

Base Draft Interview Guide

This interview guide will be refined to reflect differences between frontline healthcare workers and Antibiotic Stewardship Leads. It will also be refined to reflect differences between acute, long-term care and ambulatory settings. These are the core domains. This can also be amended for length and comprehensibility of questions.

Warm Up/Demographics

- What is your job title?
- How long have you been working at this hospital?
- What is your background education and training in?
- What year did you start practicing independently (post-training, i.e. residency and/or fellowship)?
- In your own words, what is antibiotic stewardship? Have you heard this phrase before? If yes, what does it mean to you?

Implementation of CUSP-Antibiotic Stewardship Intervention

To be asked in Baseline Period

- Does your facility have any antibiotic stewardship efforts underway? If yes, what are they?
- How ready do you think your facility is to implement the AHRQ Safety Program for Improving Antibiotic Use?
- Do you anticipate that there will be any challenges to implementing the Antibiotic Stewardship Intervention? If yes, what are they?
- Do you think it is necessary for your facility to implement this intervention? Please explain.
- What other patient safety and quality improvement initiatives are going on at your facility?
- How much leadership support do you feel that you have for improving patient safety and quality?
- What could leadership be doing better, if anything, and what do you think the barriers are to getting them involved?

To be asked at end of Intervention Period

- What are the greatest successes and/or challenges you have experienced in implementing the AHRQ Safety Program for Improving Antibiotic Use?
 - *ADD SPECIFIC QUESTIONS HERE ABOUT DIFFERENT ELEMENTS OF INTERVENTION – EDUCATIONAL MODULES, FAMILY EDUCATION MATERIALS, “NUDGE” POSTERS, TIME OUTS, CHECKLISTS, POCKET CARDS, ETC.*

Prescribing Etiquette, Social Norms and Decision-Making Around Antibiotics

To be asked in Baseline and end of Intervention Periods

- What are the biggest barriers to the more judicious use of antibiotics in your practice?
- What are the biggest facilitators of more judicious use of antibiotics in your practice?

- How do you view your own antibiotic prescribing levels and patterns in relation to others?
- Would you characterize yourself as liberal or conservative when it comes to using antibiotic prescribing? (*Need to discuss this concept with the team so it is meaningful to respondents – it is an area I’m interested in and can explain more*)
- Do you feel you have had sufficient education and training on antibiotic prescribing and management?
- Do you feel that you can comment on the antibiotic prescribing decisions of your colleagues?
- Who, in your view, is responsible for making sure the prescribing and management of antibiotics is optimal?
 - How clear do you think this responsibility is?
- What do you think could be done on an organizational level to improve antibiotic prescribing?
- How do you decide what type of antibiotics to prescribe?
- Are there specific patient groups that you are more likely to prescribe antibiotics to than others?
- If you decide not to prescribe an antibiotic, what are the alternatives you consider?
- How do you keep up to date on new information about antibiotics? What sources do you consult?
- What are your thoughts about the future of antibiotics?

The Role of Nursing in Stewardship

To be asked in Baseline Period and at end of Intervention Period

- What role do you think nurses can play in improving antibiotic prescribing? How, specifically, might they impact the use of antibiotics in your facility?

To be asked at end of Intervention Period

- Did participation in the intervention change your opinion about how nurses and others who are not directly responsible for prescribing can contribute to improving antibiotic use?

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