

Form Approved: OMB No: Exp. Date:

Attachment C: Unaffiliated Organizations - Interview Protocol

The following are semi-structured questions to be asked in a telephone interview.

Interviewer name: _____

Respondent organization: _____

Respondent name: _____

Date: _____

Permission to record: Y/N Interviewer initials: _____

Consent Script

We are conducting interviews to learn about the [Cooperative name] model and network engagement approach to supporting primary care practices. Abt Associates, a research company, is doing the interviews for the Agency for Healthcare Research and Quality (AHRQ), which is part of the Department of Health and Human Services.

If you agree to be interviewed, we will:

- Ask you questions about your Cooperative and network, its quality improvement (QI) strategy, impact and sustainability, and lessons learned.
- Not share your interview with anyone outside of our study team, which includes our sponsors. When we publish our results, we will generally talk about our combined findings from across our interviews. We won't use your name or otherwise identify you, unless you give us permission to do so.

Before this interview you should know the following:

- This interview should take about 60 minutes to complete.
- You do not have to participate in this interview.
- If you decide not to take part in this interview, there will be no effect on your professional relationship with AHRQ, Abt Associates, or your organization.
- If you participate in this interview, you can skip questions or stop answering the questions at any time.
- There is no cost to you for doing this interview.
- The principal risk of this interview is you could say something to us that you later regret having said. There is also a small risk that someone could find out what you tell us. The team has many procedures in place to reduce this risk.

May we record this interview? The recording is a backup to the notes and will be deleted in the end of this project.

Yes _____ No _____

Number of questions to be asked each year	Y1=N/A, Y2=15, Y3=14
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Cooperative

- C1. What is your role in your organization? [Y2]
- C2. What is your organization’s role or goals in primary care, heart health, and QI support or other area relevant to this effort? [Y2]
- C3. What do you know about the Cooperative and its work? When and how did you learn about it? [Y2]
- C4. Please describe your relationships, if any, with any of the participating Cooperative partner organizations? [Y2]
- C5. In what ways, if any, does your organization’s work overlap with work the Cooperative does? Do you see this as a conflict or a synergy? Please explain. [Y2]
- C6. Are there any additional organizations, including your own, that should be involved in the Cooperative? What are these and what kind of roles could they have played? [Y2]
- C7. Would you want to join the Cooperative if you had the opportunity to do so? Why or why not? [Y2]
- C8. What are your views on the organization of the cooperative, its network of practices, QI strategy it is implementing? Has the Cooperative engaged the right organizations or approaches to ensure that health disparities are considered and addressed? [Y2-3]
- C9. What effect, if any, has the Cooperative had on your organization’s work in improving delivery of primary care? [Y3]

Network

[Note: For organizations that are familiar with the Cooperative’s practice recruitment efforts? If no, skip to N2.]

- N1. Has the Cooperative been successful in recruiting practices from across the state that serve diverse and vulnerable populations? [Y2]
- N2. Are you aware of other programs or activities in your state that may have affected recruitment and engagement of practices and their ability to improve QI capacity and heart health? [Y2]

QI Strategies

[Note: For organizations that are familiar with the Cooperative’s QI support strategies? If not, skip to next section.]

- QI1. What is your view on the effectiveness of the QI support provided to practices in the network **not participating** in heart QI health project? To what extent has participation

contributed to improved QI capacity? Can you give specific examples of successes and failures? [Y3]

QI2. What is your view on the effectiveness of the QI support to ***practices participating*** in the heart health QI project? To what extent has participation contributed to improved QI capacity and reduction of cardiovascular risk? Can you give specific examples of successes and failures? [Y3]

QI3. For practices that appeared to improve their QI capacity, what factors drove that success? [Y3]

QI4. For practices that did not appear to improve their QI capacity, what factors seemed responsible for that failure? How could these barriers be addressed if at all? [Y3]

Impact and Sustainability

IS1. In what way has the Cooperative been successful or not successful in establishing state-level capacity to provide QI support to primary care practices? In delivering QI support to practices? Can you give specific examples? [Y2-3]

IS2. What do you see as the long-term impact of Cooperative and network for primary care practice capacity, heart health, etc.? Can you give some examples of impact on patients? [Y2-3]

IS3. Has this effort improved health disparities in your state? If so, how? Can you give specific examples? [Y3]

IS4. How sustainable do you think the external, QI support infrastructure created with this grant will likely be? Explain. [Y3]

Lessons Learned

LL1. In hindsight, is there anything the Cooperative should have done differently to achieve better results? [Y2-3]

LL2. What do you see as the strengths and weaknesses of the QI support model used by the Cooperatives/network? [Y2-3]

LL3. What are the most important lessons learned from this effort? Are the lessons applicable to other states or other efforts? [Y2-3]

LL4. What advice would you give other states interested in establishing a Cooperative and delivering state-level primary care QI support? [Y3]