent	Total Burden Hours	Wage Rate	Total Hour Cost
Online Health Literacy Project Training of Trainers Satisfaction Survey	100	1	100	0.25	25	Health Educator: \$26.57	\$664.25
Paper Health Literacy Project Health Professionals Satisfaction Survey	500	1	500	0.08	40	Healthcare Support: \$13.86/hour	\$554.40
	500	1	500	0.08	40	Case Managers: \$21.75/hour	\$870.00
	500	1	500	0.08	40	Registered Nurses: \$33.55/hour	\$1342.00
	500	1	500	0.08	40	Nurse Practitioners: \$47.11/hour	\$1884.40
	500	1	500	0.08	40	Physicians (Internists, General): \$91.60/hour	\$3664.00
<b>Total</b>	<b>2600</b>	<b>1</b>	<b>2600</b>		<b>225</b>	<b>(see breakout)</b>	<b>\$8979.05</b>

*Planned frequency of information collection:*

This is a one-time project. Responses will be collected one time from each respondent.

13. Estimates of Annualized Cost Burden to Respondents

The only associated cost to respondents is their time to provide the requested information.

The total annual burden expected as a result of the Health Literacy Program Customer Satisfaction Surveys is 225 hours with an estimated cost of \$8978.25. This estimate is explained in the narrative below and in the Burden Table.

#### *Summary of Burden Table*

**Online Health Literacy Project Training of Trainers Satisfaction Survey:** The respondents to this survey will be the trained health literacy trainers. As their role for the purposes of this activity is that of a health educator, the mean hourly wage for a health educator (\$26.57) was used to estimate response burden (BLS, 2014). Thus, 100 respondents responding 1 time each at 0.25 hours per response with an hourly rate of \$26.27 will incur a total hourly cost of \$664.25.

**Paper Health Literacy Project Health Professionals Satisfaction Survey:** As the training will be conducted for health professionals (see above), in order to best estimate the hourly cost associated with response, the line on the burden table has been broken out by position. The 2014 BLS hourly wage rate for healthcare support staff is \$13.86, for case managers is \$21.75, for registered nurses is \$33.55, for nurse practitioners is \$47.11, and for physicians (internists/general) is \$91.60. The average of these average hourly wage rates is \$41.57/hour. This burden table assumes an equal distribution of health professionals from each category (500 per category, 2500 total) will attend the training and complete the survey.

**Total:** The total burden of all customer satisfaction survey responses is estimated to be 225 hours at a cost of \$8979.05.

#### 14. Estimates of Annualized Cost to the Government

It is estimated that data entry will take 0.0833 hours per survey. Given that the total number of expected responses is 2600, the total estimated time for data entry is 216.58 hours. Data analysis activities are expected to take 8 hours.

Given this, the estimated annual cost to the government is \$10,628.01 which includes 12.2% time from two JSI/BAI staff members.

#### 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

The ToT evaluation will occur throughout the three month ToT training period (October – December 2015). The post-training customer satisfaction survey will occur at the end of the last ToT training session. JSI/BAI staff will prepare, organize, and analyze survey responses using the analytic tools available through the online survey platform. Narrative information from the

surveys will be coded, 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.

Health professional training evaluation activities will occur throughout the health professionals' six month training period (January – July 2016). Surveys will be administered on paper by the trainers at the conclusion of each training session. Survey responses will be collected by the trainers and sent to the JSI team. The JSI team will then aggregate and analyze the aggregate survey responses. 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.