

B Collection of Information Employing Statistical Methods

B.1 Respondent Universe and Sampling Methods

Introduction

This Paperwork Reduction Act (PRA) request is to conduct a cross-sectional survey of OAA service recipients.

We will employ a two-stage sample design for the 15th National Survey of Older Americans Act Participants (NSOAAP). The following sections discuss the respondent universe and sampling methods.

Baseline Respondent Universe

For the first stage of the sample design, we will select a probability sample of AAAs proportional to size (PPS) of the total number of clients (actual and predicted) in each stratum, where stratum is defined by Census Division. The Census Divisions are as follows:

Census Division
1 (New England)
2 (Middle Atlantic)
3 (East North Central)
4 (West North Central)
5 (South Atlantic)
6 (East South Central)
7 (West South Central)
8 (Mountain)
9 (Pacific)

As a result of the 14th NSOAAP, client counts are available for 581 out of the 628 AAAs in the sampling frame, covering approximately 92.5% of the AAAs. We were able to predict the total client counts for those AAAs for which we did not have prior data using regression modeling, where the square root of the AAA budget and Census Division were used as predictors.

When selecting AAAs for the 15th National Survey, Westat will select a sample of AAAs large enough to recruit 350 Area Agencies on Aging. The second stage is the selection of a random sample of service recipients by service within each sampled AAA, including all of the largest ones. In this way all service recipients will have a known probability of selection. A fixed number of service recipients will be selected within each service for a total of 6,600 recipients. It is important to note that clients are sampled independently by service and no client will be asked to participate for more than one service. Further if a client happens to be sampled for more than one service, the client will be assigned to a single service at random.

Exhibit B-1 on the next page presents the respondent universe for each module proposed for the 15th National Survey of Older Americans Act Participants (NSOAAP).

Exhibit B-1. Respondent Universe

Service Recipient Survey

PERFORMANCE MEASURES	INDICATOR	TARGET POPULATION OF PARTICIPANTS
Congregate Meals Module	Questions on nutrition intake, nutrition risk, food security and clients' assessments of the Congregate Meals program.	All service recipients receiving Congregate Meals services
Home-delivered Meals Module	Questions on nutrition intake, nutrition risk, food security and clients' assessments of the Home-delivered Meals program.	All service recipients receiving Home Delivered Meals
Transportation Module	Questions on client's experience and assessment of transportation services.	All users of Transportation Services
Case Management Module	Questions on clients' experiences and assessments of case management services.	All service recipients receiving Case Management services.
Homemaker/Housekeeping Module	Questions on clients' experiences and assessments of homemaker/housekeeping services.	All service recipients who receive Homemaker/Housekeeping Services
Caregiver Support Module	Questions on clients' experiences and assessments of caregiver support services.	All service recipients who receive Caregiver Support Services
Additional Services List	Questions asking service recipients if they receive other OAA services.	All service recipients. Caregivers will be asked about services received by their care recipients.
Physical Functioning Module	Revised Katz Activities of Daily Living (ADL) Scale and Quality of life measures from the Behavior Risk Factor Surveillance System (BRFSS) questionnaire.	All service recipients, with the exception of Caregivers; Caregivers will be asked these questions about their care recipients.
Emotional Well-Being Module	Questions on mood and affect from prior surveys of older adults.	All service recipients, except Caregivers.
Social Functioning Module	Degree of satisfaction with social activity and of health effects on social activities.	All service recipients, except Caregivers.
Falls Module	Questions ask about falling and losing one's balance.	All service recipients and Caregivers.
Social Integration Module	Questions about contact with other people and perception of social isolation.	All service recipients, except Caregivers.
Life Changes Module	What life event prompted client to seek out services.	All service recipients, except Caregivers.
Demographic Information Module	Demographic Information	All service recipients and Caregivers.
Annual Rotating Module		
PERFORMANCE MEASURES	INDICATOR	TARGET POPULATION OF PARTICIPANTS
COVID-19 Module (2021)	Questions ask about the effect COVID-19 has had on older adults' access to and use of Older Americans Act programs and services during the past year.	All service recipients and Caregivers.

