Community Telehealth Site Survey

INFORMATION SHEET

Community-Cancer-Connect: A Survey About Telehealth in Rural Communities

Principal Investigator: Charles Kamen, PhD

This form describes a research study that is being conducted by Charles Kamen, PhD from the University of Rochester's Department of Surgery.

The purpose of this study is to better understand the perspectives of community organizations about providing telehealth to the communities that they serve.

If you decide to take part in this study, you will be asked to complete a survey.

We estimate that approximately 82 volunteers will take part in this study. Your participation will last about 5-10 minutes.

There are no other expected risks to you for participating in this study. There are also no expected benefits. You will not be paid for participating in this study.

The University of Rochester makes every effort to keep the information collected from you private. In order to do so, we will make sure only approved research staff members have access to study information collected. If you choose to provide contact information, such as your organization's phone number or address, your survey responses may no longer be anonymous to the researcher. However, no names or identifying information will be included in any publications or presentations based on these data, and your responses to this survey will remain confidential.

Your permission to use your survey data for this study will not expire unless you tell us you want to cancel it. We will keep the information we collect about you indefinitely. If you cancel your permission, you will be removed from the study.

Your participation in this study is completely voluntary. You are free not to participate or to withdraw at any time, for whatever reason. No matter what decision you make, there will be no penalty or loss of benefits to which you are otherwise entitled.

For more information or questions about this research you may call Sarah Merritt at (585) 738-5539. Please contact the University of Rochester Research Subjects Review Board at 265 Crittenden Blvd., CU 420628, Rochester, NY 14642, Telephone (585) 276-0005 or (877) 449-4441 for the following reasons:

- You wish to talk to someone other than research staff about your rights as a research subject;
- To voice concerns about the research;
- To provide input concerning the research process;
- In the event the study staff could not be reached.

Do you agree to participate in this study?	○ Yes ○ No	



A telehealth site would provide patients access to a private space with a computer, webcam, microphone, a stable internet connection, and other equipment to allow them to connect via the internet to a healthcare provider. A community location could be a library, senior living center, school, or other public space that could host this telehealth site. Do you think a telehealth site in a community location Yes \bigcirc No would be beneficial? Choose top three locations in your community that ☐ library could best host a telehealth site (select multiple): senior center community center □ school recreation center ☐ church □ firehall ☐ Office for Aging ☐ other Fill in other locations for a telehealth site: Yes Would you personally feel comfortable using a \bigcirc No telehealth site in a community location? Why not? Would people in your community use a telehealth site Yes in a community location? \bigcirc No Why not? Would your organization be interested in hosting a Yes telehealth site? \bigcirc No Do you have a private space in your facility that Yes could be used to host a community telehealth site? \bigcirc No Is there anyone who would be interested in being a Yes point person/lead/champion for setting up a telehealth \bigcirc No site in your organization? Name: Email address: Is there anyone within your organization who would need to approve hosting a telehealth site at your location? Names and titles:

We are interested in your thoughts about setting up a telehealth site in a community location.



What resources do you already have that could make a telehealth site work at your organization?	designated room furniture computer good camera and lighting headphones infection prevention supplies scheduling assistant/software white noise machine scale blood pressure cuff training for staff educational resources for the community library champion other
What other resources do you have?	
What would be your concerns about offering telehealth in a community setting? (select multiple):	 □ privacy □ transportation □ scheduling □ prefer in person □ lack of familiarity with technology/computer knowledge □ language barrier □ handicapped accessibility □ hours □ COVID or other illness □ other
Fill in other concerns:	
Do you feel there would be participation among local doctors to provide services through a telehealth site in a community location?	○ Yes ○ No
Do you have a current working relationship with a local health system or local doctors?	○ Yes ○ No
Please describe this relationship:	
What types of services would you want to see offered through this telehealth site?	 □ primary care □ mental health □ endocrinology □ urology □ oncology □ tobacco and substance use services □ integrative care (mindfulness, guided imagery) □ genetic counseling □ other
What other types of services would you want to see offered through a telehealth site?	

