

Appendix B - Field Test Evaluation Protocol for Patients and Family Members

AHRQ Guide to Improving Patient Safety in Primary Care Settings by Engaging Patients and Families

Patient Focus Group Script – Guide Field Test Evaluation

MedStar Health Research Institute (MHRI) will conduct twelve (12) focus groups (one per practice) with patients during Guide Field Testing. We will aim to recruit patients in the following manner:

- 6 patients, family members, and/or caregivers per primary care practice.
- Patients/family members who have been exposed to the intervention
- A diverse group of patients in terms of age, sex, race/ethnicity, income, education, and current self-reported health status.

Recruitment Criteria

Patients and family members who have been exposed to the intervention (i.e. attended the primary care practice during the period of Guide implementation) will be eligible to participate in the focus groups. MHRI team members will work with the practice coordinators to identify and recruit patients to participate in the focus groups.

Focus Group Goals

The goals of the focus groups will be to:

- Obtain feedback on the intervention **patient-focused** materials
- Obtain feedback on the barriers and facilitators encountered for each intervention
- Obtain feedback on satisfaction with interventions
- Obtain feedback on receptivity and enhancements to intervention to improve adoption

Focus Group Materials

- Copies of the patient-focused materials implemented by the practice during the period of implementation
- Informed consent documents
- Participant stipends and receipts
- Digital recorder

Focus Group Location

Focus groups will be conducted at a location within the practice's community. Locations may include libraries and/or community centers.

Participant Stipends

Upon arriving at the focus group location and after the completion of the informed consent process, all participants will complete the required paperwork (W9) to receive the stipend for participation. The stipend for participation will be \$25.

Informed Consent Procedures

Participants will complete the informed consent process at the time of arrival to the focus group.

Proposed Agenda – Patient Focus Group

Focus Groups will be planned for approximately 90 minutes each.

<u>Agenda</u>	
Introduction	5 minutes
Participant Introductions	10 minutes
Background	10 minutes
Review Materials	15 minutes
General Experience with Intervention (satisfaction/barriers/enablers)	20 minutes
Enhancements	15 minutes
Closing	15 minutes
Total	90 minutes

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Form Approved
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Exp. Date xx/xx/xxxx

Patient Focus Group Script – Guide Field Test Evaluation

[bracketed text will depend on interviewee and topic]

WELCOME AND INTRODUCTION

- Thank you for agreeing to participate in the focus group about [INSERT NAME OF INTERVENTION]!
- My name is [INSERT NAME OF INTERVIEWER] and I am the facilitator for today’s conversation. I am here with [INSERT NAME OF PROJECT STAFF] and HE/SHE will be taking notes of our conversation.
- With your permission we will also be audio recording the session. This will help make sure that we don’t miss anything that you say and can share with other people who are working on this project. The recording will be deleted immediately after we have the notes transcribed and are sure we have captured all your comments accurately.
- TODAY/TONIGHT we will be asking you questions about your experiences with [INSERT THE INTERVENTION NAME].
- Nothing that you say or share today will impact your treatment or care from your doctor’s office. We will not share your name or anything that you say with them.
- Do you have any questions before we begin?

GROUND RULES

- We want to hear from everyone and want to hear your honest opinions. There are no wrong answers.
- If you have something to add to the conversation, please feel free to jump in. The more discussion we have the better we can make the [INSERT INTERVENTION NAME]. We do have a lot to cover so we will try not to spend too much time on any one topic.
- It is important that when you do jump in that we try to make sure that we only have one person talking at any time. This will help us hear everyone’s thoughts and opinions.
- Any questions?

So let’s get started.

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BRIEF INTRODUCTIONS

I would like to start with some brief introductions. We will go around the table. As we go around, please tell us all your first name and something about yourself like your favorite hobby or television show.

BACKGROUND

That is great! I am really pleased to meet you all. I would like to jump right in and start asking for your impressions about patient safety.

