In-depth INTERVIEW GUIDE

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Note: Minutes allocated to each topic by type of grantee are shown on the heading row for each section. For each of the Funding Opportunity Announcements and its corresponding survey instruments, two types of respondents and their relative depth of knowledge about the grant and corresponding time estimates to address those issues in the telephone interview have been specified. Researchers will manage the discussion of each section within those minute allocations, to ensure all topics are covered. Senior staff knowledgeable about health IT will lead the interviews in a conversational style, using follow-ups and probes at their discretion to meet project goals for obtaining the information on each topic—the topics shown below will be covered, but the question wording shown here may or may not be used.

|  | Planning | | Implementation | | Value | |
| --- | --- | --- | --- | --- | --- | --- |
| Discussion Topic | With Subsequent Health IT Implementation | No Subsequent Health IT Implementation | Project Does Not Include HIE or EHR | Project Includes EHR and/or HIE (Use one or both of the EHR and HIE sections) | Involved in  Planning and Implementation | Not Involved in  Planning and Implementation |
| **Total Time Requested for Interview** | 1 hour 15 minutes | 1 hour | 1 hr 30 minutes | 1 hour 50 minutes if one,  2 hrs 10 minutes if both | 1 hour 15 minutes | 45 minutes |
| **Background** | 2 minutes | 2 minutes | 1 minute | 2 minutes | 2 minutes | 2 minutes |
| What were your roles as leader and/or participant in the project? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| **Partnerships** | 10 minutes | 8 minutes | 10 minutes | 10 minutes | 5 minutes | 5 minutes |
| [Briefly summarize our understanding of the partnership that was in place for the project.]  Did the partners share a vision of what value the health IT would bring, and to whom? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| How did this affect the project? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| How successful do you feel the partnership aspect of the project was? Why? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| Have you learned anything about how partnerships can be strengthened over time? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| Have you learned anything about what factors can undermine partnerships or cause them to become unproductive over time? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| Looking back on the experience, would you have done anything differently in selecting your partners? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| How important was the partnership to achieving project goals? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| Please comment on the role of the vendor in your partnership—what was their role? | 🗸 |  | 🗸 | 🗸 |  |  |
| Looking back, was it the ideal role for a vendor to play? | 🗸 |  | 🗸 | 🗸 |  |  |
| **AHRQ Grant Process and Features** | 10 minutes | 10 minutes | 15 minutes | 15 minutes | 10 minutes | 10 minutes |
| How fully developed was the idea for the grant project prior to your becoming aware of the AHRQ funding opportunity? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| How did you have to modify the original plan or concept to fit the funding opportunity? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| How important was the grant to advancing health IT for the involved organizations? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| How important was the planning grant to advancing health IT for the involved organizations? |  |  | 🗸 (only those with prior THQIT planning grants) | 🗸 (only those with prior THQIT planning grants) |  |  |
| How likely is it that the project would have been done without AHRQ funding? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| What grant requirements or processes were particularly helpful to the project? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| What if any grant requirements or processes impeded the progress of the project? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| Are there things you think AHRQ should consider changing if they fund these types of projects again? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| Did the cooperative agreement requirement that there be at least 50/50 matching funds result in greater commitment by the involved organizations to the project long-term? |  |  | 🗸 | 🗸 |  |  |
