

SUPPORTING STATEMENT

Work Force Recruitment in Bureau of Primary Health Care (BPHC)-Funded Health Centers Survey

A. Justification

1. Circumstances of Information Collection

HRSA's mission and key legislative authority tasks its programs "to improve health and achieve health equity through access to quality services, a skilled health workforce and innovative programs."

As the Affordable Care Act is fully implemented, it is critical that HRSA receives timely data on employment vacancies and employment opportunities in health centers to meet the expected surge in demand for services. In addition, the information on veterans hiring provides needed data for the President's veteran's hiring challenge.

This survey will allow HRSA to track workforce trends in health centers over a three year period, assessing both vacancies and recently hired employees by profession and veteran status. The survey also requests information about the length of time vacancies were open by position type. Together, these data provide a picture of health center workforce needs and hiring trends that will inform HRSA's efforts to provide workforce-related training and technical assistance to health centers.

This survey will also assist in leveraging existing and planned workforce programs and initiatives within HRSA and with our partners at the Department of Labor, the Substance Abuse and Mental Health Services Administration (SAMHSA), and other federal agencies. The additional information gained by the survey will enhance efficiency and effectiveness of these collaborative workforce initiatives and potentially reduce the overall implementation costs.

2. Purpose and Use of Information

This survey is designed to collect information from HRSA-funded health centers regarding their current workforce recruitment efforts. This data is essential in demonstrating the effectiveness of recruitment efforts over the next two years for returning veterans, many of whom have trained as health care providers and/or administrators during their time in the service.

The survey results will be used to help assess how health centers have filled recent vacancies, whether the availability of veterans to join the health center workforce is impacting their hiring efforts, and what additional training or technical assistance that might be needed to support health center recruitment at a critical time of expansion in the nation's health care safety net.

For example, the survey will help answer questions about workforce capacity and capability by organization, by region, and by state. This will help HRSA and our partners plan outreach efforts and implementation in specific geographic areas. The survey will also provide information on the type of

positions that health centers are recruiting, such as nurse or physician, which will assist in planning specific programs to help fill gaps in staff type.

3. Use of Improved Information Technology

An online data collection tool, Survey Monkey, will be used to collect information electronically from BPHC-funded health centers. The use of this tool will reduce burden on the participants, as well as aid in efficient analysis of the collected information.

4. Efforts to Identify Duplication

Following discussions with other national organizations that work with BPHC-funded health centers, it was determined that this information does not currently exist nor is it being collected by other entities. This is a unique data collection effort.

5. Involvement of Small Entities

The information being requested has been held to the absolute minimum required for the intended use of the data.

6. Consequences if Information Collected Less Frequently

For effective monitoring and evaluation of the program, we will need a semi-annual collection. This data collection schedule will allow HRSA to make “real-time” adjustments in our programs that will maximize impact on health center hiring efforts. Following our initial survey in August 2012, we plan to collect this data over a 3 year span in order to capture trends in ongoing workforce development needs.

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7. Consistency with Guidelines in 5 CFR 1320.5(d)(2)

The data are collected in a manner consistent with guidelines contained in 5 CFR 1320.5(d)(2), with the following exception: Respondents will be asked to respond to the survey within 14 days. This shortened timeframe is necessary to meet the reporting deadline described in section 1 (above).

8. Consultation Outside the Agency

A 60-day Federal Register Notice was published in the Federal Register on September 17, 2012, vol. 77, No. 180 (see attachment). There were two requests for the survey instrument, and no public comments.

9. Remuneration of Respondents

Respondents will not be remunerated.

10. Assurance of Confidentiality

This request does not involve the collection of individual level or personally identifiable information.

11. Questions of a Sensitive Nature

The survey does not collect confidential or protected information. There are no questions of a sensitive nature.

12. Estimates of Annualized Hour Burden

The program estimates that 1,200 health center grantees will be asked to respond to this survey twice per year. The burden includes the time for the grantee to read the survey instructions, collect the data and information requested, and to complete the online survey. This time estimate was developed with assistance from Seiji Hayashi, BPHC Chief Medical Officer (5600 Fishers Lane, Room 17-105, Rockville, MD 20852, shayashi@hrsa.gov). The most burdensome component will be to assemble the data to answer the question. This step could be done by a lower level staff. The estimate of burden is as follows:

Form	Type of Respondent	Number of Respondents	Responses per Respondent	Hours per Response	Total Burden Hours	Hourly Wage Rate	Total Respondent Cost
Form A (online survey)	Health Center Administrator & Staff	1,200	2	0.5	2,400	Average \$30/hr	\$60/ respondent or \$72,000 for all respondents

13. Estimates of Annualized Cost Burden to Respondents

There is no capital or start-up cost for this activity.

14. Estimated Cost to the Federal Government

The estimated annual cost to the federal government for this activity is approximately \$1,208.75 for 25 hours of staff time at an average rate of \$48.35 per hour (the current rate for a GS 13-5).

15. Changes in Burden

The only change in burden from the previously approved survey is that this request is for semi-annual surveys. Each respondent will therefore be asked to respond to the survey twice per year, whereas the previously approved survey was for a one-time emergency data collection effort.

16. Time Schedule, Publication and Analysis Plans

The survey will be fielded in February or March 2013 (approximately 6 months after the last survey on this topic). The survey will be open for 2-4 weeks. The data will be compiled within 4 weeks of the closing date and used for internal planning and program development. The data may also be shared with HRSA grantees, HHS and/or the White House, as appropriate.

17. Exemption for Display of Expiration Date

The expiration date will be displayed.

18. Certifications

This project fully complies with CFR 1320.9.