Response Rates from other National Surveys of Older Americans Act Participants

This is the 15th time this type of survey will be conducted. This OMB approved survey (0985-0014, 0985-0017, 0985-0020, 0985-0023) was done in 2002, 2003, 2005, 2008, 2009, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, and 2019. The research team anticipates an 80 percent response rate for AAAs given the 81% AAA response rate in the 14th NNOAAP, and an 80 percent cooperation rate for the telephone survey of respondents, based on the success we had with the preceding 14 surveys.

Response rates are calculated by taking the ratio of the number of completed interviews to the number of eligible units (this includes completes and non-respondents). Non-response occurs for a variety of reasons, including, for example, being unwilling to participate, unable to locate respondents, and language issues. In the case of surveys conducted by telephone, such as NSOAAP, potential respondents may have difficulty communicating by phone, another instance of nonresponse. The U.S. Census Bureau defines the following: “**Unit nonresponse** occurs when respondents are unable or unwilling to participate; interviewers are unable to locate addresses or respondents; or when other barriers exist to completing the interview.”¹

In NSOAAP, we often refer to completion rates because of our experience in locating and contacting potential respondents. Members of the NSOAAP target population frequently have changes in status, such as relocating to be closer to family members, moving into assisted living or nursing facilities or other such changes. These changes can occur between the time the client lists are created and attempts are made in the field to contact the individuals. Completion rates are calculated by excluding records for whom no contact was ever established, for example, the not-locatable and not resolved cases from the non-respondents.² In a survey like NSOAAP the completion rate may be a more accurate measurement of the degree of success in collecting data which are representative of the population of service clients.

¹ <https://www.census.gov/programs-surveys/acs/methodology/sample-size-and-data-quality/response-rates-definitions.html>

⁵ <https://www.insightsassociation.org/issues-policies/best-practice/casro-definition-response-rates>

B.2 Procedures for the Collection of Information

B.2.1 Introduction

Several data collection activities will be conducted to support the survey. They are designed to ensure as complete a sample of AAAs (stage one) and service recipients (stage two) as possible. This will provide a representative sample for the analyses and to inform ACL/AoA on results of performance measures for state and community programs on aging under the Older Americans Act.

B.2.2 Data Collection Procedures

B.2.2.1 Telephone Contact with State and Local Agencies on Aging

Information will be collected in a two-step process. The proposed design will employ a probability sample of all AAAs proportional to size (PPS) of the total client counts per AAA. Once an agency is selected, its director will receive an email message from ACL that contains an introductory letter from ACL, an invitation to participate in an orientation webinar, and detailed instructions for the AAA (see Appendices H & I)⁶. Approximately two weeks later, state and AAA staffs will be able to participate in a live webinar to learn about the importance of the survey and how the procedures for selecting clients will work. ACL will also post a recording of the webinar for state and AAA staffs who are unable to participate during the live webinar. For AAAs that do not respond to the initial email from ACL or participate in the webinar, a researcher will reach out to the agencies to address any concerns that they might have and to review instructions for sampling the service recipients. The researcher will explain the numbered participant lists the agency needs to generate from which to select the random sample of service recipients for each of the six services. In addition, we will provide detailed instructions specific to the client tracking software used by the AAA. Previous experience has enabled Westat, the contractor, to streamline the data collection procedures for the AAAs.

B.2.2.2 Telephone Survey of Older Americans Act Participants and Caregivers

Pre-notification Advance Letters

Potential respondents selected for the telephone interview will receive a letter from ACL. The letter contains an introduction to the study, explanation about the nature of participation, and a toll-free phone number to call if they do not wish to participate. Those who opt out of the study are not contacted further. A separate toll-free phone number is included for respondents who wish to reach a telephone interviewer directly, and take the survey at their convenience. A copy of this letter is included in Appendix F].

⁶ State units also receive a letter with a list of AAAs selected in the state.

Telephone Interview

Interviewers participate in intensive training sessions prior to data collection and are monitored during data collection to ensure the protocol is properly followed. The training covers general interviewing techniques, topics specific to administering the 15th National Survey of Older Americans Act Participants, and practice sessions.

