ATTACHMENT – A: Telephone Interview Guide for HAI State Coordinators/Epidemiologist

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Interviews to begin 4 weeks after project email announcement sent [Date TBD pending OMB approval]

Health Departments' Access to Electronic Health Records EXPLORATORY IN-DEPTH INTERVIEW SCRIPT FOR State Health Departments'

I. INTRODUCTION

Hello, [RESPONDENT NAME], my name is _______. Thank you for taking the time to be willing to share your opinions with me. We'll be spending the next 30 minutes or so discussing your experiences with electronic health records. We are interested in your experience with electronic health records during the 2012 fungal meningitis outbreak because that is the experience that highlighted this issue, but we are also interested in your experience with outbreaks or other situations where you might have experience with electronic health records. There are no right or wrong answers to the questions I'm going to ask you, so please provide your honest and frank opinions throughout our time together. Some of my questions may be hard to answer. Please feel free to take as much time as you need to give a response that you are happy with. If you don't understand the question, feel free to let me know, and I can ask it another way. This is not a test, so feel free to say you don't know or don't have an opinion to offer.

I am conducting interviews in twelve states across the U.S. and the information I gather will be used by the Centers for Disease Control and Prevention and The Association for State and Territorial Health Officials in the development of an electronic health record access toolkit for states. The state toolkit will include a list of barriers; suggestions to overcome those barriers; highlight best practices and policies that support electronic health record access and may include practical tools such as templates for cooperative agreements, memorandums of understanding, or policies.

Public reporting burden of this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. 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 CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0879).

Before we begin, I wanted to go over a couple of items:

- First, I want to make sure you know that this interview is **voluntary**. You can decline to answer any question, and "I don't know" is a perfectly acceptable response to any question. There are no right or wrong answers, we are interested in your opinion.
- Second, the information you provide will be kept **anonymous**. The responses of all of the individuals I speak with will be reported as a group or at the state level and nothing will be attributed to any one person

Lastly, I wanted to let you know that I will be audio-recording our conversation. I do this simply to ensure that I capture all the information that you share and so I can listen to what you have to say and not worry about taking notes. The recording helps me in writing my report and is used for that purpose only. After our interview has been transcribed the audio-recording will be destroyed.

Do you have any questions before we begin? I'd like to go ahead and begin our discussion.

II. Background

- 1. What is your official title?
 - a. What are your current responsibilities?

III. Electronic Health Record Access

1. What has been your experience with the health department requesting and/or getting access to electronic health records from clinical providers in your jurisdiction?

Probes:

Epidemiologist, *HAI Coordinator*

- A. What has been your role in getting electronic health record access for your health department?
- в. Why was getting electronic health record access important?
- c. How quickly was your health department granted electronic health record access after your request?
- D. How did your experience differ across the clinical care facilities?
- E. When you got access to a facility's electronic health records system, what was it like to

use it?

- F. What kind of access to electronic health records did you have?
 - *a.* Remote, or onsite?
 - b. Did you want remote access?
- *G.* Was access different for each facility?
 - a. How much of the patient's record were you able to see (part, whole?) If partial, were there things you needed to see that you couldn't?
 - *b.* If full, were there things you could see that you would rather not have seen?

How has having access to the electronic health helped or hindered your work?

- н. When you accessed the electronic health record how easily were you able to get the information you needed?
- I. Has your health department had any previous experiences requesting electronic health record access from this facility, such as during an outbreak?
- J. What was your relationship like with this facility before, during, and after you requested electronic health record access?

IV. Electronic Health Record Access

2. How is access to electronic health records practically defined in your jurisdiction?

Probes:

Epidemiologist, HAI Coordinator

- A. Do you have access to one electronic health record system that has all records or did you have to use multiple systems?
 - a. How did using multiple systems affect your experience?
- B. How does access differ across clinical care facilities?
- c. Do you define electronic health record access by onsite, remote or both?
- D. Is there an expiration date for access?
- E. Is there a process for access (for example, do you have to submit a request that specifies a symptom, characteristic, diagnosis, lab fining, or name) or do are you able to simply request access?

3. What were some of the barriers [real or perceived] you encountered when requesting and/or getting electronic health record access?

[actual hurdles you experienced and things you thought would be hurdles]

Probes:

Epidemiologist, HAI Coordinator

- A. What real and perceived barriers did **facilities** have in granting you access, if any?
- B. What kinds of barriers [real and perceived] did your health department have in supporting your access, if any (e.g. technological or other)
- c. What kinds of barriers [real or perceived] did you have about your use of the data for analysis and decision making?
- D. What kinds of barriers [real or perceived] did you have about having the authority to access electronic health records, if any?
- E. What kinds of barriers [real or perceived] about patient privacy, if any?
- F. What kinds of barriers [real or perceived] did you have about security, if any?
- G. What kinds of barriers [real or perceived] did you have about your relationship with the clinical care facility, if any?

4. What are the greatest lessons that you learned when requesting and/or getting electronic health record access?

Probes:

Epidemiologist, HAI Coordinator

- A. Upon reflection, what do you wish had been set in place BEFORE requesting access? What do you wish you had known about (or known more about)?
 - a. Are you currently working on a plan to address any of these lessons learned?
- B. In terms of interactions and relationships with health care facilities, is there anything you are doing differently now that you weren't doing before your request for electronic health record? Is there anything you would have done differently before or requesting electronic health record access

5. What would you like to see in the toolkit that that could help us to address health departments' access to electronic health records?

Probes:

Epidemiologist, HAI Coordinator

- A. What suggestions do you have for health departments requesting electronic health record access?
- B. What electronic health record functions/features were helpful or could be helpful?
- c. What software programs were helpful; what weren't?
 - a. Please describe how these programs were used (e.g., analysis, data sharing, reporting, visualization, algorithmic).
- D. Do you have particular tools, best practices and/or lessons learned that you feel are valuable to other states or jurisdictions for responding to similar situations?
 - a. Would you be willing to share the tools with us you identified as valuable?

This concludes our discussion. Thank you so much for your participation. Your work here will make a difference.