Administrative Burden Assessment for Tribal MIECHV Grant Recipients

Burden Statement: 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-XXXX and it is valid until XX/XX/202X. This information collection is voluntary. Public reporting burden for this collection of information is estimated to average 4 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

Introduction

This assessment is designed to assess the administrative burden associated with the forms that are part of the Tribal Maternal, Infant, and Early Childhood Home Visiting (TMIECHV) Program.

The results of this assessment will be used to inform recommendations to reduce burden. We will also be holding interviews with select grant recipients to supplement what we learn on this assessment and identify areas of duplication in existing forms. Findings from these activities will be provided to Health Resources and Services Administration (HRSA) and Administration for Children and Families (ACF) mid-2024.

The purpose of this assessment is to capture information about the burden associated with TMIECHV-related forms. This assessment is not designed to capture details about other types of burden that is associated with the expectations of being a grant recipient (such as complying with federal rules, monthly calls, etc.). In addition, we do not ask about government-wide forms that ACF does not have the authority to change (such as federal fiscal reporting forms). There are open-ended questions to capture fiscal burden and other burden associated with TMIECHV requirements and forms we do not explicitly ask about.

We ask that one person per grant recipient (the Project Director/Coordinator/Manager) complete this assessment. It is expected that the respondent consult with others at the grant recipient organization, to answer all questions. For your convenience, a copy of the assessment is available here so you can prepare your answers before submitting them via this website. You can also view a brief video that provides an overview of the assessment here. If you need to return to your online submission before you are finished, you may press "Save & Return Later."

You will then be given a return code to access the survey with your saved responses. If you misplace your code, please contact Sarah Crowne at scrowne@childtrends.org for assistance.

We expect this assessment will take 4 hours to complete (inclusive of all coordination and information collection within the tribe/organization). We acknowledge that this one-time assessment is an added burden, but we hope that the time spent completing this assessment will reduce ongoing burden in a meaningful way.

Child Trends has been contracted by HRSA, in partnership with ACF, to administer this assessment. This assessment is anonymous; we do not ask for your tribe/organization name on this assessment. Your responses will be summarized with responses from other grant recipients and will be reported to HRSA and ACF in aggregate. Your individual responses will remain confidential and will be saved on a secure drive that only Child Trends can access. In addition, your individual responses will have no effect on your performance review or application for additional TMIECHV funding. At the end of this assessment, we direct you to a separate brief survey where we request your tribe/organization name (to track who has responded and who has not) and provide you with the opportunity to indicate if you are interested in participating in an interview about administrative burden. This additional survey will not be linked to your responses on this assessment.

If you have any questions about the assessment, you may contact Sarah Crowne at scrowne@childtrends.org.

Grant Recipient information

- 1. Please indicate the average number of families receiving TMIECHV home visiting services in your tribal organization at any point in time. This information will help us assess the extent to which administrative burden varies by caseload size.
 - a. 44 or less families
 - b. 45-74 families
 - c. 75 or more families

Identifying Administrative Burden

This section seeks information about how long it takes your tribal organization to complete forms/reports related to the TMIECHV Program. For each form/report, a series of questions will be asked. While we have provided a link to the form to help you recall what the form entails, it is possible that the form looked different when you last completed it. When asked if your tribe has completed this form before, consider the form in general, not necessarily the specific version of the form linked below. [This assessment will ask about the following forms. The respondent will be presented the form name, description, frequency, the person who is likely most familiar with the form, and a link to view the form. The respondent will then be asked a series of questions about that form before proceeding to the next form]:

Application materials and related documents

Notice of Funding Opportunity (NOFO) - Development and Implementation

Description: The notice to apply for funding for a TMIECHV Grant Program: Development and Implementation Grant.

Frequency: Once every five years (at the beginning of the grant)

Person in grantee organization who is likely most familiar with form: TMIECHV Project

Director

Survey questions asked about this form: Q2-7

Notice of Funding Opportunity (NOFO) - Implementation and Expansion

Description: The notice to apply for funding for a TMIECHV Grant Program: Implementation and Expansion Grant.

Frequency: Once every five years (at the beginning of the grant)

Person in grantee organization who is likely most familiar with form: TMIECHV Project

Director

Survey questions asked about this form: Q2-7

Non-Competing Continuation (NCC)

Description: A streamlined alternative to the NOFO for grant recipients already awarded funds.

