

August 25, 2023

Dear Awardee,

NORC at the University of Chicago is excited to be moving forward with our evaluation of the Health Resources and Services Administration's (HRSA) Health and Public Safety Workforce Resiliency Training Program (HPSWRTP) and Promoting Resilience and Mental Health among Health Professional Workforce (PRMHW) program. During our April 18th meeting, some awardees asked questions regarding Institutional Review Board (IRB) engagement. As a follow-up, this letter provides helpful IRB-related resources and an update from NORC's IRB.

On June 26, 2023, NORC's IRB determined that NORC's program evaluation is '*Not Human Subjects Research*'. Please see the accompanying documentation for further details.

The following resources are attached:

- Additional information on IRB Review.
- Additional information about the Provider Resiliency Evaluation.
- The letter from NORC's IRB with their determination that the evaluation is not human subjects research.

Pending approval from the United States Office of Management and Budget, **we anticipate that data collection could begin as early as October 2023**. If you need to speak with your IRB about NORC's evaluation activities, we ask that you please do so before October. We hope that providing these resources to you now will help ensure that there is no delay in beginning data collection this fall.

We will be in touch with updates and guidance soon. For now, we encourage you to reach out to project officers with questions about your involvement with the evaluation. You can also reach the NORC team at norceval@norc.org with questions about the evaluation's materials and protocol.

Sincerely,



Britta Anderson, PhD
Project Director

Additional Information about IRB Review

What is the “Not Human Subjects Research” determination?

All IRBs in the U.S. are regulated by the United States Department of Health and Human Services (HHS) Office for Human Research Protections (OHRP). This office communicates federal regulations (i.e., Title 45 CFR Part 46) to IRBs, including specifying the types of projects that are exempt from IRB review.

According to the NORC IRB, the Provider Resiliency Evaluation does not meet the Federal Policy for the Protection of Human Subjects (Common Rule) federal definition of human subjects research: “systematic investigation designed to develop or contribute to generalizable knowledge.”

The ‘Not Human Subjects Research’ determination by NORC’s IRB **indicates that these federal regulatory requirements *do not apply* to the provider resiliency evaluation activities**. Given this determination, the attached official ‘Not Human Subjects Research’ letter should provide sufficient documentation for most awardee organizations’ IRBs. However, we understand some institutional IRBs may want to review the provider resiliency evaluation protocols to confirm the NORC IRB determination, and/or require their own review and determination for the awardee organization to engage in evaluation activities.

For more information about this determination, we recommend the following resources:

1. U.S. Department of Health and Human Services, Office for Human Research Protections. 2020. “Human Subject Regulations Decision Charts: 2018 Requirements. Chart 1.”
<https://www.hhs.gov/ohrp/regulations-and-policy/decision-charts-2018/index.html>
2. Brown University. 2018. “Does My Project Need IRB Review?” Human Research Protection Program
<https://www.brown.edu/research/sites/research/files/1.%20Does%20My%20Project%20Need%20IRB%20Review.pdf>

Additional Information about the Evaluation

What will we be asked to do that might be relevant to an IRB?

While this evaluation will rely on data from multiple sources, it is critical for NORC and HRSA to hear directly from the healthcare workers who were offered program-funded trainings, resources, and other activities. To achieve this aim, NORC has developed a 10-15 minute web-based survey called the **Healthcare Workforce Survey**. Awardees expressed concerns about sharing individuals’ contact information with NORC, so we adapted our methodology and will instead provide a link to the survey and invitation/reminder text for you to disseminate. Some awardees noted they wanted to consult with their IRBs about sending the survey link and invitation/reminder text.

The table below includes additional details about the survey, and a recording of NORC’s webinar discussing planned evaluation activities can be accessed at:

<https://norc.zoom.us/rec/share/DcnzfQqe4Qj3tdI45sJ9eE3ATQ5GVWcMjTpT3K2K7wqbFBjYWw6lV0gu2CNE9ls.-Ht5NGpKAssvHLsI> (Passcode: 94\$#r#!8W)

Please contact the NORC team at norceval@norc.org to request copies of the draft instruments and recruitment materials, as needed.

