

## Attachment C

# AHRQ Health Care Innovations Exchange

## Health Care Innovator Interview Guide

Your specific questions will depend on the nature of the innovation and what information you have already collected. This guide is intended to help you think about what to ask so that you'll get everything you'll need for the profile as efficiently as possible. Depending on how much you can glean from the literature and/or the innovator's submission, you may not need to ask every question, but check to make sure you either have an answer or don't need one. It is also important to verify information that comes from literature, as it may not always be up-to-date. For both your sake and the innovator's, it is important to minimize the number of "repeat visits."

### At the beginning:

- Introduce yourself as calling on behalf of an AHRQ program called the Health Care Innovations Exchange. Explain the purpose of the program and ask if they have looked at the web site [www.innovations.ahrq.gov](http://www.innovations.ahrq.gov). If not, tell them that they can see hundreds of examples of profiles covering a wide range of clinical areas, settings, and populations to get a sense of how we present the innovations. Answer any questions about the purpose and goals of the Innovations Exchange.

It is not necessary to mention the company you work for unless they ask, in which case you can tell them and explain that you are a contractor hired by AHRQ to work on this program.

- Explain that we will draft the profile based on the information they provide, and that they will have a chance to review, comment on, and approve it before it gets posted to the web site. Explain that this information may be posted on the Web so they should not share anything proprietary or sensitive. Answer any other questions the innovator may have about what will happen with this information.
- Thank them for sending any written materials that they have provided in advance, and note that you will be exploring that information in more depth to get additional details that will

enable readers to understand the nature of the innovation and its relevance to their needs.

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If the interviewee would like to see the questions ahead of time, you can send them by e-mail or fax. One advantage of sending questions in advance is that they can quickly let you know whether someone else needs to be involved; it also allows them to be more prepared during the call. However, try to avoid overwhelming the interviewee with too many questions.

### **During the interview:**

- Probe deeply for human interest stories, which could include any of the following:
  - o An interesting story behind the impetus for the innovation, especially a patient's experience that convinced the organization of the need to act. For example, stories of a patient suffering a specific medical error/injury are often the impetus for the development of patient safety initiatives.
  - o Stories of people (patients or staff) who have been positively affected as a result of the innovation. Human "success" stories can make for good reading.
  - o Stories of patient/families that played a critical role in advocating for/developing/implementing the innovation. Sometimes patient/family advocates play an important role in rallying support for and spearheading initiatives.
- You may not have enough time to flesh out the details of a story, but try to gather enough information for us to determine whether to followup to get the details for a story that could be published on the site.

## At the end of the interview:

- Ask if there are any additional written materials that they have developed beyond what we already have in-house. If so, ask for a copy.
- Ask if you can contact them by e-mail or phone with followup questions.
- Thank them for their time.
- Let them know that they will have an opportunity to review the draft profile and consent before it is published. They should look for an e-mail from the AHRQ Innovations Exchange within the next few weeks.

Below are specific questions and probes organized by the main sections of the profile template. However, the interview need not necessarily follow the order of questions outlined below; in fact, you may find that it makes more sense to begin the interview by asking about the impetus for the program (which goes in the Context section) and about the problem the program addresses (a related issue that is covered in the Problem Addressed section), as this represents a natural starting point for the interview. If it is not clear exactly what the most innovative aspects of the program are, then asking the innovator this question this can be a good starting point for the interview. Then it likely makes sense to circle back to talk about how the program works (Description of the Innovation section), its impact (Results section), planning and development processes, and lessons learned related to implementation and start-up (Adoption Considerations). Also, as noted earlier, you may have already reviewed published articles and/or other written materials on the program. When such materials provide ample information for some of the sections included in a profile, the focus of portions of the interview may be changed to confirming, clarifying, updating, and elaborating on information from these materials.

## What They Did

- Problem:** What problem does the innovation address?

*Possible Probes:*

- What's the process of care that is affected by this innovation (e.g., patient handoffs, hospital admissions)?*

- o *Quality aim: What's the aspect of quality that this innovation addresses?*
- o *Do you have any data or evidence that quantifies the magnitude of the problem being addressed, either nationally or locally? Or can you suggest any studies or sources for this information? If the innovator cites data, request a source or at least note that we'll need to find one.*

ii. **Goals:** What specifically were you trying to achieve?

*Possible Answers: improved outcomes, such as lower mortality rates, complication rates, etc.; reduced resource utilization, such as lower hospital admissions; better communication among providers; improved patient satisfaction*

iii. **Description of the innovation:** How does this innovation work on a daily basis?

*Possible Probes:*

- o *What are the key elements or steps? How does this program work from the perspective of the person or persons being served by it (e.g., patient/customer, front-line clinician)*
- o *Who is involved and what do they do?*
- o *When does the activity occur? (If appropriate, when does the care get delivered?)*
- o *Where does the activity occur? (If appropriate, where does the care get delivered?)*
- o *How does this activity differ from standard (or previous) practice in your institution/office?*
- o *How does it differ from standard practice? (Innovator may not know.)*
- o *What was the theoretical framework or evidence based health information, or prior experience is it based on?*
- o *What clinical practice guideline, if any, is the activity based on?*
- o *(If not clear from previous questions) What makes this activity innovative?*
- o *Are you aware of any other organizations that have implemented similar ideas?*
- o *What patient population is affected by this innovation?*