The study sample includes older adults who may be living with disabilities. With that in mind, the training designed and conducted for the data collectors/telephone interviewers includes special guidance for interviewing and accommodating respondents who are age 60 or older and who may have disabling conditions and/or communication problems (hearing impairments, speech disorders, cognitive impairments, memory disorders, non-native English speakers.) In certain instances, an interview with an interpreter or a proxy is arranged. Additionally, data collectors are advised to be alert to the respondent's fatigue and to suggest calling back and completing the interview during another session. For Spanish-speaking respondents, trained bilingual data collectors conduct the interview in Spanish.

Interviewers will conduct a 45-minute telephone survey of a representative sample of Older Americans Act service recipients and caregivers. The interview includes modules for each service (e.g., home delivered meals, congregate meals, case management, caregiver, transportation, and homemaker) as well as modules that are the same for all services on demographics, physical functioning, and quality of life. Additionally, a module on COVID-19 will be asked of all respondents for the 2021 survey. Interviewers administer the appropriate service module (i.e., the module that focuses on the service from which the participant was sampled.)

The service modules include items on the extent to which the respondents use the service, consumer assessment of services, and self-reported outcomes, such as the ability to live independently at home. The demographic module identifies age, living arrangements, race/ethnicity, and income categories. The module on physical functioning identifies the extent to which respondents are able to care for themselves (e.g., bathe dress, eat, etc.) and are able to handle paying bills, going to the doctor, and grocery shopping, for example.

Quality Control Procedures

Westat has quality control procedures in place for every phase of the project. Interviewers participate in rigorous training that includes general interviewer training and project specific training. Trainers observe interviewers conducting practice interviews, and they monitor interviewers during data collection. During data collection, data are checked to ensure that there are no outliers in the dataset. In addition, when questions are raised during an interview, interviewers complete a form documenting an ambiguous or inconsistent response. Researchers review the forms and make any necessary adjustments.

B.2.3 Sampling Plan

B.2.3.1 Sample Design

The sample design for the 15th survey will consist of two stages, with a sample of approximately 350 AAAs in the first stage and a sample of clients, by service type, from each selected AAA, in the second stage. This design is similar to that of the 3rd-14th surveys. The client sample sizes by service type, as specified by ACL, are as follows:

As in the 3rd through 14th surveys, these sample sizes will permit the production of reliable estimates both at the national level and at the geographic regional or demographic sub-group level.

For a two-stage design, Table B-1 presents the half-widths of the 95 percent confidence intervals (CI) for various sample sizes and for cross-sectional estimates of target characteristics of proportions ranging from 10 percent to 50 percent.⁷ The 50 percent target is a worst-case scenario, where respondents are expected to be fairly evenly split on a particular response item, limiting the reliability of the estimate (e.g., such as trying to predict the outcome of an election where the sample of voters is about evenly divided between two candidates). Also, the precision of any estimate greater than 50 percent is the same as that of its complement, i.e., the precision of a 70 percent estimate is the same as the precision of a 30 percent estimate. The numbers in the tables are half-widths of 95 percent CIs, (i.e., the estimate, \pm the half-width is the CI, where half-width is 1.96 times the standard error (SE) of an estimate). For example, Table B-1 shows that for a sample of size 1,000, for a target characteristic of around 30 percent, the CI would be the estimate \pm 3.24 percent.

The table can be used to assess the adequacy of the sample sizes for both the national, and the regional or sub-group level estimates. For example, if the sample size is 1,000 at the national level then the sixth row in Table B-1 would provide the precision of the estimates at the national level. From the same table, the precision of an estimate at the regional or sub-group level can be obtained by computing the sample size that is expected for a particular region. For instance, if the region covers 25 percent of the target population, then the sample size for that region is expected to be about 250 (out of 1,000) under a proportional allocation, and the precision of the estimates for that region can be checked from the row where the sample size equals 250 in Table B-1. Similarly, if a sub-group covers 10 percent of the target population then the expected sample size for that sub-group is 100 out of 1,000 and the precision of the estimates for that sub-group can be checked from the row with sample size equal 100.

⁷ This percent range refers to the client response patterns that may occur; for example, in a yes/no question, it refers to the expected percent of respondents who will answer yes, versus no.

