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

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HEALTH WORKER IMPLEMENTATION SURVEY - 6 MONTHS

Item	Question	Response options	Skip pattern
000	Dear Provider,	• •	••
	The Safety Program in Perinatal Care-II the Johns Hopkins University and the A from the Agency for Healthcare Researc integrating teamwork and communication hemorrhage and severe hypertension in because your hospital's leadership has have received training on teamwork and	lliance for Innovation on Maternal He ch and Quality, aims to demonstrate on training with AIM maternal safety b n pregnancy. You are being asked to agreed to participate in this Demonst	ealth (AIM) with funding the value of bundles for obstetric complete this survey tration Project and you
	This survey is a tool to help assess the and your colleagues are currently using name or the name of your hospital in an provide.	these in clinical obstetric practice. W	/e will not identify your
	Your responses will be kept confidential confidentiality statute, 42 USC 299c-3(c conducted or supported by AHRQ that i purpose for which it was supplied unless purpose.). That law requires that information dentifies individuals or establishment s you consent to the use of the inform	collected for research ts be used only for the
000a	Staff ID Provided by AIM Team Lead	[Staff ID]	
1	What is your staff position in this hospital? [Please select ONE answer that best describes your position.]	ObGyn Attending Physician0ObGyn Resident1ObGyn Hospitalist2Registered Nurse3Certified Nurse-Midwife4Midwife5Physician Assistant6Nurse Practitioner7Other (specify)77 [Specify; free text]	
2	In total, how many years of experience in obstetric practice do you have? [<i>Please estimate if you do not know</i> <i>the exact number of years.</i>]	[Number of years]	
3	How many years and months have you worked in this hospital? [For example, if 1 year and 6 months, please enter "1" for Number of years	[Number of years] [Number of months]	
L	picace enter I for Number of years		

Item	Question	Response options	Skip pattern
	and "6" for Number of months].	• •	
4	Typically, how many hours per work do you work in this hospital? [Please estimate based on hours worked last week.]	[Number of hours]	
SPPC-II	Training Assessment—LEARNING		1
	wing questions refer to the teamwork and	d communication training offered in c	conjunction with the
	gram in your state.	-	-
5	Have you completed all eight e-	Yes1	
	modules?	No0	
		Don't remember88	
6	Have you completed any of the e-	Yes1	
	modules more than once?	No0	
		Don't remember88	
7	Prior to this training that is	Yes1	
	specifically applied to obstetric	No0	
	emergency scenarios, did you receive other similar training on teamwork and	Don't remember88	
	communication aspects in clinical		
	practice, for example, TeamSTEPPS		
	training(s)?		
8	Have you attended one or more in-	Yes, I attended1	
	person training or simulation	No, I did not attend0	\rightarrow Skip to question 10
	sessions facilitated by your unit	No such sessions were organized	\rightarrow Skip to question 10
	leadership aiming to demonstrate or	in my unit66	
	practice the strategies you learned from this training?	Don't remember88	\rightarrow Skip to question 10
9	How many sessions like this did you attend?	[Number of sessions]	
		Don't remember88	
10	Do you think that you gained sufficient	Yes1	
	knowledge for the time you invested in	No0	
	this training and, if attended, the	Don't know88	
	related facilitation sessions?		
11	Would you benefit from more didactic	Didactic training0	
	training or facilitation sessions on	Facilitation sessions1	
	teamwork and communication in	Both2	
	clinical practice?	Neither3	
		Don't know88	
	nsider a clinical scenario: A 41-week preg		
	her membranes spontaneously rupture		ins and checks fetal
	te. The patient's blood pressure is 170		1
12	What should the nurse do?	Document this information in the	
		patient's chart0	
	[Select ALL that apply]	Inform both the resident and the	
		attending physician who take	
		care of the patient of her blood	

