

2024 HRSA Grantee Satisfaction Survey

Final (January 3, 2024)

Survey Introduction

Welcome to the Health Resources and Services Administration (HRSA) grantee satisfaction survey. We are interested in getting your confidential feedback on the guidance, assistance, and services that we provide to grantees like you.

The mission of HRSA is to improve health outcomes and achieve health equity through access to quality services, a skilled health workforce, and innovative, high-value programs. Our grantees play a critical role in this effort. Providing effective and efficient service to organizations like yours is vital to our success and we are committed to continually improving the support we provide to you.

This survey will give us information about what is working, what could be improved upon, and what direction you would like us to take in the future to best support you in achieving our mission. Your participation is greatly appreciated. We will share a summary of the survey results and the corresponding actions we plan to take with our grantees.

Survey Instructions

- Your responses are and will remain confidential.
- Your participation in this survey will not in any way affect your current award or eligibility for, or receipt of, future services or funding. Please feel free to be completely candid.
- You do not have to complete the survey in one sitting. You may exit and return later to complete the survey or update your responses. You will **not** lose your previously completed responses as they are automatically saved when you close out of the survey. To reenter the survey, simply click on the survey link you received.
- You may forward the survey link to a staff member within your organization who may be better equipped to answer the survey questions. However, your assigned link can only be completed **one** time.
- Please do NOT provide any names of individuals (Project Officer, Grants Management Specialist, etc.) in your responses.

Please click “next” below to begin the survey.

If you have any questions or feedback regarding the survey, please email [\(XXXX\)](#)

If you require technical assistance with the survey, please email SurveyHelp@cfigroup.com.

Public Burden Statement: HRSA plans to survey HRSA grant recipients to better understand their opinions about HRSA’s grants processes and to improve the way HRSA conducts business with them. 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 0906-0006 and it is valid until XX/XX/202X. This information collection is voluntary – the response is entirely discretionary and has no direct effect on any benefit or privilege for the respondent. This survey is being administered by CFI Group, an independent third-party research group. Answers will remain anonymous. Public reporting burden for this collection of information is estimated to average 20 minutes (0.34 hours) 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 Information Collection Clearance Officer, 5600 Fishers Lane, Room 14N39, Rockville, Maryland, 20857 or paperwork@hrsa.gov.

Please note that ALL questions on this survey (unless noted otherwise) refer to your experiences over the PAST 12 MONTHS from the date you are completing the survey. When answering the survey, please only think about your interactions with **[GRANT PROGRAM]**.

Application and Award Processes

For the following questions, please think about your experiences with the **[GRANT PROGRAM]** application processes.

- AP1. How did you learn about HRSA's **[GRANT PROGRAM]**?
- a) An official HRSA Notice of Funding Opportunity (NOFO)
 - b) On the HRSA website
 - c) Grants.gov
 - d) Word-of-mouth
 - e) Newsletter from HRSA
 - f) HRSA-funded technical assistance partners (e.g., Primary Care Associations)
 - g) Other [Please specify]
- AP2. Which of the following resources did you use during the application process for the **[GRANT PROGRAM]**? (select all that apply)
- a) Webinar(s)
 - b) HRSA staff identified in the HRSA Notice of Funding Opportunity (NOFO)
 - c) Information on the HRSA website
 - d) HRSA sponsored videos or podcasts
 - e) HRSA help lines or online forms
 - f) HRSA funded partners
 - g) HRSA newsletters
 - h) Grant writer or paid consultant
 - i) Other ____ [Please specify]
- AP3. How did you apply for the **[GRANT PROGRAM]**?
- a) Grants.gov
 - b) Electronic Handbooks (EHBs)

Using a scale of 1 to 5 where 1 is *Poor* and 5 is *Excellent*, please rate:

- AP4. Clarity of application instructions
- AP5. Time to develop and submit the grant application
- AP6. Fairness and reasonableness of application requirements
- AP7. Ease of submitting the application
- AP8. Helpfulness of any support you received on questions about the application process
- AP9. Ease of reaching HRSA personnel with questions or concerns about the application
- AP10. Speed of HRSA replies to your questions about the application

For the following questions, please think about your experiences with the **[GRANT PROGRAM]** award processes, from the time you were first notified about your award, to when you received your award.

