

# Pathways to Prevention (P2P) Program

## Pathways to Prevention Workshop: Improving Rural Health Through Telehealth-Guided Provider-to-Provider Communication

### Summary of the Panel's Final Report

About one-fifth of people in the United States live in rural areas. These areas have lower life expectancy than urban areas. They also often have a shortage of health care providers. Telehealth—the use of information and telecommunications technology to provide care across time and distance—may help needed health care services reach rural communities.

In October 2021, the National Institutes of Health (NIH), Centers for Disease Control and Prevention, and Health Resources and Services Administration hosted a [workshop](#) to find and fill research gaps on the use of provider-to-provider telehealth to improve health outcomes in rural areas. After the workshop, an independent panel made these recommendations:

- **Develop one definition for rural provider-to-provider telehealth.** Not having a shared definition of rural provider-to-provider telehealth has made it hard to know how much it is used, how it is used, and whether it works. It also makes it hard to share information about provider-to-provider telehealth programs. The definition should be broad and cover services like mentoring and continuing education. It should not be limited to services that providers bill for.
- **Compare different rural provider-to-provider telehealth services.** Identify which services improve patient health and provider experience. Find out which programs spread the farthest and last the longest and why they succeed.
- **Involve patients and providers in the development and evaluation of rural telehealth services.** Tailor services to local needs and resources. Conduct mixed methods research to get important qualitative information from patients and providers.
- **Capture context in your research.** Describe demographics, state laws, internet access, and other factors that might impact telehealth programs. Track the best practices and resources that help make telehealth programs successful in different settings.

For a full list of findings and recommendations, read the [Panel's Final Report](#).

## About the Workshop

The Pathways to Prevention (P2P) Workshop: Improving Rural Health Through Telehealth-Guided Provider-to-Provider Communication took place on October 12–14, 2021. The goal of the workshop was to find and fill research gaps on the use of provider-to-provider telehealth in rural settings.

The workshop was co-sponsored by the National Center for Advancing Translational Sciences; National Heart, Lung, and Blood Institute; Health Resources and Services Administration Federal Office of Rural Health Policy; Centers for Disease Control and Prevention Office of the Associate Director for Policy and Strategy; and NIH Office of Disease Prevention (ODP).

## About the Workshop Panel

Each P2P workshop has an independent panel with members who have diverse professional and personal perspectives. Panel members attend the workshop, where they listen to and ask questions about presentations from expert speakers. After the workshop, the panelists write a report that summarizes the discussions and highlights research gaps and future priorities. The recommendations in the panel's report are for use by the broader research community. Panel reports are not policy statements of the NIH or the federal government.

The panel for the P2P Workshop: Improving Rural Health Through Telehealth-Guided Provider-to-Provider Communication included:

- Mary Wakefield, Ph.D. (Workshop & Panel Chair)
- Jayashri Sankaranarayanan, Ph.D.
- Joanne Mather Conroy, M.D.
- Velma McBride Murry, Ph.D.
- Sara L. McLafferty, Ph.D., M.A.
- Robert P. Moser, M.D.
- Rebecca Slifkin, Ph.D., M.H.A.

The panel members' [full bios](#) are available on the ODP website.

## Learn More

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- Follow ODP on Twitter: [@NIHprevents](https://twitter.com/NIHprevents).
- Watch recorded workshops on [youtube.com/NIHODP](https://youtube.com/NIHODP).
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