Patient Satisfaction Survey

Overview

The current problem is that there are two Telehealth surveys being distributed from Telehealth Services. The distribution of two surveys has resulted in too many expended resources and funds for the creation of two similar Patient Satisfaction forms. The Clinical Video Telehealth (CVT) Training Center as well as the Store and Forward Telehealth (SFT) Training Center distribute surveys that have similar content. These two surveys were run out of two separate training centers which have now merged to become one training center. Also the need to incorporate ICARE survey questions was stated, thus resulting in the need for both surveys to be redone to incorporate these changes.

Background

Currently there is a Clinical Video Telehealth Patient Satisfaction survey (OMB 2900-0770) as well as a Store-and-Forward Telehealth Patient Satisfaction Survey. Both of these surveys are distributed to Veterans after their Telehealth visit. Currently there are two separate processes being used regarding how the survey is distributed, how it is instructed to be filled out, as well as how it is received back to the training centers. The surveys are mailed to each facility based on a percentage of their patient population. From there a Scheduler, TCT (Telehealth Clinical Technician), etc. fills in the facility information on the front and hands the form to the Veteran after their visit along with an envelope to put the completed form in. The envelopes are already postmarked, so the Veteran can either fill it out at the clinic or take it home and fill it out and put it in the mail, but there is no cost for the facility of Veteran to return the form to the training center. Once the surveys are received they are scanned using Scantron and the data is compiled and the reports for the facilities and specialties are generated.

Solution

The two surveys (CVT and SFT) have been combined to streamline the process regarding the distribution and receiving of the surveys. Instead of having two separate training centers sending out two separate surveys, the survey has been combined thus decreasing: funds spent sending out the forms, personnel time needed to not only distribute the survey but as well as analyze the results, less confusion for the field since the surveys were similar, less burden on the Veteran.