

VI. Now the Work Begins

No matter how well planned, each community HANES will change and evolve between conception and completion. Therefore, it is essential to have a structure in place that demands consistency, but is flexible enough to incorporate change.

A. Maintaining Staff Communication and Coordination

At the start of the survey, unanticipated procedural issues are likely to arise. Establishing a chain of command for communication will help staff members when they have a question or concern. It is also important to have a plan for how to make procedural changes when necessary, and communicate these changes to affected staff.

B. Quality Assurance

Throughout the data collection period, senior study staff should plan to monitor staff performance, as well as the interview and measurement data being collected, to ensure overall quality. Frequent feedback to staff on their performance, and the overall progress of the study, is critical to maintaining staff morale.

1. Assessing Staff

The study protocol should include methods for assessing staff performance. These methods ensure that the staff is following specified procedures and can help determine when additional training is needed. Scheduling days when senior staff can shadow the field, clinic and

central office staff during their regular operations also provides an opportunity for evaluating staff performance and adherence to protocols.

2. Data Quality Assurance

To maintain the integrity of the data, it is important to establish procedures to assess all data collected during recruitment, interviews, examinations and laboratory analysis. It is also important that clear procedures are in place for documenting the identification and correction of data errors. As data quality procedures and protocols are updated, it is important that staff are made aware of changes and know how and where to access the most up to date documentation. Monitoring data quality will be an on-going process.

3. Survey progress updates

Keeping people informed within your program as well as around the agency is also a high priority. Creating and disseminating reports on progress can accomplish this. In designing progress reports organizers should consider what indicators will best illustrate survey progress and who within the agency needs to receive these reports.

NYC HANES Staff Communication Methods

NYC HANES senior staff instituted weekly meetings for each operational area – the central office, field and clinic. During these meetings the staff discussed successes and challenges from the previous week, and were trained on any procedural changes made since the previous meeting. Because it was difficult to bring all survey staff together on a regular basis, senior study staff produced a weekly newsletter to update staff on global survey issues, such as study progress, technical issues, upcoming events and milestones.

*[View: NYC HANES sample weekly newsletter, and field screener weekly meeting agenda
<http://www.nyc.gov/html/doh/html/hanes/section6.shtml>]*

NYC HANES Quality Assurance

During NYC HANES, senior staff produced and examined weekly data reports. Feedback was provided to all staff to ensure that data collection procedures were being followed. Some examples of information reported include:

- The mean and distribution of blood pressure measurements for each health technician.
- Timing reports of the interview and examination components for each health technician.
- The status of all households visited the previous week.

NYC HANES Program Monitoring

Weekly overall progress reports were generated and sent to key staff members within the agency. Weekly geographic segment reports were used internally to assess field recruitment progress. Periodic narrative progress reports went out to larger audiences within the agency and the community. Additionally, the local media were alerted when important milestones were reached.

Internal Reporting

For internal use by survey staff, weekly reports were produced that showed the number of:

- Households who completed an eligibility questionnaire (completed screeners).
- Eligible survey participants who made an appointment (enrollment rate).
- Participants who kept their appointments (completed interviews).
- Response rates for each geographic segment.

These reports were used to drive decisions regarding the amount of field coverage needed in certain neighborhoods, whether outreach was necessary to community groups and the media, and whether to consider extending the survey period.

[View: Sample progress report

http://www.nyc.gov/html/doh/downloads/pdf/hanes/HANES_work_progressreport.pdf]

C. Keeping Staff Motivated

The difficult work and long hours required to conduct a community HANES study can be a recipe for burnout. Recruitment staff may encounter household residents who are angry or suspicious, and they may tire of the same routine week after week. Other issues may plague examination staff including erratic participant flow (slow periods interspersed with busy periods) or survey participants who are upset or distressed. Devising methods to keep staff motivated is critical.

D. Keeping the Community Informed

Another critical piece of conducting a successful survey is keeping the community informed. It is important to both raise the general awareness in the community, and to reach out to the media and community leaders who may be able to sway residents in selected areas toward participation. Outreach efforts should be both proactive and reactive.