- *When was the innovation implemented? Over what period of time?*
- *Did you develop any tools for use in this innovation?*
- *Who is responsible for the innovation? (If several organizations are involved, confirm who should be credited for the innovation.)*
- *Where did the funding for this innovation come from?*
- *Who would be most likely to be interested in this innovation? (e.g., hospital medical directors, physician practice administrators)*

*Note on the use of the term “evidence-based”:* During an interview, an innovator may describe a clinical intervention or protocol as “evidence based.” The use of this term should be a signal to the interviewer to probe further on what the innovator means by this term and what specifically is the source of the evidence base. It is important that the profile make it clear that we are not just taking the innovator’s word for it that an intervention is evidence-based, but can back that up that statement. The profile should document the use of that term by making reference to either a published systematic review of the evidence, or to an evidence-based clinical practice guideline that would meet or has met criteria for inclusion in the National Guidelines Clearinghouse (NGC). If the innovator cannot identify a systematic review or guideline as the basis for the intervention, then the author should not use the term “evidence-based” to describe the innovation.

- iv. **Quality Measures:** What quality measures do you track that relate to this innovation? Get information on specific measures and measure developers where possible.

*Possible Answers: HEDIS measures, the Joint Commission’s Core Measures, the National Hospital Quality Measures*

## Results

- i. **Impact:** What are the results of the innovation?

*Possible Probes:*

- *What did you track?*

- Possible answers: mortality/morbidity rates, complication rates, medical errors, patient/provider satisfaction, costs/ROI, process efficiencies.
- What evaluation design did you use?
  - Possible answers: before/after time series, survey, randomized controlled trial.
- What did you find? Any unexpected results, positive or negative? If so, why do you think these results occurred?
- Have results been published or posted?
- If no formal assessment done, why not?
  - Possible answers: too soon, no funding/resources
- What other evidence is available that shows the innovation worked?
  - Possible answers: anecdotal, informal feedback from providers, patients and families---further probe for specific stories.
- If the innovation did not show effective results, why not?
  - Possible answers: lack of staff buy-in, inadequate resources, leadership

## How They Did It

**i. Context:** Describe your setting, e.g. type/structure of organization, programs and services offered, size, and marketplace characteristics. **As noted, it may make sense to cover this topic early in the interview, when you are talking about the problem being addressed.)**

*Possible Probes:*

- *What was the impetus for starting this program? Did a specific event, study, or person serve as the impetus?*
- *Is this program part of a larger initiative? If so, please describe the initiative and this program's relationship to it.*

**ii. Planning and Development Process:** How did you implement the innovation? What were the upfront planning and development steps required to get it up and running?

*Possible Probes:*

- o Describe what you did to plan for the activity and get it up and running.*
  - Possible answers: securing leadership support and approval, formation of planning committee, staff hiring and training, multidisciplinary teamwork, development of program components and/or implementation tools, pilot testing, expansion and roll-out*
- o What additional planning/development steps have been needed to sustain it over time?*
  - Possible answers: additional manpower, securing additional financial resources, continued support from leadership*
- o What other mechanisms do you use, are they available to share?*
  - Possible answers: forms, communication tools*
- o What training is required? (Who, what, when, how long?)*  
*What supplies, resources, equipment, and organizational support were necessary?*
- o What challenges did you face in the planning and development process, and how did you overcome them?*

**iii. Resources Needed:**

- **Staffing:** Did the innovation require new staff, or did existing staff incorporate it into their regular routines? If it required new staff, how many and what type of background do they have? If someone else were adopting this program, would they need to use the staff with the same type of background?
- **Costs:** How much did the program cost to develop and implement (i.e., upfront costs)? What are the annual operating costs? Can you provide a breakdown of the major components of these costs (e.g., staffing, equipment, etc.)?

**iv. Funding Sources:**

- Did you receive any external support to pay for the initial development and implementation of the program? If so, from whom? How are the ongoing operating expenses for the program paid for? Do you have any external support for that? If so, from whom?

## Adoption Considerations

- i. Getting Started:** What lessons learned can you offer for others who might be interested in beginning to adopt the innovation?

*Possible Probes:*

- *What advice do you have for others who may want to get started implementing the innovation?*
- *What worked based on your experience, and were there any surprises along the way? If so, how did you deal with them?*
- *What would you do differently if you could do it all over again?*
- *Which stakeholders were involved in implementation, and how did you get them on board? For example, what was the message with each key stakeholder, who delivered it, and how was it delivered? Did this approach work well? If so, why, and if not, why not?*
- *Many programs require the engagement and support of organizational leaders? How specifically did you secure that support? Who approached the leaders, and what was their strategy/message in securing support? And how can one keep leaders engaged and supportive over time?*
- *What were some of the barriers that you overcame in implementing the innovation, and how did you overcome them?*

- ii. Sustaining the Innovation:** What lessons learned can you offer about sustaining the innovation over time?

*Possible Probes:*

- *What guidance do you have for others for keeping the innovation going over time?*
- *How do you maintain enthusiasm and avoid complacency?*
- *What relationships and political issues needed attention to sustain the innovation?*

- iii. Use by Other Organizations:** Are there any other organizations using this innovation? Did they begin using it before you or after you? Have you worked directly with them at all?



*Possible Probes*

- *What questions might potential adopters in other settings have, and how would you advise addressing these issues?*