| As you know, AHRQ required applicants for the grants to document specific aims in their proposal. [Researcher reviews the grantees' specific aims with them, then asks:] Looking back, was it helpful to have these specific aims identified? |  |  | 🗸 | 🗸 |  |  |
| Did realities you experienced change these aims over the course of the project? |  |  | 🗸 | 🗸 |  |  |
| **Planning for Health IT** | 10 minutes | 15 minutes | 13 minutes | 13 minutes | 8 minutes | 0 minutes |
| [Researcher summarizes survey responses regarding strengths and weaknesses of planning, and effective facilitators.] What more do we need to know to have a good understanding of the strengths and weaknesses of the health IT planning? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |  |
| How much pre-implementation planning was done, and how important was this to implementation? |  |  | 🗸 | 🗸 | 🗸 |  |
| What were the most important resources for planning? [For planning grantees, follow up on survey responses regarding need for continued resources for planning] | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |  |
| Were parts of planning omitted or short-cut due to resource constraints? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| What if any important user needs did you miss in planning that were discovered in implementation? | 🗸 |  | 🗸 | 🗸 |  |  |
| What changes did you make to the original implementation plan, and why? | 🗸 |  | 🗸 | 🗸 |  |  |
| Looking back, what if anything would you have done differently in planning for the health IT? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |  |
| **Implementation of Health IT** | | | | | | |
| **General** | 4 minutes | 3 minutes | 4 minutes | 12 minutes | 12 minutes | 0 minutes |
| [Follow up on survey responses to understand what was implemented, and how closely related it was to the implementation plan developed during the grant period] | 🗸 |  |  |  |  |  |
| [Discuss reasons why health IT was not implemented] |  | 🗸 |  |  |  |  |
| [Researcher summarizes our understanding of what was implemented from the grantee’s final report to AHRQ and 2008 update, asks for corrections or anything important to understand not mentioned about what was implemented.] |  |  | 🗸 | 🗸 | 🗸 |  |
| *Training* |  |  |  |  |  |  |
| [Summarize training responses to the survey to reflect existing knowledge, and ask them to please tell us more about the training that was used.] |  |  | 🗸 | 🗸 |  |  |
| How effective did you find this training strategy to be? |  |  | 🗸 | 🗸 |  |  |
| Is there anything you would change about it, if you were doing it over? |  |  | 🗸 | 🗸 |  |  |
| *Workflow/Process Redesign* |  |  |  |  |  |  |
| [Summarize workflow/process redesign responses to the survey, and ask them to please tell us more about how they approached redesign of workflow and processes as they implemented the health IT, and when this effort took place relative to implementation.] |  |  | 🗸 | 🗸 |  |  |
| How well do staff like the changes to workflow/care process that were made? |  |  | 🗸 | 🗸 |  |  |
| Have you seen any changes in efficiency or quality of care in the office as a result of the changes? |  |  | 🗸 | 🗸 |  |  |
| Is there anything you would change about it, if you were doing it over? |  |  | 🗸 | 🗸 |  |  |
| **Common and unique barriers and facilitators to implementation, across types of health IT and care settings** | 14 minutes | 0 minutes | 21 minutes | 21 minutes | 18 minutes | 0 minutes |
| What parts of implementation worked very well? [For implementation, probe using survey responses] | 🗸 |  | 🗸 | 🗸 | 🗸 |  |
| How and why did these things work well—what helped the project make progress? | 🗸 |  | 🗸 | 🗸 | 🗸 |  |
| Were these positives anticipated early on, or discovered later? | 🗸 |  | 🗸 | 🗸 |  |  |
| Is there reason to think these positives would work especially well for specific types of health IT, specific populations, or specific care settings? | 🗸 |  | 🗸 | 🗸 | 🗸 |  |
| What was the cost or savings to the project from these positives? | 🗸 |  | 🗸 | 🗸 |  |  |
| What parts of implementation were very difficult? [For implementation, probe using survey responses] | 🗸 |  | 🗸 | 🗸 | 🗸 |  |
| [If the list was long, identify three most important difficulties on which to focus the following follow-ups] |  |  |  |  |  |  |
