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## Welcome to OAT PIMS tutorials

These are detailed step-by-step procedures to help Grantees to get the best from their new system.

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# 1 Grantee Functions in OAT PIMS

## 1.1 Grantee Login (How to Access and Use OAT PIMS)

Grantees will access OAT PIMS through EHB  
Be registered with EHB

Type the following URL on your browser and hit “Enter”:

<https://grants.hrsa.gov/webexternal/login.asp>

This brings up the EHB logon screen

U.S. Department of Health and Human Services  
**HRSA**  
Health Resources and Services Administration  
E-HANDBOOK HOME

HRSA Electronic Handbooks for Applicants/Grantee

[home](#) | [contact us](#) | [more instructions](#) | [glossary](#) | [help](#) | [questions/comments](#)

**Login**

[Login](#)  
[Forgot Password](#)  
[Registration](#)

**Login**

**Contact Us:**  
Phone: 877-Go4-HRSA/877-464-4772; 301-998-7373  
Time: 9:00 a.m. to 5:30 p.m. Eastern Time (E.T.), Monday through Friday  
Email: [CallCenter@HRSA.GOV](mailto:CallCenter@HRSA.GOV)

Fields marked with an asterisk(\*) are required.

**LOGIN**

**Already Registered?**

\*Username   
\*Password

[Forgot your password?](#)

**Not Registered?**

- Registration is needed only once
- Read the getting started guidelines for [New Applicants](#) and/or [Existing Grantees](#)

**Warning!**

This site is maintained by the U.S. Government. It is protected by various provisions of Title 18, U.S. Code of Federal Regulations. Violations of Title 18 are subject to criminal prosecution in federal court. For site security purposes and to ensure that this service remains available to all users, we employ software programs to monitor traffic, to identify unauthorized attempts to upload or change information, or otherwise cause damage. In the event of authorized law enforcement investigations, and pursuant to any required legal process, information from these sources may be used to help identify an individual.

[Privacy Policy](#) | [Disclaimer](#)

### 1.1.1 Username and Password

Enter your username and password and click "Login"

The screenshot shows the HRSA Electronic Handbooks for Applicants/Grantee website. At the top left is the HRSA logo with the text "U.S. Department of Health and Human Services" and "Health Resources and Services Administration". To the right of the logo is the text "HRSA Electronic Handbooks for Applicants/Grantee". In the top right corner is a "HELP" button with a mouse cursor icon. Below the logo is a "Logon Menu" with options: "Login", "Forgot Password", and "Registration". The "Login" option is selected. Below the menu is a "Login" button. To the right of the menu is a "Login" section with a "home" link, "contact us" link, "more instructions" link, "glossary" link, "help" link, and "questions/comments" link. Below this is a "Contact Us:" section with a phone icon. It lists phone numbers (877-Go4-HRSA/877-464-4772; 301-998-7373), time (9:00 a.m. to 5:30 p.m. Eastern Time (E.T.), Monday through Friday), and email (CallCenter@HRSA.GOV). Below the contact information is a "Fields marked with an asterisk(\*) are required." section. This section is titled "LOGIN" and is divided into two columns: "Already Registered?" and "Not Registered?". Under "Already Registered?", there are two input fields: "\*Username" with the value "shsdced" and "\*Password" with masked characters. Below these fields is a "Login" button, which is circled in orange. Below the "Login" button is a link "Forgot your password?". Under "Not Registered?", there is a "Create an Account" button and a list of bullet points: "Registration is needed only once" and "Read the getting started guidelines for [New Applicants](#) and/or [Existing Grantees](#)". Below the "LOGIN" section is a "Warning!" section with a paragraph of text: "This site is maintained by the U.S. Government. It is protected by various provisions of Title 18, U.S. Code of Federal Regulations. Violations of Title 18 are subject to criminal prosecution in federal court. For site security purposes and to ensure that this service remains available to all users, we employ software programs to monitor traffic, to identify unauthorized attempts to upload or change information, or otherwise cause damage. In the event of authorized law enforcement investigations, and pursuant to any required legal process, information from these sources may be used to help identify an individual." At the bottom of the page is a "Privacy Policy | Disclaimer" link.

## 1.1.2 View Portfolio

From the EHB Welcome page click 'View Portfolio' on the "Home" left hand side menu

U.S. Department of Health and Human Services  
**HRSA**  
Health Resources and Services Administration  
E-HANDBOOK HOME

HRSA Electronic Handbooks for Applicants/Grantee  
SHAWNEE HEALTH SERVICE, Carterville, IL

HELP

Welcome George O'Neill (Last login date and time 4/30/2008 11:01:00 AM)

**Welcome**  
[home](#) | [logout](#) | [contact us](#) | [glossary](#) | [help](#) | [questions/comments](#)

**Contact Us:**  
Phone: 877-Go4-HRSA/877-464-4772; 301-998-7373  
Time: 9:00 a.m. to 5:30 p.m. Eastern Time (E.T.), Monday through Friday  
Email: [CallCenter@HRSA.GOV](mailto:CallCenter@HRSA.GOV)

Applicant/Grantee Electronic Handbook (EHB) provides all potential and existing grantees a means to conduct various activities electronically.

**WHAT WOULD YOU LIKE TO DO TODAY?**

- Manage Competing Applications**
  - [Read Electronic Submission Guide](#)
  - [Verify Grants.gov Application \(if required per Guidance\)](#)
  - [Work on My Application](#)
  - [Allow Other Members of My Organization to Work on My Application](#)
  - [Search Funding Opportunities](#)
- Manage Grants Portfolio**
  - [Read About Grant Registration](#)
  - [Add a Grant to My Portfolio](#)
  - [View Grants in My Portfolio](#)
  - [Work on a Grant](#)
  - [Work on My Noncompeting Application](#)
  - [Work on Other Post Award Submissions](#)
- Manage My Profile**
  - [Update My Contact and Address Detail](#)
  - [Verify My Email Address](#)
  - [Change My Password/Security Question](#)
  - [Read About Multiple Organization Registrations](#)
  - [Associate My Account with Another Organization](#)
  - [Set My Default Organization](#)
- Manage Organization Profile**
  - [Read About Organization Profile Management](#)
  - [Update Organization Information on File](#)
  - [Change Communication Contact for Organization](#)
  - [Manage Users of My Organization](#)

[Logout](#)

[Acceptable Use Policy](#)

This brings up the Grants List for the grantee

### 1.1.3 Open Grant Handbook

Select a grant by clicking on the "Open Grant Handbook" link on the last column of the Grants list.

U.S. Department of Health and Human Services  
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Health Resources and Services Administration  
E-HANDBOOK HOME

HRSA Electronic Handbooks for Applicants/Grantee  
SHAWNEE HEALTH SERVICE, Carterville, IL

HELP

Welcome George O'Neill (Last login date and time 4/30/2008 1:44:00 PM)

**View Portfolio**  
[home](#) | [logout](#) | [contact us](#) | [glossary](#) | [help](#) | [questions/comments](#)

Following are the grants for which you have been registered either as a project director or an employee. Click on the "Open Grant Handbook" link to manage a grant.

GRANTS LIST			
<b>H80CS00667:Health Center Cluster</b>		<b>Last Award Issued on: 09/25/2007</b>	
Project Period	4/1/2002-3/31/2011	Budget Period	4/1/2007-3/31/2008
CRS EIN	1370966854A1	Number of Support Years	6
Project Director	George M O'Neill, Email: reitester1@hotmail.com, Phone: (618) 985-8221		
Grant Contact	Carolyn Testerman, Email: reitester1@hotmail.com, Phone: (301) 594-4244		
Program Contact	Brenda Wise, Email: reitester1@hotmail.com, Phone: (301) 443-0621		
<a href="#">Open Grant Handbook</a>			
<b>H37RH00053:Black Lung/Coal Miner Clinics Program</b>		<b>Last Award Issued on: 06/25/2007</b>	
Project Period	10/1/1979-6/30/2010	Budget Period	7/1/2007-6/30/2008
CRS EIN	1370966854A1	Number of Support Years	29
Project Director	George M O'Neill, Jr., Email: reitester1@hotmail.com, Phone: (618) 985-8221		
Grant Contact	Donna Marx, Email: reitester1@hotmail.com, Phone: (301) 594-4245		
Program Contact	Kristin Martinsen, Email: reitester1@hotmail.com, Phone: (301) 594-4438		
<a href="#">Open Grant Handbook</a>			

**Home**  
Welcome  
**Manage Applications**  
Funding  
Opportunities  
View Applications  
Peer Access  
**Grants Portfolio**  
Add to Portfolio  
View Portfolio  
**Manage Organization Profile**  
View/Update Profile  
Update  
Communication  
Contact  
Manage Users  
**Manage Personal Profile**  
Update Profile  
Change Password  
My Registered  
Organizations

[Logout](#)

[Acceptable Use Policy](#)

This brings up the selected Grant menu.

## 1.1.4 Performance Reports

Choose to work on Performance Reports by clicking the link on the Grant menu.

