

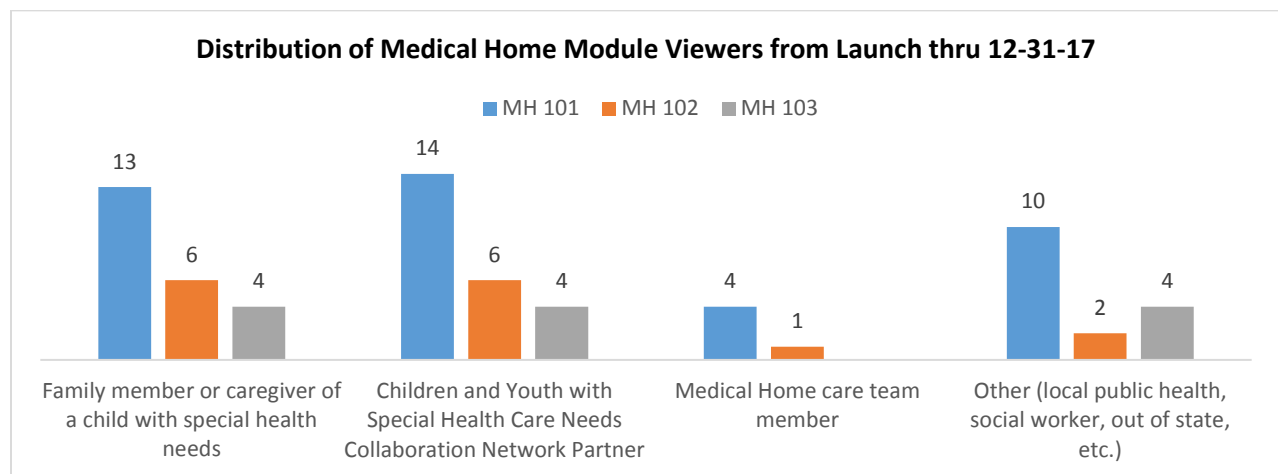
Medical Home 101 – 103 Module Evaluation | 2016 Summary

Website hits from module “go live” date until 12-31-16 (count)	
Medical home 101, 102 and 103	
Total number of hits:	219
Unique hits:	127

Accessed website and proceeded to module downloads “go live” date until 12-31-16 (count)			
	Medical home 101	Medical home 102	Medical home 103
Total number:	39	13	11
Unique individuals:	35	12 (4 watched as a group)	11

