CMS-10675 Appendix A.1

Medication Safety and Adverse Drug Event Prevention Survey Screenshots

Introduction

0%
Introduction and Informed Consent The Centers for Medicare and Medicaid Services, or CMS, is conducting this survey to learn about the resources that you find to be helpful for medication safety and preventing adverse drug events, defined as injuries resulting from medical interventions related to a drug. This includes medication errors, adverse drug reactions, allergic reactions, and overdoses. This survey is voluntary, you may stop participating in the survey at any time, and you do not have to answer every question. Neither your name nor the name of your business will ever appear in any reports from the findings. Your responses will remain private and will not in any way affect your business's relationship with CMS.
PRA Disclosure Statement
According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-XXXX (Expires XX/XX/XXXX) . The time required to complete this information collection is estimated to average 10-20 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850. ****CMS Disclosure**** Please do not send applications, claims, payments, medical records or any documents containing sensitive information to the PRA Reports Clearance Office. Please note that any correspondence not pertaining to the information collection burden approved under the associated OMB control number listed on this form will not be reviewed, forwarded, or retained. If you have questions or concerns regarding where to submit your documents, please contact [List Program Specific Contact].
Please click next to begin
Next

<u>Screener</u>

	S1.	In	what	state	do	you	current	ly	work?
--	-----	----	------	-------	----	-----	---------	----	-------

In what state do currently work?	
Select ~	
Next	

S2. Which of the following best describes your specific occupation within a medical practice/ pharmacy? Please select one.

5%
Which of the following best describes your specific occupation within a medical practice/ pharmacy? Please select one.
Medical Doctor (MD, DO, DPM; including PCPs and Specialists)
Nurse Practitioner
Physician Assistant
Registered Nurse
Pharmacist
Technician
Office/Practice Manager
Other
Next

S3. In what setting do you primarily work? Please select one.

9%		
In what setting do you primarily work? Please select one.		
O Acute-care hospital or general hospital		
O Specialty care hospital		
O Physician's office or group practice		
O Nursing home or long-term care facility		
O Urgent care center		
O Home health agency		
O Community or retail pharmacy		
O Rehabilitation center		
○ Other		
	Next	

S4. Approximately how many [INSERT "providers" OR "pharmacists"] are employed at your [INSERT "practice" or "community or retail pharmacy"]?

11%
Approximately how many providers are employed at your practice?
Next

S5. Is the [INSERT "practice" OR "pharmacy" depending on participant's setting] where you primarily work part of any of the following?

13%		
Is the practice where ye	ou prim	arily wo
	Yes	No
Health system	0	0
Network of practices	0	0

S6. Does your [INSERT "practice" OR "pharmacy" depending on participant's setting] have any programs or protocols in place to reduce or prevent adverse drug events among your patients/customers?

15%	
Does your practice have any programs or protocols in place to reduce or prevent adverse drug events among your patients/customers?	
O Yes	
○ No	
Next	

S7. How familiar are you with your [INSERT "practice's" OR "pharmacy's"] programs or protocols to reduce or prevent adverse drug events?

18%	
How familiar are you with your practice's programs or protocols to reduce or p	event adverse drug events?
O Very familiar	
O Somewhat familiar	
O Not very familiar	
O Not familiar at all	
Next	

S8. Has your [INSERT "practice" OR "pharmacy"] worked with or received assistance from any of the following organizations to develop programs or protocols to reduce or prevent adverse drug events?

20%	
Has your practice worked with or received assistance from any of the following organizations to develop programs or protocols to prevent adverse drug events?	o reduce or
An external consultant	
□ A government agency	
□ Telligen, the Quality Improvement Organization (QIO) in Illinois	
□ None	
Next	

S9. How long have you worked in the field of healthcare?

22%	
How long have you worked in the field of healthcare?	
O Less than 1 year	
○ 1 - 3 years	
○ 4 - 6 years	
○ 7 - 10 years	
○ More than 10 years	
	Next

S10. How many years have you been at your current position?

25%		
How many years have you been at your current position	n?	
O Less than 1 year		
○ 1 - 3 years		
○ 4 - 6 years		
○ 7 - 10 years		
○ More than 10 years		
	Next	

Survey Questions

I. <u>Quality Improvement Initiatives</u>

1. Since [for practices INSERT 'January 2015' OR for pharmacies INSERT 'September 2016'], has your practice begun or continued working on any quality improvement (QI) activities with the goal of reducing or preventing adverse drug events related to the following medications?