Thinking about the award process for **[GRANT PROGRAM]** and using a scale of 1 to 5 where 1 is *Poor* and 5 is *Excellent*, please rate:

- GA1. Ease of understanding the Terms, Conditions, and Reporting Requirements outlined in the Notice of Award
- GA2. Helpfulness of support on questions about the award process
- GA3. Ease of reaching HRSA personnel with questions, issues, or concerns about the award process
- GA4. Speed of responses to your questions on the award
- GA5. Adequacy of the length of time between receipt of Notice of Award (NOA) and the start date of grant/cooperative agreement

AP11. What can HRSA do to improve the application process (please be specific)? **[Optional Open End]**

AP12. What went well with the application process? **[Optional Open End]**

HRSA Electronic Handbooks (EHBs)

Thinking about the HRSA Electronic Handbooks (EHBs) grant management system you've interacted with for **[GRANT PROGRAM]**:

Please rate the following using a scale of 1 to 5 where 1 is *Poor* and 5 is *Excellent*.

EHB1. Effectiveness of the HRSA Electronic Handbooks (EHBs) for completing tasks associated with:

- a) Application Process
- b) Grant Monitoring
- c) Performance Reporting Requirements
- d) Guidance/Policy

EHB2. Ease of navigating HRSA Electronic Handbooks (EHBs)

EHB3. Clarity of information provided in the HRSA Electronic Handbooks (EHBs) (e.g., online help, on-screen messages)

EHB4. When using the EHBs system, where do you normally seek assistance? (select all that apply)

- a) HRSA Electronic Handbooks (EHBs) Help and Knowledge Base
- b) HRSATube (YouTube)
- c) Project Officer (PO)
- d) Grant Management Specialist (GMS)
- e) "Sarah" Chatbot
- f) EHBs Customer Support Center
- g) Other [Please specify]_____

EHB5. Have you used the HRSA Electronic Handbooks (EHBs) Help and Knowledge Base?

- a) Yes
- b) No **[Skip to EHB7]**

EHB6. Using a scale of 1 to 5 where 1 is *Poor* and 5 is *Excellent*, please rate the helpfulness of the HRSA Electronic Handbooks (EHBs) Help and Knowledge Base.

EHB7. Have you used or were you aware of the HRSA Electronic Handbooks (EHBs) Chatbot “Sarah”?

- a) Yes
- b) No [Skip to EHB9]

EHB8. Using a scale of 1 to 5 where 1 is *Poor* and 5 is *Excellent*, please rate the helpfulness of the HRSA Electronic Handbooks (EHBs) Chatbot “Sarah.”

EHB9. What is the one most critical improvement HRSA could make to the HRSA Electronic Handbooks (EHBs) system? [Optional Open End]

Award Monitoring

Award monitoring includes site visits, office-based grant reviews, financial reporting, and responding to requests for amendments to an award. Thinking about the grant monitoring process for [GRANT PROGRAM], and using a scale from 1 to 5 where 1 is *Poor* and 5 is *Excellent*, please rate:

- M1. Helpfulness of HRSA grant monitoring guidance (provided in writing and verbally)
- M2. Usefulness of HRSA feedback in the monitoring reports
- M3. Relevance of monitoring procedures
- M4. Ease of reaching HRSA personnel with questions or concerns about monitoring activities.

- M5. In the past 12 months, have you participated in a site visit to assess compliance with requirements for [GRANT PROGRAM], whether in person at your location, at HRSA offices, or virtually?
 - a) Yes
 - b) No – skip to R1
 - c) I do not know – skip to R1

Thinking about your most recent compliance-based site visit and using the same 1 to 5-point scale, please rate:

- SV1. Lead time you had to prepare for the site visit
- SV2. Helpfulness of HRSA personnel in preparing for the site visit
- SV3. Knowledge and expertise of the HRSA review team (onsite, HRSA office, or virtual)
- SV4. Usefulness of the site visit
- SV5. Timeliness of the site monitoring report
- SV6. Clarity of the site monitoring report
- SV7. Adequacy of time you had to respond to the site monitoring report
- SV8. Impact of the site visit and follow-up actions on your organization’s overall performance.

Grant Performance Reporting Requirements

Thinking about the reporting requirements for [GRANT PROGRAM], and using a scale from 1 to 5 where 1 is *Poor* and 5 is *Excellent*, please rate:

- R1. Clarity of the reporting requirements
- R2. Ease of data collection
- R3. Time allowed to meet the reporting requirements (provide the data/information)
- R4. Ease of reporting/submitted required data/information
- R5. Ease of reaching HRSA for support on the reporting requirements

HRSA Training and Technical Assistance

Now think for a moment about the training and technical assistance services that are provided by the [GRANT PROGRAM].

