**Health Resources and Services Administration**

**SUPPORTING STATEMENT**

**HRSA Office of Regional Operations (ORO) 2016 Tele-Behavioral Health Webcast Series**

**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:

## 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.

One of the biggest barriers to individuals receiving behavioral health services is access, especially in already underserved communities. With a growing trend towards using technology-based interventions to deliver behavioral health treatment and recovery services, it is imperative that HRSA be at the forefront of providing information and training on this topic to healthcare providers.

HRSA’s Office of Regional Operations (ORO) will obtain feedback from participants who attended any of three webcasts for provider organizations about developing or expanding tele-behavioral health services for underserved populations. The webcasts occurred April 14, April 28, and May 19, 2016. The goal of the series was to improve providers’ knowledge and awareness of tele-behavioral health services, provide information on tele-behavioral health that attendees perceive as useful, and ultimately increase the amount of tele-behavioral health services provided by attendee organizations. Feedback will be gathered approximately six months after the webcast series in order to assess mid-term, rather than short-term, effects of the webcast series.

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." Improving agency programs requires ongoing assessment of service delivery, by which we mean systematic review of the operation of a program compared to a set of explicit or implicit standards, as a means of contributing to the continuous improvement of the program. The Agency will collect, analyze, and interpret information gathered to identify strengths and weaknesses of the webcast series and make improvements in service delivery based on feedback. Specifically, we will assess whether attendance at all or part of this webcast series improved attendees’ knowledge about and awareness of tele-behavioral health; assess the degree to which attendees found such content useful; and determine whether or not participation in all or part of the webcast series is correlated with the amount of tele-behavioral health services provided by attendee organizations. Attendees will also have the opportunity to offer insight or opinions on barriers to the initiation, use, or expansion of tele-behavioral health services and any other comments on the webcast or topic area they would like to share. If this information is not collected, vital feedback from customers and stakeholders on the webcast series will be unavailable.

2. Purpose and Use of the Information

The primary use of the information to be collected is to identify how well the webcast series attained its goals of improving providers’ knowledge and awareness of tele-behavioral health services, providing information on tele-behavioral health that attendees perceive as useful, and increasing the amount of tele-behavioral health services provided by attendee organizations. The information collected will be used internally by HRSA staff to determine if a similar webcast series should be offered at a later date and if changes to the webcast series might help to better attain the stated goals. Similarly, information provided on barriers to the initiation, use, or expansion of tele-behavioral health as well as any other feedback on the webcast or topic area that attendees share will be used by HRSA staff to select topics for and/or inform future webcasts on tele-behavioral health in order to ensure we provide effective and relevant training to the field. Finally, survey results may be utilized to assess the nature and extent of future technical assistance needs of HRSA provider organizations. It is likely that regional office staff may be utilized to provide on-site, organization-specific technical assistance based on the information gathered.

3. Use of Improved Information Technology

Information will be gathered via a web-based format, and requests and reminders to complete the survey will be sent to attendees via email.

4. Efforts to Avoid Duplication

The survey is designed to assess the effect of a particular webcast series offered by HRSA. No other organization is collecting information on this activity. Similarly, there is no information on barriers to the initiation, use, and expansion of tele-behavioral health from the provider segment likely to attend a HRSA webcast series. HRSA also has not previously offered providers an open-ended opportunity to offer comments on tele-behavioral health in order to inform future training offerings.

5. Involvement of Small Entities

This activity does not have significant impact on small entities.

6. Consequences if Information Collected Less Frequently

This survey is a one-time evaluation of the relevance, usefulness, and effectiveness of a time-limited webcast series.

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

The notice required in 5 CFR 1320.8(d) was publishedin the *Federal Register* on December 17, 2014, (Vol. 79, No.242, pages 75164). No public comments were received.

9. Remuneration of Respondents

Not applicable.

10. Assurance of Confidentiality

This survey will not collect any PII; participation will be voluntary and responses are anonymous.

11. Questions of a Sensitive Nature

The survey does not contain questions of a sensitive nature.

12. Estimates of Annualized Hour Burden

*Respondents:*

Respondents will be all webcast participants who voluntarily complete the web-based survey after receiving an email requesting their participation in this one-time collection of data. Approximately 300 people participated in the webcast series, so those 300 will be contacted via email for voluntary participation.

*Annual burden estimates:*

The total respondent burden for the one-time web-based customer satisfaction survey is estimated to be 15.03 hours. As mentioned above, 300 people will be contacted to participate. We will plan for a high response rate (approximately 30 percent), to account for the full possible burden to respondents. We expect the survey to take 10 minutes to complete.

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Type of Collection | Number of Respondents | Responses per Respondent | Total Responses | Hours per Respondent | Total Burden Hours | Wage Rate | Total Hour Cost |
| Tele-behavioral Health Webcast Series Evaluation | 90 | 1 | 90 | 0.167 | 15.03 | $51.59[[1]](#footnote-1) | $775.40 |
| Total | 90 | 1 | 90 | 0.167 | 15.03 | $51.59 | $775.40 |

*Planned frequency of information collection:*

This is a one-time collection of data.

13. Estimates of Annualized Cost Burden to Respondents

The only cost burden to respondents is the time to complete the web-based survey.

14. Estimates of Annualized Cost to the Government

Responses to the survey will be reviewed by a team of two senior-level ORO staff in GS13 and GS14 (or equivalent) positions. We estimate that each member of the team will spend five hours reviewing the responses. The hourly rate for a GS13 Step 9 is $55.10 and the hourly rate for GS14 Step 6 is $61.07. The total cost of this five hour review is $580.85 ($55.10 x 5 + $61.07 x 5). We will use a free online survey tool such as Survey Monkey to gather and analyze the responses. For the multiple choice/Likert scale questions, the online survey tool will calculate the number of responses per answer choice, making it easier for the ORO staff to review responses in the aggregate.

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 web-based evaluation of the webcast series will be available approximately six months after the last webcast session. The survey will be open for two weeks. Once the survey closes, ORO staff will review responses in order to ascertain whether additional offerings similar to this webcast series would be beneficial to the field. Similarly, ORO staff will review responses to the open-ended questions to identify areas of need or interest for future tele-behavioral health focused webinars.

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.

1. The wage rate used here is the average of the mean estimated wage rates of the four professions most likely to attend the webcast series: Physicians/Surgeons ($97.33), Registered Nurses ($34.14), Social Workers ($23.88), and Medical and Health Services Managers ($50.99). The mean estimated wage rates used are from the U.S. Department of Labor, Bureau of Labor Statistics: <http://www.bls.gov/oes/current/oes_nat.htm>, accessed April 20, 2016. [↑](#footnote-ref-1)