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E-HANDBOOK HOME

HRSA Electronic Handbooks for Applicants/Grantee  
SHAWNEE HEALTH SERVICE, Carterville, IL

HELP

Welcome George O'Neill (Last login date and time 4/30/2008 1:44:00 PM)  
**Overview**  
[home](#) | [logout](#) | [contact us](#) | [glossary](#) | [help](#) | [questions/comments](#)

**Grant Handbook**  
H37RH00053

**Grant Menu**

- Overview
- View Awards**
- Last NGA
- Award History
- Administer**
- New Users
- Existing Users
- Submissions**
- Monitor Schedules
- Noncompeting
- Continuations
- Performance Reports**
- Progress Reports
- FSR
- Other Submissions

**Contact Us:**

Phone:	Time:	Email:
877-Go4-HRSA/877-464-4772; 301-998-7373	9:00 a.m. to 5:30 p.m. Eastern Time (E.T.), Monday through Friday	<a href="mailto:CallCenter@HRSA.GOV">CallCenter@HRSA.GOV</a>

Grant Electronic Handbook (EHB) provides authorized users of the grantee organization a means to conduct various activities electronically.

**Note:** You have multiple grants in your profile. Currently, you are working on Grant# H37RH00053. All data shown to you will be for this grant. To change to a different grant click [here](#).

**WHAT WOULD YOU LIKE TO DO TODAY?**

- View Grant Information**
  - ➔ [View Most Recent Notice of Grant Award](#)
  - ➔ [View Prior Notices of Grant Awards](#)
  - ➔ [Change/Control Who Can View this Information](#)
- Administer Grant Handbook**
  - [Learn About Grant Access Privileges](#)
  - ➔ [Allow Other Users from My Organization to Work on this Grant](#)
  - ➔ [Change/Control How Others Can Work on this Grant](#)
- Manage Post Award Submissions**
  - [Learn About Post Award Submissions](#)
  - ➔ [View Available Post Award Submission Schedule](#)
  - ➔ [Work on Noncompeting Continuation Application](#)
  - ➔ [Work on Performance Report or Other Submissions](#)
  - ➔ [Control How Others Can Work on Submissions](#)

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This brings up the Performance Report for the Grant.

### 1.1.5 Select "Performance Report" option

Select one of the first 3 options (Submit Report, Edit Report, and View Report) under "Performance Report".

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 Health Resources and Services Administration  
 E-HANDBOOK HOME

HRSA Electronic Handbooks for Applicants/Grantee  
 MINER'S COLFAX MEDICAL CENTER, Raton, NM

HELP

Welcome Kandace Kay Evans (Last login date and time 4/30/2008 1:05:00 PM)  
**Performance Reports**  
[home](#) | [logout](#) | [contact us](#) | [glossary](#) | [help](#) | [questions/comments](#)

Following is the list of performance reports for this grant along with their statuses. Based on its status, you can edit or view the performance report by clicking on the appropriate link.

**To search for a particular report, click on the search button and modify the search criteria to generate the results. For example, to search for submitted reports, click on the search button and select the "Submitted" option under the Schedule Status search criteria.**

Displaying 1-1 of 1

PERFORMANCE REPORT			
Input Parameters: <a href="#">(Show Parameters)</a>			
<b>ORHP Report</b>		<b>Schedule Status: In Progress</b>	
Type	Performance Reports	Due Date	2/7/2009
Available Date	4/4/2008	Submission Tracking Number	N/A
Reporting Cycle	Budget Period Start Date	Reporting Period	01/01/2008 - 12/31/2008
Online Submission	Yes (Preferred)	Submission Status	In Progress
Started by	Kandace Kay Evans on 4/7/2008 11:56:13 AM		
<a href="#">Submit Report</a>   <a href="#">Edit Report</a>   <a href="#">View Report</a>   <a href="#">View Related NGA</a>			

Page 1

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### 1.1.6 You are redirected to OAT PIMS Welcome/Home page

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HRSA Office for the Advancement of Telehealth  
 Performance Improvement and Measurement System  
[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee:  
 Current Report Period: - | Report Due Date:

[Home](#) [Reports](#) [Setup Options](#)

## Welcome to Performance Improvement and Measurement System

As required by the Government Performance and Review Act (1993), all federal agencies must develop strategic plans, describing their overall goals and objectives. These "GPRA Plans" must provide annual performance reports containing quantifiable measures of each program's progress in meeting the stated goals and objectives.

The performance assessment instruments developed by the Office for the Advancement of Telehealth (OAT) with its grantees will fulfill GPRA requirements to report to Congress on the impact of OAT's telehealth grant programs. Moreover, OAT hopes to use the information derived from these instruments to demonstrate the "value-added" that telehealth services contribute to improving health care. OAT has incorporated these performance assessment tools into the routine reporting required as part of the "mid-year or mid-cycle" and annual reports required under your grant. Each of the programs will also get reports comparing themselves to the entire set of grantees, on these same measures.

There will be two data reporting periods each year; during these biannual reporting periods, data should be reported for the previous six months of activity. Programs will have approximately six weeks to enter their data during each biannual reporting period.

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## 1.2 New Report Data Collection

### 1.2.1 Repeat Instructions 1.1.1 to 1.1.4.

### 1.2.2 Select the "Start Report"

Select the "Start Report" option on the "Performance Report" menu. The report status is "Not Started"

U.S. Department of Health and Human Services  
**HRSA**  
Health Resources and Services Administration  
E-HANDBOOK HOME

HRSA Electronic Handbooks for Applicants/Grantee  
SHAWNEE HEALTH SERVICE, Carterville, IL

Welcome George O'Neill (Last login date and time 4/30/2008 1:44:00 PM)

**Performance Reports**  
[home](#) | [logout](#) | [contact us](#) | [glossary](#) | [help](#) | [questions/comments](#)

Following is the list of performance reports for this grant along with their statuses. Based on its status, you can edit or view the performance report by clicking on the appropriate link.

To search for a particular report, click on the search button and modify the search criteria to generate the results. For example, to search for submitted reports, click on the search button and select the "Submitted" option under the Schedule Status search criteria.

Displaying 1-1 of 1

PERFORMANCE REPORT			
Input Parameters: ( <a href="#">Show Parameters</a> )			
ORHP Report			Schedule Status: Not Started
Type	Performance Reports	Due Date	4/7/2008
Available Date	4/4/2008	Submission Tracking Number	N/A
Reporting Cycle	Budget Period Start Date	Reporting Period	01/01/2008 - 12/31/2008
Online Submission	Yes (Preferred)	Submission Status	Not Started
Started by			
<a href="#">Start Report</a>   <a href="#">View Related NGA</a>			

Page 1

[Acceptable Use Policy](#)

You are redirected to OAT PIMS Welcome/Home page

### 1.2.3 Launch OAT PIMS

Click on "Continue" button

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Health Resources and Services Administration  
E-HANDBOOK HOME

HRSA Office for the Advancement of Telehealth  
Performance Improvement and Measurement System  
[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee:  
Current Report Period: - | Report Due Date:

[Home](#) [Reports](#) [Setup Options](#)

### Welcome to Performance Improvement and Measurement System

As required by the Government Performance and Review Act (1993), all federal agencies must develop strategic plans, describing their overall goals and objectives. These "GPRA Plans" must provide annual performance reports containing quantifiable measures of each program's progress in meeting the stated goals and objectives.

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There will be two data reporting periods each year; during these biannual reporting periods, data should be reported for the previous six months of activity. Programs will have approximately six weeks to enter their data during each biannual reporting period.

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The first "Setup Options" form is brought up. Provide and save all required information on all 4 forms on this Tab then move to "Reports" Tab.

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E-HANDBOOK HOME

HRSA Office for the Advancement of Telehealth  
Performance Improvement and Measurement System  
[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee:  
Current Report Period: - | Report Due Date:

Home Reports **Setup Options**

**Tools**  
[Validate/Submit Report](#)  
[PDF Print](#)  
[Grantee Information](#)

**Data Collection Period**  
-

**Report Status:** In Progress

**Setup Options**  
[Configure Report Period](#)  
[Configure Sites](#)  
(Total Listed: 0)  
[Select Specialty Areas](#)  
(Total Selected: 0)  
[Select Settings](#)  
(Total Selected: 0)

### Configure Report Period

During this reporting period: Yes No

1. Were TM interactions used for the purpose of overseeing students or trainees involved in formal educational programs. These sessions are used to fulfill formal education, licensure or certification requirements. (help)  Yes  No

2. Were TM interactions used for supervision of clinicians that is NOT REQUIRED to meet formal educational requirements. This includes sessions required to meet regulatory practice requirements, as well as supervision/advice requested by remote practitioners. (help)  Yes  No

3. Did you use TM to provide home telehealth services?  Yes  No

4. Did you provide telerehab services during this reporting period?  Yes  No

5. Did you provide services to patients in any of the following categories during this reporting period?  
 Yes  No

- CHF
- COPD
- Asthma
- Diabetes
- Mental Health
- Other Chronic Condition

6. Your program is a:

Are the set-ups above complete?  Yes  No

**Save** **Cancel**

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Grantee:  
 Current Report Period: - | Report Due Date:

[Home](#) | [Reports](#) | **Setup Options**

**Tools**

- [Validate/Submit Report](#)
- [PDF Print](#)
- [Grantee Information](#)

**Data Collection Period**

- ▾

Report Status: In Progress

**Setup Options**

- [Configure Report Period](#)
- [Configure Sites](#)  
(Total Listed: 0)
- [Select Specialty Areas](#)  
(Total Selected: 0)
- [Select Settings](#)  
(Total Selected: 0)

### Configure Sites

Indicate the Sites in which you had activity during this reporting period and for which you wish to enter data. For more information, please see the instructions (located at the top right of the page).