- TTA1. Have you received any training or technical assistance (e.g., webinars, conferences, and online resources) related to [GRANT PROGRAM]?
- a) Yes
 - b) No (skip to T5)

Thinking about the on-going training and technical assistance (e.g., webinars, conferences, and online resources) you receive for the [GRANT PROGRAM], and using a scale from 1 to 5 where 1 is *Poor* and 5 is *Excellent*, please rate:

- T1. Clarity of information
- T2. Usefulness of information
- T3. Ease of finding information online
- T4. Knowledge and expertise of technical assistance providers

Now think about what training and technical assistance would be useful to you in the future, regardless of whether you've received any training or technical assistance in the past or not.

- T5. How would you most prefer to receive training and technical assistance? (Please select one):
- a) Webinars
 - b) Written Materials
 - c) One-on-One assistance
 - d) Peer-to-Peer assistance
 - e) Resource Center (specific to your grant/cooperative agreement)
 - f) Access to experts in the field
 - g) Other [Please specify]

- T6. What can HRSA do to improve its training and technical assistance? [Optional Open End]

FEDERAL TORT CLAIMS ACT (FTCA)

[BPHC only Question(s) – Separate Driver for BPHC]

- FTCA1. Does your organization receive Federal Tort Claims Act (FTCA) coverage?
- a) Yes
 - b) No - Skip to COM1

Consider your experiences with the Federal Tort Claims Act (FTCA) program in the past 12 months. Using a scale from 1 to 5, where 1 means *Poor* and 5 means *Excellent*, rate the following:

- FTCA2. Clarity of the FTCA application instructions.
- FTCA3. Time it took to complete the application process.
- FTCA4. Helpfulness of support in answering questions about the FTCA program.
- FTCA5. Usefulness of FTCA technical assistance.

FTCA6. What can HRSA do to improve the FTCA program? **[Optional Open End]**

Communication

In this next section, please think about your overall experience with HRSA-provided services over the past 12 months related to **[GRANT PROGRAM]**.

COM1. Which of these communication channels do you most rely on for updated information that impacts your grant(s)/cooperative agreement(s)? (Please select one.)

- a) Email/Group Email(s)
- b) Social media [Please specify: _____]
- c) Online platforms/updates (e.g., the HRSA Electronic Handbooks (EHBs))
- d) HRSA Website
- e) Other HRSA program sites [Please specify: _____]
- f) E-newsletters (e.g., HRSA eNews)
- g) Webcasts (e.g., Health Center Program Updates, HAB You Heard)
- h) Other [Please specify: _____] **[REQUIRED RESPONSE]**

COM2. What information do you most often look for from HRSA (select all that apply):

- a) Upcoming grant funding opportunities
- b) Information to support preparation of a grant application
- c) Information on my awarded grant/cooperative agreement
- d) Contact information for HRSA personnel
- e) Information from experts and other learning opportunities
- f) Data about HRSA programs
- g) Other [Please specify: _____] **[REQUIRED RESPONSE]**

Thinking about HRSA's overall communication efforts (website, E-Newsletters, webcasts, social media, online platforms) and using the scale from 1 to 5 where 1 is *Poor* and 5 is *Excellent* please rate HRSA on:

- C1. Providing sufficient information to stay informed about your program(s)
- C2. Communicating information with enough time for you to respond
- C3. Ease of understanding HRSA communications
- C4. How consistent HRSA communications are (i.e., you get the same information regardless of the source)
- C5. Ease of finding the information you need

- C6. What can HRSA do better in its communication efforts (please specify type of communication: website, E-Newsletters, webcasts, social media, online platforms)? **[Optional Open End]**
- C7. What works well with HRSA's communication efforts (please specify type of communication: website, E-Newsletters, webcasts, social media, online platforms)? **[Optional Open End]**

HEALTH CENTER PROGRAM COMMUNITY

[BPHC only Question(s) – Not a Separate Driver - Part of Communication Driver]

HCPC1. Do you use the online Health Center Program Community?

- a. No - Go to HCPC2
- b. Yes - Go to HCPC3

HCPC2. Would you find value in an online community where you could connect and share best practices with other Health Center Program grantees/stakeholders?

- a. Yes
- b. Maybe – would need more information.
- c. No

HCPC3. What do you find most valuable about the Health Center Program Community (select one)?

- a. Ability to connect and collaborate with others
- b. Access to specific program resources, recordings, and materials
- c. Stay up to date with Health Center Program news
- d. It's required by a specific grant/program
- e. Other (Please specify)

HCPC4. Using a scale from 1 to 5, where 1 means Poor and 5 means excellent, how would you rate your experience with finding the information you need within the Health Center Program Community?

