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# Virtual Integrated Multisite Patient Alighted Care Team (V-IMPACT) Comprehensive Evaluation and Review Patient Interview Guide

# OMB No. 2900-0770 Estimated Burden: 45 minutes

# Expiration Date: 9/30/2020

**The Paperwork Reduction Act of 1995:** This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Accordingly, we may not conduct or sponsor and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who complete this survey will average 45 minutes. This includes the time it will take to follow instructions, gather the necessary facts and respond to questions asked. Customer satisfaction is used to gauge customer perceptions of VA services as well as customer expectations and desires. The results of this telephone/mail survey will lead to improvements in the quality of service delivery by helping to achieve V-IMPACT services. Participation in this survey is voluntary and failure to respond will have no impact on benefits to which you may be entitled.

**Interviewer Name:**

**Date:**

**Time Start:**

**Time End:**

Hello [Mr./Ms. interview participant name],

Thank you for joining me today. My name is [interviewer name] and (*if relevant*) joining me is my co-worker [interviewer name]. I am part of a team that is interviewing Veterans about their experience getting VA medical care over Video. We’ve been asked to complete this work by the VA Office of Primary Care. The information you share with us will be confidential. Your name and any names mentioned today will not be used in any of our reports. Your providers will not know that you participated in this interview, and they will not know anything that you share with us. Information will be used to improve video health care at the VA.

The call will take approximately 25-45 minutes. Does that still work for you?

Your participation in this interview is completely voluntary. You can stop the interview at any time, and you do not have to answer a certain question if you do not want to. I want to let you know that if we learn you intend to harm yourself of others, we must report this information to the Veteran Crisis Line.

Do you have any questions?

To make sure we don’t miss anything and get the full benefit of our time today, we would like to audio record this call. The audio-file for the recording will be stored directly to a restricted access file on the VA secure computer system. Is this okay with you? **[Hit record button.]** Okay, to confirm, I’m starting the recording. Is this ok with you?

***Grounded prompts: If responses are limited or require clarification, probes may be used to elicit more detailed responses. Probes should use words or phrases presented by the participant using one of the following formats:***

***1. What do you mean by \_\_\_\_\_\_\_\_\_\_\_\_?***

***2. Tell me more about \_\_\_\_\_\_\_\_\_\_\_\_.***

***3. Give me an example of \_\_\_\_\_\_\_\_\_\_\_\_.***

***4. Tell me about a time when \_\_\_\_\_\_\_\_\_\_\_.***

***5. When did (they, you, it, etc) \_\_\_\_\_\_\_\_\_\_?***

***6. Where did (they, you, it, etc) \_\_\_\_\_\_\_\_\_\_?***

Before we get started, can you tell me if you have ever seen a provider, pharmacist, or mental health provider over video at the VA?

**If No** prompt the patient: Over the last few months, your last video appointment with a provider was on \_\_\_\_\_\_\_\_\_\_\_ add date of last VIMPACT appointment

1. Tell me about getting medical care at the VA.

**Probes:**

* 1. What type of care do you receive at the VA?
  2. How long have you been receiving care at the VA?
  3. [If thin description] Tell me about the most recent time you got medical care at the VA.
  4. What [else], if anything, makes getting care at the VA easy?
  5. What [else], if anything, makes getting care at the VA difficult?

1. Please describe a typical video appointment with a provider .
   1. **Probes:**
      1. Where were you for that video? (e.g., home, local VA clinic, community center, etc.)
      2. Tell me about the equipment or internet access used during your video appointment.
      3. Who was present during the video appointment? Were there family members, spouse or caregivers there with you during the video medical care visit?
   2. Have you seen that provider in person? What was that like?
2. Have you seen any other provider over video at the VA?

**If no,** then ask Have you seen a pharmacist or mental health provider?

**If no,** then skip to question 4

**If yes,** then ask

1. Please describe a typical video appointment with \_\_\_\_\_\_\_(add type of provider)

**Probes:**

1. Where were you for that video? (e.g., home, local VA clinic, community center, etc.)
2. Tell me about the equipment and internet access used during your video appointment.
3. Who was present during the video appointment? Were there family members, spouse or caregivers there with you during the video medical care visit?
4. Have you seen that provider in person? What was that like?
5. How does video medical care compare to face-to-face medical care at the VA?
   1. Are there issues or medical problems that are easier to address over video?
   2. Are there issues or medical problems that are harder to address over video?

1. What, if anything, about video medical appointment is most helpful?
2. What, if anything, about video medical appointment is least helpful?
3. Do you have any concerns about seeing your provider over video?
4. **FOR NON PC V-IMPACT VETS:** Since receiving video medical care, has your relationship with your primary care provider changed?
5. What could improve video care for Veterans?
6. Is there anything else we should know about getting medical care over video at the VA?
7. Do you have any questions for us?

Thank you for taking the time to participate in this interview. We really appreciate you sharing your experiences with getting medical care at the VA.