Site Name	Town	State	Zip	Location	Fuction	Action
AHEC Ft. Smith	Fort Smith	AL	12345	Rural	Consultant Site	<a href="#">Edit</a> <a href="#">Delete</a>
yyy	yy	AS	66666	Rural	Patient/Patient Data Site	<a href="#">Edit</a> <a href="#">Delete</a>
oooo	oooooo	AL	88888	Rural	Patient/Patient Data Site	<a href="#">Edit</a> <a href="#">Delete</a>
mmmm	mmmm	AR	33333	Rural	Patient/Patient Data Site	<a href="#">Edit</a> <a href="#">Delete</a>
<input type="text"/>	<input type="text"/>	AK ▾	<input type="text"/>	Rural ▾	Patient/Patient Data Site ▾	<a href="#">Add</a>

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Grantee:  
 Current Report Period: - | Report Due Date:

[Home](#) | [Reports](#) | **Setup Options**

**Tools**

- [Validate/Submit Report](#)
- [PDF Print](#)
- [Grantee Information](#)

**Data Collection Period**

- ▾

Report Status: In Progress

**Setup Options**

- [Configure Report Period](#)
- [Configure Sites](#)  
(Total Listed: 0)
- [Select Specialty Areas](#)  
(Total Selected: 0)
- [Select Settings](#)  
(Total Selected: 0)

### Select Specialty Areas

Indicate the Specialty Areas in which you had activity during this reporting period and for which you wish to enter data. ([help](#))

Specialty Area
<input type="checkbox"/> Select (or Unselect) All Specialty Areas
<input type="checkbox"/> Allergy/Rheumatology/Immunology
<input type="checkbox"/> Adult Echocardiology
<input type="checkbox"/> Interventional Cardiology
<input checked="" type="checkbox"/> Pediatric Echocardiology
<input type="checkbox"/> Routine Pediatric Cardiology

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Grantee:  
Current Report Period: - | Report Due Date:

[Home](#) | [Reports](#) | [Setup Options](#)

**Tools**

- [Validate/Submit Report](#)
- [PDF Print](#)
- [Grantee Information](#)

**Data Collection Period**

- ▾

Report Status: In Progress

**Setup Options**

- [Configure Report Period](#)
- [Configure Sites](#)  
(Total Listed: 0)
- [Select Specialty Areas](#)  
(Total Selected: 0)
- [Select Settings](#)  
(Total Selected: 0)

## Select Settings

Indicate the settings in which you had activity during this reporting period and for which you wish to enter data. ([help](#))

Settings
<input type="checkbox"/> Select (or Unselect) All Settings
<input type="checkbox"/> Hospital ER
<input type="checkbox"/> Hospital In-Patient
<input checked="" type="checkbox"/> Hospital Outpatient
<input type="checkbox"/> Non-Hospital Clinic (e.g. rural health clinic, migrant health clinic)
<input checked="" type="checkbox"/> Private Medical Practice or Physician's Office
<input type="checkbox"/> Health Department and Mental Health Agency
<input type="checkbox"/> Patient's Home
<input checked="" type="checkbox"/> Licensed Nursing Home
<input checked="" type="checkbox"/> Assisted Living Facility
<input checked="" type="checkbox"/> School
<input checked="" type="checkbox"/> Prison
<input type="checkbox"/> Indian Health Clinic
<input type="checkbox"/> Mobile Unit

[Save](#) [Cancel](#)

For technical help please call HRSA Call Center 1-877-Go4-HRSA (1-877-464-4772) or email [CallCenter@hrsa.gov](mailto:CallCenter@hrsa.gov)

This brings up the first not completed form. For a “Not Started” report the first not completed form is “Volume of Specialties and Services, by Setting”. Grantee can select a different form by clicking the form link under “Report Navigation”

### 1.2.4 Form Data Entry

Enter data in form fields. If all required information is provided Grantee can choose to complete the form.

**Grantee:**  
Current Report Period: - | Report Due Date:

Home Reports Setup Options

**Tools**  
Validate/Submit Report  
PDF Print  
Grantee Information

**Data Collection Period**  
-

**Report Status:** In Progress

## 2. Volume of Specialties and Services, by Setting

For help on this page, please click the Instructions link on the top right of the page.

Click on each patient setting listed below to enter data on the encounters that took place for patients in that setting. Enter the number of encounters for each specialty that took place in that patient setting.

[Click here](#) to modify the list of settings for this reporting period.

Setting	Total Encounters
<a href="#">Hospital Outpatient</a>	0
<a href="#">Private Medical Practice or Physician's Office</a>	0
<a href="#">Licensed Nursing Home</a>	27
<a href="#">Assisted Living Facility</a>	25
<a href="#">School</a>	0
<a href="#">Prison</a>	0

**Number of Each Type of Site You Are Reporting**

Consultant Sites:

Patient or Patient Data (Store-Forward) Sites:

**Any Comments About this Form or the Data You Entered**

Gordon OAT FormSitesData  
For help on this page, please click the Instructions link on the top right of the page.  
Click on each patient setting listed below to enter data on

**Is this Form Complete?**

No  Yes

**Save** **Cancel**

For technical help please call HRSA Call Center 1-877-Go4-HRSA (1-877-464-4772) or email CallCenter@hrsa.gov

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## 1.2.5 Save Error

Click “Save” at the bottom of the form to write the provided information to the database. The form will not save if errors are found in the information provided, or if the grantee chooses to complete when all required information is not provided. An error message will be generated.

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Grantee:  
Current Report Period: - | Report Due Date:

[Home](#) [Reports](#) [Setup Options](#)

**Tools**  
Validate/Submit Report  
PDF Print  
Grantee Information

**Data Collection Period**  
-

**Report Status:** Not Started

**Report Navigation**  
 1. Configure Report Period;  
 2. Volume of Specialties and Services, by Setting  
 3. Service Availability in Remote Communities  
 4. Patient Travel Saved  
 5. Number of Practitioner Referrals, by Source of Referral  
 6. Supervision of Students/Trainees  
 7. Informal Supervision and Mentoring  
 8. Other Uses of System  
 9. Telehealth Consultants Continuing Participation  
 10. Referring Practitioners Continuing Participation  
 11. Homecare  
 12. Outcome Measures for Chronic Conditions  
 13. Telerehabilitation  
 14. Dermatology  
 15. Patients

### 2. Volume of Specialties and Services, by Setting

For help on this page, please click the Instructions link on the top right of the page.

**Please correct the following error(s) and try again:**

- ↓ [Consultant Sites](#) can contain a whole number only.
- ↓ [Patient Or Patient Data Sites](#) can contain a whole number only.

Click on each patient setting listed below to enter data on the encounters that took place for patients in that setting. Enter the number of encounters for each specialty that took place in that patient setting.

[Click here](#) to modify the list of settings for this reporting period.

**There are no settings currently defined.**

**Number of Each Type of Site You Are Reporting**

Consultant Sites:	<input type="text" value="y"/>	←
Patient or Patient Data (Store-Forward) Sites:	<input type="text" value="y"/>	←

**Any Comments About this Form or the Data You Entered**

**Is this Form Complete?**

No  Yes

For technical help please call HRSA Call Center 1-877-Go4-HRSA (1-877-464-4772) or email CallCenter@hrsa.gov

## 1.2.6 Successful Save

If the “Save” function is successful in either case ( non-completed form or completed form) the grantee is prompted to either work on the next not completed form by clicking “Next” button, or to selected any other form from the “Report Navigation” menu.

The screenshot displays the HRSA Office for the Advancement of Telehealth Performance Improvement and Measurement System interface. The header includes the HRSA logo, the text "U.S. Department of Health and Human Services", "HRSA Office for the Advancement of Telehealth", and "Performance Improvement and Measurement System". Navigation links for "Instructions", "Contact Us", and "Sign Out" are present. The main content area shows a message titled "Incomplete Report Saved" with the text: "Your incomplete report has been saved successfully. Please come back and complete the report later. You can now either click the Next button or pick any other report under Report Navigation to continue." A "Next" button is visible. On the left, there are sections for "Tools" (Validate/Submit Report, PDF Print, Grantee Information), "Data Collection Period" (a dropdown menu), "Report Status: In Progress", and "Report Navigation" (a list of 15 report categories, each with a checkbox and a link).

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HRSA Office for the Advancement of Telehealth  
Performance Improvement and Measurement System

Instructions | Contact Us | Sign Out

Grantee:  
Current Report Period: - | Report Due Date:

Home Reports Setup Options

**Incomplete Report Saved**

Your incomplete report has been saved successfully. Please come back and complete the report later.  
You can now either click the Next button or pick any other report under Report Navigation to continue.

