



OPAE Data Survey

Dear HHS Stakeholder:

You have been selected as part of a limited group of respondents to answer questions about your interactions with Operational Divisions (Op-Divs) of the U.S. Department of Health and Human Services (HHS). To ensure that a sufficient amount of meaningful data are collected as a part of this process, we are asking for your kind assistance in helping us understand how stakeholders like yourself both view your interactions with HHS and the services which it provides as partners.

This survey is part of "Reimagine HHS", a Department-wide optimization effort. Responses will thus be used to assess regional performance to ensure that stakeholder/customer needs and expectations are met and exceeded.

We require your assistance so that we can offer effective programs and resources that serve the American people. By completing this assessment to provide information, you will be assisting HHS in potentially modifying its programs and services to be both more efficient and effective. Participation is voluntary, of course, and there are no risks associated with lack of participation.

We assure you that your responses to this questionnaire will be kept completely confidential, and that your contact information will not be stored with any survey responses. All data analysis and reporting of the results from this questionnaire will not include personally identifiable information. Your completion of this questionnaire is completely voluntary and you may decline to answer any particular question.

The assessment takes approximately 10-15 minutes to complete. Please take this opportunity to help HHS ensure the best possible programs services by completing this assessment no later than February 28, 2019.

Thank you for your help.

Privacy Advisory

The results of this survey will be used by HHS to report on the regional program effectiveness and make decisions on how to improve the stakeholder relationships.

Your participation in this survey is voluntary and you may decline to respond to any question. Your name will not be collected in this survey. Your response to this survey will not be identified to you, will remain confidential and will not be used in a manner that could identify you in the future.

OK

1. What HHS Division do you regularly interact with ?

- NIH
- CMS
- HHS
- ACF

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2. How often do you interact with HRSA?

- Daily
- Weekly
- Monthly
- Quarterly
- Annually
- Less than once per year

3. By what means do you interact with HRSA?

- In person
- Via Phone
- Electronically

4. What other HHS Divisions do you interact with, other than HRSA?

- Administration for Children and Families (ACF)
- Office of Intergovernmental and External Affairs (IEA)

4. What other HHS Divisions do you interact with, other than HRSA?

- Administration for Children and Families (ACF)
- Administration for Community Living (ACL)
- Assistant Secretary for Preparedness and Response (ASPR)
- Agency for Toxic Substances and Disease Registry (ATSDR)
- Centers for Medicare and Medicaid Services (CMS)
- Health Resources and Services Administration (HRSA)
- Office of Intergovernmental and External Affairs (IEA)
- Office of the Assistant Secretary for Health (OASH)
- Office for Civil Rights (OCR)
- Office of the General Counsel (OGC)
- Substance Abuse and Mental Health Services Administration (SAMHSA)
- I do not interact with HHS Divisions other than HRSA

OK

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5. Do you believe that there is effective coordination between the HHS Divisions that service you?

Yes

No

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NEXT

6. Please indicate the degree to which you agree or disagree with the following statements about HRSA.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
The HRSA staff are helpful.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with my access to the HRSA staff.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The information provided by HRSA is useful.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with the amount of communication received from HRSA.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. Please indicate the degree to which you agree or disagree with the following statements about HRSA.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
I know the main points of contact at HRSA and how to reach them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understand all of HRSA's programs that are relevant to me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am aware of the schedule, timeline, and deadlines I need to follow to get what I need from HRSA.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I know how to overcome obstacles when they arise with HRSA programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. Please indicate the degree to which you agree or disagree with the following statements about HRSA.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
I have difficulty contacting HRSA staff (including leaders and officials).	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The HRSA supports me in the way that I need.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The HRSA shows interest in my goals.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The HRSA is very organized.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
I often need to duplicate effort to get things done with HRSA.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. Please indicate the degree to which you agree or disagree with the following statements about HRSA.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
Working with HRSA has improved relationships with my stakeholders.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My partnership with HRSA has improved efficiency of my operations.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
HRSA support enables me to effectively accomplish my program goals.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My work with HRSA has led to increased collaboration with my other partners.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

10. Please rate how valuable it is for HRSA to provide support. [Bookmark this page \(Ctrl+D\)](#) [reas.](#)

	1	2	3	4	5	6	7	8	9	10
Emergency Prevention & Response	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Technical Assistance	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Collaboration & engagement	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge sharing	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Understanding whom to report to	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program consistency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Establishing partnerships	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tapping specialized expertise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Addressing opioids and substance abuse	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Assisting with issues in Native American Health	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Environmental health and hazardous substances	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental health services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Legal counsel	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Civil rights enforcement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medicaid	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. How can HRSA improve engagement with you? Please add any additional comments you would like to share about your experiences with HRSA.

Thank you for reviewing this survey!

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PREV

SUBMIT



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