## **COMMUNICATIONS WITH GRANTEES**

## Draft Email from AHRQ, Introducing the Surveys and Interviews

Dear THQIT Grantees,

As one of the 118 THQIT grantees, your experience in planning, implementing, and/or studying the effects of health IT is a resource that needs to be tapped by the many other health care organizations moving to implement health IT at this important time. AHRQ is committed to translating your collective experience for the field.

Please help by completing the 2010 Survey of THQIT Grantees—a one-time survey about your experience planning, implementing, and/or studying health IT during and after the THQIT grant period, when you are contacted by our contractor for the effort, Mathematica. Recognizing the day-to-day pressures you all face, we are offering a \$25 gift card in thanks for each completed survey.

Mathematica will send you a link to the survey tailored to your type of grant (planning, implementation, or value grant) within about a week. Your responses will be provided to AHRQ in a data file from Mathematica at the conclusion of the survey effort, so that we may retain the option consider future follow-up research. Your responses will not affect consideration of any future grant application.

Later, some of you will also be asked to participate in an interview to follow up on your survey response. Different from the survey, the interviews will work to capture the local dynamics that allowed your project to succeed and to understand the barriers that you faced and gain insights into how they could be overcome. This information too is essential to the goal of providing the most useful information possible from your experience to support future efforts.

In addition to providing insights to the field, both the surveys and interviews will seek feedback to assist AHRQ to optimize our grants process moving forward.

Thank you very much in advance for your assistance in this timely and important effort.

Jon White [signature block]

# Invitation Email for Survey from Mathematica

Subject Line: 2010 Survey of THQIT Grantees

Dear [NAME],

This is to follow up on the recent email from Jon White of AHRQ, who stressed the importance of participating in the 2010 Survey of THQIT Grantees. This is part of AHRQ's effort to gather and translate the lessons learned from the THQIT grantees to others now planning and implementing health IT.

**Every response is important**, whether your project ran smoothly and was an unqualified success, struggled or ran into insurmountable difficulties, or evolved into something it did not start out to be. <u>We want to hear about all of these experiences</u>! In appreciation for your time and effort, a \$25 gift card will be sent to you once the survey is completed.

You can begin the Survey of THQIT [Planning/Value/Implementation Grantees] by clicking the link below:

[insert link]

We request that you complete the survey by [date].

We have been careful not to ask questions that can be answered by reading your final grant report and/or other publications. Those documents were reviewed and used to structure the survey which will allow us to summarize your collective experience in a scientifically valid manner to inform others' health IT planning, implementation and evaluation efforts.

The report synthesizing survey responses will report at a summary level and will not identify individual grantees. However, a data file with each grantee's survey responses, identified to the grantee organization, will be provided to AHRQ by Mathematica. Although AHRQ may use the file for additional analyses, the data will in no way affect consideration of any future grant application.

If you have other questions, please contact Rachel Machta of Mathematica Policy Research, Inc. at thqit\_survey@mathematica-mpr.com

Thank you very much for your assistance.

## Reminder #1

Subject Line: There is still time to participate! 2010 Survey of THQIT Grantees

Dear [NAME],

Last week we sent you an invitation to participation in the Survey of THQIT [Planning/Value/Implementation] Grantees. This is part of AHRQ's effort to gather and translate the lessons learned from the THQIT grantees to others now planning and implementing health IT.

**Every response is important**, whether your project ran smoothly or struggled. We want to hear about all of these experiences! In appreciation for your time and effort, a \$25 gift card will be sent to you once the survey is completed.

You can begin the Survey of [Planning/Value/Implementation] Grantees by clicking the link below:

[insert link]

We request that you complete the survey by **[1 week time period]**.

The report synthesizing survey responses will report at a summary level and will not identify individual grantees. However, a data file with each grantee's survey responses, identified to the grantee organization, will be provided to AHRQ by Mathematica. Although AHRQ may use the file for additional analyses, the data will in no way affect consideration of any future grant application.

If you have other questions, please contact Rachel Machta of Mathematica Policy Research, Inc. at thqit\_survey@mathematica-mpr.com

Thank you very much for your assistance.

# Reminder #2

Subject Line: We need to hear from you! 2010 Survey of THQIT Grantees

Dear [NAME],

Recently, we sent you an invitation to participation in the [FILL SURVEY NAME]. We have not yet heard from you. **Every response is important.** In appreciation for your time and effort, a \$25 gift card will be sent to you once the survey is completed.

