CREST CHANGE VALENCE
- Need
  - Diversity of opinion among staff (Sub-specialty territorialism)
  - Diversity re: sepsis vs. trauma
- Effectiveness
- Evidence Assessment
- Usefulness
- Patient/Family Acceptability

CONTEXTUAL FACTORS-ENABLING
- Structural Characteristics
  - Subspecialty MD availability
  - Hospital support staff
  - QI Structure/Staff
  - ED Structure resources
- Hospital Leadership/QI Culture
- ED Culture
- Usefulness
- Strategic concerns-transfer skimming

CONTEXTUAL FACTORS-HISTORICAL
- Past Telemedicine Experiences

CREST INFORMATIONAL ASSESSMENT
- Task Demands
- Resources Perceptions
  - RN/MD/Admin Alignment
- Facilitation (Involvement, Communications)
  - Involvement in Planning
  - Championship
  - Training
  - Communication (ED, Attendings, PCPs)
- Evaluation
  - Data metrics availability

READINESS FOR CREST
- Change Receptivity