PATIENT SAFETY

1. What is the first thing you think of, or what comes to mind when you hear the term “patient safety”? Why?
 - a. Can you share with me any [other] examples of patient safety?
2. In your opinion as a patient/family member/caregiver, what would you say are the most important things for patients like you to know or think about when it comes to patient safety?
3. What suggestions would you share with primary care doctors about how to improve patient safety?

Wow, this is great. Thank you for sharing. I now want to speak with you about patient engagement.

PATIENT ENGAGEMENT

4. What is the first thing you think of or what comes to mind when you hear the term “patient engagement”?
 - a. Can you share with me any [other] examples of patient engagement, or what patient engagement looks like to you?
5. In your opinion, what types of things get in the way of patient engagement?
6. From your experience what is the best way to get patients engaged with their care?
 - a. What is needed to get patients more engaged with their health care?
 - b. Are there any reasons that you can think of that people wouldn't be able to engage in their care? Or want to engage in their care?

Thank you for all your open feedback on patient safety and patient engagement. Now I would like you to consider the materials that you have in front of you. We are going to spend the next 15 minutes talking about them. get started. We will go through each material individually and ask the same or similar questions about each of them.

FEEDBACK ON MATERIALS

7. What is the first thing that comes to mind when you see this [BROCHURE, DOCUMENT, POSTER - THIS WILL BE INTERVENTION SPECIFIC]?
 - a. Have you seen these materials before?
 - i. Where exactly did you see them?
 - ii. Did you pick them up or ask anyone about them?
 1. Why? Why not?
 - b. Did you think they were helpful? Why/Why not?
8. Can you describe for me how you would use/used the [BROCHURE, DOCUMENT – INSERT INTERVENTION SPECIFIC INFORMATION]
 - a. Did you find it helpful?
 - b. What would have made it better?
 - c. Did you feel like you needed more information about why you should use it?
9. If you could change one thing about the materials, what would that be? Let's go around the table.
 - a. If nothing to change: Did you personally get a chance to use these tools? Did your family member? Can you describe their experience?
10. What about the format of the [INTERVENTION MATERIAL]? Is there a better way for us to think about presenting the materials?
 - a. What about an electronic version? If you had this on your phone would that help? Similar to an "app"?

Is there anything else you would like to share about your experiences with the materials? If not, let's move on to learning more about your experiences with the Guide and the interventions.

FEEDBACK ON EXPERIENCE WITH INTERVENTION

11. We want to get some more information about your thoughts on [INSERT NAME OF INTERVENTION]. Where did you first hear about the [INTERVENTION]?
 - a. Who first brought it to your attention, your doctor, another organization?
 - b. How long ago, or when did you first get introduced to the [INTERVENTION]?
12. When you were first given the [INTERVENTION] what did you think?
 - a. How did you feel about using it?
 - b. How did you end up using the [INTERVENTION], or did you end up not using it after all?
 - c. If no, what prevented you from using it? Time? Challenges with the materials?
 - d. Do you plan on using the [INTERVENTION] in the future? If yes, how. If no, why not? Is there something we could do to help you with making it more usable?
13. How easy or challenging did you find the [INTERVENTION] to be?

14. What was the best thing about the [INTERVENTION]?
15. What was your least favorite thing about the [INTERVENTION]?
16. What would you have changed about the [INTERVENTION]?
17. Specifically thinking about patient safety the way we discussed it earlier: how did you think this the [INTERVENTION] addressed safety for you?
18. And what about patient engagement, how did the [INTERVENTION] help you to engage or increase your engagement in your health care?
19. Imagine you are in charge of creating a program/process/” intervention” for people like yourself to improve patient safety.
 - a. What would this look like?
 - b. Can you describe it?
 - c. What would it do?
 - d. How would you tell other patients about it?

CLOSING

20. Those were all the questions I had today. Are there any questions that I should have asked that I did not?
21. Is there anything else you would like to add on any of the topics we discussed today?

Thank you for your time and participation in this interview. Your comments will be very helpful to this project!