

Indian Health Service

Mashpee Wampanoag Health Service Unit Community Health Assessment

Supporting Statement B

Justification

OMB Control No. 0917- XXXX

Please see responses below for Part B: Supporting Statement for Community Health Assessment Program Application

B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS

1. Respondent Universe and Sampling Methods

The respondents will be Mashpee Wampanoag Tribe's community members. The Tribe has 2,882 members and within our five Contract Health Service Delivery Area's (CHSDA's) are the people we service. They are located in Barnstable, Plymouth, Bristol, Norfolk and Suffolk County with the furthest approximately 1.5 hours from the Service Unit.

As of May of 2018, we have 1580 patients registered in our Electronic Records with 1,081 patients' ages 18 to 65 years in which 568 of them are Female and 513 are Males. As a direct service, we are allowed to accept all Native Americans from Federally recognized Tribes and have approximately 60 that have visited in the last six months. It will be the 1,081 patients that we sample through a proposed simple stratified method.

Participation is expected to be moderate (30% or greater) and the respondent refusal rate is expected to be minimal because IHS provides health services on a regular basis.

2. Procedures for the Collection of Information

All samples collected during this survey are convenience samples. The survey will be administered to Mashpee Wampanoag Tribal members ages 18 through 65 and for male and female respondents. These respondents will be the population serviced by the service unit. The survey will be voluntary and will use a simple stratified method. Out of 100 respondents, we presume that 30 will

respond. Total sample size is 324.

We plan to divide the patient population by gender into male and female subgroups. Then randomly select the final subjects proportionally from the different strata. It will be the responsibility of the selected vendor to implement the proposed plan. We will have people fill out the surveys during office visits via electronic access through purchased tablets or an accessible computer. Each gender subgroup will have a sample size of 162. Through, Systematic Random Sampling we plan to:

1. Pick an integer that is less than the total number of the population for example 3
2. Select another integer which will be the number of individuals between patients for example 5
3. Our patient surveys will be patients 3, 8, 13, 18, 23 and so on.

The procedures for collecting data for the IHS Mashpee Community Health Assessment (CHA) Survey will be done by survey monkey in person, prior to or after going into the patient visit . The survey will serve as a snapshot of current and potential status of health and satisfaction.

To analyze the survey, IHS Mashpee plans to hire a contractor. Each program in the service unit will be sent a letter. The letter will introduce the survey, explain the need for it, indicate the importance and advantages of participation, and briefly outline the data collection procedures. The email and letter will explain the purpose of the Community Health Survey (CHA) survey, highlighting the benefits to the community and alert individuals on the dates and times to expect distribution access of the survey in Mashpee. The email and letter will include a statement of support from the Mashpee Wampanoag's Health and Human Services Liaison on the Tribal Council.

These efforts will improve communication and commitment between staff and the respondents, and help to ensure the respondents understand the survey.

3. **Methods to maximize Response Rates and Deal with Nonresponse**

Survey monkey will be set-up so that respondents can remain anonymous with their answers, so no PHI/PII will be included in the survey. The survey cannot assure no duplication and analysis method includes that error.

IHS would be contracting the survey company and addressing survey nonresponse issues through the hiring of skilled principal investigators, evaluators, and researchers to address both unit and item nonresponses.

4. **Tests of Procedures or Methods to be Undertaken**

Survey questions are derived from the 2002 Mashpee Wampanoag Tribe Community Health Survey questions have been modified because the population is small and we want to protect privacy so we have modified the initial questions that may identify the respondent. An initial draft of the survey was shared with a group of five tribe members with knowledge of community health concerns. The tribe members were asked to review the survey and consider whether the questions addressed major community health concerns. Based on feedback, questions were added to the survey to include community health issues such as transportation to medical care, substance abuse and mental health. Questions as stated have since been modified because the population size is small and we want to comply with privacy laws and protect respondents.

5. **Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data**

Rita Gonsalves RN, MM
CEO Mashpee Wampanoag Health Service Unit (MWHSU)
NCCEO-Secretary
MWHSU

Kristina Rogers, MMI, CPC, CPMA, CPC-I
Nashville Area Indian Health Service
Statistical Officer/GPRA Coordinator
ICD-10 Coordinator (Certified ICD-10 Trainer)

Ralph W. Ketcher, Jr.
Director, DEAA
Chief of Contracting Office
711 Stewarts Ferry Pike
Nashville, TN