**DATE:** May 7, 2024

**TO:** Daniel Cline, OMB Desk Officer

**FROM:** Joella Roland, HRSA Information Collection Clearance Officer

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**Request**: The Health Resources and Services Administration (HRSA) requests approval to send an additional email and include eight of the already-approved HRSA Grantee Satisfaction Survey (OMB number 0906-0006 expiration date 03/31/2027) questions in a different survey link to 78 respondents.

**Purpose**: The purpose of this request is to address and correct a technical glitch that occurred when fielding the HRSA Grantee Satisfaction Survey. The skip logic for the eleven Bureau of Primary Health Care-specific questions on the survey was not working correctly, and 78 project directors who should have been presented these questions did not see them. As a result, we are requesting approval to send an additional email and different survey, featuring only the questions that were missed due to the fielding error, to the affected project directors. This memo explains the changes and supporting rationale.

**Changes: Instruments:**

The proposed non-substantive changes section A lists the questions that were previously approved under OMB ICR-0906-0006 but were omitted from the GSS fielding. HRSA is proposing to send these questions in the follow up survey.

**Respondent Sampling and Recruitment**

HRSA is proposing to focus only on the missed questions and the affected respondents, so the survey will only be sent to 78 of the 7,813 respondents.

**Time Sensitivity**: The changes to this collection need to be approved by May 17, 2024, so that HRSA and its contractor can implement the changes while not delaying the survey collection.

**Burden:** HRSA is requesting an additional four hours total or 3 minutes per each of the 78 respondents. Making these changes will allow HRSA researchers to accurately capture grantee satisfaction. The original and updated burden estimates are listed below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Original ICR** | **Original Responses** | **Original Hours** | **Updated IC Title** | **Updated Responses** | **Updated Hours** |
| HRSA Grantee Satisfaction Survey | 2,500 | 850 | Updated Grantee Satisfactions Survey | 2,578 | 854 |

**PROPOSED NON-SUBSTANTIVE CHANGES:**

**Screener**

Q1. Does your organization receive Federal Tort Claims Act (FTCA) coverage?

|  |  |  |
| --- | --- | --- |
| Yes | 1 |  |
| No | 2 | **[SKIP LOGIC: GO TO Q4.]** |

**FEDERAL TORT CLAIMS ACT (FTCA)**

Q2.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:

(Select one for each row)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Poor 1 | 2 | 3 | 4 | Excellent 5 | NA |
| Clarity of the FTCA application instructions |  |  |  |  |  |  |
| Time it took to complete the application process |  |  |  |  |  |  |
| Helpfulness of support in answering questions about the FTCA program |  |  |  |  |  |  |
| Usefulness of FTCA technical assistance |  |  |  |  |  |  |

Q3. What can HRSA do to improve the FTCA program? (Optional)

**HEALTH CENTER PROGRAM COMMUNITY**

Q4. Do you use the online Health Center Program Community?

|  |  |
| --- | --- |
| Yes | 1 |
| No | 2 |

Q5. **[SKIP LOGIC: ONLY IF Q4. = 2]** Would you find value in an online community where you could connect and share best practices with other Health Center Program grantees/stakeholders?

|  |  |
| --- | --- |
| Yes | 1 |
| Maybe- would need more information | 2 |
| No | 3 |

Q6. **[SKIP LOGIC: ONLY IF Q4. = 1]** What do you find most valuable about the Health Center Program Community (select one)?

|  |  |
| --- | --- |
| Ability to connect and collaborate with others | 1 |
| Access to specific program resources, recordings, and materials | 2 |
| Stay up to date with Health Center Program news | 3 |
| It’s required by a specific grant/program. | 4 |
| Other (Please specify) | 5 |

Q7. **[SKIP LOGIC: ONLY IF Q4. = 1]** Using a scale from 1 to 5, where 1 means Poor and 5 means excellent, how would you rate your experience with:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Poor 1 | 2 | 3 | 4 | Excellent 5 | NA |
| Finding the information you need within the Health Center Program Community? |  |  |  |  |  |  |

Q8. **[SKIP LOGIC: ONLY IF Q4. = 1]** What can HRSA do to improve the Health Center Program Community? **(Optional)**

**Attachments:**

1. NSCR Instruments 0906-0006 05062024