Frequency: Once a year except Year 1 of the grant

Person in grantee organization who is likely most familiar with form: TMIECHV Project

Director

Survey questions asked about this form: Q2-7

Implementation Plan

Description: Grant recipients are required to submit a comprehensive plan that outlines critical activities that are required to successfully execute their TMIECHV grants.

Frequency: Once, during Year 1 of the grant

Person in grantee organization who is likely most familiar with form: TMIECHV Project

Director

Survey questions asked about this form: Q2-7

Data and performance measures

Demographic Service Utilization Report: Form 1

Description: This form collects data on demographic, service utilization, and select clinical indicators including: an unduplicated count of enrollees; selected characteristics by race and ethnicity; socioeconomic data; other demographics; numbers of households from priority populations; service utilization across all models; among other measures.

Frequency: Once a year

Person in grantee organization who is likely most familiar with form: TMIECHV Project

Director or data staff

Survey questions asked about this form: Q2-7

Performance Measurement Report: Form 2

Description: This form collects data on performance indicators on statutorily mandated six

benchmark areas. **Frequency**: Once a year

Person in grantee organization who is likely most familiar with form: TMIECHV Project

Director or data staff

Survey questions asked about this form: Q2-7

Quarterly Performance Report: Form 4

Description: This form collects data on program capacity, family engagement, and staff

vacancies.

Frequency: Four times per year

Person in grantee organization who is likely most familiar with form: TMIECHV Project

Director or data staff

Survey questions asked about this form: Q2-7

Evaluation and Continuous Quality Improvement (CQI)

Tribal MIECHV CQI Plan-Do-Study-Act (PDSA) Planning Tool

Description: This tool is intended to help grant recipients think through the important details of a PDSA cycle.

-

Frequency: Optional, varies

Person in grantee organization who is likely most familiar with form: TMIECHV Project

Director or data staff

Survey questions asked about this form: Q2-4, 6-7

Multi-Site Implementation Evaluation (MUSE) Data Collection and Reporting

Description: The MUSE study incorporates secondary data analysis, qualitative interviews, administrative data, longitudinal surveys of caregivers, home visit questionnaires, staff surveys, and logs of program activities to better understand home visiting implementation across the Tribal MIECHV initiative.

Frequency: Varies based on data collection form

Person in grantee organization who is likely most familiar with form: TMIECHV Project

Director or data staff (only IEG1 grant recipients) **Survey questions asked about this form**: Q2-4

Evaluation Final Report

Description: Grant recipients report on information about a grant recipient's evaluation plan, methods, and results.

Frequency: Once every five years (at the end of the grant)

Person in grantee organization who is likely most familiar with form: TMIECHV Project

Director or evaluation staff (only IEG2 grant recipients)

Survey questions asked about this form: Q2-7

Progress Reports

Annual Report to Secretary and Final Report to the Secretary

Description: Grant recipients report on progress toward meeting goals and objectives, collecting performance measurement data, and updated on evaluation activities (for grantees participating in the MUSE study only) and CQI efforts.

Frequency: Once a year for the Annual Report to the Secretary; once at the end of the grant for the Final Report to the Secretary

Person in grantee organization who is likely most familiar with form: TMIECHV Project

Director

Survey questions asked about this form: Q2-7

ACF Program Progress Report (PPR)

Description: Grant recipients report on the overall progress towards meeting project goals and plans for the continuation of the project.

Frequency: Semi-annually

Person in grantee organization who is likely most familiar with form: TMIECHV Project

Director

Survey questions asked about this form: Q2-4

- 2. Has your tribe/organization completed this form before?
 - a. Yes Go to applicable questions about the form

- b. No (neither I nor my colleagues are aware of our tribe/organization ever completing this form) *Go to next form*
- 3. When you most recently completed this form, was it the first time your tribe/organization completed this form?
 - a. Yes, it was the first time we completed this form
 - b. No, it was not the first time we completed this form
- 4. Approximately how much time (in hours) was needed to complete this form the most recent time your tribe/organization completed it? Please break out the amount of time by the following categories:
 - Accessing the form, reading the form, preparing a plan for completing the form, coordinating with colleagues (including data and fiscal staff), training staff to complete the form
 - Data collection and data entry related to this form
 - Data quality checks, validation, cleaning, and analysis related to this form
 - Filling out the form and getting the form reviewed and approved as needed, and submitting the form to ACF
 - Responding to ACF revisions
 - Total burden (sum of the above categories)

IMPORTANT INSTRUCTIONS:

Comprehensively calculate hours: When estimating how long it took your tribe/organization to complete the form the most recent time it was completed, please include time spent (in hours) across all staff who were involved (e.g., Project Director/Manager/Coordinator, data staff, fiscal staff, home visitors, supervisors) and across all activities required to complete a form. If you work with contractors to complete any of these tasks, include the amount of time it took contractor staff as well. Rough estimates are fine.