Since January 2015, has adverse drug events rela				ng on any quality improvement (QI) activities with the goal of reducing or preventing
	Yes, begun new QI activities	Yes, continued existing QI activities	No, haven't worked on QI activities	
Opioids	0	0	0	
Anticoagulants	0	0	0	
Diabetes medications	0	0	0	

2. How effective would you say your organization has been in reducing or preventing adverse drug events related to these medications?

6					
			har har i		
low effective would you		ganization	nas been ir	n reducing o	or preventin
	Not effective at all				Very effective
	(1)	2	3	4	(5)
Opioids	0	0	0	0	0
Anticoagulants	0	0	0	0	0
Diabetes medications	0	0	0	0	0
					Next

3. Does your [INSERT "**practice**" OR "**pharmacy**"] use any of these methods or activities for medication safety or prevention of adverse drug events?

31%
Does your practice use any of these methods or activities for medication safety or prevention of adverse drug events?
□ Audits of medical records against pharmacy orders
Medication reconciliation
Educating patients on opioid guidelines
Documenting and monitoring adverse drug event rates within your patients
□ Increasing access to Naloxone
Instituting electronic health record (EHR) or electronic medical record (EMR) populated notifications of drug interactions and/or allergies
□ Involving patients or their family members in your efforts to improve medication safety?
Coordinating with hospitals, skilled nursing facilities or other healthcare services around transfers of patients from these facilities
□ Risk assessment for opioid use disorders
Opiate or opioid agreements
□ Screening or review of data, reports or graphs for patients at risk for adverse drug events
□ Medication therapy management (MTM) coordination across health care settings
□ Training patients on ADE-related topics
Medication take-back events or appointments
Collaboration with a coalition or learning group in your community
□ Medication bag reviews
Teaching patients and family members how to identify and treat an adverse drug event
Pharmacist case management for patients with several medications
Medication management review
Other (Specify)
□ None
Next

4. How would you gauge the extent to which you involve [INSERT "patients" OR "customers"] or their family members in your efforts to improve medication safety?

34%
How would you gauge the extent to which you involve patients or their family members in your efforts to improve medication safety?
○ Do not involve recipients or family at all (1)
O 2
O 3
O 4
○ Highly involve recipients or family (5)
Next

5. To the best of your knowledge, was your [INSERT "practice" OR "pharmacy"] working in each of the following methods or activities before [for practices INSERT 'January 2015' OR for pharmacies INSERT 'September 2016']?

To the best of your knowledge, was your pr	actice	workin
o the best of your knowledge, was your pr		
Audits of medical records against	Yes	No
pharmacy orders	0	0
Medication reconciliation	0	0
Educating patients on opioid guidelines	0	0
Documenting and monitoring adverse drug event rates within your patients	0	0
Increasing access to Naloxone	0	0
nstituting electronic health record (EHR) or electronic medical record (EMR) populated notifications of drug nteractions and/or allergies	0	0
Involving patients or their family members in your efforts to improve medication safety?	0	0
Coordinating with hospitals, skilled nursing acilities or other healthcare services around transfers of patients from these acilities	0	0
Risk assessment for opioid use disorders	0	\circ
Opiate or opioid agreements	0	0
Screening or review of data, reports or graphs for patients at risk of adverse drug events	0	0
Medication therapy management (MTM) coordination across health care settings	0	0
Training patients on ADE-related topics	0	0
Medication take-back events or appointments	0	0
Collaboration with a coalition or learning group in your community	0	0
Medication bag reviews	0	0
Teaching patients and family members how to identify and treat an adverse drug event	0	0
Pharmacist case management for patients with several medications	0	0
Medication management review	0	0

II. Outcome Attribution to QIO

Section Introduction

;	38%
	The next several questions ask about different programs, organizations, and other resources your practice may have used when developing and implementing quality improvement activities related to preventing and reducing adverse drug events. These questions refer to your efforts since January 2015.
	Next

6. Please select the programs below that your **[INSERT "practice" OR "pharmacy"]** has used to promote medication safety or prevent adverse drug events.

ase select the programs below that your practice has used to promote medication safe Collaborative or Campaign for edicine Management (also known as N-QIO), or Telligen ansforming Clinical Practices Initiative CPI) oosing Wisely Campaign CO CPI
Yes No D Collaborative or Campaign for edicine Management (also known as N-QIO), or Telligen O ansforming Clinical Practices Initiative CPI) O
D Collaborative or Campaign for edicine Management (also known as N-QIO), or Telligen ansforming Clinical Practices Initiative CPI)
oosing Wisely Campaign O
eryone with Diabetes Counts (EDC) O O

Please select other national or state agencies/organizations that your [practice/pharmacy] use to promote medication safety or prevent adverse drug events.

