Supporting Statement A

Voluntary Partner Surveys to Implement Executive Order 14058 in the Health Resources and Services Administration

OMB Control No. 0915-0212 - Revision

Note: HRSA requests a change in the OMB control number to 0906-XXXX, since 0915 is a prefix for HSA (the old name for HRSA).

A. Justification

1. Circumstances of Information Collection

This is a request for an extension of OMB approval for a generic clearance for the Health Resources and Services Administration (HRSA) to conduct customer satisfaction surveys and focus groups. In 1997, HRSA implemented Executive Order 12862 within the agency in relation to satisfaction of those entities who are our "partners" in delivery of services to the public. HRSA partners are typically State or local governments, health care facilities, health care consortia, health care providers, and researchers. HRSA partners may also include individuals served by HRSA programs and/or funding recipients. OMB granted a generic approval for HRSA to conduct satisfaction surveys under OMB No. 0915-0212. The current clearance expires 4/30/2024.

Executive Order 12862 directs agencies that "provide significant services directly to the public" to "survey customers to determine the kind and quality of services they want and their level of satisfaction with existing services." In addition, this Executive Order directs Agencies to continually reform their management practices and operations to provide service to the public that matches or exceeds the best service available in the private sector. In December 2021, the White House also issued Executive Order 14058, calling on the Federal government to improve its service delivery to its customers and put people at the center of Federal government activity.

HRSA provides a number of services and information to the public and to its partners. Many of these services are centered around information dissemination or in providing technical assistance to grantees. The purpose of this submission is to obtain generic approval for satisfaction surveys of our partners with various aspects of the "partnership" and to identify ways in which we can improve our services to them and to the beneficiaries of the program.

In accordance with this directive, HRSA is requesting approval of this generic umbrella ICR from OMB to conduct the partner surveys with a slight increase in the allotted burden hours so that HRSA can assess its performance from a larger swath of its partner population to help ensure that HRSA’s customer service delivery continues to improve, in accordance with the directive in Executive Order 14058.

In accordance with OMB guidelines for generic clearances for voluntary customer satisfaction

surveys, HRSA has an independent review process (see Supporting Statement B, #5) to assure the development and implementation of high-quality partner surveys within HRSA. Survey instruments developed for use under this generic clearance will be submitted to OMB for review and inclusion in the public docket.

In addition, HRSA requests to renew the following currently approved instruments under 0915-0212 along with the renewal of this generic umbrella collection. Copies of each instrument and the fast-track generic memo are provided in the listing of Information Collection Instruments on reginfo.gov:

1. HRSA Electronic Handbooks Customer Service Survey
2. Maternal, Infant, and Early Childhood Home Visiting Program Technical Assistance Resource Center Satisfaction Surveys
3. Title V Information System User Satisfaction Survey
4. Maternal, Infant, and Early Childhood Home Visiting Program On-Site Compliance Review Awardee Feedback Form
5. Division of Independent Review Objective Review Assessment Survey
6. Collection of Qualitative Feedback on Telehealth.HHS.gov
7. Health Center Program Support Customer Service Survey
8. Division of Grants Management Operations Customer Service Satisfaction Survey
9. Early Childhood Systems Technical Assistance and Coordinating Center Customer Satisfaction Surveys
10. Be The Match Donation Experience Survey (now NMDP Donation Experience Survey)
11. Maternal, Infant, and Early Childhood Home Visiting Innovation Technical Assistant Center Satisfaction Surveys
12. Tree Testing of HRSA's Ryan White HIV/AIDS Program website
13. HRSA Web Survey
14. National Practitioner Data Bank Usability Survey
15. 2024 Maternal, Infant, and Early Childhood Home Visiting Program All Grantee Meeting Evaluation Surveys
16. Evaluation Survey of Eligible National Practitioner Data Bank Entity Users: Relevance of Information Collected via NPDB Query Forms
17. Maternal, Infant, and Early Childhood Home Visiting Site Visit Awardee Feedback Form

2. Purpose and Use of the Information

The primary use for information gathered through focus groups and voluntary partner surveys is to identify strengths and weaknesses in current HRSA materials or service provisions and to make improvements that are practical and feasible. Information from these partner surveys is used to plan and redirect resources and efforts to improve or maintain a high quality of service to the health care providers, their clients, and other partners. Timeliness, appropriateness, accuracy of information, courtesy, or problem resolution will be assessed in the context of individual programs.