Name	Provider Resiliency Evaluation
Funding Source	Bureau of Healthcare Workforce; HRSA
Brief summary of the purpose and scope of the evaluation	<p>The Public Health Service Act and the American Rescue Plan Act of 2021 authorized three programs that are part of the BHW: 1) the Health and Public Safety Workforce Resiliency Training Program (HPSWRTP); 2) the Promoting Resilience and Mental Health among Health Professional Workforce (PRMHW) program; and 3) the Health and Public Safety Workforce Resiliency Technical Assistance Center (HPSWRTAC).</p> <p>Each program was designed to address provider resiliency in unique ways. The HPSWRTP funds resilience training activities that use evidence-based strategies for the health workforce in rural and underserved communities. The PRMHW program supports organizations’ evidence-based programs or protocols that foster resilience and wellness among the health workforce in these communities. The HPSWRTAC provides tailored training and technical assistance to recipients of HPSWRTP and PRMHW awards.</p> <p>The purpose of the planned evaluation is to assess the three programs with respect to their goals of promoting resiliency and mental health in the health workforce. Data collection efforts will inform BHW leadership about the progress, costs and benefits, and impact of these efforts to support the delivery of health care in the United States. As a part of the evaluation, we will carry out the following data collection activities: Healthcare Workforce Survey (including comparison group), Awardee Training and Services Report, Fielding Tracker, Awardee Survey about the TAC, Awardee Cost Workbook, Awardee Qualitative interviews, and a Qualitative Interview with the Technical Assistance Center.</p>
Evaluation Questions Pertaining to the Healthcare Workforce Survey	<p>The evaluation questions pertaining to the Healthcare Workforce Survey include:</p> <p>Both the HPSWRTP and PRMHW Programs-</p> <p>What are the perceived changes in outcomes before and after activities, trainings, and/or services in the target population? Key outcomes include burnout, resiliency, work environment, support needs, mental health.</p> <p>HSPWRTP Only-</p> <p>Are perceived changes in key outcomes, as well as current levels of burnout, resiliency, intent to leave, and absenteeism, different between the target population and a comparison group? (NORC will be responsible for identifying and surveying the comparison group. This is not an expectation of the awardees.)</p>
Healthcare Workforce Survey Content	<p>This voluntary and confidential survey will assess perceived outcomes associated with award-funded trainings/activities (such as burnout, resiliency, absenteeism, and intent to leave profession and employment setting) as well as other related factors (such as perceptions of mental health, whether respondents found trainings/activities to be helpful, and reasons for burnout). The Healthcare Workforce Survey will also assess perceptions about organizational culture and whether respondents feel prepared for another infectious disease outbreak like COVID-19.</p>

<p>Procedures for the Healthcare Workforce Survey</p>	<p>The Healthcare Workforce Survey will be a web-based survey that respondents can access through a secure link. To ensure privacy of personally identifiable information (PII), awardees will send out email invitations to complete the survey. Awardees will be provided with detailed instructions on how to contact their target program population throughout the data collection period. Outreach will be through email only, using customized email templates, with an initial survey invitation email followed by approximately weekly email follow up.</p> <p>Awardees will be asked to use the Healthcare Workforce Fielding Tracker to record all outreach conducted, including the number of emails sent, date of sent emails, and the number of undeliverable emails (no PII will be collected). Outreach emails will introduce awardees and respondents to the survey, provide instructions on completing the survey, include a secure link to the survey, and include survey support team contact information for questions and concerns and a link to frequently asked questions (FAQs) about the survey.</p> <p>The Healthcare Workforce Survey will be administered twice- once in 2023 and once in 2024. The data collection plan for this project has been designed to minimize respondent burden by utilizing web-based technology. The survey will be programmed in Voxco, a FedRAMP-certified survey platform. The NORC team will develop the survey in Voxco and send the links to the awardee organizations, who will then field the links to the target population via survey invitation emails with imbedded links. NORC will work with a panel vendor to recruit respondents to the Comparison Group Survey.</p> <p>The average burden time (in hours) for each instrument: 1) Healthcare Workforce Survey: 0.25 2) Awardee Fielding Tracker: 4</p>
<p>Plans for analysis of the Healthcare Workforce Survey data</p>	<p>NORC will use quantitative and qualitative analyses to describe characteristics and outcomes among the awardee program participants. If possible, NORC will integrate survey and secondary data to understand how contexts and award programs are related to outcomes. NORC will also compare the HPSWRTP program to a comparison group.</p> <p>Only NORC staff will have access to the respondent-submitted data.</p> <p>NORC will present the results of our analyses in tables and visuals in the interim and final evaluation reports. NORC will prepare specific tabulations during development of the outline for each evaluation report. The Fielding Tracker is only used to support survey administration and does not require analysis.</p>

**Institutional Review Board Certification
Determination of Not Human Subjects Research**

Principal Investigator/Project Director: Alana Knudson

Department: Health Care

IRB Protocol Number: 23-06-1342

Protocol Title: Provider Resiliency Programs Evaluation- Main Evaluation

Determination Date: June 26, 2023

This certifies that the protocol described above was submitted for review and it is determined that the activities do not meet the definition of human subjects research by the NORC Institutional Review Board (IRB00000967), under its Federal Assurance #FWA00000142, which is valid through July 19, 2023.



Micah Sjoblom