



State Offices of Rural Health (SORH) Performance Improvement Measurement System (PIMS)

July 7th, 2022

Sarah Ndiang'ui, MPH
SORH Program Coordinator
Federal Office of Rural Health Policy (FORHP)

Vision: Healthy Communities, Healthy People



Purpose of Webinar

- FY 21 SORH PIMS reporting (now open)
- FY 21 SORH PIMS definitions for Technical Assistance and Unduplicated Client
- Five year (FY 16 FY 20) program wide SORH PIMS trends





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





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.





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.





SORH Performance Measures Objective 2 (Cont'd)

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/ CHCs, 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.





Program Objective 3: Provide Technical Assistance to Public and Non-Profit Private Entities

- 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.





Definitions Continued:

<u>Client (Unduplicated):</u> 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.

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

<u>Non-affiliated Individuals:</u> (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

Roll-up of measures from all 50 SORHs reported to OMB, high variations require explanation.

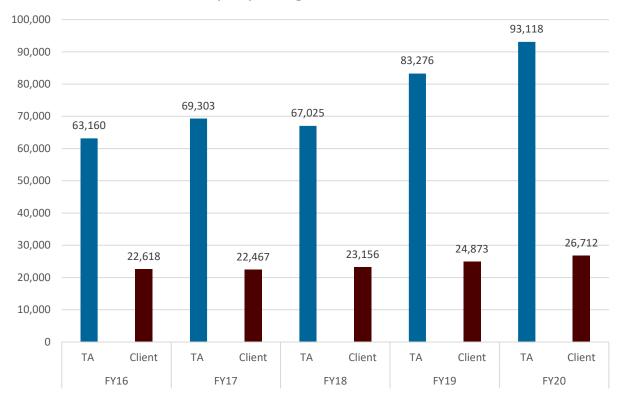
To view HRSA's Budget Justification, visit: https://www.hrsa.gov/sites/default/files/hrsa/about/budget/budget-justification-fy2022.pdf





SORH Performance Measures





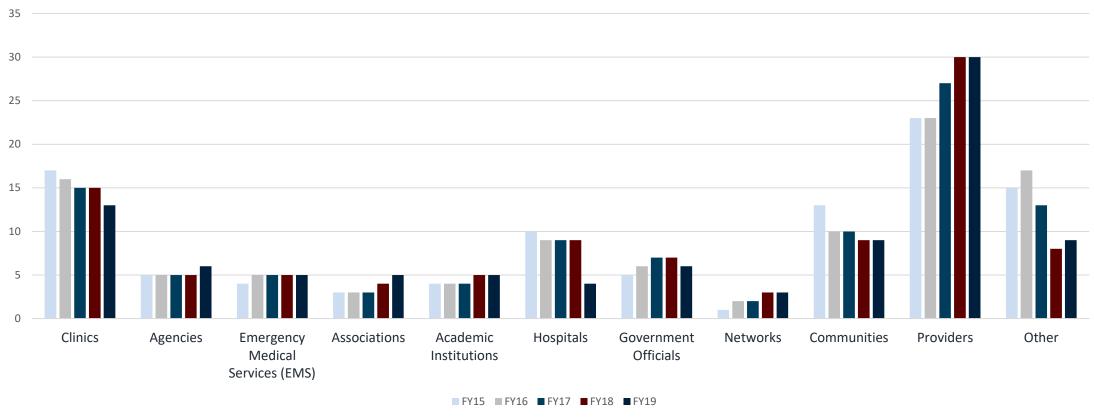
Note: 38 SORHs use TruServe collection instrument.





