

# Performance Improvement Measurement System (PIMS) Update

Suzanne Stack, MS  
SORH Program Coordinator  
Federal Office of Rural Health Policy  
Health Resources and Services Administration



# Purpose of Webinar

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- **FY 17 SORH PIMS timeline and process.**
- **FY 17 SORH PIMS definitions for Technical Assistance and Unduplicated Client.**
- **Five year (FY 12 – FY 16) program wide SORH PIMS trends.**
- **Review new proposed PIMS for upcoming FY18 project period.**



# SORH Performance Measures - Current

- **Current measures are:**
  1. **Report the number of technical assistance (TA) encounters provided directly to rural clients by SORH.**
  2. **Report the number of rural clients (unduplicated) that received TA directly from SORH.**
- **Clear definitions of what constitutes a direct TA encounter and the difference between affiliated and unaffiliated clients.**
- **TA encounters expected to exceed unduplicated clients (~1:2).**



# Definition: Technical Assistance (TA) Encounter

- Any activity that is planned, funded, organized, administered or provided by SORH that results in the delivery of substantive information, advice, education or training directly to a client. TA must be provided face to face, thru teleconference/webinar technology or via in-depth telephone and e-mail interactions that result in the delivery of substantive service or subject content (problem solving, proposal feedback, regulation interpretation, grant application guidance etc.) to a client.
- Relatively brief or routine telephone and email responses and direct mass mailings are not considered TA for the purpose of this measure.
- TA encounters provided to the same client on different occasions shall still be counted as an individual encounter.



# Definitions Continued:

**Client (Unduplicated):** Any individual, group or organization interested in rural health. A client may only be counted *once* regardless of how many times the client receives TA during the reporting period. Examples include but are not limited to: providers, hospitals, clinics, networks, agencies, associations, organizations, academic institutions, government officials, communities, partners and other stakeholders.

**Affiliated Individuals:** (i.e. members of an association or organization) are considered a single client. Example - SORH addressing State Rural Health Association about grant opportunities.

**Non-affiliated Individuals:** (i.e. hospital administrators or nurses) are considered *multiple* clients. Example - hospital staff attending a SORH sponsored workshop on quality and performance improvement.



# SORH Performance Measures - Current

- In addition to TA measures, SORHs also provide breakdown of:
  - types of TA provided (i.e. face-face, e-mail, teleconference, webinar, other); and
  - types of unduplicated clients (i.e. hospitals, clinics, academic institutions, providers, other).
- Sum of types must equal TA & Clients totals.
- Roll-up of measures from all 50 SORHs reported to OMB, high variations require explanation.
- To view HRSA's Budget Justification, visit:  
<https://www.hrsa.gov/sites/default/files/hrsa/about/budget/budget-justification-fy2019.pdf>



# Types of TA listed in EHB PIMS

	Types of TA Provided	Number
<input checked="" type="checkbox"/>	In-Depth Telephone and email interactions	1102
<input checked="" type="checkbox"/>	Webinar Technology	27
<input checked="" type="checkbox"/>	Thru Teleconference	42
<input checked="" type="checkbox"/>	Face to Face	129
<input checked="" type="checkbox"/>	Other	129
	<b>Total:</b>	<b>1429</b>