Here's an example for a hypothetical form:

- 2 hours for 2 grantee staff to access and read the form (2 hours X 2 staff = 4 hours)
- 10 hours for 1 grantee staff member to develop a plan for filling out the form and coordinate with colleagues (10 hours x 1 staff = **10 hours**)
- 3 hours for 2 grantee staff and 3 hours for 1 staff member at each of 5 local sites to coordinate completion of the form ((3 hours x 2 staff) + (3 hours x 1 person/site x 5 sites) = **21 hours**)
- ... and so forth for all activities required to complete a form

We have prepared an optional spreadsheet that you may use to help calculate the burden of each form. Feel free to adapt the spreadsheet as needed.

<u>Calculate burden for ONE submission of the form.</u> Please consider how long it takes to complete one submission of the form. For instance, if a form is completed quarterly, please enter how long it takes to complete one quarterly form. If a form is completed annually, please enter how long it takes to complete one annual form.

<u>Calculate burden for most recent submission.</u> When estimating burden, consider how much time was needed during the most recent time you completed the form. While we have provided a link to the form to help you recall what the form entails, it is possible that the form looked different when you last completed it. If that is the case, please still estimate the burden from the most recent time you completed the form.

<u>Allocate hours proportionally across forms, if needed</u>. In some cases, your tribe/organizations' work to complete one form may be related to the work needed to complete another form. For instance, home visitors' time spent doing data collection and data entry may inform Form 1 and Form 2 and it is hard to disentangle the data collection and entry hours for each individual form. In such cases, proportionally allocate the number of hours for related forms among the individual forms. Again, rough estimates are fine.

	Amount of time (in hours)
Accessing the form, reading the form, preparing a plan for completing the form, coordinating with colleagues (including data and fiscal staff), training staff to complete the form	
Data collection and data entry related to this form	
Data quality checks, validation, cleaning and analysis related to this form	
Filling out the form/report and getting the form reviewed and approved as needed, and submitting the form to HRSA	
Responding to HRSA revisions	
Total burden (sum of the above categories)	[Auto- calculated]

- 5. In recent years, ACF has made changes to this form. Since Fiscal Year 2016 (October 1, 2015 to September 30, 2016), the amount of effort needed to complete this form/report has...:
 - Increased
 - Decreased
 - Stayed about the same
 - Not applicable/we did not complete this form/report prior to Fiscal Year 2016
 - Don't know (neither I nor my colleagues have this historical knowledge)

- 6. To what extent is the information reported on this form useful for your tribe/organization?
 - Not at all useful (e.g., we wouldn't compile this information if the TMIECHV Program didn't ask for it)
 - Somewhat useful (e.g., some aspects of this form are useful, but others are not)
 - Very useful (e.g., we use most of the information from this form to inform decision-making)

6a. [If selected anything other than "very useful" in the prior question] What information reported on this form is the least helpful?

- Open-ended comment box
- 7. What would make this form less burdensome? (Check all that apply)
 - Provide clearer guidelines or instructions for completing this form
 - Shorten the form
 - Reduce the number of times the form is required
 - Streamline the form so there is less duplication with other required forms
 - Provide more technical assistance on how to complete the form
 - Other (please specify)
 - My colleagues and I do not have ideas about ways to make this form/report less burdensome
 - Nothing, this form is not burdensome at all

7a. [If selected anything other than "Nothing, this form is not burdensome at all" or "My colleagues and I do not have ideas about ways to make this form/report less burdensome" in the prior question] Please use this space to elaborate on your response.

Open-ended comment box

Conclusion

This section seeks additional information about your experiences of administrative burden related to the TMIECHV Program and suggestions for reducing burden more broadly.

- 8. What else would you like us to know about the TMIECHV-related administrative burden your tribal organization experiences?
 - Open-ended comment box
- 9. Do you have any additional suggestions for reducing TMIECHV-related administrative burden?
 - Open-ended comment box

- 10. What supports could the federal government provide to assist you with TMIECHV-related administrative processes?
 - Open-ended comment box
- 11. Is there anything else you would like to share?
 - Open-ended comment box