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## **Attachment G.** Post-implementation Semi-structured Interview Protocol

## **RED Implementation: Interview guide**

Hi, my name is \_\_\_\_\_\_\_. I'd like to interview you today as part of a project funded by the Agency for Health Care Research and Quality (AHRQ) to improve the discharge process at your hospital. The project is being conducted by Boston University Medical Center. We are thankful that you took time out of your busy schedule to participate in this interview. Your experiences and thoughts are very important and will greatly inform the project. The goal of the interview is to gather your thoughts on the implementation of the Project RED intervention. We will use this information to develop a hospital guide to implement Project RED and improve the process at your hospital. This interview is completely voluntary and confidential. You can refrain from answering any question at any time.

Your hospital has implemented a new process for patient discharges using the procedures and toolkit developed by Boston Medical Center. We would like to talk to you about the implementation experience including your hospital's goals, organizational supports, and facilitators and barriers to accomplishing project objectives.

- 1. **Impetus:** What is your understanding of the reasons for changing the patient discharge process? What are the hospital's objectives?
- a. How well did the old processes work?
- b. Why was redesign needed?
- c. How receptive are staff and to the changes?
- 2. **Fidelity:** Is your hospital implementing all of the procedures recommended in the BMC RED toolkit?
- a. What tools are (and aren't) being used?
- b. Are there areas where your hospital has needed to "customize"? Why is that?
- c. Are there workarounds?
- 3. **Experience & Outcomes:** Has the RED implementation improved the patient discharge process? In what ways? Is the new system successful in terms of:
- a. Tools and recommendations are well-designed and useful
- b. Procedures are working smoothly
- c. Information system components are easy to learn and use
- d. Patient discharges happen on schedule fewer delays in discharges
- e. Lapses and miscommunications that affect discharges are sharply reduced
- f. Patients know what to expect and what to do
- g. Staff know what to expect and what to do

- h. Clinical staff (physicians, nurses, pharmacists, social workers, etc.) comply with new procedures
  - i. Patients leave the hospital with clarity about plans for follow-up care
- 3. **Gaps:** Are there remaining problems or areas needing further improvement? What are they? How can they be addressed? Probes:
- a. Procedures and tools
- b. Communication & coordination
- c. Organizational support
- d. Resources
- e. Staff buy-in
- f. Patient buy-in
- 4. **Implementation:** Has the process by which the redesigned discharge process was put into place been successful in terms of:
- a. Way it was introduced
- b. Training provided
- c. Technical assistance provided
- d. Other resources needed
- 5. **Implementation Gaps:** Were there any problems with the RED implementation process? Probe for *specifics* regarding:
- a. The training provided
- b. The way it was introduced
- c. The technical assistance provided
- d. How could the implementation process be improved?
- 6. **Barriers & Facilitators:** What barriers and facilitators have affected the patient discharge redesign process and outcomes?
- a. Priorities competing for attention
- b. Clinic/practice leadership support for the redesign
- c. Role clarity for the areas/disciplines involved in the redesign
- d. Organizational culture including receptivity to change in affected clinical areas and practices
- e. Experience with strategies used to successfully introduce new clinical tools and processes
- 7. **Organizational Context:** In your area (and in the larger organization) how did leaders demonstrate their support for this project and its goals? Probe:
- a. Leaders make it clear that the project is a priority
- b. Leaders communicate their commitment to and support for the project
- c. The project is adequately resourced

- d. Project progress is routinely reported to a steering group (or an existing organizational management group) to assure that objectives are being met
- e. Leaders help resolve problems and barriers when they occurred
- f. Leaders provide time and training needed for staff to work on implementation
- 8. **Organizational Learning:** What has your organization learned from your experiences with the RED implementation?
- a. Have there been any surprises?
- b. What have been the most positive aspects of the change process?
- c. What could have been done differently to improve the process?
- d. Have any problems been created by implementation of this process?
- e. Did you encounter any unanticipated issues or problems during implementation?

## 9. Toolkit Feedback

- a. Any hospital specific factors that were not addressed in tool?
- b. What are the strengths of tool?
- c. What are weaknesses?
- d. Is there anything that needs clarity?
- e. Anything that needs more details/description?

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