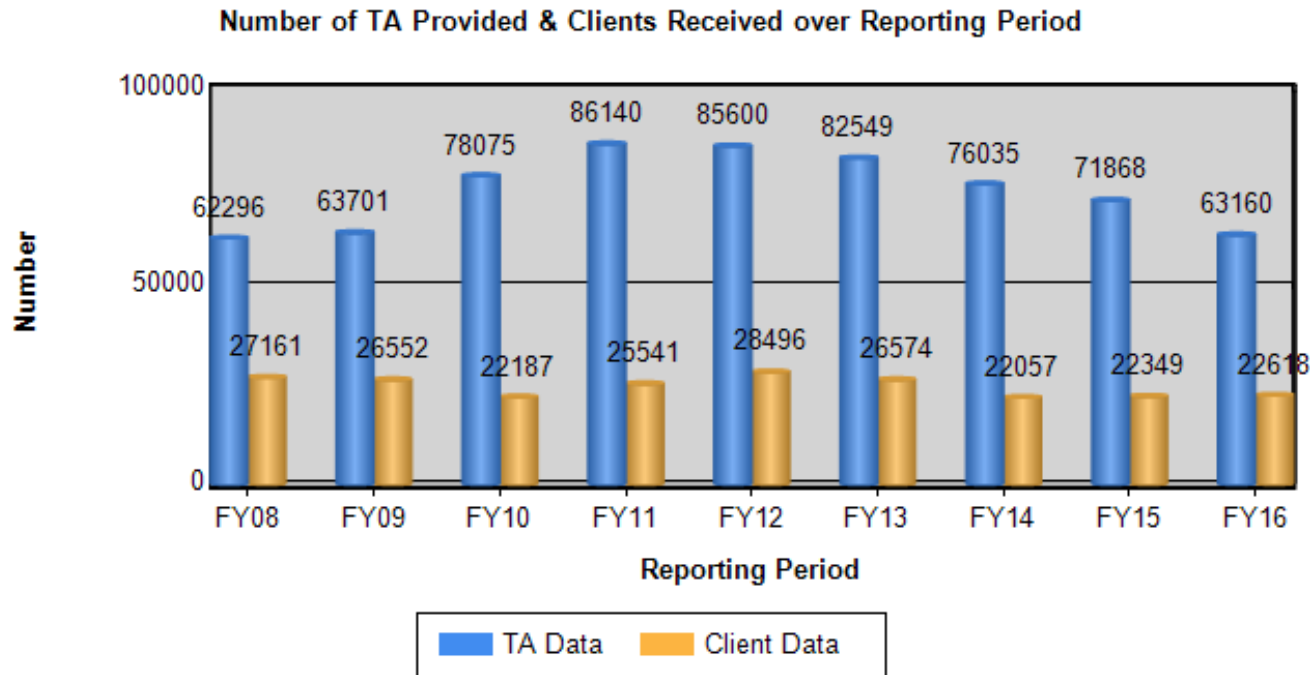


	Types of Clients that Received TA	Number
<input checked="" type="checkbox"/>	Communities	28
<input checked="" type="checkbox"/>	Government Officials	2
<input checked="" type="checkbox"/>	Academic Institutions	4
<input checked="" type="checkbox"/>	Associations	8
<input checked="" type="checkbox"/>	Agencies	6
<input checked="" type="checkbox"/>	Networks	3
<input checked="" type="checkbox"/>	Emergency Medical Services (EMS)	2
<input checked="" type="checkbox"/>	Clinics	41
<input checked="" type="checkbox"/>	Hospitals	18
<input checked="" type="checkbox"/>	Providers	128
<input checked="" type="checkbox"/>	Other	13
	<b>Total:</b>	<b>253</b>





# SORH Performance Measures

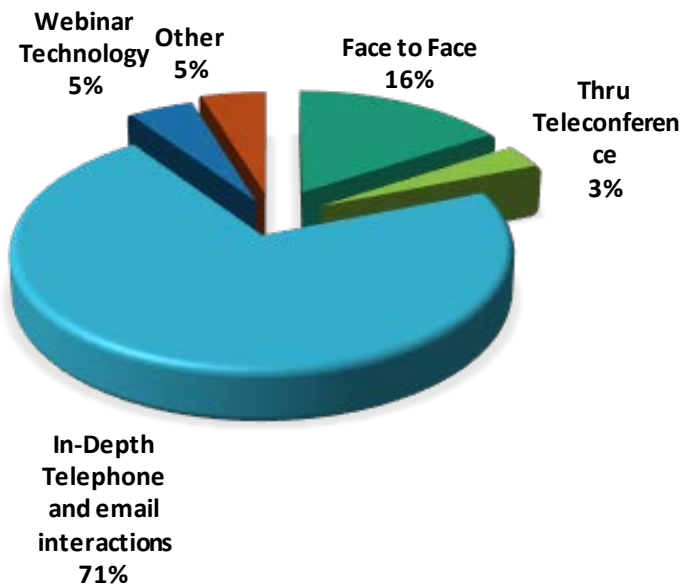


Note: 38 SORHs use TruServe collection instrument.

