

Appendix E: Telephone Interview Guide for Informatics Directors

Interviews to begin 7 weeks after OMB approval [Date TBD pending OMB approval]

Health Departments Access to Electronic Health Records EXPLORATORY IN-DEPTH INTERVIEW SCRIPT FOR Healthcare Facilities

I. INTRODUCTION

Hello, [RESPONDENT NAME], my name is _____. Thank you for taking the time to share your opinions with me. We'll be spending the next 30 minutes discussing your experiences with granting access to electronic health records (EHRs) in your healthcare facility to health departments (HDs). We are interested in your experience during the 2012 fungal meningitis outbreak, but we are also interested in your experience with outbreaks or other situations where you might have experience with HD seeking access to electronic health records in your healthcare facility. There are no right or wrong answers to the questions I'm going to ask you, as we are requesting your opinions only. Please feel free to take as much time as you need to give a response that you are happy with. While some questions may be hard to answer, please provide your frank opinion. If you don't understand the question, please let me know, and I will 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 fifteen states across the U.S. and the information I gather will be used by the Centers for Disease Control and Prevention and the Association of State and Territorial Health Officials in the development of report related to HD access to EHRs. Your responses will also be used to help us build a toolkit to help state HDs understand your needs and perspectives when they request EHR access. The toolkit will provide perceived barriers, recommendations to overcome those barriers, best practices that support EHR access, and practical tools such as templates, memorandums of understanding (MOUs), and policies. The toolkit will be distributed to HDs, healthcare facilities, and other stakeholders to support awareness and strengthen relationships between public health and clinical care. These activities will facilitate the quick and efficient identification of cases during public health investigations and protect the health and safety of patients.

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

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-xxxx).

- First, I want to make sure you know that this interview is **voluntary**. You can decline to participate in the interview. 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, and we are interested in your frank opinion.
- Second, the information you provide will be anonymized so that information cannot be attributed to you or your facility. 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 or organization.

I will be audio-recording our conversation 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?
May I begin?.

II. Background

1. What is your official title?

a. *What are your current responsibilities?*

2. *I want to start the interview by asking you to think back to the fungal meningitis outbreak. We recognize that you might not have been involved in this outbreak, but you may have been asked for other information, or been involved in another outbreak where the health department requested EHR access. Think back to that experience and focus on the process you went through to get the HD access; from getting them into the system, helping them find the information they needed, and the EHR support they needed throughout the outbreak investigation from you and others. Think about what was the process like. What went well. What areas of that process were more challenging. Now I’d like to follow up with some specific questions about that process you’re envisioning.*

III. Electronic Health Record Access

1. **What has been your experience with the HD requesting, accessing, and using EHRs from your healthcare facility?** *Please focus on our experience as it relates to access to electronic health records in facilities’, and not health information exchanges)*

Probes:

Informatics Director:

- A. *What was your role in facilitating HD access to EHRs?*
 - a. *What kind of user did you apply to the HD?*
 - b. *Did you provide user specific credentials or generic credentials for the HD?*
- B. *Was it just a particular facility request that you assisted with or were there multiple facility requests that required your expertise?*
 - a. *How did the experience differ across facilities?*
- A. *Was access different for each facility?*
 - a. *How much of the patient's record were HDs able to see (part, whole?) If partial, were there things they wanted to see that they couldn't? (were you able to give access to the information that was needed?)*
 - b. *If full, were there things they could see that you would rather they not have seen?*
- B. *How did your experience differ across the kinds of access you provided to electronic health records?*
 - a. *Onsite versus remote?*
 - b. *Did you offer remote access?*

IV. Electronic Health Record Access

- 2. **What does giving the HD access to your facilities' EHRs mean to you?**

Probes:

Informatics Director:

- A. *What does giving the HD access to your facility's EHRs include?*
 - a. *From your vantage point, are there technical issues that need to be addressed to allow your health department to access your facility's electronic health records?*
 - b. *Were there differences in the technical issues for on-site versus remote access?*
 - c. *Were policies in place to address the technical aspects of this type of access?*
- B. *What does giving HDs access to your facility's EHRs not include?*
- C. *Are there other practices that could inform this type of access during an outbreak conducted by someone else, inside or outside, or your healthcare facility (i.e. internal audits such as those for vaccinations, accreditation or certification, or billing certification)?*
 - a. *Were there other routine practices that require someone else, inside or outside of your healthcare facility, to access EHRs?(i.e. internal audits such as those for vaccinations, accreditation or certification, or billing certification)*
- C. *What does giving the HD EHR access in your facility look like past, present, or future?*

- 3. **What were some of the barriers [real or perceived] you encountered when the HD requested and/or got electronic health record access? [actual hurdles you experienced and things you thought would be hurdles]**

Probes:

Informatics Director

- A. *What kinds of technical barriers did you encounter –...software, hardware, firewalls, virtual proxy networks, transmission issues, bandwidth, secure data storage, etc.*
- B. *What were some of the technical barriers that required your support?*
- C. *What real and perceived barriers did your healthcare facility have in granting the HD access, if any?*
- D. *What kinds of barriers [real or perceived] did your healthcare facility have related to legal issues or state law requirements in granting HDs access to EHRs?*
 - a. *If yes: who would you recommend we follow up with to learn more about these issues.*
- E. *What real and perceived barriers did your healthcare facility have in supporting HDs access, if any (e.g. technological or other)*
- F. *What kinds of barriers [real or perceived] did you have related to patient privacy, if any?*
- G. *What kinds of barriers [real or perceived] did you have related to security, if any?*
- H. *What kinds of barriers [real or perceived] did you have related to your relationship with the HD, if any?*
- I. *What kinds of barriers [real or perceived] did you have related to finances, if any?*
- J. *What kinds of barriers [real or perceived] did you have related to human resources, if any?*
- K. *What kinds of barriers [real or perceived] did you have related to the effect on your daily workflow?*

4. What are the greatest lessons that you learned when the HD requested and/or got electronic health record access?

Probes:

Informatics Director

- A. *Upon reflection, what do you wish had been set in place BEFORE the HD requested EHR 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 HDs, is there anything you are doing differently now that you weren't doing before they requested access to your facilities electronic health records?*
- d. *Is there anything you would have done differently before the HD requested access to your facility's electronic health records?*

5. From your perspective as a healthcare facility, what do you need from HDs that would make granting access to EHRs feasible?

Probes:

<i>Informatics Director:</i>
<ul style="list-style-type: none"> a. <i>What suggestions do you have for HDs regarding the policies needed to facilitate access to electronic health records from health care facilities?</i> <ul style="list-style-type: none"> a. <i>What suggestions do you have for healthcare facilities regarding the policies needed to facilitate HD's access to EHRs?</i> b. <i>How do these policies need to be different if access is on-site versus remote?</i>

- b. *What suggestions do you have for healthcare facilities regarding the technical capabilities needed to facilitate remote access to EHRs for HDs?*
 - a. *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*
 - b. *Are there security protocols used to grant the HD EHR access?*
 - i. *Are these standard security protocols that apply to all users?*
- c. *In your opinion, what do health departments need to have in place to facilitate electronic health record access?*
 - a. *In your opinion, what do healthcare facilities need to have in place to facilitate electronic health record access?*
- d. *Do you have particular tools, best practices and/or lessons learned that you feel are valuable to other healthcare facilities 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.