The total size of the target population has a negligible impact on the requirement of the sample size. For example, if a sample size of 250 is required to produce an estimate at the national level, then to estimate the same characteristic for a particular region (with the same level of precision), the required sample size from that region alone would be about 250. If there are four regions, then the required sample size at the national level would be about 1,000 (to guarantee adequate representation in each group). Therefore, to meet the objective of the proposed survey (i.e., to produce estimates at the regional or sub-group level with the same level of precision as the national estimates obtained from previous studies), the required sample size for each target region or sub-group will have to be the same as the total sample size of the previous studies.

For instance, a question was asked in the first national survey about the timeliness of the delivery of meals and an estimated 44 percent of all clients reported that the meals arrived on time, all the time. This estimate was based on a sample of 472 clients and had a CI of ± 5.2 percent. Table B-1 shows that to achieve a CI of ± 5.2 percent for an estimate, with a proportion between 40 percent and 50 percent, a sample of size around 480 is required. That means if this estimate is required at the regional level with the same level of confidence as the national, then the sample size in each region will have to be 480 and hence the sample size at the national level will be $480 \times 4 = 1,920$. In that case, the CI for this estimate at the national level would be much more precise than for the region (a little over ± 2.5 percent). Table B-1 can be used to see the precisions of the estimates that would be achieved at various levels using the expected sample sizes at the respective levels. The table can also be used to check the sample size requirement corresponding to a desired level of precision of an estimate.

Table B-1 Half-widths of 95 percent confidence intervals by various sample sizes and estimates of target characteristics (computed for a two-stage design with a design effect of 1.30)

Sample size	Estimates of Target Characteristics				
	10 percent	20 percent	30 percent	40 percent	50 percent
3,500	1.13	1.51	1.73	1.85	1.89
3,000	1.22	1.63	1.87	2.00	2.04
2,500	1.34	1.79	2.05	2.19	2.23
2,000	1.50	2.00	2.29	2.45	2.50
1,500	1.73	2.31	2.64	2.83	2.89
1,000	2.12	2.83	3.24	3.46	3.53
750	2.45	3.26	3.74	4.00	4.08
500	3.00	4.00	4.58	4.90	5.00
400	3.35	4.47	5.12	5.47	5.59
300	3.87	5.16	5.91	6.32	6.45
250	4.24	5.65	6.48	6.92	7.07
200	4.74	6.32	7.24	7.74	7.90
100	6.70	8.94	10.24	10.95	11.17

It is important to note that if the population sizes in the sub-groups or regions vary widely, then the national sample must be allocated appropriately to produce estimates from all individual sub-groups/regions with an equal level of precision. Otherwise, under a proportionate allocation, larger sub-groups will have more than required sample size while the smaller sub-groups will have less than the sample size required. For example, if the estimates are required separately for Whites and African-Americans, then just increasing the national sample would not ensure sufficient sample size for African-Americans, because less than 15 percent of recipients are African-Americans for many services. In this situation, the national sample can be disproportionately allocated by over-sampling smaller sub-groups to ensure that sufficient samples are drawn from all target sub-groups. However, over-sampling an ethnic or demographic group will require that agencies first list all their clients with the characteristic of interest and then select a sample from this list by sub-group (which may exceed the capacity of many AAA information systems).

B.2.3.2 Sample Size for Estimation of Change

If there is interest in comparing estimates from one year with another year (cross-sectionally) , or comparing estimates of one sub-group with another sub-group, the sample size requirements are different from those that show individual point estimates at the same level of precision. The standard error (SE) of the difference between two independent estimates (for example, A and B) can be obtained by

$$SE(A - B) = \sqrt{SE^2(A) + SE^2(B)} , \text{ and the half-width of the 95 percent CI is } 1.96 \times SE(A - B)$$

Since the variance of the estimate (of a difference between estimates) is the sum of the variances of the relevant individual estimates, the required sample size for estimating a difference or change is higher than for a single point estimate.

Table B-2 presents half-widths of 95 percent CIs under a two-stage design for various sample sizes and various averages of the two estimates to be compared. For example, if the average of the two target characteristics to be compared is around 30 percent (for example, A=25 and B=35) and the sample size in each sub-group is 500, to detect a difference between the two sub-groups with statistical significance, the actual difference between the two sub-group characteristics will have to be at least 6.48 percent. This is much higher than the corresponding half-widths presented in Table B-1 for each of the individual estimates. That means a sample size that is sufficient to produce a reliable point estimate for each sub-group, individually, is not necessarily sufficient to detect the difference between the two sub-groups with the same level of precision.