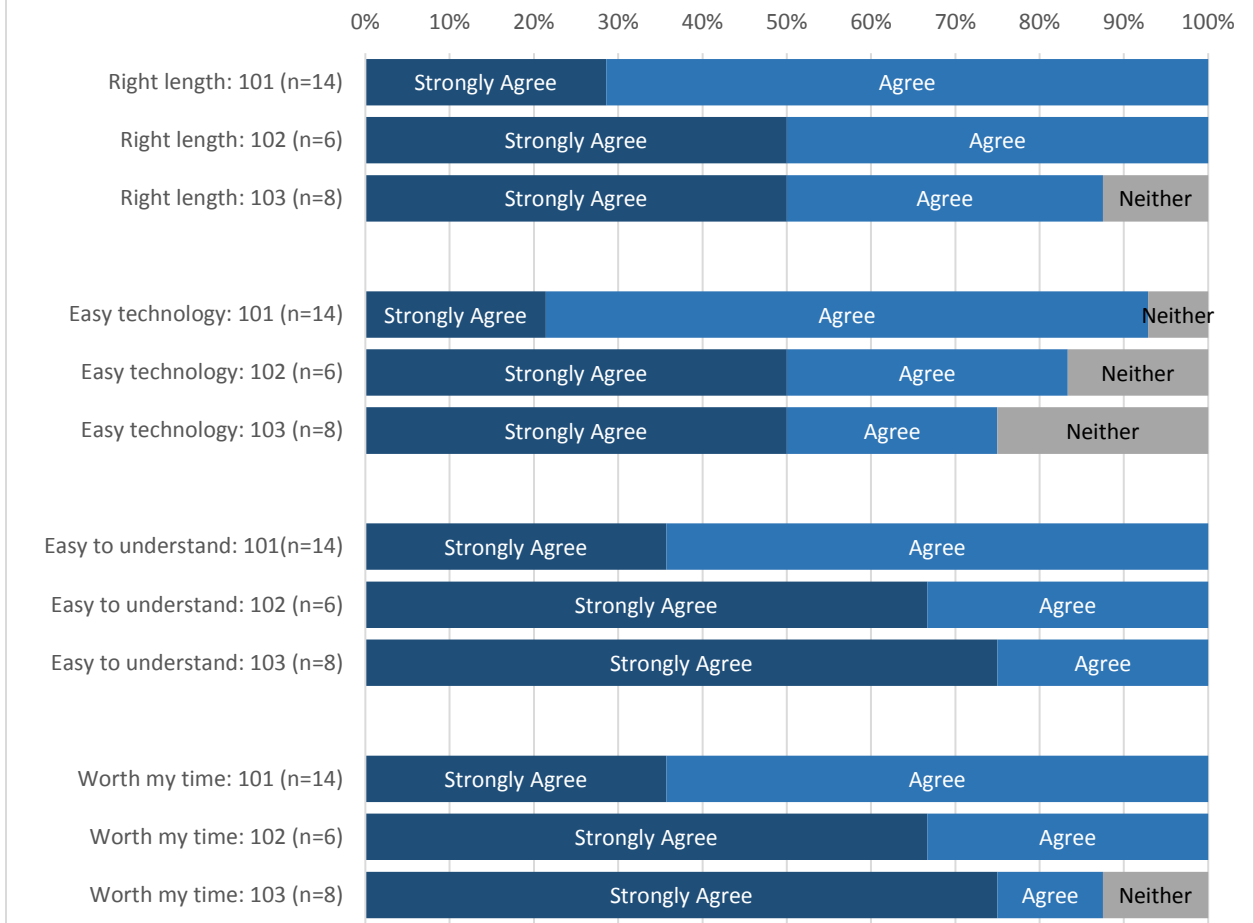
Response rate (# of surveys responses / # unique individuals that accessed the modules)			
	Medical home 101	Medical home 102	Medical home 103
	40%	38%	73%

Geographic distribution of unique individuals that accessed the modules (count)			
	Medical home 101	Medical home 102	Medical home 103
Northern Region	4	1	1
Northeastern Region	4	0	0
Southern Region	9	4	4
Southeastern Region	7	4	4
Western Region	2	0	0
Outside of WI	9	3	2



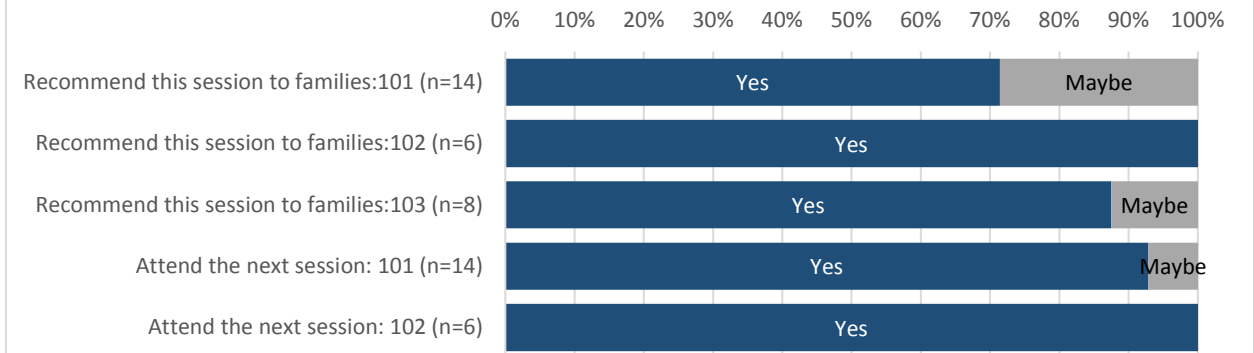
**Note that some respondents counted themselves in more than one category*

Level of agreement on Module Length, Ease of Use, Understandability and Worth of Time Spent on Medical Home Modules, Launch thru 12-31-17

