

Attachment K: Workflow Mapping Follow-Up Interview Guide

OVERVIEW:

This process serves as a confirmation that the information documented during the workflow process mapping was captured correctly. The staff will be asked to correct, add, or confirm document's details during individual interviews depending upon participant availability. Each individual staff member will also be asked specific questions regarding potential breakdowns/errors identified in the process flow.

PARTICIPANTS:

Respondents will include primary care staff available at nine different primary care sites. JSI anticipates the participation of eight individuals at each primary care site who will represent a variety of roles such as primary care providers (PCPs), nurse practitioners (NPs), physician assistants (PAs), registered nurses (RNs), licensed practical nurses (LPNs), pharmacists, behavioral health providers, community health workers, and office staff.

The participating staff will be based on the staffing of the clinic and their availability to participate. Some of these staff may overlap with staff who were involved in the workflow mapping preliminary interviews and/or group interview. There will be no effort to recruit staff based on previous research participation or lack thereof; recruitment will be based on diversity of staff role type and availability.

MATERIALS:

In order to complete the data collection instrument, each participant will be provided the Project Summary for the Re-engineered Visit for Primary Care (AHRQ REV).

INSTRUMENT AND ADMINISTRATION:

One of the project investigator staff will interview staff in person or by phone to individually review and confirm the work flow mapping process document as well as answer a small number of follow up questions.

1. Does this process flow map accurately reflect your understanding of your clinic's post-discharge care transition process? If not, how would you change it?
2. When it comes to [TASK] (e.g. scheduling a follow-up appointment, reviewing the discharge summary with the patient):
 - a. What are the biggest barriers or challenges in making sure that [TASK] happens?
 - b. How bad would it be for the patient/practice if that [TASK] does not occur?
 - c. How frequently do you think [TASK] does not happen?

- d. Do you have any suggestions for how to remove or minimize [BARRIERS]? Or how to improve [TOOL/PROCESS]?

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