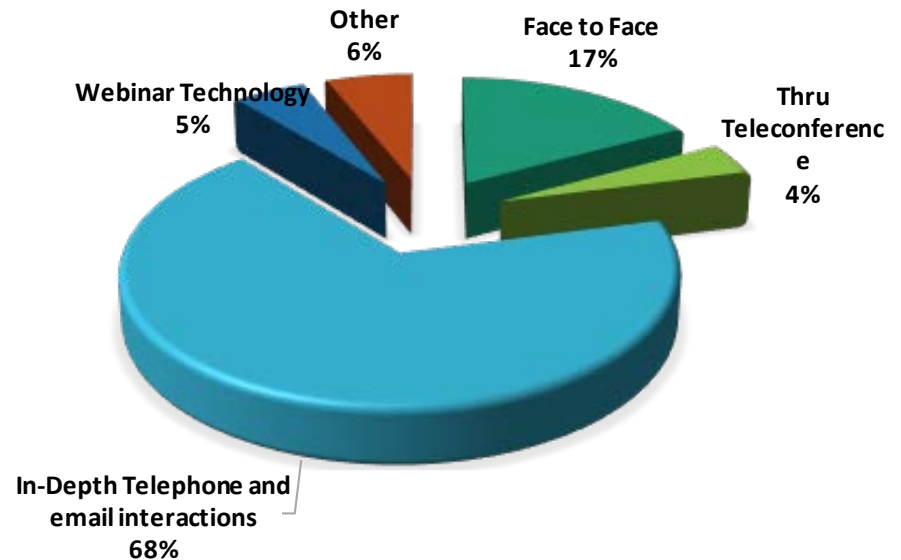


# SORH Performance Measures: Types of Technical Assistance

FY11-15

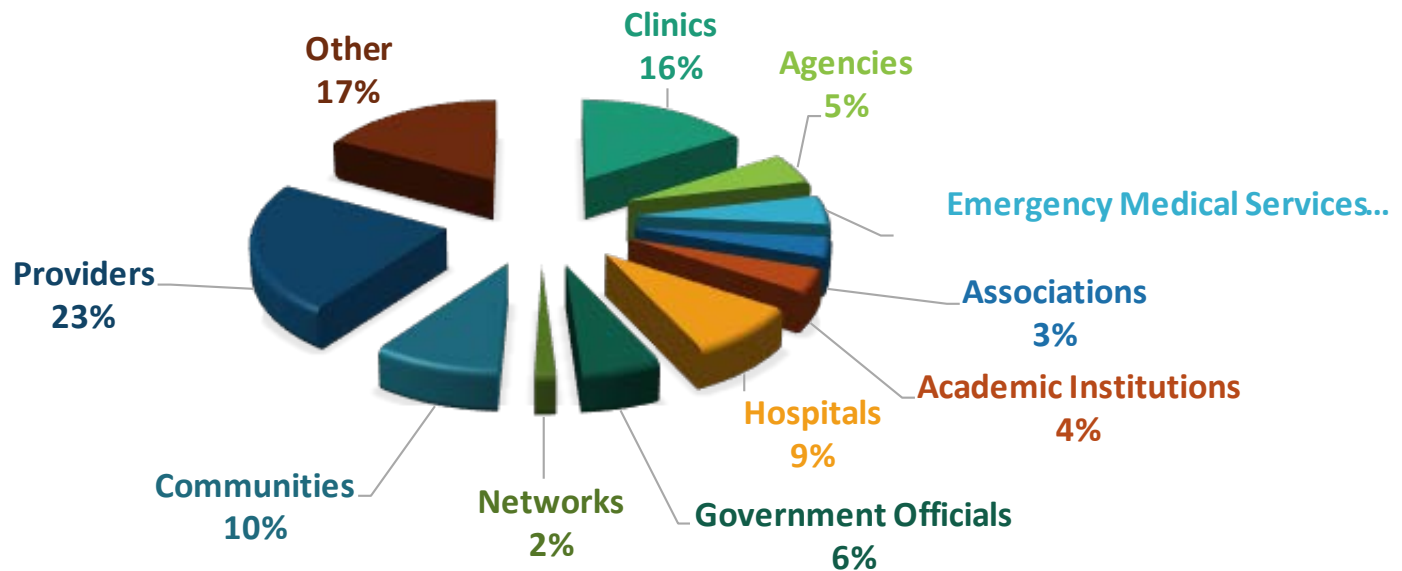


FY16



# SORH Performance Measures: Types of Clients

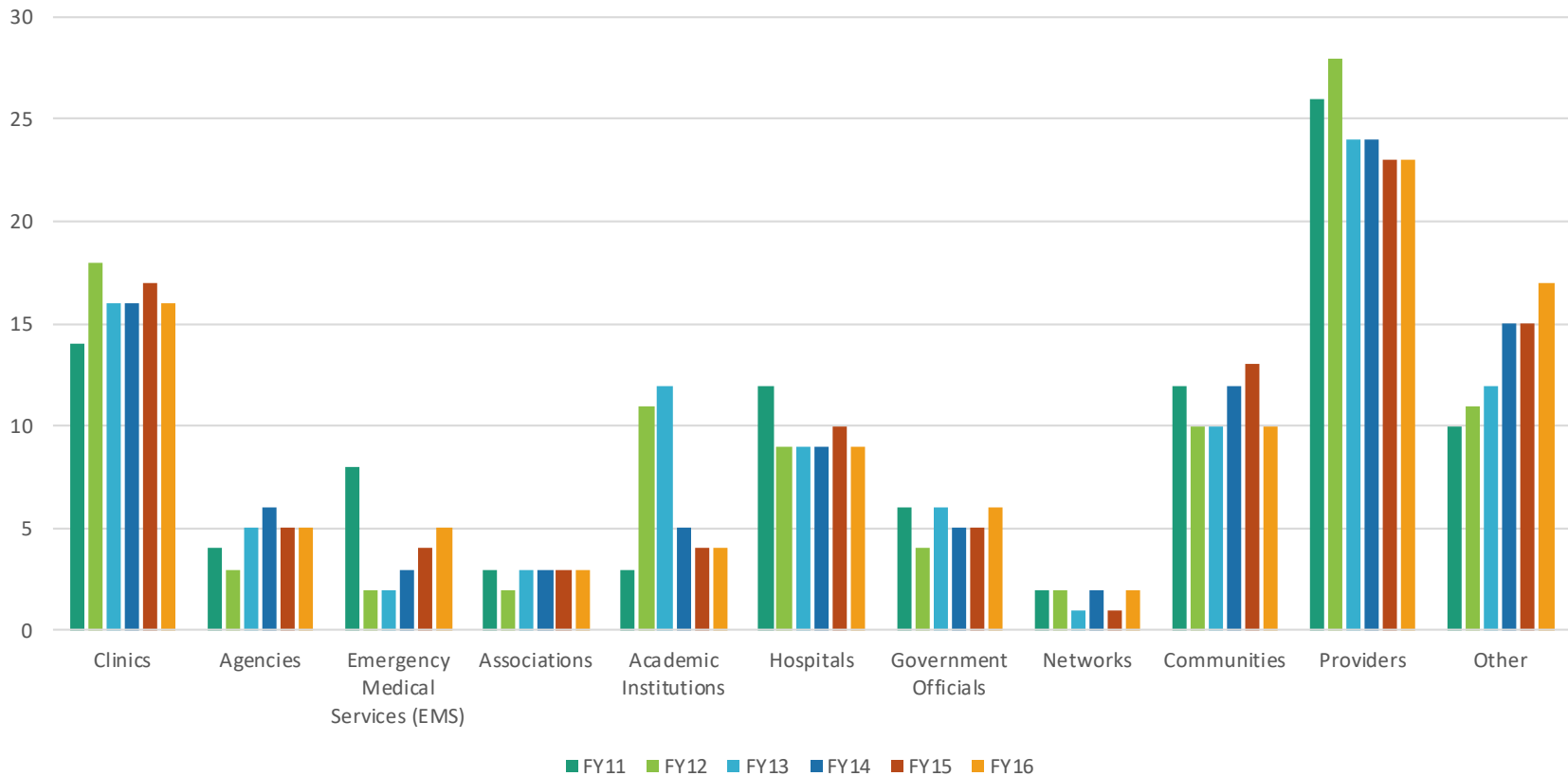
TYPE OF CLIENTS RECEIVING TECHNICAL ASSISTANCE: FY16



NOTE: Providers, clinics and hospitals receive about 50% of technical assistance

# SORH Performance Measures: Type of Clients

TYPE OF CLIENTS RECEIVING TECHNICAL ASSISTANCE, FY11-FY16



# FY 17 Submission Process

- All prior year reports can be viewed in EHB.
- Project Officer can provide five year trend.
- FY 17 PIMS due in EHB by August 30, 2018.
- If FY 17 measures vary significantly (5% or more) from FY 16 for either TA or Clients, contact Project Officer to discuss prior to submission.
- Note suspected reason for change in comment section at bottom of EHB submission form.