You can begin the Survey of [Planning/Implementation/Value] Grantees by clicking the link below:

[insert link]

We request that you complete the survey by [1 week time period].

If you have other questions, please contact Rachel Machta of Mathematica Policy Research, Inc. at thqit\_survey@mathematica-mpr.com

Thank you very much for your assistance.

# Reminder #3

Subject Line: Last chance to participate! 2010 Survey of THQIT Grantees

Dear [NAME],

Recently, we sent you an invitation to participation in the Survey of [Planning/Implementation/Value] Grantees. The survey ends shortly and it is important that we hear from you! We will send you a \$25 gift card once the survey is completed.

You can complete the Survey of [Planning/Implementation/Value] Grantees by clicking the link below:

[insert link]

If you have other questions, please contact Rachel Machta of Mathematica Policy Research, Inc. at thqit\_survey@mathematica-mpr.com

Thank you very much for your assistance.

# **Draft Email for Grantee Interviews**

Dear [Principal Investigator for selected project],

Thank you very much for participating in the 2010 Survey of THQIT Grantees; your responses are being analyzed with the others as we speak. This email is to invite your project to participate in a telephone discussion to follow up on your survey responses. Identifying pathways to successful health IT implementation requires both the type of information gathered from the survey, *and* complementary information in the local project context about the dynamics of the issues faced, strategies tried, and hard-won successes that were produced. Therefore, we are following up with a subset of grantees to get to this critical next level of understanding.

We would like to talk to you about the best one-to-three people from your project team to provide insights on the topics listed in the attachment. Approximate lengths of time for each topic are also shown on the attachment. We are flexible regarding the timing of the interviews, and look forward to scheduling a convenient time for you to occur over the next four weeks. To express our appreciation, we will provide you with a \$50 gift card upon completion of these interviews.

A THQIT study team member from Mathematica will contact you over the next few days to confirm your willingness to participate in this last key component to AHRQ's THQIT synthesis project. If you have any questions or would like to begin scheduling in the meantime, please reply to this email or contact Melanie Au at mau@mathematica-mpr.com or (202)264-3459.

## TOPICS LISTS BY TYPE OF GRANTEE ATTACHMENTS FOR EMAIL INVITATION FOR GRANTEE INTERVIEWS

## TOPICS FOR PLANNING GRANTEES WITH SUBSEQUENT IMPLEMENTATIONS

Timeframe: 1 hour and 15 minutes

# **Partnerships** – 10 minutes

• How successful the partnership aspect of the project was and why

• Lessons learned about strengthening partnerships, what can undermine them, partner selection, and importance of partners to project success

# AHRQ Grant Process and Features – 10 minutes

- Importance of the grant to advancing health IT for the involved organizations
- Grant requirements or processes that were particularly helpful and any that impeded the project
- Any recommendations for change to the grant structure or process for the future

# **Planning** – 10 minutes

- Follow-up re survey responses regarding strengths and weaknesses of planning –
  - o What more do we need to know to understand strengths and weaknesses of your planning
  - o What lessons were learned
  - o Looking back, would you have done anything differently?
- Resources used for planning (beyond the AHRQ grant), and whether desired parts of planning were omitted due to resource constraints

**More About Selected Survey Responses** [include these to the extent the respondent checked that these were issues in the survey response] - 8 minutes

- How geographic distance between partners affected the project
- Specifics about not having available people with right knowledge, skills, abilities, and effects on the project
- Issues in accessing capital or financial resources to implement the health IT
- Issues in inadequate infrastructure for health IT
- [If rural:] Anything else about the rural focus of the project that influenced the project or its success

# **Outcomes, Benefits, and Drawbacks** - 7 minutes

- Main successes and disappointments of the planning project
- [Discuss survey responses regarding benefits: ] Benefits seen by the involved organizations, clinicians, and patients

# Health IT After the Planning Project - 25 minutes

- Follow-up survey responses to understand what was implemented, and how closely related it was to the implementation plan developed during the grant period
- What things helped the implementation progress, and what parts were difficult
- Strategies that were used to overcome the difficulties
- Changes made to original implementation plan and why
- Benefits and adverse effects of the implemented health IT, and extent to which these were measured
- Business case for the health IT, as you saw it first, and as you see it now

# **Closing** – 5 minutes

• If you were advising another organization like yours on planning or implementing health IT, what would you tell them they must have or do to be successful?