HCPC5. What can HRSA do to improve the Health Center Program Community? **[Optional Open End]**

Help Lines and Online Forms

- CC1. During the past 12 months, please indicate what type of contact, if any, you had with HRSA help lines or online forms. Did you ...(select all that apply)
- a) Call a HRSA help line
 - b) Submit an online form
 - c) Had no contact with the help lines or online forms in the past 12 months **[Skip to next section]**

CC2. Please indicate which contact center(s) you contacted (select all that apply):

- a) HRSA Grants and Electronic Handbooks Customer Support Center
- b) Health Center Program Support
- c) Loan Repayment and Scholarship Program Customer Care Center (for National Health Service Corps, Nurse Corps and Faculty Loan Repayment & Scholarship)
- d) Provider Support Line (for the Provider Relief Fund)
- e) Other [Please specify: ____]
- f) I do not know

Thinking about your most recent experience with the HRSA help lines and/or online forms and using the scale from 1 to 5 where 1 is *Poor* and 5 is *Excellent* please rate HRSA on:

- CC3. Ability to resolve your issue/concern
- CC4. Speed of response to your question/issue
- CC5. Professionalism of HRSA staff

CC6. What can HRSA do better with its help lines and/or online forms. **[Optional Open End]**

Civil Rights and DEIA (Diversity, Equity, Inclusion and Accessibility)

Federal civil rights laws require HRSA and its award recipients to provide individuals with an equal opportunity to participate in a program or activity regardless of race, color, national origin (e.g., primary language spoken), age, disability, religion, or sex (e.g., sexual orientation and gender identity). These Diversity, Equity, Inclusion and Accessibility (DEIA) services aim to ensure that HRSA and its programs are nondiscriminatory, equitable, inclusive, and accessible.

DEIA. To what degree are you familiar with each of the following services offered by HRSA for helping grantees participate in technical assistance and events?

	1. Was not aware of this service	2. Was aware of this service but have not used it	3. Was aware of this service and have used it
a. Sign language interpretation services			
b. Alternative format materials (e.g., large print)			
c. Closed Captioning			
d. Assistance entering, exiting, and navigating HRSA facilities			

[if any DEIAa-d=3] Please rate your experience using HRSA's DEIA services on a scale from 1 to 5 where 1 is *Poor* and 5 is *Excellent*.

- A3. Sign language interpretation services [if DEIAa=3]
- A4. Alternative format materials (e.g., large print) [if DEIAb=3]
- A5. Closed Captioning [if DEIAc=3]
- A6. Assistance entering, exiting, and navigating HRSA facilities [if DEIAd=3]

If you have participated in HRSA trainings or webinars on Diversity, Equity, Inclusion, and Accessibility (DEIA), please rate your experience using a scale from 1 to 5 where 1 is *Poor* and 5 is *Excellent*

- A9. Diversity, Equity, Inclusion, and Accessibility (DEIA) trainings, webinars, or informational sessions (e.g., [disability access and language access](#))
- A8. Diversity, Equity, Inclusion, and Accessibility (DEIA) technical assistance documents (e.g., [language access plan worksheet](#))
- A11. Not Applicable
- A15. How can HRSA support promoting Diversity, Equity, Inclusion and Accessibility (DEIA) in your programs? [Optional Open End]

Now please consider all of your experiences with HRSA regarding your [GRANT PROGRAM].

ACSI Benchmark

- ACSI1. On a scale of 1 to 10, where 1 means *Very Dissatisfied* and 10 means *Very Satisfied*, please rate your overall satisfaction with your **[GRANT PROGRAM]** experience.
- ACSI2. On a scale of 1 to 10 where 1 now means *Falls Short of your Expectations* and 10 means *Exceeds your Expectations*, how well has your experience with **[GRANT PROGRAM]** met your expectations?
- ACSI3. On a scale of 1 to 10, where 1 is *Not Very Close to Ideal* and 10 is *Very Close to Ideal*, how close to your "ideal" grant experience was your experience with **[GRANT PROGRAM]**?

Outcome Metrics

- OM1. How much does HRSA's support (e.g., communication, technical assistance, help lines) associated with **[GRANT PROGRAM]** improve your ability to serve your community? Please use a scale of 1 to 10 where 1 is *Not at all helpful* and 10 is *Extremely helpful*.
- OM2. How much do you trust HRSA to work with you to assure your success as a grantee? Please use a scale of 1 to 10 where 1 is *No trust at all* and 10 is *Have complete trust*.
- OM3. How much confidence do you have that **[GRANT PROGRAM]** will provide equitable health care to those most in need? Please use a 1 to 10 scale where 1 is *No confidence at all* and 10 is *Have complete confidence*.

Suggestions for Improvement

- S1. How can HRSA better support your organization to improve your ability to serve the community with the **[GRANT PROGRAM]**? **[Optional Open End]**
- S2. Do you have any other feedback for HRSA that could help improve your satisfaction with HRSA services or support? **[Optional Open End]**