

## OMB-Attachment C

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### **Erase-C.diff Intervention Site Focus Group Introduction:**

***As the call's host, GNYHA gives welcoming remarks and introduces the conversation's facilitators.***

#### ***(Facilitator please read)***

Thank you for agreeing to participate in this focus group discussion today to discuss *C-difficile* Infection (CDI) and antimicrobial stewardship activities. The goal of the **ERASE C-diff Project** is to assess rates of CDI at various Greater New York Hospital Association (GNYHA) members and to evaluate the implementation of antimicrobial stewardship programs (ASP) and their effect on CDI rates. This project is funded by U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality (AHRQ) through AHRQ's ACTION Program. We are conducting a series of focus group discussions and have invited your team to participate. We are interested in learning about how facilities such as yours, who have newly established ASPs, view the process of preparing for and implementing an ASP; we will also be talking to facilities that are contemplating or preparing for implementation of an ASP. We are interested in learning how the implementation has progressed at your facility and how your perceptions about CDI and ASPs have evolved over the past 12 months.

Please remember that your participation is entirely voluntary. We expect the discussion to last approximately 60 minutes. Only information related to CDI will be gathered; no personal information will be elicited or discussed. The focus group will be facilitated by two members of the study team from Boston University and we will be recording the conversation so that we can transcribe the discussion and analyze it later. All data and audiotapes will be kept in locked files in the office of the project's Principal Investigator. Your name or position will not be associated with any of these documents or files, and you will not be quoted or identified in any way in the analysis of these interviews. The information you provide will be aggregated with information from other respondents and kept private to the extent permitted by law. Should you have any questions, please feel free to contact Maria Woods of GNYHA at 212-259-0767 or Mari-Lynn Drainoni of BU at 617-414-1417.

Public reporting burden for this collection of information is estimated to average 60 minutes per response, the estimated time required to complete the focus group. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. 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) AHRO, 540 Gaither Road, Room # 5036, Rockville, MD 20850.
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### Erase-C.diff Focus Group Questions-Intervention Sites

#### INFECTION CONTROL PRACTICES AND BASELINE STATUS OF C-difficile

1. In what ways have you been able to implement or modify the Environmental Checklist and Infection Control Bundle Monitoring tools to meet your facility's specific needs?
2. What strategies have you used to reduce C. difficile and which strategies do you think have worked?
3. What barriers have you encountered while implementing and sustaining these activities?
4. Has any unit(s) been more difficult or challenging than others?
  - If yes, why do you believe this?
  - On units where this was easiest, what do you think were the reasons?
5. What factors do you think have contributed most to your institution's C. difficile rates (e.g., LTC transfers, or environmental, or length of antibiotic use, etc.) ?

#### EXPERIENCE WITH ANTIMICROBIAL STEWARDSHIP PROGRAM IMPLEMENTATION

1. According to your application your antimicrobial stewardship team is comprised of [review application and fill in]. Has this changed?
  - Approximately how often does the core antimicrobial stewardship team meet?
  - Are there sub-committees?
  - Approximately how often does the core antimicrobial stewardship team meet with the sub-committee or other departments?
2. What were your top three priorities/goals/expectations for the antimicrobial stewardship program?
  - Looking back on your experience, would you have entered into this differently?
  - Have your priorities changed and if so, how?
3. What have your core antimicrobial strategy(ies) been?
  - Have you changed your strategy(ies) in any way since the beginning of the project?
  - If you changed your strategies, why?
  - How do you anticipate moving forward with your ASP at this point?
4. What have been the major barriers, if any, to implementation at your facility?
5. Do you feel the program has been successful?
  - If the program was successful, what factors most contributed to its success?
  - If the program was not successful, what factors contributed to the lack of success?
6. How was provider buy-in for the antimicrobial stewardship program achieved?

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7. What are the major antibiotic factors or prescribing concerns at your facility?
8. Based on your experience, what would be your major recommendations for other facilities attempting to implement an antimicrobial stewardship program?
9. Do you want to share any additional comments about your antimicrobial stewardship program that was not covered through these questions?