# TOPICS FOR PLANNING GRANTEES WITH NO IMPLEMENTATION

Timeframe: 1 hour

### **Partnerships** – 10 minutes

• How successful the partnership aspect of the project was and why

• Lessons learned about strengthening partnerships, what can undermine them, partner selection, and importance of partners to project success

## AHRQ Grant Process and Features – 10 minutes

- Importance of the grant to advancing health IT for the involved organizations
- Grant requirements or processes that were particularly helpful and any that impeded the project

• Any recommendations for change to the grant structure or process for the future

#### **Planning** – 10 minutes

- Follow-up re survey responses regarding strengths and weaknesses of planning –
  - What more do we need to know to understand strengths and weaknesses of your planning
  - o What lessons were learned
  - o Looking back, would you have done anything differently?

• Any resources used for planning beyond the AHRQ grant, and whether desired parts of planning were omitted due to resource constraints

**More About Selected Survey Responses** [include these to the extent the respondent checked that these were issues in the survey response] – 8 minutes

- How geographic distance between partners affected the project
- Specifics about not having available people with right knowledge, skills, abilities, and effects on the project
- Issues in accessing capital or financial resources to implement the health IT
- Issues in inadequate infrastructure for health IT

• [If rural:] Anything else about the rural focus of the project that influenced the project or its success

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# **Outcomes, Benefits, and Drawbacks** – 10 minutes

• Main successes and disappointments of the planning project

• [Discuss survey responses regarding benefits: ] Benefits seen by the involved organizations, clinicians, and patients

# Closing - 5 minutes

• If you were advising another organization like yours on planning or implementing health IT, what would you tell them they must have or do to be successful?

# TOPICS FOR IMPLEMENTATION GRANTEES WHOSE PROJECTS INVOLVED NO HIE OR EHR

Timeframe: 1 hour and 45 minutes

# **Partnerships** – 7 minutes

• How successful the partnership aspect of the project was and why

• Lessons learned about strengthening partnerships, what can undermine them, partner selection, and importance of partners to project success

• Experience with vendor relationship

# AHRQ Grant Process and Features – 15 minutes

- Importance of the grant to advancing health IT for the involved organizations
- Grant requirements or processes that were particularly helpful and any that impeded the project
  - o Whether the cooperative agreement requirement that there be at least 50/50 matching funds resulted in greater long-term commitment by involved organizations
- Any recommendations for change to the grant structure or process for the future

• Review of specific aims from original proposal [researcher will remind the grantee what was originally written] – was specifying these useful? Did realities you experienced change these aims over time?

## Planning - 13 minutes

- How much pre-implementation planning was done, and how important was it to implementation
- Follow-up re survey responses regarding strengths and weaknesses of planning –
  - o What more do we need to know to understand strengths and weaknesses of your planning
  - o What lessons were learned
  - o Looking back, would you have done anything differently?

• Resources used for planning (beyond the AHRQ grant), and whether desired parts of planning were omitted due to resource constraints

## **Implementation -** 40 minutes

• [Researcher will summarize our understanding of what was implemented from the grantee final report to AHRQ, and ask for corrections or anything important to understand about what the project was.]

• What things helped the implementation progress, and what parts were difficult

- Strategies that were used to overcome the difficulties
- Changes made to original implementation plan and why
- Follow-up to survey responses on training Please tell us in your own words about the training strategy
  - o How effective did you find it
  - o Anything you would change about it

• Follow-up to survey responses on workflow/process redesign – Please tell us more about your approach to workflow and process redesign as health IT was implemented

- o How well do clinicians and staff like the changes?
- o Anything you would change about it?

**More About Selected Survey Responses** [include these to the extent the respondent checked that these were issues in the survey response] – 8 minutes

- How geographic distance between partners affected the project
- Specifics about not having available people with right knowledge, skills, abilities, and effects on the project
- Issues in accessing capital or financial resources to implement the health IT
- Issues in inadequate infrastructure for health IT

• [If rural:] Anything else about the rural focus of the project that influenced the project or its success

# Outcomes, Benefits, and Drawbacks - 15 minutes

- Main successes and disappointments of the project
- For the evaluation component, which measures worked especially well and which measures proved difficult to measure or interpret
- [Discuss survey responses regarding benefits:] Benefits seen by the involved organizations, clinicians, and patients
- Any adverse effects that were discovered

- Follow up survey questions regarding AHRQ priority populations what examples might be available to illustrate effects on the AHRQ priority populations that were a focus [omit if AHRQ priority populations were indicated not to be a focus for the study]
- Business case for the health IT, as you saw it first, and as you see it now

• If doing it again, what changes would you make to the evaluation study

## **Sustainability/Expansion of the Health IT** - 5 minutes

• Discuss survey responses to understand the story of increased or decreased use post-grant project, and reasons for this

• Types of direct and indirect costs incurred for sustaining the health IT (if sustained)

# **Closing** – 2 minutes

• If you were advising another organization like yours on planning or implementing health IT, what would you tell them they must have or do to be successful?