SORH Performance Measures: Type of Clients

TYPE OF CLIENTS RECEIVING TECHNICAL ASSISTANCE, FY15-FY19

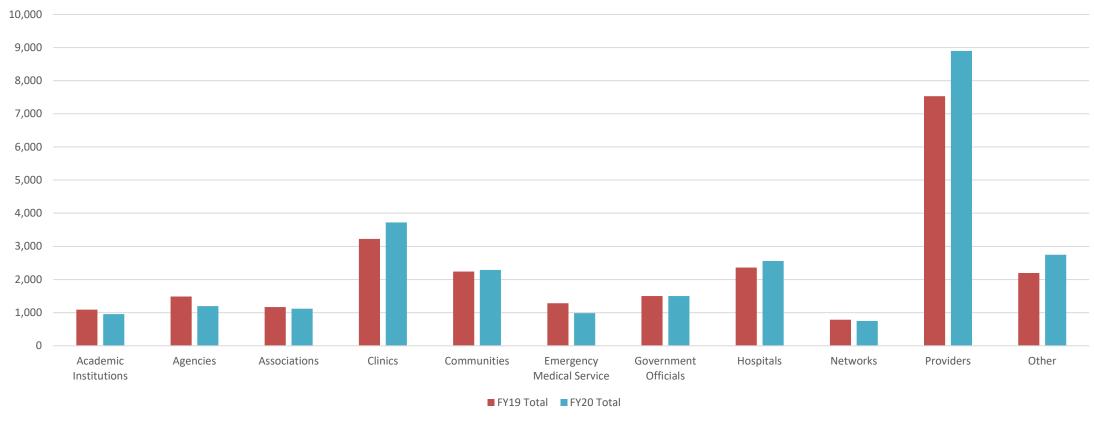






SORH Performance Measures: Type of Clients

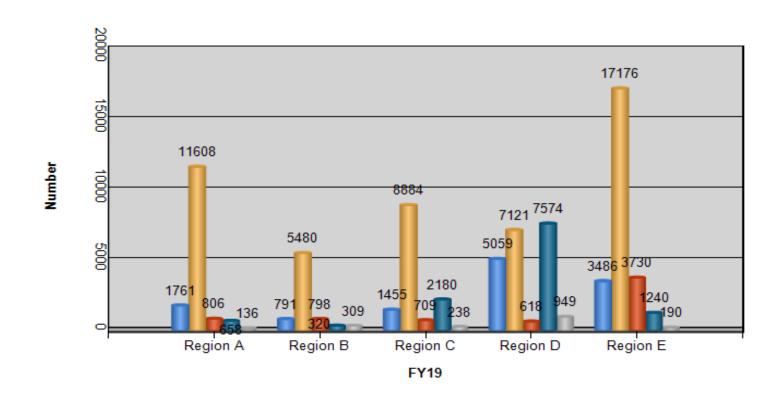
TYPE OF CLIENTS RECIEIVING TA, FY19-FY20







