Measure Changes

Previous Measure	New Measure

Program Level Distant Sites
  1. Telehealth Program/Network Name
  2. Telehealth Program/Network Status
    New
    Existing and expanded
    Existing and not expanded
    Existed and reduced services/specialties offered
    Existing but discontinued
  3. Number of New Telehealth Services/Specialties Offered by the Telehealth Program/Network (for new and expanded programs)
  4. Educational Services Delivered by the Telehealth Program/Network
    Patient/community education
    Provider education (Continuing education (CE) and non-CE credit)
    Support personnel education
    No educational services delivered
  5. Total Number of Originating Sites Served by the Telehealth Program/Network
	1: Service Utilization by Type of Organization Requesting Service and Outcomes for Reporting Period
	<u>Category</u>
	• Total number of individual clients/departments requesting TRC services and hours of client contact service provided, including preparation time.
	• Total number of new/first time
	• Total number of repeat clients (those who received service in the past – prior to the current reporting period – who are returning for more/other services)
	• Total number of hours of technical assistance provided including preparation time

Originating Site Level (Where patient is located)
  6. Program or Network Serving Originating Site
  7. Setting Type of Originating Site
    • Assisted Living Facility
    • Community Health Center
    • Health Department and Mental Health Agency
    • Hospital ER
    • Hospital In-Patient
    • Hospital Out-Patient
    • Indian Health Clinic
    • Licensed Nursing Home
    • Mobile Unit
    • Non-Hospital clinic (e.g. rural health clinic, migrant health clinic)
    • Patient's Home
    • Prison
    • Private Medical Practice or Physician's Office
    • School
    • Other (specify)
	2: Method of Query for Reporting Period
	<u>Category</u>
	Conference/Meeting or other In-Person Contact
	• Email
	• Phone
	• Referral from Another TRC
	• Social Media (Twitter, Facebook, LinkedIn, etc.)
	• TRC Initiated
	• Website
	• Other

8.1, 8.2 Originating Sites Names and Addresses (Using the originating sites' name and addresses, PIMS will be able to automatically cross-map each site to the county where the site is located and will determine whether the site is in a MUA	**3: Topic of Query for Reporting Period** <u>Category</u> • General Information • Clinical Service Program Development/Operations • Equipment and Technology Assessment/Selection

and/or a HPSA.	• Financial (Reimbursement, Business Models, Grants) • Policy • Other
Activities and Initiatives to Reduce Barriers to Telehealth 9. # of collaborative activities the TRC participated in to reduce barriers to telehealth during the current reporting period. 10. Provide a brief narrative description of any specific major initiatives undertaken to reduce barriers to telehealth during the current reporting period.	**4: Types of Services Provided by TRC during the Reporting Period** Category Training/Education and Outreach Events • Organize/Host Conference or Training Event (# of Events, Total Direct Service Hours, Total # of Participants) • Presentation at Conferences/Meetings/Webinars (# of Presentations, Total Direct Service Hours, Total # of Participants) • Other Communications/Promotional Activities • Exhibits (# of hours, # of contacts) • Newsletter (# of newsletters, # of subscribers) • Web Site (# unique visitors, # of pages viewed by visitors) • Research Publications (# of publications) • General Media (# interviews/articles) Social Media • Facebook (# of page likes, # of posts) • Twitter (# of followers, # of tweets) • LinkedIn (# of followers, # of posts) Other **Technical Assistance/Consultation** Method Used to Respond to Queries • Email (# responses) • Phone (# responses) • Videoconference (# responses) • In Person Visit (# responses) • Group Collaboration/Planning (# responses) **Client Satisfaction Survey Results** The following 4 questions come from the standardized Client Satisfaction Questionnaire – CSQ-8 and ratings are on a 4 point scale) • How would you rate the quality of service you received – Excellent, Good, Fair, Poor (# respondents, average rating) • If a colleague were in need of similar help, would you recommend our program to him or her – No, definitely not, No, I don't think so, Yes, I think so, Yes definitely (# respondents, average rating) • In an overall, general sense, how satisfied are you with the services you have received – Very satisfied, Mostly satisfied, Indifferent or mildly dissatisfied, Quite dissatisfied (# respondents, average rating) • If you were to seek help again, would you come back to our program – No, definitely not, No, I don't think so, Yes, I think so, Yes, definitely (# respondents, average rating) • Tools/Materials/Resources (# developed, #

	distributed)
Training/Technical Assistance # of trainings/TA geared towards skill development in telehealth conducted by the TRC during the performance period. This could include project-specific TA and/or training around telehealth research, services, or operations. 11a. One-to-One trainings/TA 11b. Peer-to-Peer trainings/TA 11c. One-to-Many trainings/TA 12. total # of attendees 13. # of hours spent on trainings/TA 14. Innovations Developed to Increase Telehealth Resources Provide a narrative description of any significant innovations or training and technical assistance that the TRC may have developed/conducted in the reporting period that had a significant or great impact.	**5. New telehealth sites or services developed** <u>Category</u> - Number of new telehealth sites established as a result of TRC TA - Number of new telehealth services initiated as a result of TRC TA
Educational Materials 15. # of educational materials (tools, templates etc.) developed or adapted by the TRC during performance period. 16. # of educational materials provided/supplied by the TRC during performance period	
TRC Operating Costs 17. TRC operating costs covered by non-federal sources/revenue-generating activities during the performance period. 18. Total TRC operating cost during the performance period $___	
19.-20. Client Service Assessment	

Previous Measures		
19. – 20. Client Service Assessment		
Standard client service assessment questions	19. # of clients responding with a 4 or 5 (agree/strongly agree) on a 1-5 point Likert scale	20. # of clients answering question
a) The TRC service was effective		
b) The TRC service was valuable for your operations		
c) The TRC guidance will/has help(ed) you with starting, expanding and/or operating your telehealth service		
d) You would recommend the TRC to others		
e) You are satisfied with the TRC consultation you received		
Standard client service assessment questions	# of clients responding "yes"	# of clients answering question
f) Do you perceive an improvement and/or enhancement in your telehealth services as a result of consulting with the TRC?		
Requests for TRC Services 21. # of unique requests made for TRC services around developing and/or implementing telehealth		
Please describe any challenges you experienced capturing data elements required for reporting in the TRC Performance Indicator Data Collection Tool.		