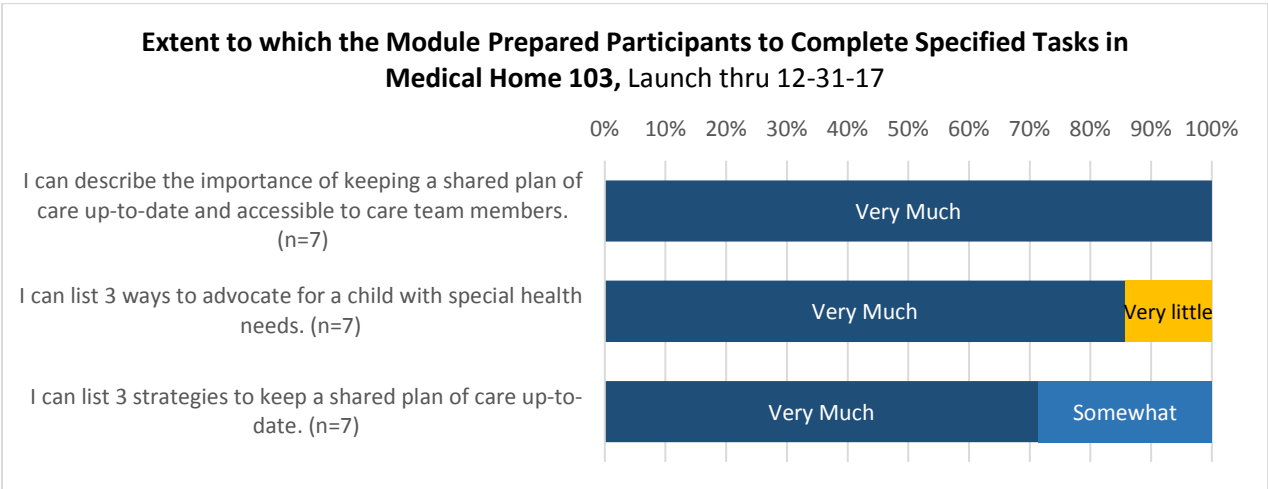
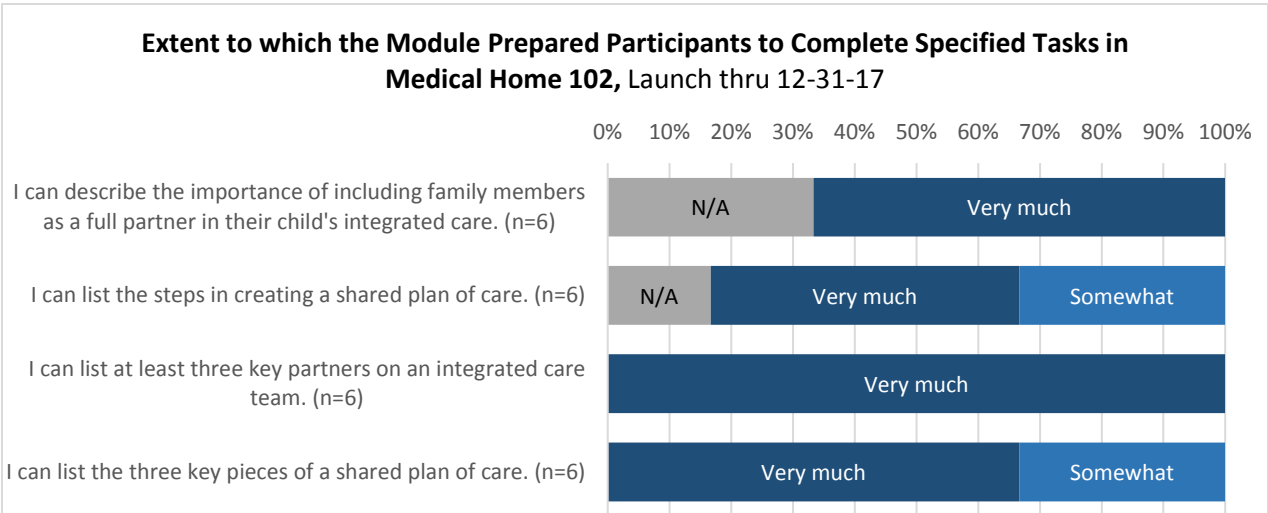
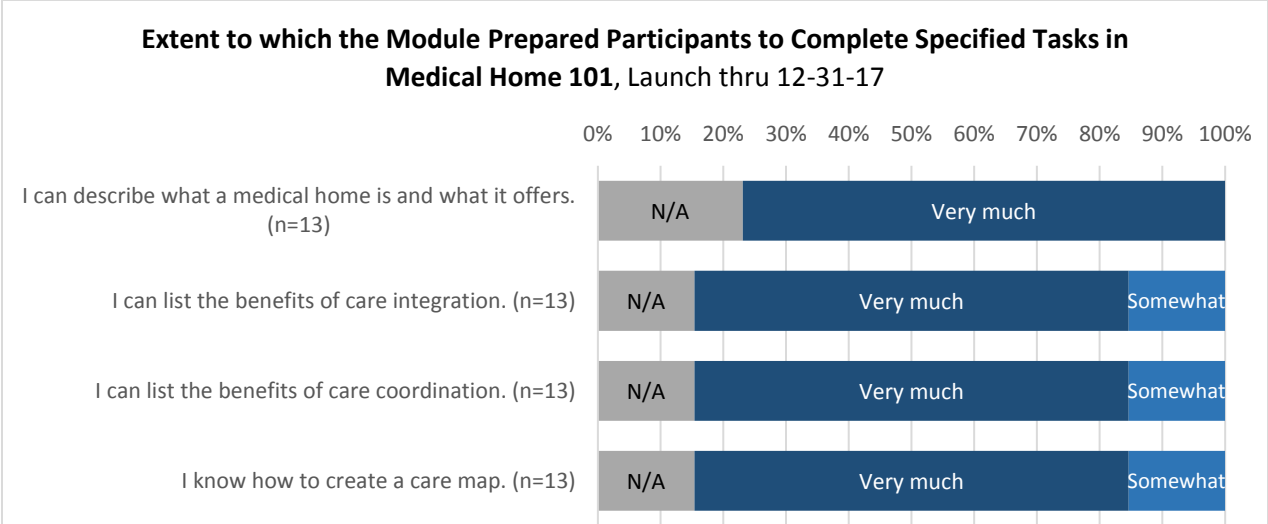


