ATTACHMENT – C: Telephone Interview Guide for Informatics Directors

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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

 What has been your experience with the health department requesting and/or getting access to electronic health records from clinical providers in your jurisdiction?(Please focus on our experience as it relates to access to electronic health records in facilities', and not health information exchanges)

Probes:

	Informatics Director:	
А.	What was your role in facilitating access to electronic health records?	
В.	How did your experience differ across facilities? a. Was it just a particular facility request that you assisted with or were there multiple facility requests that required your expertise?	
<i>A</i> .	 How did your experience differ across kinds of access to electronic health records? a. Onsite versus remote? b. Did you want remote access? 	

B. 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?

IV. Electronic Health Record Access

2. How is electronic health record access technologically operationalized/defined in your jurisdiction?

Probes:

Informatics Director:

- A. From your vantage point, are there technical issues that need to be addressed to allow your health department to access electronic health records?
 - a. Were their differences in the technical issues for on-site versus remote access?
- B. Are policies in place to address the technical aspects of this type of access?

3. What were some of the barriers [real or perceived] you encountered requesting and/or getting electronic health record access? [actual hurdles you experienced and things you thought would be hurdles]

Probes:
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	Informatics Director
A.	What kinds of technical barriers did you encountered –software, hardware,
	firewalls, bandwidth, secure data storage, etc.
В.	What were some of the technical barriers that required your support?
<i>C</i> .	What real and perceived barriers did facilities have in granting you access, if any?
D.	What real and perceived barriers did your health department have in supporting your access, if any (e.g. technological or other)
<i>E</i> .	What kinds of barriers [real or perceived] did you have about patient privacy, if any?
<i>F</i> .	What kinds of barriers [real or perceived] did you have about security, if any?
<i>G</i> .	What kinds of barriers [real or perceived] did you have about your relationship with the clinical care facility, if any?

- *H.* What kinds of barriers [real or perceived] did you have about finances, if any?
- I. What kinds of barriers [real or perceived] did you have about human resources, if any?

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

Probes:

	Informatics Director
A.	Upon reflection, what do you wish had been set in place BEFORE requesting access?
B.	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?
C.	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?

	Informatics
	Director:
D.	What suggestions do you have for health departments regarding the policies needed to facilitate access to electronic health records from health care facilities?
E.	How do these policies need to be different if access is on-site versus remote?
F.	What suggestions do you have for health departments regarding the technical capabilities needed to facilitate remote access to electronic health records in health care facilities
G.	In your opinion, what do health departments need to have in place to facilitate electronic health record access?
H.	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.