[Next](#)

**Tools**

- [Validate/Submit Report](#)
- [PDF Print](#)
- [Grantee Information](#)

**Data Collection Period**

-

**Report Status:** In Progress

**Report Navigation**

- [1. Configure Report Period](#)
- [2. Volume of Specialties and Services, by Setting](#)
- [3. Service Availability in Remote Communities](#)
- [4. Patient Travel Saved](#)
- [5. Number of Practitioner Referrals, by Source of Referral](#)
- [6. Supervision of Students/Trainees](#)
- [7. Informal Supervision and Mentoring](#)
- [8. Other Uses of System](#)
- [9. Telehealth Consultants Continuing Participation](#)
- [10. Referring Practitioners Continuing Participation](#)
- [11. Homecare](#)
- [12. Outcome Measures for Chronic Conditions](#)
- [13. Telerehabilitation](#)
- [14. Dermatology](#)
- [15. Patients](#)

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 Performance Improvement and Measurement System

[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee:  
 Current Report Period: - | Report Due Date:

[Home](#) | [Reports](#) | [Setup Options](#)

**Tools**

- [Validate/Submit Report](#)
- [PDF Print](#)
- [Grantee Information](#)

**Data Collection Period**  
 - ▾

**Report Status:** In Progress

**Report Navigation**

- [1. Configure Report Period](#)
- [2. Volume of Specialties and Services, by Setting](#)
- [3. Service Availability in Remote Communities](#)
- [4. Patient Travel Saved](#)
- [5. Number of Practitioner Referrals, by Source of Referral](#)
- [6. Supervision of Students/Trainees](#)
- [7. Informal Supervision and Mentoring](#)
- [8. Other Uses of System](#)
- [9. Telehealth Consultants Continuing Participation](#)
- [10. Referring Practitioners Continuing Participation](#)
- [11. Homecare](#)
- [12. Outcome Measures for Chronic Conditions](#)
- [13. Telerehabilitation](#)
- [14. Dermatology](#)
- [15. Patients](#)

**Report Saved**

Your report has been saved successfully.

You can now either click the Next button or pick any other report under Report Navigation to continue.

[Next](#)

The system will prompt to save or discard changes made on a form whenever the grantee attempts to navigate away from the form without saving in the following cases:

- Grantee user selects another link in the system
- Grantee user selects to navigate to another URL on the browser.
- Grantee user simply decides to close the browser.

If Grantee user chooses to save the changes he will have to select the “Cancel” button to stay on the form, then the “Save” button on the form to launch the saving process. The system will bring up the page Grantee user is trying to navigate to at the end of this process.

If Grantee user chooses not to save by selecting the “ok” button all changes on the form will be lost when the page Grantee user is trying to navigate to comes up.

Grantee:  
Current Report Period: - | Report Due Date:

Home Reports Setup Options

**Tools**

- Validate/Submit Report
- PDF Print
- Grantee Information

**Data Collection Period**

-

**Report Status:** In Progress

## 2. Volume of Specialties and Services, by Setting

For help on this page, please click the Instructions link on the top right of the page.

Click on each patient setting listed below to enter data on the encounters that took place for patients in that setting. Enter the number of encounters for each specialty that took place in that patient setting.

[Click here](#) to modify the list of settings for this reporting period.

**Report Navigation**

- 1. Configure Report Period
- 2. Volume of Specialties and Services, by Setting
- 3. Service Availability in Remote Communities
- 4. Patient Travel Saved
- 5. Number of Practitioner Referrals, by Source of Referral
- 6. Supervision of Students/Trainees
- 7. Informal Supervision and Mentoring
- 8. Other Uses of System
- 9. Telehealth Consultants Continuing Participation
- 10. Referring Practitioners Continuing Participation
- 11. Homecare
- 12. Outcome Measures for Chronic Conditions
- 13. Telerehabilitation
- 14. Dermatology
- 15. Patients

Setting	Total Encounters
<a href="#">Hospital Outpatient</a>	0
<a href="#">Private Medical Practice or Physician's Office</a>	0
<a href="#">Licensec</a>	27
<a href="#">Assisted</a>	25
<a href="#">School</a>	0
<a href="#">Prison</a>	0

**Number of Patients**

Patient or Patient Data (Store-Forward) Sites: 1100

**Any Comments About this Form or the Data You Entered**

Gordon OAT FormSitesData  
For help on this page, please click the Instructions link on the top right of the page.  
Click on each patient setting listed below to enter data on

**Is this Form Complete?**

No  Yes

Save Cancel

Microsoft Internet Explorer

Are you sure you want to navigate away from this page?

You have made changes to the data on this form. If you leave this page without selecting SAVE all changes will be lost.

Press OK to continue, or Cancel to stay on the current page.

OK Cancel



### 1.3 Update Report

#### 1.3.1 Repeat Instructions 1.1.1 to 1.1.4.

#### 1.3.2 Select "Edit Report"

Select the "Edit Report" option on the "Performance Report" menu. The report status is "In Progress"

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HRSA Electronic Handbooks for Applicants/Grantee  
MINER'S COLFAX MEDICAL CENTER, Raton, NM

HELP

Welcome Kandace Kay Evans (Last login date and time 4/30/2008 1:05:00 PM)  
**Performance Reports**  
[home](#) | [logout](#) | [contact us](#) | [glossary](#) | [help](#) | [questions/comments](#)

Following is the list of performance reports for this grant along with their statuses. Based on its status, you can edit or view the performance report by clicking on the appropriate link.

To search for a particular report, click on the search button and modify the search criteria to generate the results. For example, to search for submitted reports, click on the search button and select the "Submitted" option under the Schedule Status search criteria.

Displaying 1-1 of 1

PERFORMANCE REPORT			
Input Parameters: ( <a href="#">Show Parameters</a> )			
<b>ORHP Report</b>			
Type	Performance Reports	Due Date	4/7/2008
Available Date	4/4/2008	Submission Tracking Number	N/A
Reporting Cycle	Budget Period Start Date	Reporting Period	01/01/2008 - 12/31/2008
Online Submission	Yes (Preferred)	Submission Status	In Progress
Started by	Kandace Kay Evans on 4/7/2008 11:56:13 AM		
<a href="#">Submit Report</a>   <a href="#">Edit Report</a>   <a href="#">View Report</a>   <a href="#">View Related NGA</a>			

Page 1

[Acceptable Use Policy](#)

You are redirected to OAT PIMS Welcome/Home page

#### 1.3.3 Launch OAT PIMS

Click on "Continue" button

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E-HANDBOOK HOME

HRSA Office for the Advancement of Telehealth  
Performance Improvement and Measurement System

[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee:  
Current Report Period: - | Report Due Date:

[Home](#) | [Reports](#) | [Setup Options](#)

### Welcome to Performance Improvement and Measurement System

As required by the Government Performance and Review Act (1993), all federal agencies must develop strategic plans, describing their overall goals and objectives. These "GPRA Plans" must provide annual performance reports containing quantifiable measures of each program's progress in meeting the stated goals and objectives.

The performance assessment instruments developed by the Office for the Advancement of Telehealth (OAT) with its grantees will fulfill GPRA requirements to report to Congress on the impact of OAT's telehealth grant programs. Moreover, OAT hopes to use the information derived from these instruments to demonstrate the "value-added" that telehealth services contribute to improving health care. OAT has incorporated these performance assessment tools into the routine reporting required as part of the "mid-year or mid-cycle" and annual reports required under your grant. Each of the programs will also get reports comparing themselves to the entire set of grantees, on these same measures.

There will be two data reporting periods each year; during these biannual reporting periods, data should be reported for the previous six months of activity. Programs will have approximately six weeks to enter their data during each biannual reporting period.

[Continue](#)

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This brings up the first not completed form or the “Volume of Specialties and Services, by Setting” form if all forms are completed. Grantee can select a different form to edit by clicking the form link under “Report Navigation”.

1.3.4 Enter or modify data in form fields and “Save”.

The screenshot shows the HRSA Office for the Advancement of Telehealth Performance Improvement and Measurement System interface. The main heading is "2. Volume of Specialties and Services, by Setting". Below the heading, there is a table with two columns: "Setting" and "Total Encounters". The table lists various settings and their corresponding encounter counts.

Setting	Total Encounters
Hospital Outpatient	50
Private Medical Practice or Physician's Office	0
Licensed Nursing Home	36
Assisted Living Facility	25
School	0
Prison	13

Below the table, there are input fields for "Number of Each Type of Site You Are Reporting". The "Consultant Sites" field contains the value "2", and the "Patient or Patient Data (Store-Forward) Sites" field contains the value "66".

There is a section for "Any Comments About this Form or the Data You Entered" with a text area containing the following text: "Gordon OAT FormSitesData For help on this page, please click the Instructions link on the top right of the page. Click on each patient setting listed below to enter data on".

At the bottom of the form, there is a section for "Is this Form Complete?" with radio buttons for "No" (selected) and "Yes". Below this section are "Save" and "Cancel" buttons. The "Save" button is circled in orange.