pressure.....1

Item	Question	Response options	Skip pattern
Rem	Question	Inform only the resident about the patient's blood pressure since the physician is very busy2 Try to comfort the patient since the elevated blood pressure may be due to discomfort from contractions3 Don't know	
13	Following the nursing briefing, the attending physician requests an IV and labs, and orders immediate treatment with anti-hypertensives. After hanging up with the attending physician, the nurse attempts IV access in order to obtain labs and administer anti-hypertensives. The nurse has difficulty establishing IV access, so she calls out to the charge nurse to ask for assistance. The charge nurse is understaffed and does not have a nurse available she asks the nurse to keep trying. What tool(s) will help the nurse communicate the message (of urgency) for help to the charge nurse sends someone to help you?	SBAR0 Two-Challenge rule1 Power words2 Huddle3 Brief4 Debrief5 Handoffs6 Don't know88	
14	[Select ALL that apply] The patient's laboratory results return shortly after her arrival on L&D and demonstrate a protein/creatinine ratio of 0.46 with 3+ protein on a catheterized urine sample; elevated transaminases with AST of 107 U/L and ALT of 98 U/L; a Hgb of 10 g/dl; and a normal platelet count. The attending physician reviews the patient's vital signs and laboratory values and considers essential that he gather the team together to discuss the plan of care moving forward. Which of the following tools should the physicians use?	SBAR0 Two-Challenge rule1 Power words2 Huddle3 Brief4 Debrief5 Handoffs6 Don't know88	
	[Select ALL that apply]		
	Training Assessment—TRANSFER		
15	Which of the following teamwork and communication tools and strategies		

Item	Question	Response options	Skip pattern
	are you currently using in your		
	practice?		
15a	Call out	Yes1	
156	Chask hask	No0	
15b	Check back	Yes1 No0	
15c	SBAR	Yes1	
100		No0	
15d	Handoffs or "I PASS the BATON"	Yes1	
		No0	
15e	Two-challenge rule	Yes1	
		No0	
15f	Power Words (e.g., concerned,	Yes1	
	uncomfortable, safety issue)	No0	
15g	Briefs	Yes1	
		No0	
15h	Huddles	Yes1	
		No0	
15i	Debriefs	Yes1	
		No0	
15j	DESCR Script	Yes1	
10		No0	
16	How frequently are you using any of	Never0	
	these tools and strategies in your	Rarely1	
	practice?	Inconsistently2	
17	How frequently are other clinicians in	Consistently3 Never0	
11	your unit using any of these tools and	Rarely1	
	strategies in clinical practice?	Inconsistently2	
	Strategies in ennieur praetiee :	Consistently	
18	How frequently are you using any of	Never0	
10	these tools and strategies when your	Rarely1	
	patients' family members are present?	Inconsistently2	
		Consistently3	
19	How frequently are other clinicians in	Never0	
	your unit using any of these tools and	Rarely1	
	strategies when your patients' family	Inconsistently2	
	members are present?	Consistently3	
20	Does your unit have a "stop the line"	Yes1	
	policy where unit clinical staff know	No0	\rightarrow Skip to question 22
	that they have the responsibility and	Don't remember88	\rightarrow Skip to question 22
	authority to stop a procedure when		
04	patient safety is a concern?		
21	How confident are you that clinical	Not confident0	
	staff at all levels are empowered to	Somewhat not confident1	
	"stop the line"?	Neither confident nor not	
		confident2	
		Somewhat confident3	

Item	Question	Response options	Skip pattern
		Very confident4	
SPPCI-	ll Training Assessment – RESULTS <mark>[Ma</mark>	ayo High Performance Teamwork S	Scale]
Please checking every qu	think about your unit's work over the la g the box that corresponds to your level o uestion and select only one response for e	ast 6 months . Please rate your unit's f agreement with the statements belo each question. Please rate conserva	s work as a team by w. Please answer
	consistently demonstrate the qualities des		
22	Our unit has a clinical team leader clearly recognized by all team members.	Never0 Rarely1 Inconsistently2 Consistently3	
23	The clinical team leader assures maintenance of an appropriate balance between command authority and team member participation.	Never0Rarely1Inconsistently2Consistently3	
24	Each team member demonstrates a clear understanding of his or her role.	Never0Rarely1Inconsistently2Consistently3	
25	Our team prompts each other to attend to all significant clinical indicators throughout procedures or interventions.	Never0 Rarely1 Inconsistently2 Consistently3	
26	When team members are actively involved with the patient, they verbalize their activities aloud.	Never0 Rarely1 Inconsistently2 Consistently3	
27	Team members repeat back or paraphrase instructions and clarifications to indicate that they heard them correctly.	Never0 Rarely1 Inconsistently2 Consistently3	
28	Team members refer to established protocols and checklists for specific procedure/intervention.	Never0 Rarely1 Inconsistently2 Consistently3	
29	All members of the team are appropriately involved and participate in patient care.	Never0Rarely1Inconsistently2Consistently3	
30	Disagreements or conflicts among team members are addressed without a loss of situation awareness.	Never0 Rarely1 Inconsistently2 Consistently3	
31	When appropriate, roles are shifted to address urgent or emergent events.	Never0 Rarely1 Inconsistently2 Consistently3	
32	When directions are unclear, team members acknowledge their lack of	Never0 Rarely1	

