Interview Topic Outline

Thank you for taking the time to talk with us today about your embedded research. We work for the Agency for Healthcare Research and Quality. We are conducting an exploratory study of promising ways health systems can conduct embedded research. Our interview with you will contribute to a case study of embedded research within your organization or delivery system. The resulting illustrative case studies will likely stimulate further research, along with discussion at AHRQ and at other agencies and among health care leaders about strategies for supporting and conducting embedded research, including ways to prepare researchers to conduct this type of research.

We will audio record this interview and take notes during our conversation to make sure we accurately capture what was said. But we will not connect your name with anything that you say today, including in our notes, presentations, and papers. We are using numbers to identify each interview – this is interview #X.

[Provide consent form and ask for oral permission.]

Do you have any questions before we begin?

I. Introduction and Overview of Research Activities

Introduction/Getting to Know You

- 1. Tell me about your connection to embedded research within your organization/system (i.e. your role in overseeing, using, or conducting embedded research).
- 2. Please tell me about how your career and professional background relate to embedded research.

Setting Priorities/Initiating

- 3. Can you tell me about your health system's embedded research program's goals? [Probe for length of time system has had embedded research, topics, scale (units involved), and internal location(s) of embedded research oversight.]*
 - a. What is the process for deciding on embedded research topics? [Nominations? Prioritization? Evaluation? Decision-making?]
- 4. Have there been changes in the scope, topics, goals, process, and internal organization of embedded research in the last five years? If so, please describe them.
- 5. (If not mentioned), Has your system taken part in embedded research projects that also include other systems (please describe)?

Funding

- 6. How is embedded research funded?
 - b. Internal health system funding?
 - c. External funding (if so from where)?
 - d. Mix?
 - e. Justifications for system funding, e.g., improved performance, income from overhead on funded grants, "community benefit spending" [for 501(c)(3) hospitals]¹
 - f. Other types of support [e.g. infrastructure, IRB, mentoring]?
- 7. What is the history of funding for embedded research?
 - g. (if not evident from question 6) Has the funding changed over time?
- 8. What types of external research funding do you currently receive that would be most helpful to your system as it develops/sustains its embedded research?
- h. [Probe: training; funding for specific projects, types?; funding for capacity development] Leadership
 - 9. How, if at all, do executive level leaders relate to and use embedded research?
 - 10. How do mid-level, <u>operational leaders</u> (e.g. administrators of divisions or units) work with embedded research?
 - 11. Please describe any linkages between clinical leadership and embedded research.

¹ The IRS requires 501(c)(3) hospitals to provide charitable community benefits in exchange for their tax exemption. Under the Affordable Care Act, tax-exempt hospitals must conduct community health needs assessments every three years and develop a plan to implement strategies to address those needs. Source: https://nashp.org/states-work-to-hold-hospitals-accountable-for-community-benefits-spending/. Some systems define embedded research as a community benefit.

Staffing, Skills, Expertise, & Collaboration

- 12. How many # staff /FTE are currently engaged in embedded research?
- 13. To what extent have # staff/FTEs varied over last 2 years?
- 14. What are the skillsets and expertise of the staff?
- 15. While conducting their research, whom do the researchers work with -- both within and outside of the organization? [Probe for typical team size, composition]

Management and Impact

- 16. What is your system's process for managing and overseeing research?
- 17. What has been the results, effects, and impacts of your embedded research program?
 - a. Successes?
 - b. Areas for improvement?
 - c. Extent that the embedded research has contributed to health care operational decisions
 - d. Changes in the way that clinical, operational, or executive leaders relate to research and to improvement and innovation? [Probe for effects on values, attitudes, capacities.]
- 18. Other impacts on practices; external funding or recognition; other?
- 19. Where do you see embedded research in your organization headed in the next few years?

Other Factors

- 20. Are there any other important factors that are shaping current embedded research activities or planned changes in this area? (E.g. changes in leadership, ownership)?
- 21. What external developments or influences currently affect your organization's embedded research activities (e.g. funding, changes in payment)?

II. Describe Two Example Research Projects

Prior to the call, we will ask the interviewees to choose two projects to discuss on this call, one project that they consider to be successful and a 2^{nd} one that they believe is indicative of recurring challenge/s in how they conduct embedded research.

22. Describe <u>a successful</u> example project

- a. project origins initiators/champions for the topic/issue
- b. funding sources;
- c. other support (e.g., infrastructure)
- d. user & management responses/engagement
- e. procedures/staffing/organization of project [including team organization; scale- units affected]
- f. feedback to users/managers
- g. time frame and stages or milestones after approval
- h. impacts/results/effects
- i. use of findings/changed practices in other parts of the organization (spread)
- j. problems/challenges
- k. sustainment

23. Describe a project that is indicative of one or more recurring challenges

- a. project origins initiators/champions for the topic/issue
- b. funding sources;
- c. other support (e.g. infrastructure)
- d. user & management responses/engagement
- e. procedures/staffing/organization of project [including team organization; scale- units affected]
- f. feedback to users/managers
- g. time frame and stages or milestones after approval
- h. impacts/results/effects
- i. use of findings/changed practices in other parts of the organization (spread)
- J. problems/challenges
- k. Sustainment
- I. Ways that problems/challenges were handled
- m. Lessons learned.
- 24. To wrap up, do you have any information or feedback to AHRQ relating to the training of embedded researchers or ways that funding opportunities influence your system's embedded research program?

This interview is authorized under 42 U.S.C. 299a. The confidentiality of your responses to this survey is protected by Sections 944(c) and 308(d) of the Public Health Service Act [42 U.S.C. 299c-3(c) and 42 U.S.C. 242m(d)]. Information that could identify you will not be disclosed unless you have consented to that disclosure. Public reporting burden for this collection of information is estimated to average 60 minutes per response, the estimated time required to complete the interview. 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, 5600 Fishers Lane, Room #07W42, Rockville, MD 20857.

^{*} Items in brackets illustrate possible additional probes, to be used as needed.