

# HSPCR Interview Guide: Other Stakeholders in HSR and PCR

*State-level Healthcare Policymakers and Decisionmakers;  
Healthcare Delivery System Leaders; and Users of HSR and PCR*

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|--------------------------------------|-----------------------|
| Key Informant Name: _____            | Participant ID: _____ |
| Organizational affiliation(s): _____ | _____                 |
| Stakeholder category(s): _____       | _____                 |
| Interview Date and Time: _____       | _____                 |
| Interviewer: _____                   | Note taker: _____     |

## Consent Statement

Hello, my name is [*interviewer name*] from RAND. Thank you again for agreeing to be interviewed today about your experience in [**Health Services Research (HSR) or Primary Care Research (PCR)**]. I'm joined today by [*names and affiliations of other team members, if applicable*] and [*note-taker name*] also from RAND who will be taking notes for the interview.

We're part of a team from RAND contracted by the Agency for Healthcare Research & Quality to conduct an independent assessment of the current state of Federal HSR and PCR funding, identify the types of HSR and PCR funded by AHRQ and other Federal agencies, the impact of these research programs, insights into better aligning these research programs, as well as gaps in HSR and PCR funded by Federal agencies.

*This interview is designed to take approximately an hour.*

When we scheduled this interview, we also attached a **Project Information Sheet** that describes this work and provides a summary of informed consent information. That sheet also includes contact information for the project director if you have questions about the study, as well as for RAND's Human Subjects Protection Committee if you have questions about your rights as a research participant.

Have you had a chance to review that sheet?

[**IF YES**] Great. Do you have any follow-up questions for us?

[**IF NO**] We'll send you that document again so you have a written copy of this information.

I can now go ahead and touch on the highlights.

Do you agree to be interviewed?

[**IF NO**] Thank you for your time thus far. Have a good day.

[**IF YES**] With your permission, we'd also like to audio-record the interview to ensure we record and analyze your remarks accurately. Only the RAND team will have access to the recording, and the recording will be destroyed after the project is completed.

Would it be okay to audio-record the interview?

[**IF YES**] [start recording and continue with interview] [**IF NO**] Ok, we will not record and we will take notes as we discuss. [continue with interview]

## Interview Questions

We're going to ask you questions in four areas: types of research funded by different federal agencies, the impact of that research, potential areas of overlap, and gaps you see in the research.

### *Types of HSR and PCR Funded by Federal Agencies*

1. To start, it would help if you could give a thumbnail of your current role and responsibilities , especially as it relates to health services or primary care research.

2. Of all the HHS and VA agencies that fund or conduct HSR and PCR, which ones do you tend to follow or use? A quick list is fine. (note: DoD and PCORI are out of our scope)

3. How would you describe the types of programs or areas of HSR or PCR research that they fund?

[NOTE: ask this question separately for each additional federal entity that informant mentions in the previous question.]

Now we're going to ask you about the impacts of the federal research funding we just discussed.

### *Impact*

4. It's not always easy to conceptualize or measure the impact of research. What types of outcomes or effects on healthcare or health do you look for when conceptualizing "impact" in HSR and/or PCR?

Possible probes:

- Quality or *delivery* of care (in/outside primary care)
- Utilization and Costs
- Policy changes
- Equity or disparities

5. What do you see as the best measures for those impacts?

6. For each of the **federal entities** that you mentioned, are there particular **impacts** of the research that they funded that stand out to you in the past 5 to 7 years?

[NOTE: Let the informant answer, then probe for each of the forms of impact identified in the previous question that have not yet been discussed here.]

Now we're going to ask you about potential areas of overlap among [HSR and/or PCR] funded by federal agencies.

*Overlap Between Different Federally Funded HSR/PCR Programs*

7. We are interested in your thoughts about overlap, that is when different agencies might fund research in similar areas. From your perspective, what major overlaps in topics might you have noticed between the research funded among the agencies we've discussed?

8. For each of these areas of overlap, as far as you know, is the research being funded by these agencies pretty much the same or are there differences?

If you see some of these overlapping topics being addressed differently, how do the agencies approach the same topic differently?

If you see the agencies' approach to the same topic as similar, do you think it makes sense that both are funding the same research, or do you think that this research would be better funded by one agency or the other or a different agency altogether?

9. In which research topics or areas do you think HHS agencies and/or the VA are doing really well at coordinating their funding for HSR or PCR with each other?

10. Are there any research topics where you think the HHS agencies and/or VA are not coordinating their work well enough?

11. Would you have any recommendations for ways in which federally funded HSR or PCR might be better coordinated or aligned among agencies?

Now we're going to ask you about gaps you see in the research.

*Important Gaps in Federally Funded HSR and PCR, and Prioritization*

12. What do you see as the critical gaps in **knowledge**—critical unanswered questions—for **HSR**?

What makes these gaps critical?

Possible probes:

- a. Content area gaps for HSR

b. Methodological gaps for HSR

13. What do you see as any critical gaps in **funding** for **HSR**? That is, in which there is a mismatch in which critical knowledge gaps might not be receiving enough dedicated federal funding?

14. What do you see as the critical gaps in **knowledge** gaps for **PCR**?

What makes these gaps critical?

Possible probes:

- a. Content area gaps for PCR
- b. Methodological gaps for PCR

15. What do you see as any critical **funding** gaps for **PCR**? That is, in which there is a mismatch in which critical knowledge gaps might not be receiving enough dedicated federal funding?

16. Which of the research gaps or needs are most pressing? How would you prioritize the knowledge and research gaps you identified?

Which gaps need to be addressed now

Which need to be addressed within 2 years

Which have a longer time horizon, 2-5 years or beyond?

Why do you think that?

[NOTE: Ask this question separately for HSR and PCR if the person has commented on both.]

17. Which agencies or programs do you think would be best suited to fund research to address these gaps?

## Thanks and Possible Follow-up

Thank you very much for sharing your thoughts with us.

18. As we conclude, do you have any other thoughts to share about any of these issues – impact, overlap or gaps that you want to share?

We may have additional questions as we summarize the perspectives shared across stakeholders. Would it be alright to contact you if we had follow-up questions?

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