Item	Question	Response options	Skip pattern
	understanding and ask for repetition	Inconsistently2	
	and clarification.	Consistently3	
33	Team members acknowledge—in a	Never0	
	positive manner—statements directed	Rarely1	
	at avoiding or containing errors or	Inconsistently2	
	seeking clarification.	Consistently3	
34	Team members call attention to	Never0	
	actions that they feel could cause	Rarely1	
	errors or complications.	Inconsistently2	
		Consistently3	
35	Team members respond to potential	Never0	
	errors or complications with	Rarely1	
	procedures that avoid the error or	Inconsistently2	
	complication.	Consistently3	
36	When statements directed at avoiding	Never0	
	or containing errors or complications	Rarely1	
	do not elicit a response to avoid or	Inconsistently2	
	contain the error, team members	Consistently3	
	persist in seeking a response.		
37	Team members ask each other for	Never0	
	assistance prior to or during periods of	Rarely1	
	task overload.	Inconsistently2	
• •		Consistently3	
38	Please give your unit an overall grade	A—Excellent4	
	on patient safety at this time .	B—Very good3	
		C—Acceptable2	
		D—Poor1	
	undle transferre entetiere	E—Failing0	T = - 17
	ndle Implementation – Knowledge <mark>[Ada</mark>		
	check the box that corresponds to your level and advantage on the second s		s below. Please answer
	uestion and select only one response for e All clinical staff in our unit know what		1
39		5,5	
	AIM bundle(s) is(are) being	Agree3 Neither agree nor disagree2	
	implemented in our unit.	Disagree1	
		Strongly disagree0	
40	Any five randomly selected clinical	Strongly agree4	
τU	staff in our unit could list at least two	Agree3	
	components of the AIM bundle(s)	Neither agree nor disagree2	
	being implemented in this hospital.	Disagree1	
		Strongly disagree0	
AIM Bu	ndle implementation – Attitudes/Beliefs	s/Behaviors [Adapted from CUSP	Team Check-up Tool]
41	We have good ownership for AIM	Strongly agree4	
	bundle implementation from	Agree3	
	· · ·		

ltem	Question	Response options	Skip pattern
	physician staff in this unit.	Neither agree nor disagree2	••
		Disagree1	
		Strongly disagree0	
42	We have good ownership for AIM	Strongly agree4	
	bundle implementation from nursing	Agree3	
	staff in this unit.	Neither agree nor disagree2	
		Disagree1	
		Strongly disagree0	
43	At this time, unit staff are confused	Strongly agree4	
	about how to proceed with the	Agree3	
	implementation of the AIM bundle(s).	Neither agree nor disagree2	
		Disagree1	
		Strongly disagree0	
44	At this time, there are protocols in	Strongly agree4	
	our unit to ensure that we adequately	Agree3	
	implement the AIM bundle(s).	Neither agree nor disagree2	
		Disagree1	
		Strongly disagree0	
45	Our quality improvement team meets	Strongly agree4	
	regularly to review progress with AIM	Agree3	
	bundle(s) implementation.	Neither agree nor disagree2	
		Disagree1	
		Strongly disagree0	
46	Unit staff do not believe that perinatal	Strongly agree4	
	safety is an issue for this unit.	Agree3	
		Neither agree nor disagree2	
		Disagree1	
47		Strongly disagree0	
47	A junior staff member feels	Strongly agree4	
	comfortable questioning a more senior	Agree	
	staff member who is not using a unit-	Neither agree nor disagree2	
	developed safety tool or following a unit-developed safety process or	Disagree1	
	procedure for the implementation of	Strongly disagree0	
	the AIM bundle(s).		
	Indle Implementation – Resources	1	
48	Unit leadership (managers,	Strongly agree4	
-10	physicians, opinion leaders) is stable	Agree3	
	(i.e., there is low turnover).	Neither agree nor disagree2	
		Disagree1	
		Strongly disagree0	
49	To my knowledge, data collection and	Strongly agree4	
	reporting for the AIM program have	Agree	
	not been a burden for staff in our unit.	Neither agree nor disagree2	
		Disagree1	
		Strongly disagree0	
AIM Bu	ndle Implementation – Results		
50	Considering your work to implement	A—Excellent4	
		· · · · · · · · · · · · · · · · · · ·	

ing teamwork		
	B—Very good3	
strategies over please give your	C—Acceptable2 D—Poor1	
on	E—Failing0	
Ċ		on E—Failing0

Thank you for completing this survey.