| Were these difficulties anticipated, or were you surprised by them? | 🗸 |  | 🗸 | 🗸 | 🗸 |  |
| Is there reason to think these difficulties would be more serious for specific types of health IT, specific populations, or specific care settings? | 🗸 |  | 🗸 | 🗸 | 🗸 |  |
| What strategies were used to overcome the difficulties? | 🗸 |  | 🗸 | 🗸 | 🗸 |  |
| Please comment on whether and how the relationship with the health IT vendor may have influenced the success of implementation. | 🗸 |  | 🗸 | 🗸 |  |  |
| **Topics Toward Development of Tool to Facilitate Better Rural Hospital EHR Implementations** [Topics are only for projects involving rural hospital  EHRs] | 0 minutes | 0 minutes | 0 minutes | 16 minutes | 0 minutes | 0 minutes |
| In what order did you implement the various functionalities included in your EHR system? Could you give me the main timeframes for each step of implementation (month or season/year each function was implemented, and how much longer until used as intended)? |  |  |  | 🗸 |  |  |
| How well did the ordering you used work—anything you would change if doing it over? |  |  |  | 🗸 |  |  |
| How did the implementation take into account the needs and preferences of the various members of the health care team (including patients and their caregivers)? [Discuss this as applied to system selection, and to fitting the health IT with workflow] |  |  |  | 🗸 |  |  |
| What level of buy-in was achieved from various healthcare team members? |  |  |  | 🗸 |  |  |
| How was the buy-in achieved? |  |  |  | 🗸 |  |  |
| What lessons have you learned about achieving buy-in? |  |  |  | 🗸 |  |  |
| Please tell us about the transition strategy that you used to move from paper and isolated electronic systems to an EHR? [nature of transition, speed] |  |  |  | 🗸 |  |  |
| How did you handle productivity stress during the initial implementation? [e.g. cut workload, hire temps, etc.] |  |  |  | 🗸 |  |  |
| **Topics to Produce More In-Depth Qualitative Information on Implementation of Health Information Exchange Projects** [Topics are parallel to those just above, and are only asked of projects involving HIE] | 0 minutes | 0 minutes | 0 minutes | 16 minutes | 0 minutes | 0 minutes |
| What major steps and in what order did you use to implement your HIE project? (month or season/year each step was implemented, and how much longer until used as intended)? |  |  |  | 🗸 |  |  |
| How well did the ordering you used work—anything you would change if doing it over? |  |  |  | 🗸 |  |  |
| How did the implementation take into account the needs and preferences of the various members of the health care team (including patients and their caregivers)? [Discuss this as applied to system selection, and to fitting the HIE with workflow] |  |  |  | 🗸 |  |  |
| What level of buy-in was achieved from various healthcare team members? |  |  |  | 🗸 |  |  |
| How was the buy-in achieved? |  |  |  | 🗸 |  |  |
| What lessons have you learned about achieving buy-in? |  |  |  | 🗸 |  |  |
| Please tell us about the transition strategy that you used to move to the HIE? [Nature of transition, speed] |  |  |  | 🗸 |  |  |
| How did you handle productivity stress during the initial implementation? |  |  |  | 🗸 |  |  |
| **Rural Experience with Health IT** [Ask of all projects unless otherwise noted] [Probe on survey responses as applicable] | 8 minutes | 8 minutes | 8 minutes | 8 minutes | 8 minutes | 8 minutes |
| How if at all did the geographic distance between partners affect planning or implementation of the health IT? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| If so, what if any impact did this have on project success? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| Were people with the right knowledge, skills, and abilities available to support the health IT project? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| [If no:] What types were not available, and why not? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| [If no:] What if any impact did this have on project success? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| Did the project have adequate access to the financial resources or capital needed to implement the health IT? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| [If no:] Why not? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| [If no:] What if any impact did this have on project success? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| Did the project have the necessary infrastructure for health IT? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| [If no:] Why not? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| [If no:] What if any impact did this have on project success? | 🗸 | 🗸 | 🗸 | 🗸 |  |  |
