OMB No. 0915-0212 Expires: 7/31/2021

## Telehealth.HHS.gov Site-Level Website Survey

Note: Survey will be available in English and Spanish.

## **Site-Level Website Survey**

## **English**

Which of the following best describes you?

- I'm a health care professional (i.e. doctor, nurse, health care administrator)
- I'm a patient or other individual interested in telehealth
- Other [Free text]

Were you able to find what you were looking for?

- Yes
- Partially
- No
- Not sure yet/I'm still looking

What were you looking for specifically?

• [Free text]

Do you agree with the following statements? The pages I have read:

- Are easy to understand [Yes/No/Not sure]
- Are up to date [Yes/No/Not sure]
- Allow me to take action [Yes/No/Not sure]

How can we improve Telehealth.HHS.gov?

• [Free text]

## **Spanish**

¿Cuál de las frases siguientes mejor describe su situación?

- Soy un profesional de atención médica (p. ej. médico, enfermero, administrador de cuidados de la salud)
- Soy un paciente u otro individuo al que le interesa la telesalud
- Otro

¿Pudo encontrar lo que buscaba?

Sí

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- Parcialmente
- No
- Aún no estoy seguro/Sigo buscando

¿Qué buscaba específicamente?

¿Está de acuerdo con las frases siguientes? Las páginas que he leído:

- Son fáciles de comprender
- Están actualizadas
- Me permiten tomar medidas

¿Cómo podemos mejorar Telehealth.HHS.gov?

Public Burden Statement: HRSA's Federal Office of Rural Health Policy (FORHP) will obtain feedback from users of Telehealth.HHS.gov that was recently funded through the CARES Act (P.L. 116-136, P.L. 88-426, 5 U.S.C. 101, 42 U.S.C. Section 210), as amended. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0915-0212 and it is valid until 7/31/2021. This information collection is voluntary. Public reporting burden for this collection of information is estimated to average .007 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.