

Request for Approval under the “Generic Clearance for Preting” (OMB Control Number: 0935-0124)

OMB Supporting Statement: Attachment B - Health Information Technology Professional Interview Guide

TITLE OF INFORMATION COLLECTION: Interview Guide—Health Information Technology (IT) Professional

PURPOSE: To understand IT staff’s experience with the e-care implementation, semi-structured interviews will be conducted with up to seven IT staff members. There will potentially be six IT staff members (one from each site) and one from Oregon Health and Science university (OHSU). Interviews will be used to explore the participant’s perceptions on how the e-care plan app was implemented, their experiences with the app and implementation guide (IG), and whether the data in the app are accurate and appropriate.

DESCRIPTION OF RESPONDENTS: Target participants are health IT professionals across each site and at OHSU who have used the e-care plan app and IG.

TYPE OF COLLECTION: (Check one)

- | | |
|--|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., website or software) | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input checked="" type="checkbox"/> Other: <u>Interview</u> |

CERTIFICATION:

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low burden for respondents and low cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: Saira Haque

To assist review, please provide answers to the following questions:

Personally Identifiable Information:

- 1. Is personally identifiable information (PII) collected? Yes No
- 2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? Yes No
- 3. If Yes, has an up-to-date System of Records Notice (SORN) been published?
 Yes No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? Yes No

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Individuals	7	60/60	7 Hours
Totals			7

FEDERAL COST: The estimated annual cost to the Federal government is \$311.01

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents

- 1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe? Yes No

If the answer is yes, please provide a description of both below (or attach the sampling plan). If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them.

Potential respondents, who are health IT professionals, will be selected from across the participating clinics (seven total, one from each site and one from OHSU). The clinics will provide the names of participating staff.

Administration of the Instrument

- 1. How will you collect the information? (Check all that apply)

- Web-based or other forms of social media
- Telephone
- In person
- Mail
- Other, explain:

- 2. Will interviewers or facilitators be used? Yes No

Please make sure that all instruments, instructions, and scripts are submitted with the request.

Attachment B - Health Information Technology Professional Interview Guide

Introduction

Thank you for taking the time to meet with us today. I am [MODERATOR NAME] and will be leading this discussion. [NOTETAKER NAME] will be taking notes. Our team at RTI International, a nonprofit research institute, has been hired by The Agency for Healthcare Research and Quality (AHRQ) to assess the e-care plan app's usefulness. Although we are funded by the AHRQ, we are not part of that federal agency (or any other federal agency). We are independent evaluators and researchers.

Your participation is completely voluntary. Your name and title will not appear in any report. Although we are taking detailed notes, we would also like to audio-record the session in case we need to verify our notes. No visual (camera) recording will be done. The audio recording will be used only to ensure that our notes are complete and that we are accurately capturing your input. Recordings will be deleted after our notes are verified. Is this okay with you? We expect that this interview will take no more than 60 minutes. There are no right or wrong answers, and we are interested in your experiences. Are there any questions before we begin?

Discussion Questions

- Can you briefly describe your role and title?
 - Do you support one site or many?
- Can you please describe your role in the implementation of the e-care plan app?
- Overall, how was the process of implementing and using the e-care plan app?
 - Integration with the electronic health record (EHR)?
 - Any workarounds?
- What are the barriers and facilitators you encountered when integrating the e-care plan app into the health information technology (IT) system?
 - Organizational issues?
- Are there any technical barriers (i.e., how the app interacts with the clinic's EHR) that hinder or prevent use of the e-care plan app?
 - If so, what are they and how could they be addressed?
 - Fast Healthcare Interoperability Resources (FHIR®)-based server?
 - Data exchange?
 - Mapping data across systems?
 - Any issues with reading data?
 - Any issues with write-back capabilities?

Public reporting burden for this collection of information is estimated to average 60 minutes per response, the estimated time required to complete the **interview**. 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 (0935-0179) AHRQ, 5600 Fishers Lane, # 07W41A, Rockville, MD 20857.

- Were there any issues with the data that were collected or the transmission of data through the e-care plan app?
 - Were you easily able to pull data from the EHR into the app using common terminologies?
 - Were you easily able to transmit clinical data using the HL7 FHIR standard?
 - Did you run into data mapping issues?
- Did you use the implementation guide when implementing the e-care plan app?
 - If not, why not?
 - If so, what did you think of it?
- How useful was the implementation guide when implementing the e-care plan app?
 - If not useful, how could the guide be made more useful?
 - What information would you like to see in it?
 - Were there areas that were unclear?
- How did you navigate security concerns with implementation?
- Is there anything else you would like to share about your experiences implementing the app?
- If you were to give advice to another organization implementing the e-care plan app what would you tell them?
- Is there anything else you'd like to share about the implementation guide or the e-care plan app?