	Yes	No	
State Prescription Drug Monitoring Program	0	0	
Illinois Board of Health	0	0	
Other resources from Illinois Department of Health	0	0	
Agency for Health Research and Quality (AHRQ)	0	0	
Substance Abuse and Mental Health Services Administration (SAMHSA)	0	0	
National Quality Forum	0	0	
Other federal/state agency 1.	0	0	

Did your ["practice" OR "pharmacy"] use information and resources from any of these organizations?

		from a
	Yes	No
The American Diabetes Association	0	0
The American Heart Association	0	0
The American Medical Association, American College of Physicians or American Academy of Family Physicians	0	0
The American Medical Group Association (AMGA)	0	0
Other organization/resource 1	0	٥
Other organization/resource 2	0	0

Here are some other resources that may have been used when working or reducing ADEs. Please check if your organization uses any of the following.

ere are some other resources that may have	e been	used when working	n reducing ADEs.	5. F	Please check i
V		N.			
		No			
	0	0			
Electronic medical record/electronic health cecord software and software provider	0	0			
The Joint Commission C	0	0			
Epocrates	0	0			
Point-of-care references such as JpToDate and DynaMed	0	0			
External consultant C	0	0			
Academic or trade journal/conference	0	0			
deas and initiatives developed by your practice's own staff.	0	0			
Other source 1	0	0			
Other source 2	0	0			

7. You indicated that the sources of information below helped with your efforts to reduce adverse drug events. Please indicate how **helpful** you found each resource in your quality improvement efforts to improve medication safety and reduce adverse drug events.

In other words, how much would you say each program contributed to your organization's ability to promote medication safety or prevent adverse drug events since [for practices display 'January 2015' for pharmacies display 'September 2016']?

You indicated that the sources of information below helped with your efforts to reduce adverse drug events. Please indicate how **helpful** you found each resource in your quality improvement efforts to improve medication safety and reduce adverse drug events.

In other words, how much would you say each program contributed to your organization's ability to promote medication safety or prevent adverse drug events since January 2015?

	Very helpful	Somewhat helpful	A little helpful	Not at all helpful
QIO Collaborative or Campaign for Medicine Management (also known as QIN-QIO), or Telligen	0	0	0	0
Transforming Clinical Practices Initiative (TCPI)	0	0	0	0
Choosing Wisely Campaign	0	0	0	0
Everyone with Diabetes Counts (EDC)	0	0	0	0
State Prescription Drug Monitoring Program	0	0	0	0
Illinois Board of Health	0	0	0	0
Other resources from Illinois Department of Health	0	0	0	0
Agency for Health Research and Quality (AHRQ)	0	0	0	0
Substance Abuse and Mental Health Services Administration (SAMHSA)	0	0	0	0
National Quality Forum	0	0	0	0
The American Diabetes Association	0	0	0	0
The American Heart Association	0	0	0	0
The American Medical Association, American College of Physicians, or American Academy of Family Physicians	0	0	0	0
The American Medical Group Association (AMGA)	0	0	0	0
Health system leadership	0	0	0	0
Electronic medical record/electronic health record software and software provider	0	0	0	0
The Joint Commission	0	0	0	0
Epocrates	0	0	0	0
Point-of-care references such as UpToDate and DynaMed	0	0	0	0
External consultant	0	0	0	0
Academic or trade journal/conference	0	0	0	0
Ideas and initiatives developed by your practice's own staff.	0	0	0	0

Next

^{50%}

7aa. Which sources of information, design or assistance had the most impact on your [INSERT "practice's" OR "pharmacy's"] ability to medication safety or prevent adverse drug events since [for practices display 'January 2015' for pharmacies display 'September 2016"]?