#### TOPICS FOR IMPLEMENTATION GRANTEES WHOSE PROJECTS INVOLVED HIE AND/OR EHR

Timeframe: 2 hours if only one of the two, 2 hours and 15 minutes if both

# **Partnerships** – 7 minutes

- How successful the partnership aspect of the project was and why
  - Lessons learned about strengthening partnerships, what can undermine them, partner selection, and importance of partners to project success
    - Experience with vendor relationship

# AHRQ Grant Process and Features – 15 minutes

- Importance of the grant to advancing health IT for the involved organizations
- Grant requirements or processes that were particularly helpful and any that impeded the project
  - o Whether the cooperative agreement requirement that there be at least 50/50 matching funds resulted in greater long-term commitment by involved organizations
- Any recommendations for change to the grant structure or process for the future

• Review of specific aims from original proposal [researcher will remind the grantee what was originally written] – was specifying these useful? Did realities you experienced change these aims over time?

## **Planning** - 13 minutes

- How much pre-implementation planning was done, and how important was it to implementation
- Follow-up re survey responses regarding strengths and weaknesses of planning –
  - o What more do we need to know to understand strengths and weaknesses of your planning
  - o What lessons were learned
  - o Looking back, would you have done anything differently?

• Resources used for planning (beyond the AHRQ grant), and whether desired parts of planning were omitted due to resource constraints

# Implementation - Overall Project - 40 minutes

• [Researcher will summarize our understanding of what was implemented from the grantee final report to AHRQ, and ask for corrections or anything important to understand about what the project was.]

• What things helped the implementation progress, and what parts were difficult

- Strategies that were used to overcome the difficulties
- Changes made to original implementation plan and why
- Follow-up to survey responses on training Please tell us in your own words about the training strategy
  - o How effective did you find it
  - o Anything you would change about it

• Follow-up to survey responses on workflow/process redesign – Please tell us more about your approach to workflow and process redesign as health IT was implemented

- o How well do clinicians and staff like the changes?
- o Anything you would change about it?

**Implementation - EHR/HIE Focus Questions** - 15 minutes for one of the two, or 30 minutes if section is repeated for each

- Timeframes for implementation of each functionality/major step in the process
- How well the sequencing of the functionalities/steps worked
- How the implementation took into account the needs and preferences of various members of the health care team
  - o During system selection
  - o When fitting the health IT to workflows
- Level of buy-in achieved from various healthcare team members
  - o How it was achieved, and lessons learned about achieving this
- Transition strategy used to move from old processes to new health IT use
  - o How productivity stress was handled when it was first implemented

**More About Selected Survey Responses** [include these to the extent the respondent checked that these were issues in the survey response] – 8 minutes

• How geographic distance between partners affected the project

- Specifics about not having available people with right knowledge, skills, abilities, and effects on the project
- Issues in accessing capital or financial resources to implement the health IT
- Issues in inadequate infrastructure for health IT

• [If rural:] Anything else about the rural focus of the project that influenced the project or its success

# **Outcomes, Benefits, and Drawbacks** – 15 minutes

- Main successes and disappointments of the project
- For the evaluation component, which measures worked especially well and which measures proved difficult to measure or interpret
- [Discuss survey responses regarding benefits:] Benefits seen by the involved organizations, clinicians, and patients
- Any adverse effects that were discovered
- Follow up survey questions regarding AHRQ priority populations what examples might be available to illustrate effects on the AHRQ priority populations that were a focus [omit if AHRQ priority populations were indicated not to be a focus for the study]
- Business case for the health IT, as you saw it first, and as you see it now

• If doing it again, what changes would you make to the evaluation study

# Sustainability/Expansion of the Health IT - 5 minutes

• Discuss survey responses to understand the story of increased or decreased use post-grant project, and reasons for this

• Types of direct and indirect costs incurred for sustaining the health IT (if sustained)

# **Closing** – 2 minutes

• If you were advising another organization like yours on planning or implementing health IT, what would you tell them they must have or do to be successful?