Therefore, if the survey is designed for use at a region or sub-group level, then the corresponding national estimates can be compared meaningfully from one year to another, or for one service versus another (e.g., the percent of each service's clients below a certain income level). For example, if the sample size is 1,000 in each year, and if the average response proportion for the two target characteristics is around 30 percent, then a difference of 4.58 percent or more between the years is detectable. The corresponding comparison with a sub-group sample of size 500, would not allow detecting a difference unless it is 6.48 percent or more.

Table B-2 can be used to see the extent of difference that can be detected under a two-stage design, for various sample sizes, and for various characteristics to be compared either at the national or at the sub-group level.

Table B-2 Half-widths of 95 percent confidence intervals for the difference between two estimates by various sample sizes and for various averages of the two estimates (computed for a two-stage design with a design effect of 1.30)

Sample size in each group	Average of the estimates to be compared				
	10 percent	20 percent	30 percent	40 percent	50 percent
3,500	1.60	2.14	2.45	2.62	2.67
3,000	1.73	2.31	2.64	2.83	2.89
2,500	1.90	2.53	2.90	3.10	3.16
2,000	2.12	2.83	3.24	3.46	3.53
1,500	2.45	3.26	3.74	4.00	4.08
1,000	3.00	4.00	4.58	4.90	5.00
750	3.46	4.62	5.29	5.65	5.77
500	4.24	5.65	6.48	6.92	7.07
400	4.74	6.32	7.24	7.74	7.90
300	5.47	7.30	8.36	8.94	9.12
250	6.00	8.00	9.16	9.79	9.99
200	6.70	8.94	10.24	10.95	11.17
100	9.48	12.64	14.48	15.48	15.80

Nonresponse adjustment was done as part of the weighting process for the previous surveys and will also be done for the 15th National Survey. The weights of the respondents were inflated to account for the weights of the nonrespondents separately for each service. The adjustment was applied independently within nonresponse adjustment groups defined by census region within service. That means the nonrespondents within a group are represented by the respondents in the same group. The same types of nonresponse adjustment will be done for the 15th survey.

B.2.4 Older Americans Act Participant Survey Instruments

The survey consists of telephone interviews with service recipients and caregivers. The interview is structured and will contain specific questions about the mix of services the person has received and his or her assessment of those services. Whenever appropriate, questions will contain predefined categories. Probes will be used to facilitate obtaining complete responses to all the questions. The interviews of caregivers will not include the questions that ask for physical functioning (except health conditions and ADL and IADL limitations of their care recipients) nor the Emotional Well-being and Social Functioning questionnaires. The interviews will last approximately 45 minutes and cover the topics discussed below. This is the same process followed for each of the previous surveys.

