Form Approved OMB No. 0935-XXXX Exp. Date XX/XX/20XX

PC CDS Learning Network: Contributor

This protocol will be used for Contributors to PCCDS LN Workgroup Products, including the Trust Framework, Opioid Action Plan, and Sustainability Plan.

Introduction/Consent

- Introduce members of group.
- Thank you very much for your time today.
- NORC at the University of Chicago is a not-for-profit research organization, and we are working with the Agency for Healthcare Research and Quality (AHRQ) as the independent evaluator of the Patient Centered Outcomes Research (PCOR) Clinical Decision Support (CDS) Initiative.
- I am going to be leading this interview, but others may chime in with follow-up questions.
- Just a few things before we get started.
 - O Your participation is voluntary and you can conclude the discussion at any time. We are interested in your opinions it is completely okay for you not to answer any questions that you do not want to. There are no wrong answers to the questions I will ask.
 - O We will not attribute anything you have to say as coming from you personally. We will keep your name confidential in any summaries or reports we make available to AHRQ or the public.
 - You are also free to make comments "off record" in which case we will only consider them as background.
 - We have scheduled this meeting to last [x] minutes. **If you need to stop for any reason**, that is fine. We know you are busy and may schedule a follow up interview or e-mail you to address any unanswered questions. We appreciate your participation.
- We have **a member of our team from NORC taking notes** so we can write our reports, and we would like to make an **audio recording** to help make sure we capture everything correctly. The notes and recording will only be used by NORC to write our reports.
- Do you offer your consent to participate in the interview, and are you okay with us recording our conversation?
- Do you have any questions before we begin?

This survey 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 XX 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, 5600 Fishers Lane, Room #07W42, Rockville, MD 20857.

Overview

- Could you please start by introducing yourself, and your organization?
- How did you hear about AHRQ's PCOR CDS Initiative and the PC CDS LN?
- How were you involved in the PC CDS LN?
- Why and how did you become involved in the PC CDS LN?
 - O How much time did it take for you, and how invested did you find yourself in it?
- What is your understanding of PC CDS?
- To what extent do you think the PCOR CDS Initiative has made a contribution to the development of this type of CDS?
 - o What about the PC CDS LN specifically?

Learning Activities

- Could you please tell me about the PC CDS LN's learning activities (e.g. annual meetings, workgroups) that you participated in?
 - O How did you get involved with the PC CDS LN?
 - O Did you find these activities constructive?
 - O What was your experience like participating in these activities?
 - O Did you observe anything you thought was new or different for the field of CDS development?
 - O Anything particularly successful or difficult?
 - O Did your participation in these activities impact your work outside of the PC CDS LN?
 - What were the barriers and facilitators encountered by each of the workgroups as they worked to achieve their objectives?

Products and Dissemination

- Did you contribute to any of the PC CDS LN's products (e.g. the environmental scan, AFA framework, the trust framework, opioid action plan)?
 - O Would you please describe your role in the development?
 - O Would you please describe the process for creating the product?
- Have you been involved in the tool/report's dissemination, i.e., by sharing it with your networks, reposting it to social media, presenting it at conferences, publishing on it?
 - **o** Are you aware of how widely this tool/report has been disseminated?
- What impact do you hope that this tool/report will make, and have you observed any impact of it to date?

Patient and Clinician Engagement

[For Patients/Caregivers/Patient Advocates]

- Were your contributions integrated into the PC CDS LN products/activities? If so, how?
- How important is it for CDS to have incorporated patient or caregiver preferences?

[For Clinical Staff]

• How did your clinical experience impact your contributions to the PC CDS LN?

Impact

- Has the PC CDS LN had an impact on...
 - o ...you or your organization? Why or why not?
 - o ...the field of CDS development? Why or why not?
 - 0 ... attitudes toward or interest in shareable, standards-based, interoperable, patient-centered CDS? Why or why not?
- From your perspective, have the activities of the PC CDS LN (e.g. trust framework) impacted other components of AHRQ's CDS Initiative?
 - Are there any other examples of how the PC CDS LN impacted other aspects of AHRQ's PCOR CDS Initiative?

Sustainability

Attachment F

- Since the PC CDS LN initiative ended, have you continued working with other members of the group? On what?
- Are there any barriers and/or facilitators to sustaining the work of the PC CDS LN? If yes, please describe.