Which sources of in events since Januar	formation, design or assistance had the most impact on your practice's ability to medication safety or prevent adverse drug y 2015?
O QIO Collaborative	or Campaign for Medicine Management (also known as QIN-QIO), or Telligen
O Transforming Clin	ical Practices Initiative (TCPI)
O Choosing Wisely (Campaign
O Everyone with Dia	betes Counts (EDC)
O State Prescription	Drug Monitoring Program
○ Illinois Board of H	ealth
○ Other resources fr	rom Illinois Department of Health
O Agency for Health	Research and Quality (AHRQ)
O Substance Abuse	and Mental Health Services Administration (SAMHSA)
O National Quality F	orum
O The American Dia	betes Association
O The American Hea	art Association
O The American Me	dical Association, American College of Physicians, or American Academy of Family Physicians
O The American Me	dical Group Association (AMGA)
O Health system lea	dership
 Electronic medica 	I record/electronic health record software and software provider
O The Joint Commis	ssion
○ Epocrates	
○ Point-of-care refe	rences such as UpToDate and DynaMed
O External consultar	nt
O Academic or trade	e journal/conference
O Ideas and initiativ	es developed by your practice's own staff.

7a. Why was [INSERT TOP SOURCE] the most helpful source of information?"

54%		
Why was Group/health system leadership the most help	oful source of information?	
	Next	
	Next	

III. Participation in QIN-QIO activities for non-QIO Practice/Facilities/Pharmacies

8. Before this survey, had you ever heard of <u>Quality Improvement Organizations</u>, otherwise referred to as QIOs?

56%	
Before this survey, had you ever hear	d of <u>Quality Improvement Organizations</u> , otherwise referred to as QIOs?
O Yes	
O No	
	Next

9. Before this survey, had you ever heard of [INSERT NAME OF LOCAL QIO]?

59%		
Before this survey, had you ever heard of Telligen?		
O Yes		
O No		
	Next	

10. Has your organization **participated in any activities** with [INSERT NAME OF LOCAL QIO], the Quality Improvement Organization in [INSERT STATE] (such as technical assistance using data, Learning and Action Networks or webinars)?

61%
Has your organization participated in any activities with Telligen, the Quality Improvement Organization in Illinois (such as technical assistance using data, Learning and Action Networks or webinars)?
O Yes
O No
Next

IV. Interaction with the QIN-QIO

Section Introduction

63%		
These questions are about your interaction with the QIO that serves your area.		
Next		

11. How long has your [INSERT "practice" OR "pharmacy"] worked with [INSERT NAME OF LOCAL QIO Based on Sample Variable 'QIO']?

65	
	How long has your practice worked with Telligen?
	○ Before January 2015
	O Since January 2015
	Next

12. How much do you agree or disagree with the following statement?

My organization benefits from participating with [INSERT NAME OF LOCAL QIO. Based on Sample Variable 'QIO']

68%	
How much do you agree or disagree with the following statement? My organization benefits from participating with Telligen	
O Strongly disagree	
O Somewhat disagree	
O Neither agree nor disagree	
○ Somewhat agree	
O Strongly agree	
Next	

12a. Please explain why you disagree with this statement

70%		
Please explain why you disagree with this statement		
	Next	

13. Do you know whom to contact at [INSERT NAME OF LOCAL QIO Based on Sample Variable 'QIO'], if you wanted help or advice from them on improving medical safety, or preventing ADEs?

72%	
Do you know whom to contact at Telligen, if you wanted help or advice from them on improving medical safety, or preventing ADEs?	
O Yes	
O No	
Next	

14. Approximately how many times did you or someone at your organization participate **in one-on-one or small group meetings** with someone from [INSERT NAME OF LOCAL QIO Based on Sample Variable 'QIO'] on the phone, through email exchanges, or in-person in the past twelve months?

75%				
Approximately how many times did you or someone at your organization participate in one-on-one or small group meetings with someone from				
Telligen on the phone, through email exchanges, or in-person in the past twelve months?				
Next				

15. **Apart from one-on-one exchanges**, did your organization take part in meetings led by [INSERT NAME OF LOCAL QIO. Based on Sample Variable QIO] with other healthcare providers and pharmacists in the community, such as those working in hospitals, nursing homes, home health agencies or other types of healthcare providers?

Apart from one-on-one exchanges, did your organization take part in meetings led by Telligen with other healthcare providers and pharmacists in the community, such as those working in hospitals, nursing homes, home health agencies or other types of healthcare providers?
O Yes
○ No
Next

16. Approximately how many times did you or someone from your organization participate in **meetings with these other healthcare providers or pharmacists** in the past twelve months?