1. **Nutrition-Congregate Meals:** If a respondent receives Congregate Meals, they will be asked a short questionnaire based on the Congregate Meals survey. This questionnaire asks how long they have been attending the congregated meals program; how often they eat at the site; when the last time was they ate at the site; to rate the program; and how much of their food intake the meal provides on the days they eat at the site.
2. **Nutrition-Home-delivered Meals:** If a respondent receives Home-delivered Meals, they will be administered a short questionnaire based on the Home-delivered Meals survey. This questionnaire asks how long they have been receiving home-delivered meals; how often they receive home-delivered meals; when the last time was they received a meal; to rate the program; and how much of their food intake the meal provides on the days they receive home-delivered meals.
3. **Transportation:** All service recipients who use transportation services will be interviewed using this survey module. The module asks how long they have been using the transportation; how often they use it; when the last time was they used it; trip purpose; to rate the transportation service; and about the number of times the respondent uses the service.
4. **Homemaker/Housekeeping:** Questions on the impact of homemaker services will be asked of respondents who receive homemaker or housekeeping services. Again, the set of questions is similar to those asked of the other services: how long respondents have been receiving homemaker services; how often they receive homemaker services; when the last time was they used the services; to rate the program; and if they can depend on their aides to do deliver the allotted services.
5. **Case Management:** Service recipients who receive case management services will be asked questions about their experiences with the program. They will be asked: how long they have been receiving the services; how they would rate the various aspects of the case management services (e.g. ease of contact with the case managers; if the case managers understand their needs, etc.); to rate the services overall and if they contribute to the decisions about their care.
6. **Service List:** All service recipients will then be asked about the mix of services they receive and the impact of those services. They will also be asked to rate the services overall.
7. **Physical Functioning:** This module will be asked of all service recipients (except Caregiver clients). This survey module will include questions on: Activities of Daily Living limitations (e.g., difficulty with personal care activities such as bathing and dressing) and Instrumental Activities of Daily Living limitations (e.g., difficulty with such home management activities as meal preparation, shopping, and housekeeping). Questions about the respondents' health are also being asked, to help with assessing the frailty of the clients served by OAA services. Caregivers will be asked these questions about their care recipients.
8. **Emotional well-being:** This module will be asked of all participants in the surveys, except caregivers. The questions ask if the respondent has felt sad or depressed, worried or tense, and if they feel that they did not get enough rest, within the last thirty days. They are also asked to describe their overall emotional well-being by responding to a close-ended question (i.e., "Would you say...Excellent, Very Good, Good, Fair, or

Poor?").

9. **Social Functioning:** All service recipients except caregivers will be asked four questions from the Social Functioning section of the Short-Form Survey (SF-36). These questions ask if the respondent feels his or her social life is adequate and if health concerns have interfered with the ability to participate in social activities.
10. **Falls:** All service recipients and caregivers will be asked these five questions. The questions ask about falling and losing one's balance.
11. **Social Integration:** All service recipients except caregivers will be asked these four questions about social isolation.
12. **Life Changes:** All service recipients except caregivers will be asked this one question about why they sought out services.
13. **National Family Caregiver Support Program Assessment:** Caregivers who receive caregiver support services through the National Family Caregiver Support Program will be surveyed as part of the 15th NSOAAP. This module has questions on services offered to caregivers through the National Family Caregiver Support Program, and the impact of those services. There are also questions about services the care recipient receives and satisfaction with and impact of those services; support the caregiver receives, either as part of a formal support group or from other relatives and friends; and what kinds of other information the caregiver would find valuable. The survey asks about the type of help the caregiver provides for the care recipient, the amount of time they provide care, benefits caregiving provides them (companionship, a sense of accomplishment, etc.), drawbacks of caregiving (financial burdens, lack of private time, etc.), and demographic and health information on the care recipient. Three of the questions for this module were adapted from an AARP survey, *Caregiving in the U.S.*⁸
14. **Demographic information of the respondent:** Demographic information about the respondent will be collected, including type of area of residence (urban, suburban, or rural), Zip Code, education level, race, gender, living arrangements (living alone, with spouse, or with others), and income level. This module will be administered to all participants. The caregiver survey already includes some demographic questions about the care recipient, but the demographic information on the caregiver will be gathered using this demographic module.
15. **COVID-19 Module:** For 2021 only, all service recipients and caregivers will be asked questions about the effect COVID-19 has had on their access to and use of Older Americans Act programs and services during the past year.

Many of the national survey questions come from such commonly used vehicles as the Survey of Income and Program Participation (SIPP), (e.g., the ADL and IADL questions), the Behavioral Risk Factor Surveillance System (BRFSS) surveys conducted within each state using HHS/CDC standard questions, and other existing surveys. As mentioned previously, other questions were developed under the POMP contract, as well as with input from an advisory panel of aging experts under a Redesign contract. The survey instrument for the 15th NSOAAP is virtually the same as the instrument used for the previous 14th NSOAAP.