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Is it difficult (because of distance, availability, etc.) for people in your community to receive:	 □ Well visits or check-ups □ Sick visits or urgent care □ Mental health services □ Cancer prevention □ Specialty follow-up □ Other 		
What other services are difficult for your community to receive?			
Please estimate: What percent of the community in which you live does not have reliable access to the internet?	0%	50%	100%
	(Place a mark on the scale above)		
Is there a place at your facility where a training for community members about using telehealth could be held (e.g., classroom, conference room)?	○ Yes ○ No		
Would you be willing to promote other health initiatives and digital health services if they were offered (cancer screenings, wellness workshops, cooking demonstrations, etc.)?	○ Yes ○ No		
Who in your community might not be able to access this telehealth site (e.g., those who are disabled, too sick, non-English speakers)?			-
What are other advantages of having a telehealth site in a community location?			-
What are other disadvantages of having a telehealth site in a community location?			-
What other comments do you have about setting up a telehealth site in a community location?			-
Your name:			
Email address:			
Organization:			
Your organization's zip code:			



Library Staff Survey

Please complete the survey below. Thank you!

	Organizational Readiness for Implementing Change for Telehealth						
		Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	
1)	I feel confident that the organization can get people invested in implementing a telehealth booth.	0	0	0	0	0	
2)	I am committed to implementing a telehealth booth.	0	0	0	0	0	
3)	I feel confident that we can keep track of progress in implementing a telehealth booth.	0	0	0	0	0	
4)	I will do whatever it takes to implement a telehealth booth.	0	0	0	0	0	
5)	I feel confident that the organization can support people as they adjust to using a telehealth booth.	0	0	0	0	0	
6)	I want to implement a telehealth booth.	0	0	0	0	0	
7)	I feel confident that we can keep the momentum going in implementing a telehealth booth.	0	0	0	0	0	
8)	I feel confident that we can handle the challenges that might arise in implementing a telehealth booth.	0	0	0	0	0	
9)	I am determined to implement a telehealth booth.	0	0	0	0	0	
10)	I feel confident that we can coordinate tasks so that implementation goes smoothly.	0	0	0	0	0	
11)	I am motivated to implement a telehealth booth.	0	0	0	0	0	
12)	I feel confident that we can manage the politics of implementing a telehealth booth.	0	0	0	0	0	



Macedon Library Patron Survey

Please complete the survey below. Thank you!

People sometimes find it hard to health care team by computer or private room, known as a telehea	phone. To provide	you with acc	cess to these services	s, the Macedon	
Have you ever had a telehealth a	ppointment?		Yes, on the comp Yes, on the phone No		
Would you feel comfortable going appointment at the Macedon libra			○ Yes ○ No		
Why not?					
Do you have concerns about usin the Macedon library?	g a telehealth boot	th in	○ No ○ Yes		
What concerns do you have?					
In your opinion, who would beneft community from using this telehe					
What are advantages of having a the Macedon library?	telehealth booth in	n			
What are disadvantages of having the Macedon library?	g a telehealth boot	h in			
Do you have any other comments telehealth booth in the Macedon		a			
	Very Dissatisfied	Somewhat Dissatisfied	Neither Satisfied nor Dissatisfied	Somewhat Satisfied	Very Satisfied
How satisfied are you with the telehealth booth at the Macedon library?	0	0	0	0	0



ThanksLiving Vendor Feedback

Please complete the survey below. Thank you!

Organization Name: Contact Name: (Your name, or best person to contact at your organization) Contact Email: (Your email, or best email for contacting your organization) Overall, what did you think of the Thanksliving event at the Macedon Public Library, on November 17, 2022? Did you get any referrals for your organization? Yes \bigcirc No If so, how many? \bigcirc Yes Do you think telemedicine was promoted well at this event? \bigcirc No Why not? ○ Yes
○ No Would you attend another community event as a vendor at the Macedon Public Library? Do you have any ideas to help promote the use of the digital privacy booth at the Macedon Public Library?