Response options: Strongly agree, Agree, Neither agree nor disagree, Disagree, Strongly disagree

Satisfaction with Modules: Indicated by Whether or Not Participants would Recommend the Module to Other Families and Interest in Attending the Next Session, Launch through 12-31-17



Response options: Yes, Maybe, No



Response options: Very much, Somewhat, Very little, Not at all, N/A – I knew how to do this before the session.

What is one idea or resource from the session that you will use?

# of Mentions	Medical Home 101 Topics
7	Care map
1	Integration was a term that I had put into this context - I like it.
1	Care coordination
1	Reassure family members to trust their instincts
1	Your doctor or staff work with you as a caregiver finding information and resources.
1	I will check out the web sites listed.

# of Mentions	Medical Home 102 Topics
2	Care notebook
2	Sharing the care plan: <ul style="list-style-type: none"> Created a shared care plan to have on hand. A good way to get new medical professionals educated on my child's situation too. Share the care plan with the team members.
1	The three key pieces to a shared plan of care
1	Updating my shared plan
1	Sign releases
1	Care map

# of Mentions	Medical Home 103 Topics
3	Updated care plan: <ul style="list-style-type: none"> That I (<i>sic</i>) need to keep a shared plan of care up-to-date; Three strategies top keep a care plan updated. A care plan is not only informative, tells an ongoing medical and historic story but would alleviate (<i>sic</i>) stress of things to remember when your child may have complex medical needs as well.
2	Calendar reminders: <ul style="list-style-type: none"> Using calendar reminders to update/review changes in the care plan. I like the idea of having a calendar reminder to update the SPoC since things are always changing but you might not think to add it.
1	I like the suggestions of having the plan available in multiples formats (electronically, USB drive, hard copy) in case of situation where you can't access one of the formats.
1	Write down health check criteria needed at certain ages to do with Down Syndrome specifically. Example, orthopedic checks as a teen for neck stability and proper growth and development. I kept things like this on my mind.
1	That I (<i>sic</i>) can try to ask for a Care Coordination conference
1	The website for additional forms
1	All of the ideas! Great resource for parents!