1. Proactive Outreach

As recruitment begins in each new neighborhood, it is important to publicize the survey so that residents of selected households will have

some awareness of recruitment efforts and knowledge about what participation in the survey involves. Even vague recognition of the survey can improve response rates.

2. Reactive Outreach

As data collection progresses, recruitment problems may emerge in particular neighborhoods or among specific populations. Weekly progress reports and feedback from recruitment staff can help define the extent of the problem and the reasons behind it. Existing relationships with influential community organizations, elected officials and the media will be critical to increasing response rates.

E. Making Changes Midstream

No matter how carefully study procedures are thought through, it is likely that minor, and sometimes major changes will need to be made mid-study. For example, the recruitment schedule could be disrupted by a long heat wave or continual storms; crucial staff members may quit and be difficult to replace; or a batch of specimens may be damaged during shipping. Being prepared for surprises, and ready to modify operational systems will enable organizers to overcome unforeseen obstacles.

NYC HANES: How We Kept Staff Motivated

NYC HANES coordinators found that relaxed weekly meetings were key to maintaining morale. Meetings gave staff members the chance to socialize and discuss their successes and challenges. Coordinators listened to the ideas presented by the staff and implemented many changes that improved operations. Regular meetings also provided the opportunity to re-emphasize the importance of the survey and create a sense of “ownership” among all staff.

Senior staff developed ways to recognize the contributions of staff members. At weekly field meetings, the field screener who enrolled the greatest number of participants the previous week was named “Screener of the Week.” At clinic staff meetings, small contests with prizes kept staff engaged. Short articles in the weekly newsletter also highlighted the efforts of various staff members by explaining their role within the survey.

NYC HANES Proactive Outreach Efforts

NYC HANES proactive outreach efforts included:

- A kickoff press conference
- Follow-up press releases at survey milestones
- The use of citywide, neighborhood and ethnic press
- Letters of support from influential community leaders
- Packets sent to potential survey participants that included a follow-up letter and recent newspaper articles about the survey
- Copies of articles distributed at community meetings and in selected buildings
- “Outreach binder” containing copies of press releases, newspaper articles, and letters of support from elected officials and community leaders to be used by field staff.

[View: Outreach Documents

<http://www.nyc.gov/html/doh/html/hanes/section3.shtml>]

NYC HANES Reactive Outreach Examples

Resistance and Reticence in the Bronx

When field screeners encountered strong resistance among some members of the Hispanic community in the Bronx because of concerns about undocumented immigration status, senior staff worked with DOHMH’s community affairs staff to reach out to churches and community-based organizations, as well as Spanish print and broadcast outlets. Field staff also emphasized the study’s strict confidentiality policies.

Hard to Reach Residents on the Upper East Side

NYC HANES included several segments on the Upper East Side of Manhattan, where many affluent residents live in high-rise buildings staffed by doormen. Finding residents at home and communicating with them via doormen and other gatekeepers proved extremely difficult. For assistance, study planners reached out to Community Boards and building management. With the help of the DOHMH press office, the interest of *The New York Times* was captured and an article documenting the difficulties faced in this particular neighborhood was published.

[View: NY Times article

http://www.nyc.gov/html/doh/downloads/pdf/hanes/HANES_start_nytimes.pdf]

NYC HANES: Developing the Home Interview Option

NYC HANES found that some participants would not travel to clinic locations. This was especially true for elderly participants or those caring for sick family members. To increase participation rates, a special team of home interviewers was trained. These interviewers visited participants to conduct a portion of the interview, and take blood pressure and body measurements in the home. Home interviewers traveled in department-owned cars, equipped with laptop computers, scales, stadiometers, manometers, mercury spill kits and blood pressure cuffs.

Participants who were interviewed in their homes were then strongly encouraged to come to one of the NYC HANES clinics to provide blood and urine specimens and complete the more sensitive portions of the interview.