

November 14, 2011

Office of Management and Budget  
ATTN: Desk Officer for HRSA  
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Washington, DC 20503

SENT VIA ELECTRONIC MAIL TO: [OIRA\\_submission@omb.eop.gov](mailto:OIRA_submission@omb.eop.gov)

To Whom It May Concern:

The undersigned members of the Federation of Associations of Schools of the Health Professions (FASHP) write in response to the notice “Agency Information Collection Activities: Submission for OMB Review” published in the October 14, 2011 *Federal Register* (76 FR 29251-63930).

Created in 1968 as a forum for representatives from organizations of health professions education, FASHP addresses education’s role in organizational matters of health care, encourages effective collaboration among the health professions in education and practice, and prepares health professionals for the future. FASHP promotes health professions training programs, such as Titles VII and VIII, and programs related to education financing.

FASHP welcomes the opportunity to comment on the Health Resources and Services Administration’s (HRSA) proposed revision to the Bureau of Health Professions (BHP) Performance Report for Grants and Cooperative Agreements (OMB No. 0915-0061). As strong supporters of HRSA’s health professions workforce programs, FASHP member organizations and the institutions they represent applaud HRSA’s goals of streamlining the reporting process and updating information collection efforts in a way that allows meaningful, consistent assessments of the programs’ successes. These objectives align with the emphasis on measuring the long-term impact of the programs when the Title VII and VIII programs were reauthorized through the Affordable Care Act (P.L. 111-148 and P.L. 111-152). The law included an important component to achieving these goals – the authority for the Secretary of Health and Human Services to supplement individual grants for this purpose – and we strongly recommend that HRSA employ that authority to enable grantees to comply with any additional, resource intensive reporting requirements.

We also commend HRSA for seeking input and requesting feedback on the data collection revision. Our ability to respond constructively to the agency’s request, however, would have required an opportunity of greater insight into the implementation process as well as time to review specifics of the proposal presented to the Office of Management and Budget (OMB). We encourage HRSA to partner with our member organizations in the future to achieve our mutual goal of successfully implementing a data collection mechanism that strengthens HRSA’s workforce programs without imposing an unreasonable burden on grantees or the agency.

Sincerely,

American Association of Colleges of Nursing  
American Association of Colleges of Osteopathic Medicine  
American Association of Colleges of Pharmacy  
Association of American Medical Colleges  
Association of American Veterinary Medical Colleges  
Association of Chiropractic Colleges  
Association of Schools and Colleges of Optometry  
Association of Schools of Allied Health Professions  
Physician Assistant Education Association