Click “Save” at the bottom of the form to write the provided information to the database. The form will not save if errors are found in the information provided, or if the grantee chooses to complete when all required information is not provided. An error message will be generated. If the “Save” function is successful the grantee is prompted to either work on the next not completed form by clicking “Next” button, or to selected any other form from the “Report Navigation” menu.

The system will prompt to save or discard changes made on a form whenever the grantee attempts to navigate away from the form without saving in the following cases:

- Grantee user selects another link in the system
- Grantee user selects to navigate to another URL on the browser.
- Grantee user simply decides to close the browser.

If Grantee user chooses to save the changes he will have to select the “Cancel” button to stay on the form, then the “Save” button on the form to launch the saving process. The system will bring up the page Grantee user is trying to navigate to at the end of this process. If Grantee user chooses not to save by selecting the “ok” button all changes on the form will be lost when the page Grantee user is trying to navigate to comes up.

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 Performance Improvement and Measurement System  
[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee:  
 Current Report Period: - | Report Due Date:

Home Reports Setup Options

**Tools**

- Validate/Submit Report
- PDF Print
- Grantee Information

**Data Collection Period**  
 -

**Report Status:** In Progress

**Report Navigation**

- 1. Configure Report Period:
- 2. Volume of Specialties and Services, by Setting
- 3. Service Availability in Remote Communities
- 4. Patient Travel Saved
- 5. Number of Practitioner Referrals, by Source of Referral
- 6. Supervision of Students/Trainees
- 7. Informal Supervision and Mentoring
- 8. Other Uses of System
- 9. Telehealth Consultants Continuing Participation
- 10. Referring Practitioners Continuing Participation
- 11. Homecare
- 12. Outcome Measures for Chronic Conditions
- 13. Telerehabilitation
- 14. Dermatology
- 15. Patients

**2. Volume of Specialties and Services, by Setting**

For help on this page, please click the Instructions link on the top right of the page.

Click on each patient setting listed below to enter data on this form.

Click here to return to the previous page.

Setting	Total Encounters
<a href="#">Hospital Outpatient</a>	50
<a href="#">Private Medical Practice or Physician's Office</a>	0
<a href="#">Licensed Nursing Home</a>	36
<a href="#">Assisted Living Facility</a>	25
<a href="#">School</a>	0
<a href="#">Prison</a>	13

**Number of Each Type of Site You Are Reporting**

Consultant Sites:

Patient or Patient Data (Store-Forward) Sites:

**Any Comments About this Form or the Data You Entered**

Gordon OAT FormSitesData  
 For help on this page, please click the Instructions link on the top right of the page.  
 Click on each patient setting listed below to enter data on this form.

**Is this Form Complete?**

No  Yes

Save Cancel

Microsoft Internet Explorer  
 Are you sure you want to navigate away from this page?  
 You have made changes to the data on this form.  
 If you leave this page without selecting SAVE all changes will be lost.  
 Press OK to continue, or Cancel to stay on the current page.  
 OK Cancel

## 1.4 Complete Data Form

“Is This Form Complete” The Grantee is asked to respond by “Yes” or “No” to this question at the bottom of each form.

Select “Yes” only when all required information is provided. “No” is the default value.

The screenshot shows a form section with two main parts. The top part is a text area titled "Any Comments About this Form or the Data You Entered" containing the text "foo bar bo bee". Below this is a section titled "Is this Form Complete?" with the instruction "If selected 'No', you're not required to fill in all fields before you save." and two radio buttons: "No" (which is selected) and "Yes". Below the radio buttons are "Save" and "Cancel" buttons. The entire "Is this Form Complete?" section is circled in orange. At the bottom of the page, there is a footer with technical help information and a copyright notice.

Any Comments About this Form or the Data You Entered

foo bar bo bee

**Is this Form Complete?**  
If selected "No", you're not required to fill in all fields before you save.

No  Yes

Save Cancel

For technical help please call HRSA Call Center 1-877-Go4-HRSA (1-877-464-4772) or email CallCenter@hrsa.gov

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## 1.5 Add Comments to Data Form

A text area is provided at the bottom section of each form where Grantee can actually type comments up to 5000 characters. This information will be saved in the database for further use.

The screenshot shows a form section with two main parts. The top part is a text area titled "Any Comments About this Form or the Data You Entered" containing the text "foo bar bo bee". Below this is a section titled "Is this Form Complete?" with the instruction "If selected 'No', you're not required to fill in all fields before you save." and two radio buttons: "No" (which is selected) and "Yes". Below the radio buttons are "Save" and "Cancel" buttons. The entire "Any Comments About this Form or the Data You Entered" section is circled in orange. At the bottom of the page, there is a footer with technical help information and a copyright notice.

Any Comments About this Form or the Data You Entered

foo bar bo bee

**Is this Form Complete?**  
If selected "No", you're not required to fill in all fields before you save.

No  Yes

Save Cancel

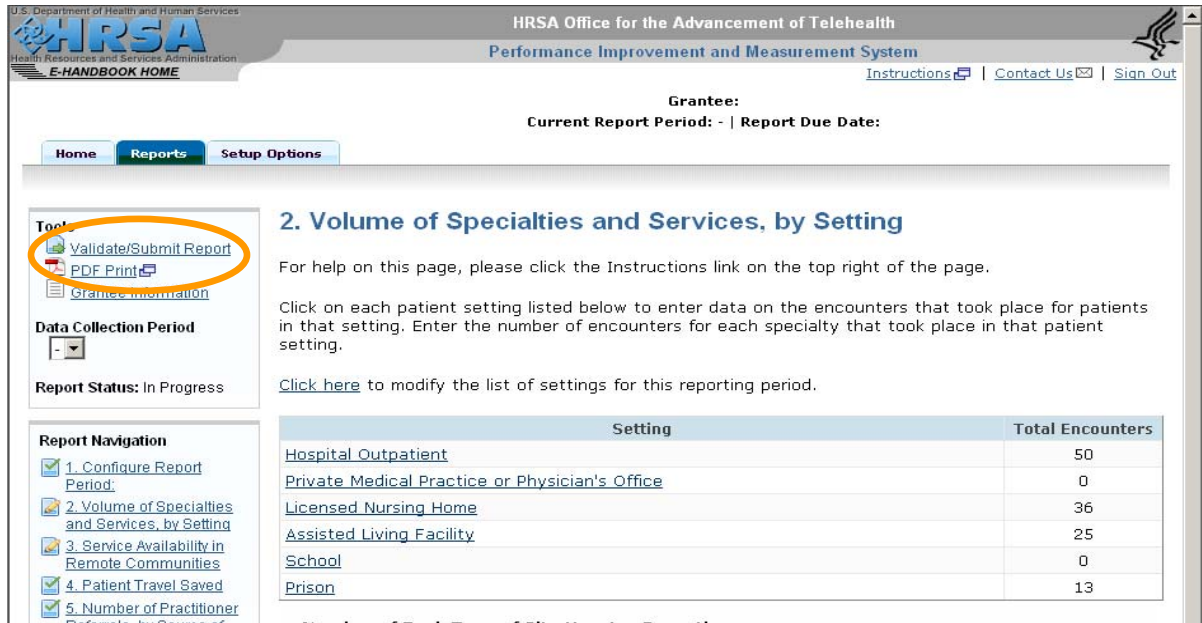
For technical help please call HRSA Call Center 1-877-Go4-HRSA (1-877-464-4772) or email CallCenter@hrsa.gov

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## 1.6 Validate and/or Submit Report

### 1.6.1 Validate Report

At any time Grantee can choose to run validation rules against the already provided information by clicking the “Validate/Submit Report” link under Tools menu if already logged in the system, or by selecting the “Submit Report” link from EHB.



The screenshot shows the HRSA Office for the Advancement of Telehealth Performance Improvement and Measurement System. The page title is "2. Volume of Specialties and Services, by Setting". The "Tools" menu on the left has "Validate/Submit Report" highlighted with an orange circle. Below the menu, there is a "Data Collection Period" dropdown and a "Report Status: In Progress" indicator. The "Report Navigation" section on the left lists five steps, with the second step, "2. Volume of Specialties and Services, by Setting", selected. The main content area contains instructions and a table of settings and encounters.

Setting	Total Encounters
<a href="#">Hospital Outpatient</a>	50
<a href="#">Private Medical Practice or Physician's Office</a>	0
<a href="#">Licensed Nursing Home</a>	36
<a href="#">Assisted Living Facility</a>	25
<a href="#">School</a>	0
<a href="#">Prison</a>	13

### 1.6.2 Validation Error

If there are validation issues a message with the list of errors and warnings is generated. Those have to be fixed in order to successfully validate the report.



The screenshot shows the HRSA Office for the Advancement of Telehealth Performance Improvement and Measurement System. The page title is "Validation Error Occurred". The "Tools" menu on the left has "Validate/Submit Report" highlighted. Below the menu, there is a "Data Collection Period" dropdown and a "Report Status: In Progress" indicator. The "Report Navigation" section on the left lists five steps, with the second step, "2. Volume of Specialties and Services, by Setting", selected. The main content area contains a message about validation errors.

