## Attachment C - Faculty Interview

### Faculty Member Interview Guidelines

Thank you once again for agreeing to speak with us regarding the incorporation of patient centered outcomes research in the health professions curriculum. As we noted, the interview will take less than an hour. May we record the interview to ensure we capture our discussion fully? [Record response].

#### **Background Information on Respondent**

- 1. Verify interviewee's:
  - a. professional background
  - b. years of experience
  - c. location of training
  - d. discipline(s) and
  - e. degree(s).
- 2. Verify current academic position (e.g., dean of program, program director, course director), including department and geographic location.
- 3. Do you currently hold other appointments? If yes:
  - a. What is/are the other position(s)?
  - b. What are your primary responsibilities?
  - c. How long have you been in that position?
- 4. (If not mentioned in response to above question: What is your role in your department/division with regards to curriculum development?
  - a. Do you participate directly in developing curriculum content and materials? If yes:
    - i. Please describe your roles and responsibilities in this area.
  - b. Are you involved in any curriculum committees, professional associations (e.g., the AGCME or the LCME), or organizations where you play a role in influencing curricula in your field more broadly? If yes:
    - i. Please describe these associations/organizations
    - ii. What is your role
- 5. Do you teach in a formal classroom setting? If yes:
  - i. What topics do you teach?
  - ii. Are your courses or lectures oriented toward undergraduate or graduate students? For students at the beginning or end of their program, or a mix?
  - iii. Are the courses or lectures you teach mandatory for students or are they electives?

Public reporting burden for this collection of information is estimated to average 1 hour 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.

- 6. Do you supervise and/or mentor students? If yes:
  - i. What is your role?
  - ii. Are the students you mentor generally at the beginning of their programs, the end, or a mix?
- 7. Do you currently practice in your clinical field?
  - i. If yes, what is your area of clinical practice?

# **Faculty Perceptions of PCOR**

As we noted in our initial discussions with you, AHRQ is assessing students' and faculty's needs and preferences for integrating Patient-Centered Outcomes Research (PCOR) into the health professions' curricula, learning environment, and other training opportunities. [Refer to definition of PCOR sent via email: 'Patient Centered Outcomes Research (PCOR) is research that assesses the benefits and harms of preventive, diagnostic, therapeutic, palliative or health delivery system interventions. The research helps clinicians, patients and other caregivers make informed decisions about health care choices by highlighting comparisons and outcomes that matter to people, such as survival, function, symptoms, and health related quality of life.'

- 8. Is PCOR, or related concepts, taught at your institution?
  - Yes No Don't Know

If yes:

- a. Please describe what is taught, by whom, and when it occurs within the program
- b. (Probe all responses): Are students taught to access and evaluate new evidence about effective diagnostic and treatment services? If yes, when and how? If no, why not?
- c. (Probe) Are students taught about shared decision-making and/or patient goals of care? If yes, when and how? If no, why not?

If no to all of above:

- d. Should PCOR be a part of the curriculum? Discuss response.
- 9. If PCOR or related concepts are taught: Is PCOR integrated into the curriculum at your institution (as opposed to being taught as a separate course(s))? Yes No

If yes:

- a. Please explain how. What courses include PCOR?
- b. Are PCOR concepts incorporated into online curriculum? [go to Q3]

If PCOR is NOT taught or answer to above is no:

c. Should PCOR be integrated into the curriculum?

- 10. To what extent do you personally incorporate PCOR into the classes you teach or the curriculum materials you have developed? (If response is 'not at all', probe for reasons.)
- 11. What pedagogical strategies have you found to be most effective for preparing your students, currently and as they become practitioners, to make use of newly available information and changes in evidence-based practice and guidelines?
- 12. In general, have you tried to change the way PCOR is framed in your program?
  - i. Have you used new teaching methods in order to integrate this material into your courses? If yes, discuss. If no, explore reasons.
  - ii. Have you used tools and techniques such as social media to do so? If yes, which ones? What facilitated their use? What were barriers to use of others? If none used, are there specific barriers to use of these tools? Other reasons for non-use?
- 13. In your program, to what extent does students' exposure to PCOR and research-based clinical information vary based on factors such as his or her selection of elective courses, the faculty member teaching the course or supervising clinical time, etc.?

### **Curriculum Development and Strategies**

14. Are there any plans to [expand/include] the incorporation of PCOR into the curriculum?

Yes No If yes: Please tell me about these plans.

If no: Why not?

- 15. Who/what [influences/would influence] the addition and integration of PCOR into the curriculum at your institution?
- 16. What aspects [if any] of PCOR do you view as essential to include in the curriculum and which are less essential at this stage (in reference to the student's currently taught by this faculty member) of clinical training/professional development (e.g., which could be reserved for later educational opportunities and professional exposure)?
- 17. Should PCOR be implemented in a structured or unstructured (i.e., organic) manner (i.e., presented as a specific course or course section, or have it arise as part of the ongoing lectures/conversations.)
- 18. How should PCOR be prioritized between course work and clinicals?
- 19. What do you feel is the right balance between teaching content (e.g., the evidence) and teaching applications of such content (e.g., how to critically review evidence, incorporate evidence into practice, and speak with patients about evidence)?
- 20. What are the [potential] barriers (e.g., length of program/number of credit hours, resources, incentives for faculty, faculty expertise) to implementing PCOR into the curriculum?

- 21. How might some of these barriers to integration most easily be overcome?
- 22. What are the [potential] facilitators (e.g., faculty interest and expertise, resources) to implementing PCOR into the curriculum?
- 23. [If a clinical practitioner]: Do you integrate PCOR into your clinical practice?

If yes:

- a. Please offer some examples of how you have done so.
- b. In general, do you feel that PCOR is part of the clinical culture in your practice or institution or is this something that varies across individual practitioners?

If no: What are the reasons PCOR is not a part of your practice?

- 24. What elements of PCOR do you think new clinicians can readily apply in practice? Which elements can they not apply easily, and why not?
- 25. What recommendations do you have for how AHRQ could help academic and clinical faculty members improve the dissemination of PCOR to students and its integration into practice?
- 26. Based on your experience is there anything else about PCOR we need to consider that has not already been discussed?