79%		
Approximately how many times did you or someone pharmacists in the past twelve months?	from your organization participate in meetings with these other healthcare provide	ers or
	Next	

17. How much do you agree or disagree with the following statements about these meetings organized by [INSERT NAME OF LOCAL QIO. Based on Sample Variable QIO]?

low much do you agree or disagree with t	he following :	statements ab	out these me	etings organi	zed by Telliger	1?
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	
Participants in these meetings act as a collaborative or coalition to increase coordination of care and/or reduce ADEs	0	0	0	0	0	
Members actively participate in the meetings	0	0	0	0	0	
If tasks need to be completed before the next meeting, members assume lead responsibility for tasks	0	0	0	0	0	
Members actively plan, implement, and evaluate activities	0	0	0	0	0	
Members commit a sufficient amount of time to achieve goals and nurture the collaboration	0	0	0	0	0	

V. <u>Activities and Resources Provided By QIN-QIO</u>

18. Please indicate to the best of your knowledge whether your [INSERT "practice" OR "pharmacy"] has used any of the following resources that may be provided by your QIO:

rease indicate to the best of your kin	owledge whether your practice has used any of the followi	ng resou	urces th	at may be	provided by your C
		Yes	No	Don't Know	
Data on adverse drug event-related hospitalizations or readmissions in your area			0	0	
Resource materials such as tool kits on preventing ADEs from anticoagulants, diabetes agents, or opioids, or links to information online			0	0	
Technical assistance with collecting data			0	0	
Technical assistance on using data to monitor potential ADEs or occurrence of ADEs with patients			0	0	
Conference calls			0	0	
Meetings or webinars on a specific topic			0	0	
Any other general engagement or information resources?	Other Resource 1:	0	0	0	
	Other Resource 2:	0	0	0	
	Other Resource 3:	0	0	0	

19. Overall, please mark the response that best describes your organization's level of engagement with medication safety technical assistance and resources provided by [INSERT NAME OF LOCAL QIO] since [for practices insert "January 2015" OR for pharmacies insert "September 2016"].

icase indicate to the best of your kin	owledge whether your practice has used any of the follow	ing reso	urces th	at may be p	ovided by your Q
		Yes	No	Don't Know	
Data, reports or graphs on adverse drug event-related hospitalizations or readmissions in your area				0	
Resource materials such as tool kits on preventing ADEs from anticoagulants, diabetes agents, or opioids, or links to information online			0	0	
Technical assistance with collecting data			0	0	
Technical assistance on using data to monitor potential ADEs or occurrence of ADEs with patients			0	0	
Conference calls			0	0	
Meetings or webinars on a specific topic			0	0	
Any other general engagement or information resources?	Other Resource 1:	0	0	0	
	Other Resource 2:	0	0	0	
	Other Resource 3:	0	0	0	

20. What quality improvement areas related to medication safety or adverse drug events is your [INSERT "practice" OR "pharmacy"] most in need of for additional assistance?

Please provide enough detail so that CMS can understand what type of assistance you would need for this quality improvement area.

90%	
What quality improvement areas related to med	lication safety or adverse drug events is your practice most in need of for additional assistance?
Please provide enough detail so that CMS can u	understand what type of assistance you would need for this quality improvement area.
	Next

21. How useful would it be for your [INSERT "practice" OR "pharmacy"] to adopt each of the following practices? [Only for respondents who chose No for Q6a and Q10]

low useful would it be for your practice to	adopt each o	f the following	g practices?	
	Very helpful	Somewhat helpful	A little helpful	Not at all helpful
Screening or review of data, reports or graphs for patients at risk of adverse drug events	0	0	0	0
Medication reconciliation	0	0	0	0
Pharmacist case management for patients with several medications	0	0	0	0
Medication management review	0	0	0	0
Instituting electronic health record (EHR) or electronic medical record (EMR) populated notifications of drug nteractions and/or allergies	0	0	0	0
Medication bag reviews	0	0	0	0
Medication take-back events or appointments	0	0	0	0
Medication therapy management (MTM) coordination across health care settings	0	0	0	0
Risk assessment for opioid use disorders	0	0	0	0
Opiate or opioid agreements	0	0	0	0
Collaboration with a coalition or learning group in your community	0	0	0	0
Educating patients on opioid guidelines	0	0	0	0
Teaching patients and family members how to identify and treat an adverse drug event	0	0	0	0
Coordinating with hospitals, skilled nursing facilities or other healthcare services around transfers of patients from these facilities	0	0	0	0
Training patients on ADE-related topics	0	0	0	0
Documenting and monitoring adverse drug event rates within your patients	0	0	0	0
Involving patients or their family members in your efforts to improve medication safety?	0	0	0	0

<u>End</u>

93%		
Thank you for your time and for sharing your experiences.		
	Next	

100%

Those are all the questions we have for you today. Thank you for your time.

All information you provide is kept strictly confidential and is used for research purposes only.