

**Appendix D – Pre-test Interview Protocol**

## **AHRQ –Measure Dx: A Resource To Identify, Analyze, and Learn From Diagnostic Safety Events**

Form Approved  
OMB No. xxxx-xxxx  
Exp. Date xx/xx/20xx

### **Pre-test Interview Protocol for Quality and Safety Personnel**

During the evaluation of Measure Dx, the project team will conduct pre-test interviews at the start of implementation (approximately 2-3 weeks after delivery of the resource to the sites). Interviews will be conducted virtually, with participants from up to 10 implementation sites, and 1-2 representatives per site, for approximately 60 minutes each. Participants will include clinicians and/or quality and safety personnel from each site.

### **Interview Goals**

The goals of the interviews will be to:

- Understand the presence and features of current policies and structures at the organization that are relevant to diagnostic safety
- Understand the presence and features of event reporting systems
- Understand the awareness of diagnostic error in the organization
- Obtain information about plans for implementation and selected measurement strategy
- Identify perceived barriers and facilitators for implementing the resource and/or improving diagnostic safety
- Obtain feedback to optimize resource materials
- Provide participants with additional information or clarification to implement Measure Dx

### **Materials**

- Copies of the Measure Dx materials
- Informed consent documents
- Digital recorder

### **Location**

Interviews will take place via videoconference.

### **Informed Consent Procedures**

Participants will complete the informed consent process prior to starting the interview.

### **Participant Stipends**

None.

Each interview is expected to take no more than 60 minutes.

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 60 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.

## WELCOME AND INTRODUCTION

- Thank you for agreeing to participate in this interview, which is part of the larger Measure Dx project.
- My name is [INSERT NAME OF INTERVIEWER] and I am here to ask you a few questions about Measure Dx.
- With your permission we will also be audio recording the session. This will help make sure that we capture all the information you are sharing.
- During this interview, I will address any questions you have about the resource, and ask you questions about your organizational plans to implement the resource.
- Everything you say here will be kept confidential. Your insights will be used as part of our assessment on the feasibility of implementing the resource, and its materials, into practice. We will not share your name or attribute any of your words directly to you. If at any time you wish to withdraw from taking part in this interview, please let me know and we will stop the interview.
- Do you have any questions before we begin? Ok, great. Let's get started.

## BACKGROUND AND CURRENT PRACTICES

1. Let's talk first about why you decided to participate in this project.
  - a. Why is improving diagnostic safety of value to your organization?
  - b. What was appealing to you about using this measurement resource to improve diagnostic safety?
2. Tell me about how your organization currently addresses diagnostic safety. [Follow-up probes should follow up further on positive responses to the Safer Dx Checklist]
  - a. PROBE: Are there dedicated individuals, teams, or programs at your organization with defined roles to address diagnostic safety?
    - i. IF YES → Tell me about the members of this team – what other roles do they play in the organization? How does this [INDIVIDUAL/TEAM] fit into the structure of the organization? How does this [INDIVIDUAL/TEAM] coordinate activities for improving diagnosis?
    - ii. IF NO → What are the barriers to having an individual or team address diagnostic error?
    - iii. [IF UNCLEAR, PROBE MORE ABOUT WHERE DIAGNOSTIC SAFETY INITIATIVES MIGHT FIT IN THE ORGANIZATION'S PATIENT SAFETY INFRASTRUCTURE.]
3. Tell me about your culture and reporting environment for diagnostic errors and near misses.
  - i. PROBE: How do you ensure that clinicians are comfortable discussing diagnostic errors?
  - ii. Are there barriers to creating a patient safety culture that values diagnostic excellence and transparency? If yes, please describe.
  - iii. How are staff encouraged to come forward and voice their concerns, ideas, and inputs regarding diagnostic error?

4. Describe the types of diagnostic errors that your organization has identified.
  - a. How does the [INDIVIDUAL/TEAM/PROGRAM] become aware of diagnostic safety issues in your organization? How do they investigate or respond to that information?
  - b. How do you investigate diagnostic safety events?
    - i. PROBE: How [DO YOU/DOES YOUR TEAM] conduct a root cause analysis involving a diagnostic error?
    - ii. PROBE: Without sharing any information that would identify the involved persons, can you tell me about the last diagnostic error case you analyzed?
  - c. Does the [INDIVIDUAL/TEAM/PROGRAM] systematically track or measure diagnostic safety events? If so, how?
    - i. Does your organization use information about diagnostic safety events to make improvements?
      1. If yes, who typically leads this work? Who is involved in the improvement activities?
      2. If no, what do you think a process to make improvements could look like?
  
5. How do you facilitate patient engagement to address diagnostic errors?
  - a. If you identify a diagnostic error, do you communicate or disclose that to patients? How?

## **IMPLEMENTATION PLANS**

Now that you have had a chance to look over Measure Dx, do you have any questions for us?

Let's talk about your plans for using the resource. Can you share:

1. Who will be leading the implementation?
2. Who else is on the implementation team?
3. Who is the executive sponsor of this work? What is his/her/their title

Let's talk about the measurement strategies specifically [ORIENT PARTICIPANT TO THE STRATEGIES SECTION OF THE RESOURCE IF NECESSARY.] Which specific measurement strategy(ies) is your organization planning to implement?

Strategy A     Strategy B     Strategy C     Strategy D

1. What influenced your decision to choose this Strategy?

## **OUTCOMES AND GOALS**

1. What do you hope to achieve as a result of implementing Strategy [A, B, C, D]?
2. How do you plan to use any new information you obtain?

- a. PROBE: Let's imagine for a minute that you identified some previously known diagnostic safety event. What will you do next?

## QUESTIONS AND CLOSING

1. Are there any questions we can answer for you at this point?
2. Is there anything else you would like to share with us?

Thank you for your time and participation in this interview. Your insights will be very helpful to improve the resource and diagnostic safety in the future.

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