

AHRQ PFE Guide Individual Interviews

Pre-Implementation Protocol– Health Professionals

July 1, 2010

Research design

- AIR staff will conduct interviews with a total of 24 health professionals during the pre-implementation period (8 health professionals at each of 3 hospitals)

Recruitment criteria

- Physicians and nurses who work on the units where the intervention will be implemented

Testing materials

- Audio recording equipment, speaker phone
- Interviewer clock
- Materials emailed to health professional 1 day before interview:
 - o Consent form
- Packet of testing materials for interviewer
 - o Informed consent form

Procedures for obtaining informed consent

Clinician will be sent an informed consent form before the interview. At start of interview, interviewer will ask clinician if they have any questions about the consent form and if they agree to be interviewed and audiotaped. A waiver of signed informed consent has been obtained from AIR's IRB.

Public reporting burden for this collection of information is estimated to average 60 minutes per response, the estimated time required to complete the interview. 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) AHRQ, 540 Gaither Road, Room # 5036, Rockville, MD 20850.

Interview goals

The purpose of this interview is to collect data from health professionals (e.g., physicians, nurses) to assess their views organizationally on:

- their current knowledge, attitudes, and behaviors regarding patient and family engagement and/or patient- and family-centered care;
- what kinds of efforts the hospital has undertaken in the past related to patient and family engagement and/or patient- and family-centered care;
- why the hospital is interested in implementing the Guide;
- factors they think will be important in contributing to successful implementation of the Guide; and
- their reactions to the upcoming implementation of the Guide.

Health professional interviews

Topic
Introduction (welcome; background; ground rules; warm-up)
Conceptualization of Patient and Family Engagement
Experience With and Motivators for Engaging Patients & Families
Guide Implementation
Closing

Introduction

Welcome and Background—explain purpose of the interview

- Thank you for agreeing to do this interview. My name is {NAME} and I'll be talking with you today. I work for a company called the American Institutes for Research, which is an independent non-profit research organization.
- As you know, the interview that you'll be doing today is part of a project being funded by the Agency for Healthcare Research and Quality to develop a guide to patient and family engagement around the issues of hospital safety and quality.

- The purpose of this interview today is to talk about your hospital’s experiences with patient and family engagement and to discuss your perceptions of what factors will be important in your hospital’s implementation of the Guide.
- The interview will last about 60 minutes.
- Did you read the consent form that was sent to you? Do you have any questions?

Go over ground rules.

- Everything you tell us will be kept confidential to the extent permitted by law, including AHRQ’s confidentiality statute, 42 USC 299c-3(c). To protect your privacy, we won’t connect your name with anything that you say, unless you give us permission to do so.
- Is it OK if I audiotape this interview today? **{Turn on recording equipment.}**

Conceptualization of Patient and Family Engagement

I’d like to begin by asking you some questions about patient and family engagement in general.

1. What does the term “patient and family engagement” mean to you? How would you describe patient and family engagement? What do you think are the most critical components of patient and family engagement? What does patient and family engagement look like in a hospital setting?
2. In your opinion, what is the ultimate goal of patient and family engagement? What are the expected or hoped for outcomes of patient and family engagement?
 - a. What are the expected or hoped for outcomes for patients and families? Health care professionals? Hospitals in general? Your hospital in particular?
3. How, if at all, does patient and family engagement relate to hospital safety and quality?
 - a. What role, if any, do patients and family members have in hospital safety and quality?
4. How, if at all, does patient and family engagement relate to patient- and family-centered care? Is it the same? Different?

5. How do you think that health professionals, such as yourself, contribute to patient and family engagement?
 - a. What role do they have in promoting patient and family engagement?
Sustaining it?
 - b. How can they promote and sustain patient and family engagement in hospital safety and quality? What are the challenges to this happening?
 - c. Which health care professionals (e.g., physicians, nurses, etc.) have the most to contribute to patient and family engagement?
 - d. What is needed from health care professionals to support patient and family engagement in safety and quality?
 - e. What facilitates or challenges those behaviors?

6. What elements of organizational culture facilitate or challenge patient and family engagement in safety and quality?
 - a. Hospital leadership? Policies or procedures? Team work?

Experience with and Motivators for Engaging Patients and Families

Now, let's talk about some of your hospital's experiences (focusing particularly on your unit) with engaging patients and families and other quality improvement initiatives.