## TOPICS FOR VALUE GRANTEES [NOT INVOLVED IN PLANNING AND IMPLEMENTATION OF THE HEALTH IT THEY STUDIED]

Timeframe: 45 minutes

# Partnerships - 7 minutes

• How successful the partnership aspect of the project was and why

• Lessons learned about strengthening partnerships, what can undermine them, partner selection, and importance of partners to project success

# AHRQ Grant Process and Features – 10 minutes

- Importance of the grant to advancing health IT for the involved organizations
- Grant requirements or processes that were particularly helpful and any that impeded the project

• Any recommendations for change to the grant structure or process for the future

# Influence of Selected Factors on Value Study's Methods or Results – 8 minutes

- Any influence of the following factors on the value study's methods or results:
  - o Geographic distance between point-of-care organizations
  - o Availability of personnel with the right knowledge, skills, and abilities, within the point-of-care organizations
  - o Access to needed capital among the point-of-care organizations
  - o Health IT infrastructure at the point-of-care organizations

• [If rural focus:] Did anything about the rural focus of the study not discussed so far influence the value study's methods or results?

# **Quality Measures** - 5 minutes

- Which measures worked especially well and which measures proved difficult to measure or interpret
- Are there lessons learned about how to get the study results used by others?

# Outcomes, Benefits, and Drawbacks - 15 minutes

• Main successes and disappointments of the project

- [Discuss survey responses regarding benefits:] Benefits seen by the involved organizations, clinicians, and patients
- Any adverse effects that were discovered
- Follow up survey questions regarding AHRQ priority populations what examples might be available to illustrate effects on the AHRQ priority populations that were a focus [omit if AHRQ priority populations were indicated not to be a focus for the study]
- Business case for the health IT, as you saw it first, and as you see it now

• If doing it again, what changes would you make to the value study

# **Closing** – 2 minutes

• If you were advising another organization like the point-ofcare organizations you worked with on planning or implementing health IT, what would you tell them they must have or do to be successful?

## TOPICS FOR VALUE GRANTEES INVOLVED IN PLANNING AND IMPLEMENTATION OF THE HEALTH IT THEY STUDIED

Timeframe: 1 hour and 15 minutes

# **Partnerships** – 7 minutes

• How successful the partnership aspect of the project was and why

• Lessons learned about strengthening partnerships, what can undermine them, partner selection, and importance of partners to project success

# AHRQ Grant Process and Features – 10 minutes

- Importance of the grant to advancing health IT for the involved organizations
- Grant requirements or processes that were particularly helpful and any that impeded the project

• Any recommendations for change to the grant structure or process for the future

# Influence of Selected Factors on Value Study's Methods or Results – 8 minutes

- Any influence of the following factors on the value study's methods or results:
  - o Geographic distance between point-of-care organizations
  - o Availability of personnel with the right knowledge, skills, and abilities, within the point-of-care organizations
  - o Access to needed capital among the point-of-care organizations
  - o Health IT infrastructure at the point-of-care organizations

• [If rural focus:] Did anything about the rural focus of the study not discussed so far influence the value study's methods or results?

# **Quality Measures** - 5 minutes

- Which measures worked especially well and which measures proved difficult to measure or interpret
- Are there lessons learned about how to get the study results used by others?

# Outcomes, Benefits, and Drawbacks - 15 minutes

• Main successes and disappointments of the project

- [Discuss survey responses regarding benefits:] Benefits seen by the involved organizations, clinicians, and patients
- Any adverse effects that were discovered
- Follow up survey questions regarding AHRQ priority populations what examples might be available to illustrate effects on the AHRQ priority populations that were a focus [omit if AHRQ priority populations were indicated not to be a focus for the study]
- Business case for the health IT, as you saw it first, and as you see it now

• If doing it again, what changes would you make to the value study

# **Planning** – 8 minutes

- How much pre-implementation planning was done, and how important was it to implementation
- Follow-up re survey responses regarding strengths and weaknesses of planning –
  - o What more do we need to know to understand strengths and weaknesses of your planning?
  - o What lessons were learned?
  - o Looking back, would you have done anything differently?

## **Implementation** – 22 minutes

• [Researcher will summarize our understanding of what was implemented from the grantee final report to AHRQ, and ask for corrections or anything important to understand about what the project was.]

• What things helped the implementation progress, and what parts were difficult

- Strategies that were used to overcome the difficulties
- Changes made to original implementation plan and why

## **Closing** – 2 minutes

• If you were advising another organization like the point-ofcare organizations you worked with on planning or implementing health IT, what would you tell them they must have or do to be successful?

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