Please correct the following errors before submitting:

Not all forms have been completed. Please go to Report Navigation (located on the left) and complete the incomplete report(s). They are the ones that are not marked by this icon: 

### 1.6.3 Successful Validation

If the report is successfully validated (this happens only when all forms are completed) a report submission screen is brought up giving grantee the option to submit the report. Click "Cancel" to not submit the validated report.

The screenshot shows the HRSA Office for the Advancement of Telehealth Performance Improvement and Measurement System interface. The page title is "Report Submission for Grant". The main content area displays the message: "Your report has been successfully validated." Below this, there is a section titled "Submit Report to Project Officer" with a text area for a "Message to Project Officer" containing the text "default message here...". A "CERTIFICATION" section contains a checkbox for "I certify that I am authorized to submit this report for grant ." and "Save" and "Cancel" buttons. On the left side, there is a "Report Navigation" menu with a list of 15 items, each with a checked checkbox. The first item, "1. Configure Report Period", is highlighted with an orange box. The footer contains the text: "For technical help please call HRSA Call Center 1-877-Go4-HRSA (1-877-464-4772) or email CallCenter@hrsa.gov".

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HRSA Office for the Advancement of Telehealth  
Performance Improvement and Measurement System  
[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee:  
Current Report Period: - | Report Due Date:

Home Reports Setup Options

**Tools**  
Validate/Submit Report  
PDF Print  
Grantee Information

**Data Collection Period**  
- ▾  
Report Status: In Progress

**Report Submission for Grant**  
Your report has been successfully validated.  
**Submit Report to Project Officer**  
The following message will be sent to your Project Officer if the submission is confirmed. Please change the message as needed.

**Message to Project Officer**  
default message here...

**CERTIFICATION**  
 I certify that I am authorized to submit this report for grant .  
Save Cancel

**Report Navigation**  
 1. Configure Report Period  
 2. Volume of Specialties and Services, by Setting  
 3. Service Availability in Remote Communities  
 4. Patient Travel Saved  
 5. Number of Practitioner Referrals, by Source of Referral  
 6. Supervision of Students/Trainees  
 7. Informal Supervision and Mentoring  
 8. Other Uses of System  
 9. Telehealth Consultants Continuing Participation  
 10. Referring Practitioners Continuing Participation  
 11. Homecare  
 12. Outcome Measures for Chronic Conditions  
 13. Telerehabilitation  
 14. Dermatology  
 15. Patients

For technical help please call HRSA Call Center 1-877-Go4-HRSA (1-877-464-4772) or email CallCenter@hrsa.gov

## 1.6.4 Submit Report

Click “Submit” or “Save” after selecting the Certification check box and adding a message to be emailed to the project officer to complete the submission.

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HRSA Office for the Advancement of Telehealth  
Performance Improvement and Measurement System  
[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee:  
Current Report Period: - | Report Due Date:

Home Reports Setup Options

**Tools**  
Validate/Submit Report  
PDF Print  
Grantee Information

**Data Collection Period**  
-

Report Status: In Progress

**Report Navigation**  
 1. Configure Report Period.  
 2. Volume of Specialties and Services, by Setting  
 3. Service Availability in Remote Communities  
 4. Patient Travel Saved  
 5. Number of Practitioner Referrals, by Source of Referral  
 6. Supervision of Students/Trainees  
 7. Informal Supervision and Mentoring  
 8. Other Uses of System  
 9. Telehealth Consultants Continuing Participation  
 10. Referring Practitioners Continuing Participation  
 11. Homecare  
 12. Outcome Measures for Chronic Conditions  
 13. Telerehabilitation  
 14. Dermatology  
 15. Patients

**Report Submission for Grant**

Your report has been successfully validated.

**Submit Report to Project Officer**

The following message will be sent to your Project Officer if the submission is confirmed. Please change the message as needed.

**Message to Project Officer**

default message here...

**CERTIFICATION**

I certify that I am authorized to submit this report for grant .

Save Cancel

For technical help please call HRSA Call Center 1-877-Go4-HRSA (1-877-464-4772) or email CallCenter@hrsa.gov

## 1.6.5 Report Submission Confirmation

A confirmation message is generated with a confirmation number for the submission.

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HRSA Office for Black Lung Clinics Program  
Performance Improvement and Measurement System  
[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee: Demo Program  
Current Report Period: 9/1/2006 - 12/31/2006  
Report Due Date: 01/31/2008

**Report Submitted Successfully for Grant H37RH00057**

Your report has been successfully submitted. Your confirmation number is: 92

Close

For technical help please call HRSA Call Center 1-877-Go4-HRSA (1-877-464-4772) or email CallCenter@hrsa.gov

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## 1.7 View Submitted Report

### 1.7.1 Login to OAT PIMS

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HRSA Electronic Handbooks for Applicants/Grantee

[HELP](#)

**Login Menu**

- Login
- Forgot Password
- Registration

**Login**

**Login**  
[home](#) | [contact us](#) | [more instructions](#) | [glossary](#) | [help](#) | [questions/comments](#)

**Contact Us:**

<b>Phone:</b> 877-Go4-HRSA/877-464-4772; 301-998-7373	<b>Time:</b> 9:00 a.m. to 5:30 p.m. Eastern Time (E.T.), Monday through Friday	<b>Email:</b> <a href="mailto:CallCenter@HRSA.GOV">CallCenter@HRSA.GOV</a>
---	--	---

Fields marked with an asterisk(\*) are required.

**LOGIN**

<b>Already Registered?</b>	<b>Not Registered?</b>
*Username <input type="text" value="shsdced"/>	<input type="button" value="Create an Account"/>
*Password <input type="password" value="●●●●●●●●"/>	<ul style="list-style-type: none"><li>• Registration is needed only once</li><li>• Read the getting started guidelines for <a href="#">New Applicants</a> and/or <a href="#">Existing Grantees</a></li></ul>
<input type="button" value="Login"/>	
<a href="#">Forgot your password?</a>	

**Warning!**

This site is maintained by the U.S. Government. It is protected by various provisions of Title 18, U.S. Code of Federal Regulations. Violations of Title 18 are subject to criminal prosecution in federal court. For site security purposes and to ensure that this service remains available to all users, we employ software programs to monitor traffic, to identify unauthorized attempts to upload or change information, or otherwise cause damage. In the event of authorized law enforcement investigations, and pursuant to any required legal process, information from these sources may be used to help identify an individual.

---

[Privacy Policy](#) | [Disclaimer](#)



## 1.7.2 View Portfolio

From the EHB Welcome page click 'View Portfolio' on the "Home" left hand side menu

U.S. Department of Health and Human Services  
**HRSA**  
Health Resources and Services Administration  
E-HANDBOOK HOME

HRSA Electronic Handbooks for Applicants/Grantee  
SHAWNEE HEALTH SERVICE, Carterville, IL

HELP

Welcome George O'Neill (Last login date and time 4/30/2008 11:01:00 AM) [-Tools Menu-] Go

**Welcome**  
[home](#) | [logout](#) | [contact us](#) | [glossary](#) | [help](#) | [questions/comments](#)

**Contact Us:**  
Phone: 877-Go4-HRSA/877-464-4772; 301-998-7373  
Time: 9:00 a.m. to 5:30 p.m. Eastern Time (E.T.), Monday through Friday  
Email: [CallCenter@HRSA.GOV](mailto:CallCenter@HRSA.GOV)

Applicant/Grantee Electronic Handbook (EHB) provides all potential and existing grantees a means to conduct various activities electronically.

**WHAT WOULD YOU LIKE TO DO TODAY?**

- Manage Competing Applications
  - [Read Electronic Submission Guide](#)
  - [Verify Grants.gov Application \(if required per Guidance\)](#)
  - [Work on My Application](#)
  - [Allow Other Members of My Organization to Work on My Application](#)
  - [Search Funding Opportunities](#)
- Manage Grants Portfolio
  - [Read About Grant Registration](#)
  - [Add a Grant to My Portfolio](#)
  - [View Grants in My Portfolio](#)
  - [Work on a Grant](#)
  - [Work on My Noncompeting Application](#)
  - [Work on Other Post Award Submissions](#)
- Manage My Profile
  - [Update My Contact and Address Detail](#)
  - [Verify My Email Address](#)
  - [Change My Password/Security Question](#)
  - [Read About Multiple Organization Registrations](#)
  - [Associate My Account with Another Organization](#)
  - [Set My Default Organization](#)
- Manage Organization Profile
  - [Read About Organization Profile Management](#)
  - [Update Organization Information on File](#)
  - [Change Communication Contact for Organization](#)
  - [Manage Users of My Organization](#)

Logout

[Acceptable Use Policy](#)

### 1.7.3 Select "Performance Reports"

The screenshot shows the HRSA Electronic Handbooks for Applicants/Grantee interface. The header includes the HRSA logo, the text "U.S. Department of Health and Human Services", "HRSA Electronic Handbooks for Applicants/Grantee", and "MINER'S COLFAX MEDICAL CENTER, Raton, NM". A user greeting reads "Welcome Kandace Kay Evans (Last login date and time 5/6/2008 10:58:00 AM)". The "Grant Handbook H37RH00057" is displayed. On the left, a "Grant Menu" lists various options, with "Performance Reports" circled in orange. The main content area includes a "Contact Us" section with phone and email information, an "Overview" section, and a "WHAT WOULD YOU LIKE TO DO TODAY?" section with several action items like "View Grant Information" and "Administer Grant Handbook". A "Logout" button is at the bottom left, and an "Acceptable Use Policy" link is at the bottom center.