7. In your opinion, how, if at all, do patient and family engagement and/or patient- and family-centered care fit into the mission of your organization? How does it fit into the mission or goals of your specific unit/department?

8. How would you describe the state of patient and family engagement in your hospital and/or unit? Where is it now and where does it need to go?

9. Has your hospital undertaken any specific initiatives related to patient and family engagement or patient- and family-centered care?

[IF YES, PROBE TO DETERMINE:

- a. What prompted your hospital to take action in this area? Tell me a bit about why.
- b. What were the goals of these efforts? What did you hope to accomplish?
- c. What resources were necessary for this effort (e.g., financial, staff expertise, etc.)?

- d. What staff, or who, from your organization was involved in this effort? Who headed this effort? Who championed this effort? What other staff were involved?
 - e. How did you disseminate information to staff? Leadership? Patients and family members? Others?
 - f. Was(were) the initiative(s) successful? How do you know? How do you define success?
 - g. What were the key factors that influenced success? (Staff, resources, other implementation considerations?)
 - h. How did you assess or evaluate these efforts?
 - i. What worked well? What were lessons learned?
 - j. What were reactions to the efforts (from staff, leaders, patients and families, the community)?
10. Within your organization, which individuals have the most to contribute to patient and family engagement? [Probe for specific individuals/roles.]
- a. How do staff feel about patient and family engagement? What do you think patient and family engagement might mean to staff?
11. In your opinion, how engaged is hospital leadership in patient and family engagement and/or patient- and-family centered care? What, if anything, do they do to support patient and family engagement?
12. What is the motivation for your organization and/or unit to undertake patient and family engagement efforts (particularly around the issues of hospital safety and quality)?
- a. Why have you initiated these efforts? [PROBE: Influence from payers? External organizations (Joint Commission)? Regulatory efforts or standards? Financial incentives or rewards? Competitors? Market factors?]
13. [IF HOSPITAL HAS PFE EFFORTS] What does it take to sustain patient and family engagement efforts?
- a. What motivation do executives have for sustaining quality at this organization? Does executive compensation reflect quality? If so, how?
14. Within your hospital, what elements of organizational culture facilitate or challenge patient and family engagement in safety and quality? Hospital leadership? Policies or procedures? Team work?

- a. Within your unit, what elements of organizational culture facilitate or challenge patient and family engagement in safety and quality? Hospital leadership? Policies or procedures? Team work?

Guide implementation

As you know, your hospital is one of three organizations that is participating in a pilot test of the Guide to Patient and Family Engagement in Hospital Safety and Quality (which I'll refer to as the Guide). Now I'd like to talk a bit about considerations for your organization and your specific department/unit as you implement the Guide.

15. We've talked about the motivation to undertake patient and family engagement initiatives more generally. What was the motivation for your organization and unit to participate in implementation of the Guide?
16. Your organization will be implementing the following components of the Guide [LIST AND BRIEFLY DESCRIBE].

Who was involved with the decision to implement these components? What influenced the selection of these components?

[IF WE DON'T KNOW THE EXACT COMPONENTS YET, ASK:] What components of the Guide will your hospital be implementing? OR How will you decide which strategies and elements of the Guide to implement?

- a. How do you see these components relating to your hospital's goals and priorities?
17. What are your goals and expectations related to the Guide implementation? What are your expected or hoped-for outcomes (personally, for other staff or groups, for patients and family members, organizationally)?
18. How do you see the Guide components and interventions that you will be implementing fitting into your current practices within your unit/department?
 - a. What will it take to implement? What changes will need to be made?
19. What do you think will be the critical factors in successful roll-out and implementation of the Guide in your organization and unit?
 - a. What are the barriers and facilitators to implementation? How does your organization and unit plan to address anticipated barriers?

- b. What are the motivators for staff? Barriers for them? How will they be supported during this implementation period (resources, training, etc.)?
- c. What or who are the key factors influencing whether or not efforts to implement the Guide succeed?

Closing

Before we end, I'd like to give you chance to share any additional thoughts or comments about the information we talked about today.

Is there anything else you would like to add that you didn't have a chance to say during our discussion today, or something that we didn't talk about that you wish we had?

Thank you very much for participating in this discussion today. We appreciate your time.