



**Supporting
Statement for OMB
Clearance Request**

**Attachment V:
Phone-based Skills
Assessment Pilot
Participant Letter**

**National and Tribal
Evaluation of the 2nd
Generation of the Health
Profession Opportunity
Grants (HPOG)**

0970-0462

April 2019

Submitted by:
Office of Planning,
Research & Evaluation
Administration for Children & Families
U.S. Department of Health
and Human Services

Federal Project Officers:
Nicole Constance, Hilary Bruck, and
Amelia Popham



DATE

Dear <First Name> <Last Name>,

Thank you for agreeing to participate in the National Evaluation of the Health Profession Opportunity Grants (HPOG) Program. When you applied to participate in <PROGRAM NAME> in <Site> you agreed to be part of a voluntary research study. The study is being funded by the Administration for Children and Families (ACF), which is part of the U.S. Department of Health and Human Services (HHS). Abt Associates, an independent research company, is conducting the study for ACF.

Right now, researchers at Abt are developing a survey questionnaire for the study. We want to make sure the questions are clear and easy to answer. One of the ways we can check this is to try out the questions on a few study participants.

Our contacts at [PROGRAM NAME] gave us your name as someone who expressed interest in helping us with this task. Since the survey will be done by phone they provided us with your phone number and address. The survey will include questions on your education activities, some basic questions about your use of computers, and some multiple choice questions on various topics. It will take about 45 minutes to complete. **[IF RESPONDENT HAS A VALID EMAIL ADDRESS:** About 4 weeks after you complete the survey you will receive an email with a unique link. This email link will allow you to choose a \$25 gift card to one of the selected vendors. **IF RESPONDENT DOES NOT HAVE A VALID EMAIL ADDRESS:** About 4 weeks after you complete the survey you should receive instructions to redeem your \$25 electronic gift certificate in the mail.]

Interviewers from Abt Associates will be conducting interviews between [PILOT START DATE] and [PILOT END DATE]. An interviewer may call you to explain more about the survey and to schedule an appointment to complete the interview if you are still available and willing to participate.

Please know that your participation is voluntary. If you decide to participate, you can choose not to answer any question in the interview. Any information you provide to us will be kept private. Your name will not be associated with your answers or used in any reports we produce. Once we are done designing our survey and publishing our results, your responses will no longer be needed and they will be destroyed at that time. If you have any questions or would like to schedule your interview, please call 866-725-1562.

Sincerely,

Brenda Rodriguez, Abt Associates Survey Director

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