The following OMB approved information collections listed below provide examples of instruments used by HRSA programs. HRSA intends to use this generic umbrella ICR for any focus groups and voluntary partner surveys that may come up.

The following collections are some that we intend to include with the initial submission. The first two collections listed below are being proposed for renewal along with the larger ICR package. The third collection is a focus group which was approved under the current ICR package but will not be renewed (this collection will be provided as supporting documentation in reginfo.gov). The purpose of these information collections are to determine the level of satisfaction with existing services and to identify problems and areas for improvement.

- The Maternal and Child Health Bureau (MCHB) conducted a customer satisfaction survey of attendees of the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program All Grantee Meeting to attain feedback on the meeting sessions and the conference overall. The purpose is to continuously improve future All Grantee Meetings so they meet the needs of attendees.

- The Office of Communications conducted a customer satisfaction survey of visitors to HRSA's websites to establish benchmarks and identify & prioritize areas of improvement & enhancement to the websites, with the goal of improving the experience for visitors.

- The Health Systems Bureau conducted a series of focus groups to get feedback on three campaign concepts specifically designed to resonate with minority audiences, garner support for organ donation, and motivate people to register as organ donors. The purpose of this information collection was to inform future outreach campaigns and determine the dissemination channels used to reach these target audiences.

This information provided important feedback regarding our partners' satisfaction and suggestions for improvement of various aspects of HRSA program services and information materials.

3. Use of Improved Information Technology and Burden Reduction

As appropriate, automated information technology using online or web-based tools will be used to collect and process information for these surveys. In some instances, however, the most appropriate methodology will involve written or oral responses to brief forms, such as feedback forms provided to give opinions about information materials or brochures. Focus group sessions would be held primarily in the routine method of a face-to-face setting, and sometimes online.

4. Efforts to Identify Duplication and Use of Similar Information

Each information collection instrument will be designed to reflect the specifics of the partner population served by a program. Proposed collections will be reviewed carefully to avoid potential duplication. Information about program plans for partner surveys will also be shared among HRSA staff at an early stage to promote a coordinated effort to collect data. HRSA PRA staff will review and edit any instruments under this umbrella generic collection to help ensure that they include only items that provide critical information for conducting the survey or focus group, and the requested information is the minimum required for the intended use of the data.

5. Impact on Small Businesses or Other Small Entities

The information collections to be approved under this control number will not have a significant impact on small businesses or other small entities. Information collections will have a low burden, be short, and will ask for opinions and suggestions.

6. Consequences if Information Collected Less Frequently

Information collections will be conducted only at intervals that are considered appropriate to measure the impact of changes implemented because of initial satisfaction surveys or focus groups and to monitor the continued level of performance. In many cases these information collections are one-time projects used to evaluate satisfaction with training or a technical assistance workshop. In some instances, an information collection will be conducted on an annual or biennial basis after establishment of a baseline. Collection on a less frequent basis would reduce the practical utility of the information and inhibit the program's ability to monitor changes. HRSA PRA staff will review and edit any fast-track collections that fall under this umbrella generic collection to help ensure that they do not collect information more frequently than what is required.

7. Special Circumstances Relating to the Guidelines in 5 CFR 1320.5

The surveys and focus groups falling under this umbrella generic clearance will be implemented in a manner fully consistent with 5 CFR 1320.5.

8. Comments in Response to the Federal Register Notice/Outside Consultation

As required be 5 CFR 1320.8(d), a 60-day Federal Register Notice (FRN) was published in the Federal Register on October 20, 2023, vol. 88, No. 202; pp. 72494-95. No comments were received on the 60-day FRN. A 30-day FRN was published in the Federal Register on January 5, 2023, vol. 89, No. 4, pp. 788-89. One comment has been received. There are no changes made to the information collection since the comment received is outside the scope of this information request.

