#### Attachment F: Placeholder for clinical staff questionnaire

(These are modifications of questions from an employee survey used in a related project – while we expect some of the questions to change based on the initial interviews, this represents the types of questions and topics that the final survey is likely to encompass.)

# Improving Performance in Infection Control

#### Definitions:

In this survey, we ask about organizational goals, priorities and activities at your facility and in your clinical unit. To clarify a few terms as you begin to respond:

By facility, we mean the medical center where you are receiving this survey.

By **clinical unit**, we mean the part of the facility in which you work. If you work in more than one unit, please think about the unit on which you spend the most time.

By team, we mean the group of people you work with regularly in your clinical unit.

By **senior management**, we mean the top officials in the facility such as the chief of staff and the nurse executive.

# Please indicate the extent to which you agree with the following statements. (using 5-point Likert response scales.)

### 1. About your facility:

a. My facility is committed to delivering the highest quality patient care.

b. My facility has a clear sense of direction

c. My facility has a clear action plan that details the steps needed to improve patient care.

d. At my facility, it is a high priority to provide patient care according to evidence-based guidelines.

e. The leadership of my facility places high priority on improving infection control in our clinical

areas.

f. At my facility, we regularly celebrate successes in improving clinical care.

g. At my facility, there are incentives and rewards for using evidence-based clinical practices.

h. At my facility, processes are in place to redesign clinical processes if they are not working well.

#### 2. About the care provided in your clinical unit:

a. Day-to-day activities demonstrate that patient care quality is important.

b. It is difficult to fix quality problems that involve other services at this facility.

c. Some patients receive too little care.

d. Patient care processes have been standardized.

e. Patient care is well coordinated across different parts of the facility.

f. Handoffs of patients or information across units go smoothly.

g. I would feel completely comfortable having a family member treated at this facility without my being there to monitor the care.

## 3. About the team in your clinical unit:

a. Our team learns from the efforts of others to improve compliance with infection control guidelines in our facility.

b. Our team is able to easily adapt infection control requirements to match the needs of our clinic

area.

c. Our team has identified measures that are tracked on a regular basis to assess our progress in improving infection control.

d. We regularly report our progress in improving infection control to senior management. e. If we needed additional resources to improve infection control, senior management would help us obtain them.

f. If we needed cooperation from other services to improve infection control, senior management

would help us obtain it.

g. Our team effectively applies knowledge and skill to get our work done well.

h. Our team has used performance data effectively to design and test changes

i. Our team gets all the information we need to do our work.

j. After we have implemented a change, team members think about and learn from the results.

k. This organization makes sure people have the skills and knowledge to work as a team. I. Our service chief or service line manager helps us obtain cooperation and resources from other services or clinical units when needed.

m. Analyzing clinical processes to identify areas for improvement is a regular part of our work.

n. When trying to improve performance, we systematically test out new ideas.

4. In your clinical unit, what are the major barriers to compliance with infection control procedures?

#### (Check all that apply.)

Lack of awareness of guidelines

- Disagreement with guidelines
- Forget to follow guidelines

Lack of education on guidelines

□ Lack of needed supplies/equipment

Supplies/equipment not conveniently located

- Takes time away from patient care
- Workload is heavy
- There are no guidelines

5. The overall quality of care currently provided at this facility is:

- □ Poor
- 🗆 Fair
- 🗆 Good
- $\Box$  Very Good
- Excellent

#### 6. What is your position in the organization?

□ Advanced practitioner (NP, PA, Nurse Manager, Clinical Nurse Specialist)

Registered Nurse

- LPN or Nursing Assistant
- Physician

Other Clinical

7. Compared to what you think it should be, what is your current level of satisfaction with your job?

Not at All Satisfied

- □ Not Very Satisfied
- Neither Satisfied Nor Dissatisfied
- Somewhat Satisfied

Very Satisfied

Thank you very much for completing this survey.

Public reporting burden for this collection of information is estimated to average 15 minutes per response, the estimated time required to complete the survey. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: AHRQ Reports Clearance Officer Attention: PRA, Paperwork Reduction Project (0935-XXXX) AHRQ, 540 Gaither Road, Room # 5036, Rockville, MD 20850.