| [For rural-focused projects only:] Did anything we haven’t discussed about the rural focus of the project influence your implementation experience or the project’s success? | 🗸  (rural-focused projects only) | 🗸 (rural-focused projects only) | 🗸 (rural-focused projects only) | 🗸 (rural-focused projects only) |  |  |
| Did any of the following factors influence the value study’s methods or results? If so, how? |  |  |  |  | 🗸 | 🗸 |
| Geographic distance between point-of-care organization partners |  |  |  |  | 🗸 | 🗸 |
| Availability of personnel with the right knowledge, skills, and abilities, within the point-of-care organizations |  |  |  |  | 🗸 | 🗸 |
| Access to needed capital among the point-of-care organizations |  |  |  |  | 🗸 | 🗸 |
| Health IT infrastructure at the point-of-care organizations |  |  |  |  | 🗸 | 🗸 |
| Did anything about the rural focus of the study not discussed so far influence the value study’s methods or results? |  |  |  |  | 🗸 (rural-focused studies only) | 🗸 (rural focused studies only) |
| **Quality Measures** | 0 minutes | 0 minutes | 4 minutes | 4 minutes | 5 minutes | 5 minutes |
| What measures worked especially well for the evaluation/value study and what measures proved to be difficult to measure or interpret? |  |  | 🗸 | 🗸 | 🗸 | 🗸 |
| Did you learn anything from the value study/evaluation component about how to get the results to be used by others? |  |  | 🗸 | 🗸 | 🗸 | 🗸 |
| **Outcomes, Benefits, Drawbacks** | 7 minutes | 7 minutes | 12 minutes | 12 minutes | 12 minutes | 12 minutes |
| **General** | | | | | | |
| In terms of project outcomes, what were the main successes and disappointments of the project? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| What benefits have the organizations involved in the project seen from the project? [Probe on survey responses] | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |
| What benefits have accrued to clinicians? [Probe on survey responses] | 🗸 |  | 🗸 | 🗸 | 🗸 | 🗸 |
| What benefits have patients experienced? [Probe on survey responses] | 🗸 |  | 🗸 | 🗸 | 🗸 | 🗸 |
| What if any adverse effects were discovered? | 🗸 |  | 🗸 | 🗸 | 🗸 | 🗸 |
| Did the original business case for the health IT turn out to be the business case? | 🗸 |  | 🗸 | 🗸 | 🗸 | 🗸 |
| [If no:] Why not? | 🗸 |  | 🗸 | 🗸 | 🗸 | 🗸 |
| If considering the same project today, how would you describe the business case? | 🗸 |  | 🗸 | 🗸 | 🗸 | 🗸 |
| If you were doing it again, what if any changes would you make to the evaluation/value study? |  |  | 🗸 | 🗸 | 🗸 | 🗸 |
| To what extent was there synergy between the health IT implementation effort and the value study? |  |  |  |  | 🗸 | 🗸 |
| Are there ways synergy between health IT implementation and value studies/evaluations could be improved to improve outcomes or documentation of outcomes? |  |  |  |  | 🗸 | 🗸 |
| **AHRQ Priority Populations** | | | | | | |
| [Follow up on survey responses to discuss the effects of the project on AHRQ priority populations. Obtain examples that will bring the survey information “to life.”] |  |  | 🗸 | 🗸 | 🗸 | 🗸 |
| **Sustainability/Expansion of the Health IT** | 7 minutes | 0 minutes | 7 minutes | 7 minutes | 5 minutes | 0 minutes |
| [Discuss survey responses to understand the story of increased or decreased use post-grant project, and reasons for this.] | 🗸 |  | 🗸 | 🗸 | 🗸 |  |
| Do you have any indication of whether others have learned from your experience in implementations outside the project itself? | 🗸 |  | 🗸 | 🗸 | 🗸 |  |
| How and by whom are financial costs of sustaining or expanding health IT being borne? | 🗸 |  | 🗸 | 🗸 |  |  |
| What have you learned about addressing financing issues of the health IT? | 🗸 |  | 🗸 | 🗸 |  |  |
| What types of direct and indirect costs are incurred? | 🗸 |  | 🗸 | 🗸 |  |  |
| **Closing** | 5 minutes | 5 minutes | 2 minutes | 2 minutes | 2 minutes | 2 minutes |
| In closing, if you were advising another organization like yours [for value, like your partners] on planning or implementing health IT, what would you tell them they must have or do to be successful? | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 | 🗸 |

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