Different TA used in each region

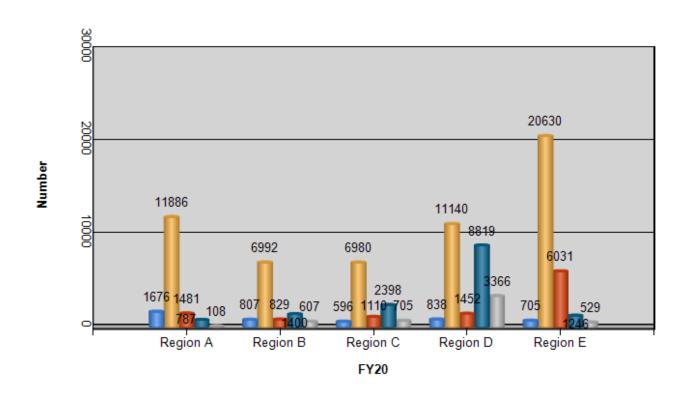








Different TA used in each Region

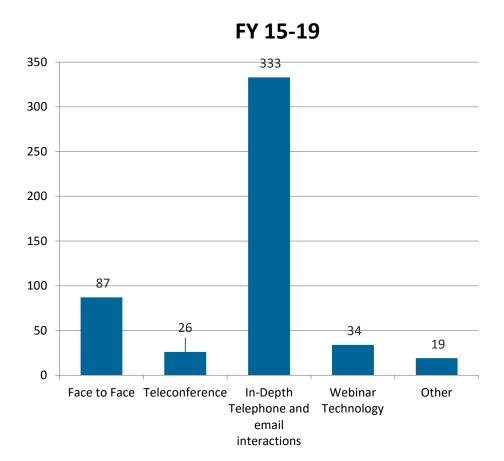


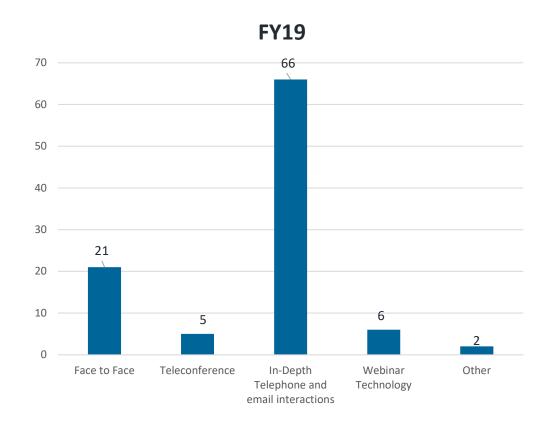






SORH Performance Measures: Types of Technical Assistance

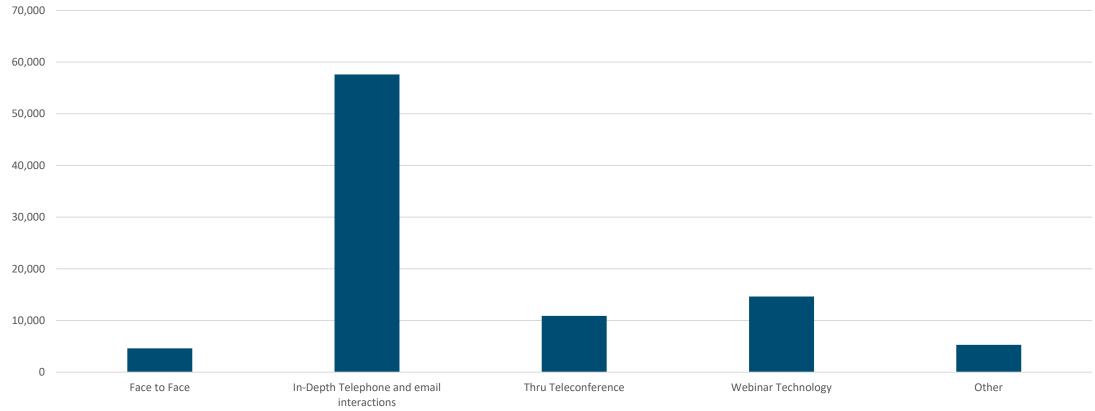








SORH Performance Measures: Types of Technical Assistance FY20







SORH Performance Measures: 2021

SORH PIMS Information for 2021:

- Across the 50 SORHs, there are:
 - 64,858 listserv subscribers
 - 4,265 items posted to listservs
 - 54,683 receiving a newsletter (mail or electronic)
 - 676 newsletters distributed
 - 1,523,804 website hits
- FORHP is sorting through additional data reported for 2020 and exploring ways to report this information.





FY 21 PIMS Submission Process

- Due in EHB by August 31st, 2022
- If FY 21 measures vary significantly from FY 20, contact Project Officer to discuss prior to submission
- Note suspected reason for any changes in comment section at bottom of EHB submission form
- All prior year reports can be viewed in EHB
- Project Officer can provide five year trend





SORH PIMS Submissions FY2021

• Questions?





The next TruServe training:

Mark Barclay, MS

TruServe Coordinator

University of North Dakota Center for Rural Health

701-777-2094

mark.barclay@und.edu

When: Wednesday, July 27th, 2:00 ET

https://und.zoom.us/meeting/register/tJUtfuGprTMqGNPcWnDkGehL6a7Met1QwRg1





Contact Information

Sarah Ndiang'ui, SORH Program Coordinator Federal Office of Rural Health Policy Health Resources and Services Administration sndiangui@hrsa.gov / (301) 443-0876

FORHP HSD Project Officer Map:

https://www.hrsa.gov/ruralhealth/ruralhospitals/regionmap.html

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

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