**Project Director Interview Questions**

Form Approved  
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**PART I: Demographics on Your CME Unit and Dissemination Data**

1. What is the highest degree of the Chief Administrator (e.g., Director of CME)?
2. Who does the Chief Administrator administratively report to?
3. Who has direct responsibility for the day to day implementation of your CME activities?
4. Who does he/she report to?
5. What is the name of the administrative unit that received the AHRQ support?
6. Has your CME unit received federal funding for any of your activities in the past three years? If yes, please describe the funding sources and the nature of the funding.
7. Number of learners served, for each CME activity
8. Number of CME certificates issued, for each CME activity
9. Types of learners served, for each CME activity (NOTE: Please summarize your data by professional categories, academic affiliations, clinical affiliations/practice settings, patient populations seen, or any other indicators available to you)
10. IF APPLICABLE, numbers and types of EHC materials (e.g., clinician guide, consumer guide, case studies) distributed to learners, for each CME activity
11. IF APPLICABLE, Web metrics (e.g., downloads, pages accessed, requests for additional content/information) collected, for each CME activity

**PART II: Project Design and Perceptions of EHC Products**

1. What were the content area(s) of your project and how were they selected?
2. Did your CME activity(ies) focus on the content areas described in the EHC products, or were the EHC products presented as part of a larger agenda?

Public reporting burden for this collection of information is estimated to average 30 minutes per response, the estimated time required to complete the survey. 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.

1. Were any of the CME presentations designed to explain the systematic review process used in comparative effectiveness research?
2. What educational format(s) were selected for the CME activity(ies) and why?
3. Who selected the CME faculty and how were they selected?
4. What audience(s) were targeted by the CME activity(ies)?
5. Please describe any previous experience that you have had in integrating EHC content into educational activities, if applicable.
6. Which EHC products were used in developing the CME content?
7. How were the EHC products used or incorporated into the content of your CME activity(ies)?
8. What challenges were encountered in integrating EHC products into new/existing CME activities/materials?
9. What modifications of the EHC products were required, if any?
10. What changes to the EHC products would have facilitated your use of the products in developing your CME activity(ies)?
11. Are there additional enabling tools or support structures that would have been useful in presenting the information from the EHC products?
12. With respect to the EHC products that you used in this project…**[CLOSED ENDED ITEMS]**
    1. What is your perception of the credibility of the CER findings presented in the EHC products?
    2. What is your perception of the currency of the EHC products?
    3. What is your perception of the scope of treatment options/medical conditions included in each of the systematic reviews?
    4. How useful are the EHC products in identifying clinical gaps and barriers?
    5. How useful are the EHC products in communicating levels of evidence to clinical audiences?
13. How would you compare the information in the EHC products (and the products themselves) to other sources of information that you have used in the past?
14. Did your CME faculty or learners indicate their perceptions of the EHC products? If so, what perceptions were expressed?
15. Did this project require you to make any significant change to your usual way of developing and implementing CE/CME activities? If so, how did this affect various stakeholders (e.g., CE/CME planners, administrators, learners, faculty presenters/developers, commercial supporters)?