

Appendix C - Interview Guide - Baseline Practice Readiness

Interview Protocol for Primary Care Providers or Practice Staff

MedStar Health Research Institute (MHRI) will conduct twelve (n=12) telephone interviews with the practice champion/administrator/provider during the baseline period to assess practice change readiness. The audience may be a provider and/or administrator.

Recruitment Criteria

Any primary care provider or practice staff administrator will be eligible to participate in the interview. The key informants will be identified through consultation with the practice coordinator/champion.

Interview Location and Schedule

The change readiness interviews will be conducted with the practices during the recruitment process. Interviews will be conducted via telephone and will last approximately 45 minutes.

Informed Consent Procedures

Interviewer will read the informed consent document and request an assent to participate to be recorded.

INTRODUCTION

Thank you for agreeing to do this interview! My name is [Insert Name of Interviewer] and I am from the MedStar Health Research Institute. I am working on a project funded by the Department of Health and Human Services Agency for Healthcare Research and Quality to design and test a Guide to Improve Patient Safety in Primary Care Practices by Engaging Patients and Families. I will be asking you questions today about your readiness to implement [Insert Name of Planned Intervention] in your practice.

The purpose of today's interview is to reflect upon the current state of readiness of your practice and your team to adopt interventions aimed at improving patient safety through engaging patients and families. The call should take about 45 minutes and all of your responses will remain confidential.

Public reporting burden for this collection of information is estimated to average 45 minutes per response, the estimated time required to complete the survey. 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, 5600 Fishers Lane, Mail Stop Number 07W41A, Rockville MD 20857

[Interviewer will read the study description and request an assent to participate in the interview. Oral agreement to audio record will be recorded. If consent submitted, the interviewer will ask if the key informant has any questions about how their input will be used and that once the interview has been transcribed that the audiotape will be destroyed]

Do you have any questions for me before we begin?

Thank you! Now let us begin.

BACKGROUND INFORMATION

1. Please briefly describe for me your position in the practice.
 - a. How long have you been working at the practice? Less than 1 year, 2-4 years, 5 or more?
 - b. Have you always been in the same position?
 - c. Have you engaged in practice improvement activities before?
 - i. If yes, can you describe what that was like? How long of a process was it? Was it successful?

Thank you for letting me get to know you a little bit. Now I would like to ask you some questions from your perspective on how your practice is currently organized and structured.

CONCEPT – PATIENT SAFETY

2. How would you describe the culture of patient safety in your practice?
 - a. Is building a safety culture a priority for your practice administrators? Providers?
3. What about teamwork. How would you describe your practice in terms of working as a team? Is it effective?
 - a. What could be improved or strengthened?

Thank you for providing us with such great information. I would now like to ask you a few questions about your perspectives on patient and family engagement in your practice.

CONCEPT – PATIENT AND FAMILY ENGAGEMENT

4. What do you think that patient and family engagement means?
 - a. How would you define it?
 - b. What other terms would you use to describe engagement?
 - c. Are there examples of how you are currently working to engage patients and families in your practice?
 - d. Can you describe any that you feel are particularly successful?
5. Can you describe how patient and family engagement might be used to improve patient safety?
 - a. Is this from personal experience?

- b. If yes, can you describe that experience?
- c. Where did that happen? In your current practice?

Ok, we are getting there. I would like to go on and ask you some questions about your perceptions of how ready your practice is to implement a new approach to patient and family engagement.

CONCEPT – CHANGE MANAGEMENT

6. Is now the right time for implementing changes in your practice?
 - a. Are there any competing priorities for time, staff, or other resources?
 - b. If yes, can you describe those for me?
7. Is this intervention that aims to better engage patients and families in their care feasible and acceptable to the team?
 - a. What might get in the way of adopting a new practice at this time?
 - b. Is there anything that might help?
8. What about leadership. Are your leaders supportive of the change?
 - a. If you successfully implement the practice change, do you think that you will be able to sustain it long term?
 - b. Are the staff and the leadership on the same page when it comes to this intervention?
9. How is the practice planning on staffing the intervention? Is there a local champion for the work?
10. What about your patients. Do you think they are ready for this level of engagement? Why or why not?

CONCEPT – MEASUREMENT AND ASSESSMENT

11. Thinking about your current practice, will your practice be ready and able to measure the success of the intervention?
 - a. Does measured success matter in these types of interventions?
12. Have you participated in practice improvement activities in the past?
 - a. If yes, how have you measured success in past when you have implemented these interventions?
 - b. Were you successful? Why? Why not?

I think that is all that I have for you at this point. Do you have any other information that would be helpful for me to know? If yes, record the interviewee's responses.

If no, I want to thank you for taking the time to meet with me and providing your perceptions and observations on your practice. Have a nice day. Interview concludes.