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*Evaluating and Implementing the Six Building Blocks Team Approach to Improve Opioid Management in Primary Care*

Attachment B

**Staff Interview Guide – QI Lead**

Version: December 12, 2019

Public reporting burden for this collection of information is estimated to average 15 minutes per response, the estimated time required to complete the survey. 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-XXXX) AHRQ, 540 Gaither Road, Room # 5036, Rockville, MD 20850.

Public reporting burden for this collection of information is estimated to average 60 minutes per response, the estimated time required to complete the survey. 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-XXXX) AHRQ, 540 Gaither Road, Room # 5036, Rockville, MD 20850.

## Introduction

Hello, I’m (*NAME*) from Abt Associates. Thank you for taking the time to speak with us. I have [insert name(s)] on the phone with me.

As a reminder, Abt Associates is working with the Agency for Healthcare Research and Quality (AHRQ) to support implementation of the Six Building Blocks model for safe opioid prescribing. This 60-minute interview aims to get a better understanding of your organization’s experiences with implementing the Six Building Blocks and progress toward making changes within your organization.

## Oral consent

Before we begin, I want to read a few points about this interview:

* Your participation is voluntary.
* This interview will last approximately 60 minutes.
* Your name and affiliation will be shared with AHRQ and included in the acknowledgements in any report or publication; however, we will not attribute our findings to you or your organization explicitly.
* You can decline to answer any question, without affecting your continued participation in the interview or your relationship with the AHRQ.
* The researchers do not foresee any possible risks from participating in this interview.

We also would like to record the interview so we do not miss anything. The recording will not be shared with anyone outside Abt Associates or AHRQ.

* Do you have any questions before we get started?
* May we record this interview? Yes \_\_\_\_\_ No \_\_\_\_\_

Introduction

1. Please describe your role at your practice and how long you’ve been in this role.
	1. What is your experience with quality improvement?
	2. How does this project fit into your role at the organization?

Opioid Prescribing Policies and Practices

1. Please briefly describe the population of patients with chronic pain that your organization cares for.

Probes: proportion of patients with chronic pain; proportion of patients with chronic pain on long-term opioid therapy; proportion of LtOT patients on high doses; proportion of LtOT patients who see pain specialists vs are managed by primary care; types of pain for which patients are on long-term opioids, SES, co-occurring substance abuse, etc.

1. Please provide a brief summary of your organization’s process for managing patients with chronic pain.
	1. Patients with chronic pain on LtOT?
	2. What do you consider to be the most important or effective prescribing and monitoring practice(s) for patients with chronic pain on LtOT and where do you think there is room for improvement?
2. Have there been any significant changes over the course of your organization’s participation in the Six Building Blocks project in your state, system, or practice that have impacted what you have been able to accomplish? If so, what are they and how are they impacting your organization?
	1. Probes: changes in leadership, staff turnover, changes to EMR/EHR, changes in state prescribing laws
	2. Have the impacts been positive or negative?
3. Can you talk a little about how the work you’re doing under the Six Building Blocks fits within the other initiatives your clinic/organization has going on?
	1. How is it complementary; how is it different?
4. We know you’ve been working on [insert initiatives from check-in calls]. Walk us through how you and your organization have been implementing these changes.
	1. Strategies used, processes implemented
	2. Use of the 6BBs toolkit
	3. Changes to the EHR
	4. Specific opioid management interventions implemented
	5. What sorts of things helped to move the work forward?
		1. Probes: external incentives; resource allocation; organizational culture/climate around change and QI; knowledge and beliefs around recommended opioid management practices
	6. What held it back?
		1. What methods and/or strategies were used to overcome barriers?
5. Have you monitored or evaluated your efforts?
	1. What specifically do you measure and how?
	2. What data do you use? Where do those data come from? Where are those data stored or captured?
	3. How regularly are the data collected/updated? How regularly are the data measured?
	4. What measures would you like to monitor but have not been able to? Why not?
6. Reflecting on the changes you’ve made as a result of participating in the Six Building Blocks project, what do you see as the key benefits?
7. For the practice overall?
8. For providers?
9. For staff?
10. For patients?
11. Have there been any negative consequences of the changes you’ve made as a result of participating in the Six Building Blocks project?
12. For the practice overall?
13. For providers?
14. For staff?
15. For patients?
16. What will help the new changes you’ve implemented continue or become part of routine practice?
	1. What could make them fade over time?
17. When we launched this project, we noted that your organization’s goals for participating were [INSERT FROM NOTES]. To what extent have you met those goals so far?
	1. Why do you think you were successful, or not? Were there other important accomplishments that were not a part of your original goals? What else do you still aim to accomplish?
18. What surprised you about the work? Were there any challenges that were anticipated but turned out not to be a big deal?
19. How do you think attitudes toward patients on LtOT have changed through the implementation of this quality improvement initiative?
20. Among the medical providers?
21. Among the staff?
22. For you?

6BBs How-To-Guide

1. To what extent have you, or your organization used the How-To-Guide?
	1. What are your experiences with using it to date?
2. When you reflect on the How-To-Guide, what parts stand out as particularly helpful for the work you are doing and why?
3. Which parts are not all that helpful? Why?
4. If you were able to make your own adaptations to the How-To-Guide, how would you change it?
	1. Would adding case studies of clinics that have implemented the 6BBs be helpful for illustrating how to use the guide?
5. What areas or sections of the guide left you feeling like you needed more guidance, resources or information?

Lessons Learned/Takeaways – [ASK AT FOLLOW-UP ONLY]

1. What are the key lessons you would share with other primary care clinics considering using the Six Building Blocks?
2. If you were starting this project over again, what would you do differently?
3. What additional support, guidance, assistance, or information would have been needed to support this work?
4. What do you think are critical resources for primary care clinics to have before taking on the Six Building Blocks or early on in the project or during the process of implementation?
5. Within the clinic?
6. Within the health care team?
7. Outside the clinic?
8. Is there anything else that we haven’t covered that you would like to share with us?