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Dear Mr. Karsten:

Thank you for submitting your comment in response to the Bureau of Health Workforce Performance Data Collection OMB No. 0915–0061—Revision 60-day Federal Register Notice. We appreciate your interest and positive feedback on the collection. We have responded to each of your specific questions below.

1. How does the Health Resources and Services Agency plan to collaborate on data collection with workforce agencies outside the Health and Human Services Department? There’s an enormous opportunity to eliminate duplication of effort and share knowledge across agencies.

The data collected via this OMB package are performance metrics specific to our grant programs. The authorization that BHW has to collect this data is to meet government reporting requirements (e.g., Government Performance and Results Act (GPRA), GPRA Modernization Act, Evidence Act) and to ensure our grant programs are achieving goals set forth in statute and through program policy. The purpose of the performance data collection, per statute, is to meet the obligations for performance budgeting. These efforts are not duplicative of what is being done at other agencies since it only pertains to HRSA grant programs. That said, we do share knowledge publicly through the following avenues:

- The “Health Workforce Data, Tools, and Dashboards” website: <https://data.hrsa.gov/topics/health-workforce>
- The “BHW Data & Research” website, which provides information on program evaluations and outcomes: <https://bhw.hrsa.gov/data-research>.
- The “Report on Your Grant” website, which provides details of data collection instruments: <https://bhw.hrsa.gov/funding/report-on-your-grant>.

2. How does HRSA define apprenticeships within the context of the healthcare workforce? How does that definition differ from other work experience programs in healthcare, and does it align with definitions from other workforce agencies? The agency could save time and effort by adapting existing definitions of apprenticeships to HRSA programs in a way that makes collected program data comparable across agencies.

HRSA-BHW grant programs that include an apprenticeship component use the U.S. Department of Labor's (DOL's) definition, making program data comparable across agencies. Per the DOL's website - <https://www.dol.gov/general/topic/training/apprenticeship>, "Apprenticeships combine paid on-the-job training with classroom instruction to prepare workers for highly-skilled careers. Workers benefit from apprenticeships by receiving a skills-based education that prepares them for good-paying jobs. Apprenticeship programs help employers recruit, build, and retain a highly-skilled workforce. [DOL's] role is to safeguard the welfare of apprentices, ensure equality of access to apprenticeship programs, and provide integrated employment and training information to apprenticeship sponsors and the local employment and training community." HRSA included questions from the DOL's Employment and Training Administration (ETA) instrument to save time and effort, reduce reporting burden for awardees, and make the data comparable between the two agencies.

3. What are HRSA's plans to expand its online data dashboards into a database of entries, exits, and skills/credentials gained by participants in grant-funded health workforce programs? Publishing more data on the career paths of participants could help create more employment opportunities in the healthcare workforce.

Per 42 USC 292 et seq, HRSA cannot share individual-level data. Specifically, U.S. Code Title 42 Chapter 6A Subchapter V Part E Section 295k(e)(3), states the following: "(A) Notwithstanding any other provision of law, personal data collected by the Secretary or any program entity under this section may not be made available or disclosed by the Secretary or any program entity to any person other than the individual who is the subject of such data unless (i) such person requires such data for purposes of this section, or (ii) in response to a demand for such data made by means of compulsory legal process. Any individual who is the subject of personal data made available or disclosed under clause (ii) shall be notified of the demand for such data. (B) Subject to all applicable laws regarding confidentiality, only the data collected by the Secretary under this section which is not personal data shall be made available to bona fide researchers and policy analysts (including the Congress) for the purposes of assisting in the conduct of studies respecting health professions personnel."

Sincerely,

Luis Padilla, M.D.
Associate Administrator