### 1.7.4 Search on Performance Reports

Run a Search on Performance Reports by clicking the "Search" button

The screenshot shows the HRSA Electronic Handbooks for Applicants/Grantee interface with the "Performance Reports" menu item selected. The header is identical to the previous screenshot. The "Grant Menu" on the left has "Performance Reports" selected. The main content area displays "Performance Reports" and a list of reports. A search box with a "Search" button is circled in orange. Below the search box, the text reads: "PERFORMANCE REPORT", "Input Parameters: (Show Parameters)", and "No records were found matching the search criteria listed above. Click on the 'Search' button to refine the criteria." A "Logout" button is at the bottom left, and an "Acceptable Use Policy" link is at the bottom center.

## 1.7.5 Search Criteria

Select "Submitted" status on the Schedule status search parameter and click "Search button"

The screenshot displays the HRSA Electronic Handbooks for Applicants/Grantee interface. The header includes the HRSA logo, the text "U.S. Department of Health and Human Services", "HRSA Electronic Handbooks for Applicants/Grantee", and "MINER'S COLFAX MEDICAL CENTER, Raton, NM". A user greeting reads "Welcome Kandace Kay Evans (Last login date and time 5/6/2008 10:58:00 AM)".

The left sidebar contains a "Grant Menu" with categories: "View Awards" (Last NGA, Award History), "Administer" (New Users, Existing Users), "Submissions" (Monitor Schedules, Noncompeting Continuations, Performance Reports, Progress Reports, FSR, Other Submissions), and "Logout".

The main content area is titled "PERFORMANCE REPORT" and contains a "Search Parameters" form. The form includes the following fields:

- Schedule Status:** A dropdown menu with options "All", "Not Started", "In Progress", and "Submitted". The "Submitted" option is selected and highlighted with an orange box.
- Submission Due Date:** Two text input fields labeled "From (mm/dd/yyyy)" and "To (mm/dd/yyyy)".
- Submission Coming up within (days):** A dropdown menu with the option "All".
- Reporting Cycle:** A dropdown menu with options "All", "Budget Period", "Project Period", and "Fiscal Year".
- Results per Page:** A dropdown menu with the option "10".

A "Search" button is located at the bottom right of the search parameters form, circled in orange. Below the search form, there is a link for "Acceptable Use Policy".

### 1.7.6 Select "View Report" link

U.S. Department of Health and Human Services  
**HRSA**  
Health Resources and Services Administration  
E-HANDBOOK HOME

HRSA Electronic Handbooks for Applicants/Grantee  
MINER'S COLFAX MEDICAL CENTER, Raton, NM

Welcome Kandace Kay Evans (Last login date and time 5/6/2008 10:58:00 AM)  
**Performance Reports**  
[home](#) | [logout](#) | [contact us](#) | [glossary](#) | [help](#) | [questions/comments](#)

Following is the list of performance reports for this grant along with their statuses. Based on its status, you can edit or view the performance report by clicking on the appropriate link.

**To search for a particular report, click on the search button and modify the search criteria to generate the results. For example, to search for submitted reports, click on the search button and select the "Submitted" option under the Schedule Status search criteria.**

Displaying 1-1 of 1

**PERFORMANCE REPORT**

Input Parameters: ([Show Parameters](#))

ORHP Report		Schedule Status: Submitted	
Type	Performance Reports	Due Date	2/7/2009
Available Date	4/4/2008	Submission Tracking Number	N/A
Reporting Cycle	Budget Period Start Date	Reporting Period	01/01/2008 - 12/31/2008
Online Submission	Yes (Preferred)	Submission Status	Submitted
Started by	Kandace Kay Evans on 4/7/2008 11:56:13 AM	Submitted by	Kandace Kay Evans on 4/30/2008 2:48:02 PM
<a href="#">View Report</a>   <a href="#">View Related NGA</a>			

Page 1

[Acceptable Use Policy](#)

You are redirected to OAT PIMS Home/Welcome page.

### 1.7.7 Launch OAT PIMS

From the OAT PIMS Home/Welcome page click on "Continue" button

U.S. Department of Health and Human Services  
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E-HANDBOOK HOME

HRSA Office for Black Lung Clinics Program  
Performance Improvement and Measurement System

[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee: Demo Program  
Current Report Period: 9/1/2006 - 12/31/2006  
Report Due Date: 01/31/2008

## Welcome to Performance Improvement and Measurement System

As required by the Government Performance and Review Act (1993), all federal agencies must develop strategic plans, describing their overall goals and objectives. These "GPRA" Plans" must provide annual performance reports containing quantifiable measures of each program's progress in meeting the stated goals and objectives.

The performance measures developed by the Office of Rural Health and Policy (ORHP) with its grantees will fulfill GPRA requirements to report to Congress on the impact of ORHP's grant programs. Moreover, ORHP hopes to use the data from PIMS to assess the impact that ORHP programs have on rural communities and to enhance ongoing quality improvement. ORHP has incorporated these performance measures as a requirement for all ORHP grant programs in order to achieve the stated objectives

Thank you taking the time to document your program's data in PIMS. We welcome your comments and should you have any questions, please contact the Data Coordinator, Anthony Achampong at [aachampong@hrsa.gov](mailto:aachampong@hrsa.gov) or at 301 594 4429.

For technical help please call HRSA Call Center 1-877-Go4-HRSA (1-877-464-4772) or email CallCenter@hrsa.gov

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This brings up a read-only version of the first completed form, in this case "Volume of Specialties and Services, by Setting".

## 1.7.8 View Report

You can select a different form to view by clicking the form link under “Report Navigation” menu. Notice that “Save” and “Cancel” buttons are both disabled.

The screenshot displays the HRSA Office for the Advancement of Telehealth Performance Improvement and Measurement System interface. The page header includes the HRSA logo, the text "U.S. Department of Health and Human Services", and "HRSA Office for the Advancement of Telehealth Performance Improvement and Measurement System". Navigation links for "Instructions", "Contact Us", and "Sign Out" are present. The main content area is titled "2. Volume of Specialties and Services, by Setting" and features a yellow warning box stating "This report is read only. To make any changes contact your HRSA Project Officer." Below this, there is a section for "Data Collection Period" and "Report Status: In Progress". A "Report Navigation" menu on the left lists various report sections, with "2. Volume of Specialties and Services, by Setting" selected. The main content area includes a table of settings and their total encounters, and a section for "Number of Each Type of Site You Are Reporting" with input fields for "Consultant Sites" (value 2) and "Patient or Patient Data (Store-Forward) Sites" (value 66).

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HRSA Office for the Advancement of Telehealth  
Performance Improvement and Measurement System  
[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee:  
Current Report Period: - | Report Due Date:

Home **Reports** Setup Options

**Tools**

- Validate/Submit Report
- PDF Print
- Grantee Information

**Data Collection Period**  
-

**Report Status:** In Progress  
Submitted

**Report Navigation**

- 1. Configure Report Period;
- 2. Volume of Specialties and Services, by Setting**
- 3. Service Availability in Remote Communities
- 4. Patient Travel Saved
- 5. Number of Practitioner Referrals, by Source of Referral
- 6. Supervision of Students/Trainees
- 7. Informal Supervision and Mentoring
- 8. Other Uses of System
- 9. Telehealth Consultants Continuing Participation

### 2. Volume of Specialties and Services, by Setting

This report is read only. To make any changes contact your HRSA Project Officer.

For help on this page, please click the Instructions link on the top right of the page.

Click on each patient setting listed below to enter data on the encounters that took place for patients in that setting. Enter the number of encounters for each specialty that took place in that patient setting.

[Click here](#) to modify the list of settings for this reporting period.

Setting	Total Encounters
<a href="#">Hospital Outpatient</a>	50
<a href="#">Private Medical Practice or Physician's Office</a>	0
<a href="#">Licensed Nursing Home</a>	36
<a href="#">Assisted Living Facility</a>	25
<a href="#">School</a>	0
<a href="#">Prison</a>	13

**Number of Each Type of Site You Are Reporting**

Consultant Sites:

Patient or Patient Data (Store-Forward) Sites:

## 1.8 Save Report on Local Machine/ Print PDF

At any time Grantees can generate a PDF version of their report by clicking “PDF Print” link from Tools menu.

