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# VISN 20 Specialty Access Initiative: Video Follow-Up Visits for Obstructive Sleep Apnea Therapy Patient Interview Guide

# OMB No. 2900-0770Estimated 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 talking with me today. My name is [interviewer name], and 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 Veterans Access to 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, or respiratory therapist 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 video CPAP visit with a respiratory therapist )

**Probes:**

* 1. Tell me about getting started on therapy with either CPAP or BiPAP?
	2. What [else], if anything, made getting sleep care at the VA easy?
	3. What [else], if anything, made getting sleep care at the VA difficult?
1. Please tell me about the recent video appointment you had to discuss your sleep apnea treatment.
	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. How did the visit affect your sleep apnea care?
		4. Who was present during the video appointment? Were there family members, spouse or caregivers there with you during the video medical care visit?
2. How does video sleep apnea care compare to face-to-face care at the VA?
	1. Are there issues or problems that are easier to address over video?
	2. Are there issues or problems that are harder to address over video?

1. Do you have any concerns about seeing your sleep providers over video?
2. What, if anything, about video sleep appointments are most helpful?
3. What, if anything, about video sleep appointments are least helpful?
4. What could improve sleep apnea video care for Veterans?
5. Is there anything else we should know about getting sleep apnea care over video at the VA?
6. 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.