Suggested improvements for Module Length, Ease of Use, Understandability, and Worth of Time Spent

<p>Medical Home 101</p>	<ul style="list-style-type: none"> • It would have been nice to see the webcast in a full-screen mode. Having the other panes on the screen were distracting. I'm not sure "team" is the best word since it conjures up images of a group of people physically coming together to work toward a common goal. This simply is not possible when a child has multiple providers so this can feel like a misleading term. • It would be nice to have specific examples of "community" services that can be accessed as this is a very vague term. • It was difficult to get back to course once I clicked onto examples that led me off the course page. • I would like to be able to print the slides and take notes. • For the survey at the beginning I would like if I wasn't required to submit my email every time. I will come back to watch this again and it feels a bit odd to enter my email every time. • I'm wondering if I were to use this in a group setting if I can make the note pages and timer disappear? • Resources on last two slides were not on the screen long enough to look at them all.
<p>Medical Home 102</p>	<ul style="list-style-type: none"> • The volume did not always work. • It's off-putting to have to give your name and email address up front to enter Adobe Connect; it is somewhat confusing to have the Tips for Using Adobe Connect cover things that are not relevant to accessing an archived version of this presentation; would be good to recommend viewing as full screen (and how specifically to do this in Adobe Connect) to get boxes off the screen that are not relevant to archived access. • It would be very helpful to remind participants to go to fullscreen for watching the presentation from the archives. The questions in the chat go by so fast that it's not possible to read them or have time to reflect on them. The 2nd one has some very informative questions. It would be great to include some feedback on the talk. • Care Notebook link should be live and on slide 34; slides with questions for live groups should be left up longer as they have some good things for folks viewing archives to think about as well; suggestions for who exactly and how to approach a "partner" from your child's care team to work together on the Shared Plan of Care would be helpful since this is not the kind of thing any medical providers are reimbursed for or currently expected to do. • Don't know how to access the care notebook--didn't see a link to it on slide 34 where mentioned and resources slide went by so fast didn't have time to see if it was there • I liked the review of concepts from 101 at the beginning and the example of Care Coordination for Nick at age 4 was good. However, I don't think it's realistic to imply that all the care providers a child sees will meet to discuss a child. In our case, our daughter sees folks in Minnesota, at Children's Hospital in Milwaukee, at Dean in Madison, at two different locations through AFCH/UW in Madison, at a pediatric therapy center outside of all of these systems, and through the

	<p>school. Providing examples on how to work with these challenges, how to approach the topic of a conference with providers, where/how to carry out a conference and how to get a partner from the care team to work on a Care Map would be very helpful. These are all challenging issues since they are not reimbursable and require a lot of coordination so the more specific the suggestions are as to how to successfully complete these, the better.</p>
Medical Home 103	<ul style="list-style-type: none"> • It would have been helpful to have more live links to things like the actual Care Notebook site through the National Center for Medical Homes on slide 17, not to a website that still requires several more clicks to get to the Care Notebook itself; Slide 7 needs links to Family Voices and Medical Home Initiative website; would have been nice to have examples of how worked with a partner to create a Shared Plan of Care and specific ideas for how to keep current; not sure how realistic it is to say "all members" of Nick's care team came to the Care Coordination meeting; would have been nice to have examples of how to advocate for changes at each place listed on slide 24 (could have been links to this info); slide 25 should have a link to the Care Notebook since it mentions it; would be nice to have links to the sources on slide 28; slides 27 and 28 should be up longer so can read through what's on them. • Volume did not always work • Needs more specifics when mentions things like advocacy • The section with questions goes pretty fast, so fast I wasn't able to finish reading them. Maybe this will be different with a live audience?

Please share any additional comments.

Medical Home 101	<ul style="list-style-type: none"> • Really well done. • Well done • Well done use of technology....this can go to a wide audience to learn more! • Great suggestion to have more than one person go to appointments if possible.
Medical Home 102	<ul style="list-style-type: none"> • <i>none</i>
Medical Home 103	<ul style="list-style-type: none"> • When can I participate in a live version of these modules? It seems like it would be very beneficial to have conversations with others around these concepts.