From the Adobe “File” menu select “Save a copy”

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HRSA Office for the Advancement of Telehealth  
Performance Improvement and Measurement System  
Instructions | Contact Us | Sign Out

Grantee:  
Current Report Period: - | Report Due Date:

Home Reports Setup Options

**Tools**  
Validate/Submit Report  
**PDF Print**  
Grantee Information

**Data Collection Period**  
-

**Report Status:** In Progress

**Report Navigation**  
1. Configure Report Period:  
2. Volume of Specialties and Services, by Setting  
3. Service Availability in Remote Communities  
4. Patient Travel Saved  
5. Number of Practitioner Referrals, by Source of Referral  
6. Supervision of Students/Trainees  
7. Informal Supervision and Mentoring  
8. Other Uses of System  
9. Telehealth Consultants Continuing Participation

### 2. Volume of Specialties and Services, by Setting

Office of the Advancement of Telehealth Program

Grant Number: Start Date: End Date: Report Date: 08-06-2008

Organization:

#### 1. Volume of Specialties and Services, by Setting

Setting: Hospital Outpatient						Total Encounters: 50
Specialty	INNP	INPP	SFBI	SFOT	MHPSA	
Pediatric Echocardiology	50					

Setting: Private Medical Practice or Physician's Office						Total Encounters: 0
Specialty	INNP	INPP	SFBI	SFOT	MHPSA	
Pediatric Echocardiology						

Setting: Licensed Nursing Home						Total Encounters: 9
Specialty	INNP	INPP	SFBI	SFOT	MHPSA	
Pediatric Echocardiology		9				

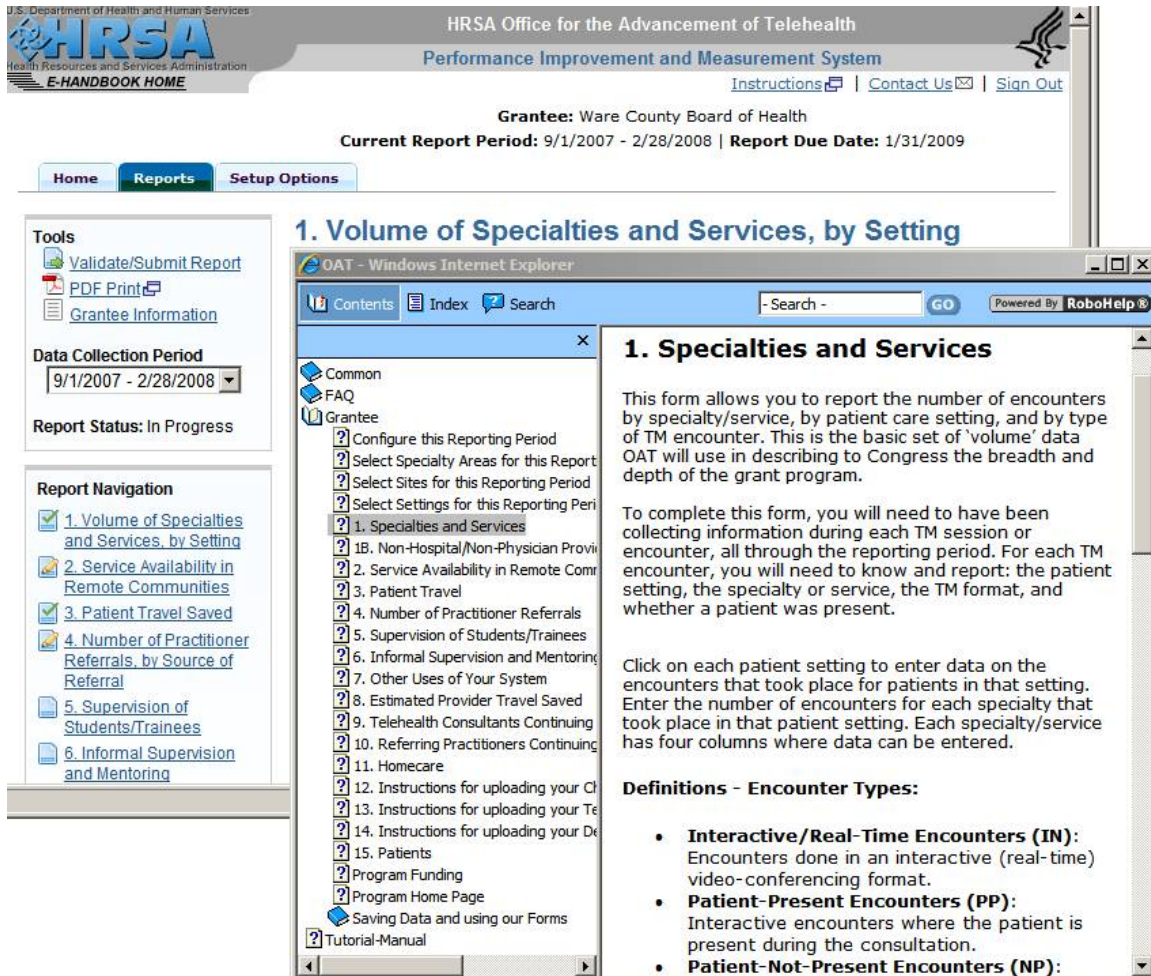
Setting: Assisted Living Facility						Total Encounters: 0
Specialty	INNP	INPP	SFBI	SFOT	MHPSA	
Pediatric Echocardiology						

## 1.9 Help

The OAT PIMS Web online help can be used to assist users with creating, editing, and submitting reports.

### 1.9.1 Help on Current Page

At any step of any process click “Instructions” link at the top right of the page. A popup screen comes up with information on the active page.



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HRSA Office for the Advancement of Telehealth  
Performance Improvement and Measurement System  
[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee: Ware County Board of Health  
Current Report Period: 9/1/2007 - 2/28/2008 | Report Due Date: 1/31/2009

Home Reports Setup Options

**Tools**  
Validate/Submit Report  
PDF Print  
Grantee Information

Data Collection Period  
9/1/2007 - 2/28/2008

Report Status: In Progress

**Report Navigation**  
[1. Volume of Specialties and Services, by Setting](#)  
[2. Service Availability in Remote Communities](#)  
[3. Patient Travel Saved](#)  
[4. Number of Practitioner Referrals, by Source of Referral](#)  
[5. Supervision of Students/Trainees](#)  
[6. Informal Supervision and Mentoring](#)

### 1. Volume of Specialties and Services, by Setting

OAT - Windows Internet Explorer

Contents Index Search - Search - GO Powered By RoboHelp

#### 1. Specialties and Services

This form allows you to report the number of encounters by specialty/service, by patient care setting, and by type of TM encounter. This is the basic set of 'volume' data OAT will use in describing to Congress the breadth and depth of the grant program.

To complete this form, you will need to have been collecting information during each TM session or encounter, all through the reporting period. For each TM encounter, you will need to know and report: the patient setting, the specialty or service, the TM format, and whether a patient was present.

Click on each patient setting to enter data on the encounters that took place for patients in that setting. Enter the number of encounters for each specialty that took place in that patient setting. Each specialty/service has four columns where data can be entered.

**Definitions - Encounter Types:**

- Interactive/Real-Time Encounters (IN):** Encounters done in an interactive (real-time) video-conferencing format.
- Patient-Present Encounters (PP):** Interactive encounters where the patient is present during the consultation.
- Patient-Not-Present Encounters (NP):**

## 1.9.2 Help on Other pages or topics

User can also navigate within the Help looking for information on other pages or other processes.

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HRSA Office for the Advancement of Telehealth  
Performance Improvement and Measurement System  
[Instructions](#) | [Contact Us](#) | [Sign Out](#)

Grantee: Ware County Board of Health  
Current Report Period: 9/1/2007 - 2/28/2008 | Report Due Date: 1/31/2009

Home Reports Setup Options

**Tools**  
Validate/Submit Report  
PDF Print  
Grantee Information

Data Collection Period  
9/1/2007 - 2/28/2008

Report Status: In Progress

**Report Navigation**  
[1. Volume of Specialties and Services, by Setting](#)  
[2. Service Availability in Remote Communities](#)  
[3. Patient Travel Saved](#)  
[4. Number of Practitioner Referrals, by Source of Referral](#)  
[5. Supervision of Students/Trainees](#)  
[6. Informal Supervision and Mentoring](#)

### 1. Volume of Specialties and Services, by Setting

#### 1.1. Homecare

Many OAT programs are now involved in tele-homecare, meeting the needs of homebound patients, especially those who require frequent monitoring. Home health agencies and insurers are interested in improving quality of homecare without increasing costs. Demonstrating the advantages of telemedicine for homebound patients may be useful as you interact with HHAs and insurers. Tele-home care offers many advantages, including reduced travel time and improved productivity through tele-visits compared to in-person home health visits, and improved access/quality through adding care that would not have occurred without telehealth technology.

Most telehealth programs already ask telehealth home nurses to fill out forms reporting date, time, purpose, etc. of their televisits. To demonstrate the progress being made by your tele-homecare program, we suggest that you gather three pieces of information on each tele-home health visit. For this purpose, you would **modify your nurse's forms and ask them to record, for each home telehealth visit:**

1. Would you have made this visit to the patient's home in-person, if telemedicine were not available? Yes No
2. Roundtrip miles to the patient's home. \_\_\_\_\_ Miles
3. Estimated roundtrip drive time to this patient's home. \_\_\_\_\_ Minutes

Please Note: this form can only be completed if