

## Quantifying Efficiencies - Leader

This protocol will be used for AHRQ Project Officers, Medstar PIs, and site leaders.

### 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.
  - o 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.

## Opening

- Could you please start by introducing yourself, and your organization?
- Please describe your role in the Quantifying Efficiencies project.
- What is your personal or organizational experience with CDS development and/or implementation?
- Had you been involved in any of the other components of the AHRQ PCOR CDS Initiative, like the Learning Network or CDS Connect, including its workgroups?
  - How did you hear about the PCOR CDS Initiative, and about the Quantifying Efficiencies opportunity?
  - How long were you involved, and what were those experiences like?
- 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?
  - What about the Quantifying Efficiencies component specifically?

## Site Specific CDS Project

### Overview

- From your final report, we learned that [X] of artifacts were selected and implemented in [Y] sites, and that these artifacts were designed to accomplish [Z].
- What criteria did you use in selecting sites?
- How were CDS artifacts selected to integrate at each site?
  - What types of providers did you intend to use these artifact?
- How important was it that the CDS be patient-centered when making the selection? To what extent were these CDS patient-centered and why?

### Implementation

- To what extent did the sites need to invest in any new technology to integrate the CDS artifact into your EHR?
- What methods did you use to document the effort involved in integrating CDS into each site?
  - What methods were particularly successful, and what was challenging?
- Were there any other resources required to integrate the CDS artifact into your EHR?
- Did you anticipate any technical challenges to implementing your CDS artifact?
  - Did you encounter these challenges?
  - Did you identify additional challenges while implementing your CDS artifact?

Based on your experience implementing CDS artifacts, are there any technical considerations that developers need to address when adapting artifacts from CDS Connect for a local environment?

- What were the primary barrier and facilitators to implementing CDS during your pilot?

### Impact

- Roughly, how many patients were affected by the CDS?
  - Were they aware of the CDS?
    - If yes, how did they interact with the CDS?
- Have you/the pilot site continued to use the artifact as planned since the contract concluded? If not, please provide background to any changes made or to discontinuing use of the artifact.
  - Why or why not?
  - If so, what has been your experience?
- Has the CDS artifact been implemented more broadly within your health system?
- Have you shared the CDS artifact with anyone outside of your health system?
  - If yes, with whom?
- To what extent has the CDS artifact impacted the value of the care you deliver? Quality? Safety? Efficiency?

## Implementation Resources

- Were there any resources available through CDS Connect to help implement the CDS at your site?

## Attachment K

- Have the resources available through CDS Connect addressed known barriers and facilitators to CDS incorporation and routine use in care delivery?
  - Which ones were most helpful?
  - What types of resources would help overcome these barriers?

### **CDS Connect Impact**

- As a research team that evaluated use of CDS Connect and its artifacts, to what extent do you think that CDS Connect has been a success?
  - What challenges do you see with either using it, or with the entire concept of it?
  - Do you have any recommendations for it?
- To what extent do you see CDS Connect disrupting the field of CDS development and encouraging more developers to make shareable, standards-based, interoperable CDS?
  - How so?
- Do you have any recommendations for the future of CDS Connect and its resources?
  - Which areas can the CDS repository improve upon? Which areas has the CDS repository succeeded in?
  - What other advice or comments would you like to share regarding the CDS Connect?