# New Draft Proposed SORH Performance Measures

- In 2017, FORHP convened a SORH PIMS Workgroup (one rep per region) to conduct an analysis of existing PIMS measures.
- The Workgroup met via conference calls to discuss existing measures and option for new PIMS measures that would more clearly depict SORH work and successes.
- Workgroup Objectives were to: Identify what we know about SORH Program accomplishments and activities; what we can reasonably find out; and what all SORHs are capable of reporting on to demonstrate outcomes.



# New Draft Proposed SORH Performance Measures

- **SORH PIMS is currently collected only for Objective 3 of the program: Provide Technical Assistance (TA Encounter and Clients Served).**
- **The Workgroup proposed to identify at least one reporting measure that could be tied to each of the other two objectives, Objective 1 and Objective 2.**
- **Efforts were made to ensure that any new measures were not overly onerous and could be collected by SORHs of varying size and capacity.**
- **The main purpose of this change is to provide a mechanism for SORHs to show the great work they are doing!!**



# New Draft Proposed SORH Performance Measures Objective 1

## Program Objective 1: Collect and Disseminate Information

### Information Disseminated:

- Number of people on listserv
- Number of people receiving newsletter (mail or electronic)
- Number of website hits
  - Include information on most popular sections of website, if known: textbox for this
- Is audience/membership for listserv the same as for newsletter: Yes or No
- Is the listserv one way information or interactive: one way or interactive





# New Draft Proposed SORH Performance Measures Objective 1

## Program Objective 1: Collect and Disseminate Information

### Optional Section, Complete Only if Applicable:

- Information Created or Developed: New/Updated/Not Applicable.
- Checkbox will be available for: Fact Sheets, Toolkits, Maps, Conferences (hosted or co-hosted), Articles, Webinars, Website Updates, Newsletter
  - Newsletter: how many newsletter issues per year (if known):  
*provide number*
  - Listserv: how many listserv posts distributed per year (if known):  
*provide number*
  - Describe one tool that you created to address a problem in your state: *This will be a textbox.*



# New Draft Proposed SORH Performance Measures Objective 2

- **Program Objective 2: Coordinate rural health care activities in state in order to avoid redundancy.**
- **Collaborative Efforts by 1) topic area and 2) type of audience.**
- **Topic Area: Convened/Attended/Not Applicable**
- **Checkbox will be available for the following topic areas: Rural Health Network, Needs Assessment, Workforce, Telehealth, Tribal, Older Adults/Aging, Behavioral Health, Community Development, Population Health, Opioids, Veterans, Oral Health, Transportation, Grant Writing and/or Other. *Other will be a textbox.***



# New Draft Proposed SORH Performance Measures Objective 2

- **Program Objective 2: Coordinate rural health care activities in state in order to avoid redundancy.**
- **Collaborated With: Other HRSA grantees, Other State Agencies, Policymakers, CAHs, Small Rural Hospitals, FQHCs, RHCs, Workforce Programs, National Organizations, Educational Institutions, Associations, Networks, Advisory Boards/Committees/Workgroups and/or Other. *Other will be a textbox.***
- **Describe one collaborative effort in your state that resulted in increased engagement on issues and/or strengthened partnerships that helped further the goals of the SORH? *This will be a textbox.***



# New Draft Proposed SORH Performance Measures

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- Questions?



# Contact Information

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Suzanne Stack, MS  
SORH Program Coordinator  
Federal Office of Rural Health Policy  
Health Resources and Services Administration  
[sstack@hrsa.gov](mailto:sstack@hrsa.gov) / (301) 443-4043

FORHP HSD Project Officer Map:  
<https://www.hrsa.gov/ruralhealth/ruralhospitals/regionmap.html>

HRSA EHB Contact Center / 877-Go4-HRSA (464-4772)

**Web:** [hrsa.gov/ruralhealth/](https://www.hrsa.gov/ruralhealth/)

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