

Voluntary Partner Surveys to Implement  
Executive Order 12862 in the  
Health Resources and Services Administration

**0915-0212 Extension**

**B. Statistical Methods**

1. Potential Respondent Universe and Sample Selection Method

The respondent universe will be separately identified for each program whose partners are to be surveyed. Developmental activities, such as focus groups, will be designed to assure inclusion of an appropriate range of partners; quantitative activities will be carried out using sampling procedures developed to be properly representative of the universe. In some cases, all partners in a particular category will be surveyed; for example, a survey of grantees to determine satisfaction with technical assistance activities is likely to include all grantees that were offered or received the assistance. Similarly, all trainees in a given program may be asked to complete an evaluation form.

Surveys will be designed to minimize burden on respondents while obtaining essential information. The expectation is that information collection instruments will require no more than 15 minutes response time, on average. Focus groups will generally last for one hour (plus travel time).

In virtually all instances, there will be existing lists of "partners" readily available for sampling. For example, names and addresses of grantees are available from the grants office. Appropriate probability sampling techniques will be used to select samples.

2. Information Collection Procedures

All data collection will be conducted in a manner that is consistent with the following principles:

- Appropriate sample sizes will be determined for each activity where sampling is utilized to assure that burden is minimized while reliable estimates are produced.
- Participation will be fully voluntary, and non-participation will have no impact on eligibility for or receipt of future services. If necessary, steps will be taken to ensure unbiased completion of questionnaires by use of third-party distribution and receipt by a party not directly involved in provision of the service being assessed.
- Information to be collected will be limited to that needed to assess partner satisfaction. Repeated implementation of quantitative surveys will be at an interval appropriate to measure the impact of changes and to monitor ongoing levels of satisfaction.

- Efforts will be made to obtain the highest possible response rates, given the voluntary nature of the data collection efforts. To the extent feasible, efforts will be made to assess non-response bias.

### 3. Methods to Maximize Response Rates

Consistent with sound survey methodology, the design of each quantitative survey will include approaches to maximize response rates, while retaining the voluntary nature of the effort. For mail surveys, for example, this is expected to include a postcard follow-up, a second mailing of the questionnaire, and possibly some telephone follow-up, if phone numbers are readily available.

### 4. Tests of Procedures

It is anticipated that most surveys will begin with focus groups or similar efforts to identify the views and concerns of partners. More formal pilot tests will be carried out at a level and in a manner consistent with the specific survey. All mail and telephone surveys are expected to include pilot tests with a small number of partners, with telephone debriefing of pilot test respondents, as needed, to clarify responses.

### 5. Statistical Consultation and Independent Review

Each program will obtain input from statisticians in the development, design, conduct and analysis of partner satisfaction surveys. This statistical expertise will be available from agency statisticians or from contractors. If needed, HRSA will arrange for technical assistance in statistics and survey design through the National Center for Health Statistics.

Proposals for specific partner satisfaction surveys within HRSA will be developed by program offices and submitted to HRSA for review and approval by the Office of Research and Evaluation (ORE). ORE directs the OMB information collection clearance program for HRSA, as well as other data policy and planning activities within HRSA. HRSA's information collections clearance officer is a social science analyst with expertise in survey methodology and questionnaire design, and familiarity with principles of sampling and data analysis.