⁸ National Alliance for Caregiving and AARP (2004, April). *Caregiving in the U.S. Appendix C*, pp. 16-17 retrieved from AARP Web site: http://assets.aarp.org/rgcenter/il/us_caregiving.pdf

B.3 Methods to Maximize Response Rates and Deal with Nonresponse

Procedures for Eliciting Cooperation and Maximizing Response Rates among AAAs

Westat will use a similar procedure to select respondents for the 15th National Survey of OAA Participants as it did in the previous seven surveys, which proved very successful. As part of the recruitment procedures, Westat initially contacts the AAAs by sending via email an introductory letter from ACL and an information package about the survey. A copy of these materials is also sent to each State Unit on Aging that had AAAs sampled for the survey. (See Appendix G for the ACL letter sent to the State Units on Aging; Appendix H for the ACL letter sent to the AAAs; and Appendix I instructions/information package sent to the AAAs.) Following up by email and telephone, the Westat research team works closely with each participating AAA to generate numbered lists of clients (using client ID numbers) by service for the client sample frame. The Westat research team uses the numbered lists of client ID numbers for the random selection of the respondents to be interviewed. To complete the random sampling process, Westat research team members enter the total numbers of participants by service into a computer sampling program. The sampling program randomly selects line numbers from the numbered lists of clients. The number of clients to select per service is already entered into the program. Westat informs the AAAs of the selected line numbers. The AAAs then provide the participant names and telephone numbers associated with those line numbers to Westat.

Westat research assistants serving as recruitment specialists will encourage the participation of all selected agencies by establishing rapport with contacts within each agency, coaching them on how to generate their client lists, and assuring them that the time involved for them to complete the participant selection procedures will be minimal. For agencies that refuse to participate, Westat will send them a refusal conversion letter (already developed for the previous surveys), and call them one more time to try to gain their cooperation. Once an agency refuses a second time, Westat will not try to contact them again. Westat will also work with ACL to communicate with ACL Regional Administrators for help in persuading reluctant AAAs to participate. Additionally, to promote agency participation, we plan to gain the endorsement and support of the National Association for Agencies on Aging (N4A), as well as the Advancing States [formerly known as the National Association of States United for Aging and Disabilities (NASUAD)].

To reduce the burden for the AAAs, Westat works with software vendors of commercial client tracking software programs commonly used by AAAs to develop step-by-step instructions for creating numbered lists of client ID numbers by service. By using agency-assigned client ID numbers to generate numbered lists of clients for the participant sample frame, Westat is able to screen the lists for duplicate client entries. Additionally, the use of agency-assigned client ID numbers helps to decrease the amount of personally identifiable client contact information collected by Westat during the survey.

Numbered lists will be developed for the following services: home delivered meals, congregate meals, transportation, case management, and homemaker services, as well as caregivers who are served by the National Family Caregiver Support Program.

To ensure a high participant response rate, Westat will send participants who are eligible for the telephone survey a letter before they are contacted by an interviewer. The letters will be on each ACL's letterhead, with toll-free phone numbers provided to answer participants' questions. Westat will attempt to contact participants at different times of the day and different days of the week to maximize the possibility of contact. Westat is also experienced in refusal conversion procedures, having achieved a refusal conversion rate of 40 percent for the earlier surveys. (See Appendix F)

B.4 Tests of Procedures or Methods to Be Undertaken

As discussed in earlier sections, the individual service modules and the modules on physical functioning, quality of life, and demographics have all been field tested and validated by the POMP participants. For example, for each module the POMP grantees drew samples of service recipients, administered the modules, and analyzed the data. The POMP grantees revised the items on the modules based on the results of the field tests and validity studies. Some new questions added for the 14th NSOAAP (Life Changes, Social Integration, Falls) were developed by an advisory panel of aging experts and cognitively-tested under a separate NSOAAP Redesign contract.

The majority of the items on the survey instrument for the 15th National Survey are from the previous survey instruments. Over the years, several items have been removed from the survey instrument because of ambiguity of the wording or in cases where the results of the item showed no variation across response options.

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

The use of statistical sampling methods is critical to this survey. Under the supervision of ACL, Westat is responsible for selecting the sample, conducting the interviews, data weighting and data analysis. Below are the names and contact information of individuals responsible for the statistical aspects of the study and individual collection and/or analysis of the data.

Administration for Community Living/Administration for Aging Personnel Responsible for Deliverables

Susan Jenkins, Ph.D.
Director, Office of Performance and Evaluation
Administration for Community Living
U.S. Department of Health and Human Services
300 C Street, SW, Rm 1243
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