RWHAP SPNS Linkages Study: Data End-User Survey

*Public Burden Statement: This data collection will provide HRSA HAB with a better understanding of the RWHAP SPNS Enhancing Linkage of STI and HIV Surveillance Data Technical Assistance program. Information gathered will provide HRSA with an understanding of the extent and impact of the TA provided, barriers and facilitators RWHAP jurisdictions face, and opportunities for improvement and lessons learned. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0906-XXXX and it is valid until XX/XX/202X. This information collection is voluntary. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.*

**INTRODUCTION**

Thank you for your willingness to complete this survey. You have received this survey because you were identified as someone who uses data or information from HIV surveillance, STI surveillance, and/or Ryan White data systems for your work. The Health Resources and Services Administration (HRSA) funded Georgetown University (GU) to provide technical assistance (TA) to your jurisdiction to help these data systems talk to each other. The purpose of this survey is to gather information about your use of these data systems.

The information you provide will inform HRSA about how their programs and services are working. This survey is voluntary and your answers will be kept confidential. The survey should take less than 10 minutes to complete.

We greatly value your insight and hope you share your experiences with us!

**Survey note**: for the purposes of this survey we use the term “STI” to mean sexually transmitted infections other than HIV, such as chlamydia, gonorrhea, and syphilis.

1. In the past 12 months, which data systems have you used to do your work?
* HIV surveillance system (such as eHARS)
* STI surveillance system (such as MAVEN, PRISM, or NBS)
* Ryan White data system (such as CAREWare)
* Data to Care system
* Reportable diseases (TB, hepatitis) surveillance system (such as NEDDS)
* Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* I have not used any data systems to do my work in the past 12 months 🡪 GO TO #3
1. Which of these data systems, if any, talk to each other or allow for data matching?
* HIV surveillance system talks to STI surveillance system
* HIV surveillance system talks to Ryan White data system
* STI surveillance system talks to Ryan White data system
* HIV surveillance system, STI surveillance system, and Ryan White data system all talk to each other
* Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the data systems I use talk to each other
* Don’t know
1. In the past 12 months, have you received any training on how to use HIV surveillance, STI surveillance, Ryan White, or other data systems to do your work? Please consider all types of trainings, including webinars, group training sessions, demos, and manual-based training.
* Yes
* No 🡪 GO TO #4

3a. If yes, about how many hours did this training take? \_\_\_\_\_\_\_\_\_\_\_

1. In the past 12 months have you trained others on how to use HIV surveillance, STI surveillance, Ryan White, or other data systems to do their work?
* Yes
* No 🡪 GO TO #5

4a. If yes, about how many hours did you spend training others in the past 12 months? \_\_\_\_\_\_\_\_\_\_\_

1. In the past 12 months have you electronically matched or linked data from HIV surveillance, STI surveillance, Ryan White, or other data systems?
* Yes
* No 🡪 GO TO #6

5a. If yes, in a normal work week, what percent of your time is spent matching or linking these data? \_\_\_\_\_\_\_\_%

The following questions ask about your use of data that is matched or linked across more than one data system. This includes matched HIV and STI surveillance data or surveillance data matched with Ryan White data. Please only think about matched data when answering the following questions.

1. In the past 12 months, have you used data that is matched across more than one data system?
* Yes
* No 🡪 GO TO #8
* Don’t know 🡪 GO TO #8
1. In the past 12 months, have you used matched data for any of the following activities? Please select all that apply.
* Conduct outreach to clients or their partners
* Follow up with *providers or clinics* about clients who are out of care
* Create reports (including lists, logs, or data tables) or other products
* *Design* data tables, dashboards, visualizations, or reports
* Provided feedback on reports (such as tables, dashboards, or lists) that use matched data

[\**FOR ANY CHECKED ITEM IN THE LIST ABOVE, RESPONDENT WILL GET A SEPARATE FOLLOW UP QUESTION*: In a normal work week, what percent of your time is spent using matched data to [*INSERT ACTIVITY FROM LIST*]? \_\_\_\_\_\_\_\_%]

* I did not directly use matched data, but I supervise staff who do.
* I did not use matched data for any of these activities in the past 12 months.

7a. [*ANSWER ONLY IF RESPONDENT CHECKED “Conduct outreach to clients or their partners” or “Follow up with providers or clinics about clients who are out of care” in #7*] For which activities, if any, did you use matched data in the past 12 months? Please select all that apply.

* To identify or offer STI testing to people with HIV
* To identify or offer HIV testing to people with an STI
* To refer clients for partner services/notification
* To identify clients to offer STI treatment
* To link people with HIV to medical care
* To re-engage people with HIV with medical care
* To get people with HIV prescribed antiretroviral treatment (ART)
* To follow up with providers to link or re-engage patients in medical care
* To make referrals to other programs or services
* To pull data that others use for follow up
* To investigate potential clusters of HIV infection
* For another activity, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate how much you agree or disagree with the following statements about the data systems you use to do your work. Please think about all the data systems you use, on average, when answering these questions.

|  | Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- | --- |
| 1. The data systems I use contain *accurate* information.
 | O | O | O | O | O |
| 1. The data systems I use contain *complete* information.
 | O | O | O | O | O |
| 1. The data systems I use contain *up-to-date* (or timely) information.
 | O | O | O | O | O |
| 1. The information I receive from these data systems is *easy to understand* and interpret.
 | O | O | O | O | O |
| 1. The information I receive from these data systems is *useful*.
 | O | O | O | O | O |
| 1. Data quality has substantially *improved* in the past 12 months.
 | O | O | O | O | O |

1. Does your Department give you an opportunity to provide feedback on the data you receive from HIV surveillance, STI surveillance, Ryan White or other systems? This might include providing input in an open forum or meeting, or by a formal process.
* Yes
* No
* Don’t know

14a. Please describe the opportunities you have to provide feedback on the data you receive from HIV, STI, Ryan White, or other systems. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

<END OF SURVEY>

Thanks for your participation! Your input is greatly appreciated!!