In order to further solicit feedback from the public, the HRSA will use annual grantee meetings, program hotlines, routine contacts with partners, focus groups and other qualitative information collection activities to identify areas of interest and concern to partners and will build the design and content of its information collections using this input. HRSA will call upon their in-house statistical staff and the staff of contractors in developing survey plans. As needed, they may also call upon the statistical resources of the National Center for Health Statistics, which has a questionnaire design laboratory. As appropriate, agencies will establish panels of outside experts to assist in design and implementation of the surveys.

9. Explanation of any Payment/Gift to Respondents

Typically, HRSA does not provide any remuneration to respondents for its surveys or focus groups. On occasion, however, there may be a need for nominal remuneration to focus group participants to compensate them for the time and inconvenience required, if there is good reason to believe this renumeration will increase responses from hard-to-reach groups. Should this type

of situation arise, the level of remuneration is not expected to exceed $20-25 for completing the information collection and will depend on the amount of respondent time and expense projected. If the level of renumeration is above that amount, the reasons will be clearly explained in the fast-track memo requesting approval of the information collection.

10. Assurance of Confidentiality Provided to Respondents

To date, the HRSA customer satisfaction surveys have not collected personally identifiable information from respondents. Data will be kept private to the extent allowed by law. Participation is fully voluntary and responses are typically anonymous. In instances where respondent identity is needed (e.g., for follow-up of non-respondents, or for a longitudinal design), the information collection will fully comply with all aspects of the Privacy Act. Respondents will be assured that neither their participation/non-participation nor any responses to items will have any effect on their participation in HRSA programs.

11. Justification for Sensitive Questions

The information collections falling under this umbrella generic clearance will not contain questions of a sensitive nature.

12. Estimates of Annualized Hour and Cost Burden

12A: Estimates of Annualized Hour Burden

The number of respondents was revised based on information collections approved under the collection approved in 2021. The total estimated annual burden hours estimated for this ICR are summarized in Table 1 below.

Table 1: Estimated Annualized Hour Burden

Instrument	Number of Respondents	Number of Responses per Respondent	Total Responses	Average Burden per Response (in hours)	Total Burden Hours
Evaluation forms	41,000	1	41,000	0.05	84050000
Surveys (telephone, online)	55,000	1	55,000	0.10	8,250
Focus groups	2,000	1	2,000	1.50	3,000
Total	98000		98000		84061250

12B: Estimates of Annualized Cost Burden

Respondents are expected to be a mix of grantee staff and health care providers; therefore, HRSA is using Healthcare Practitioners and Technical Occupations as our BLS occupational

group for the purpose of estimating costs to respondents. The median wage is $37.38 per hour.[1] For the estimate, this value will be multiplied by 2 to account for overhead costs, for a total of $74.76 per hour. Based the annual total burden of 13,250 hours, the annual cost to respondents would be $990,570.

13. Estimates of other Total Annual Cost Burden to Respondents or Recordkeepers/Capital Costs

Focus group participants will be reimbursed for any travel or incidental costs associated with traveling to a central location for interview. Except for focus groups, costs to respondents will be limited to their time to provide the requested information.

14. Annualized Cost to the Government

Estimates of annualized cost to the government are based off the costs of instruments which we will renew with the umbrella generic collection. The median cost was $16,626. Based on our review of the number of collections submitted with the previous version of this ICR and the efforts that we intend to make to increase use of generic clearances, we estimate about 15 instruments to be submitted for approval annually. Therefore, our estimated annual cost to the Government is $249,390.

15. Explanation for Program Changes or Adjustments

HRSA anticipates that the total burden of collections under this generic package will be 6,525 hours greater than under the prior approval for two reasons. First, HRSA is incorporating the additional burden amount approved for this ICR via a 2023 non-substantive change memo. Second, HRSA is accounting for upcoming efforts to get public input from a larger swath of HRSA's partners in compliance with Executive Order 14058. HRSA has decreased its estimate of the average burden per response for surveys to account for the increasing use of telephone and online surveys, rather than mail-in surveys, since the latter are more time-consuming.

16. Plans for Tabulation, Publication, and Project Time Schedule

There are no plans for detailed statistical analyses or dissemination of survey results. Generic information collections are not intended to be statistically rigorous or produce data for the public.

17. Reason(s) Display of OMB Expiration Date is Inappropriate

No exemption is being requested. The expiration date will be displayed.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

There are no exceptions to the certification.

[1] https://www.bls.gov/oes/current/oes290000.htm