## STRUCTURAL ASSESSMENT

The structural assessment asks about your practice's characteristics, frequency of screening tests ordered, and any existing supports you may have in place that are intended to improve diagnostic processes. You will be asked to complete this survey twice. Once, at the start of the Safety Program, and again at the end of the Safety Program. The results will be used to assess changes in your practice's infrastructure and capacity to implement the Safety Program over time.

- If a question does not apply to you or you don't know the answer, please select "Not Sure."
- If you work in more than one office or location for your practice, when answering this survey answer only about the office location where you received the survey.
- If your medical office is in a building with other medical offices, answer only about the specific medical office where you work—do not answer about any other medical offices in the building.

1.	How many of the following clinicians work in your practice?
_	MDs/DOs
_	NPs/PAs
_	Registered Nurses
_	Medical Assistants
_	Other (please describe)
3.	Approximately how many patients does your practice see in an average week?  Approximately what proportion of visits in your practice are via telemedicine, as defined by use of synchronous video visits?
	<ul> <li>1% to 24%</li> <li>25% to 49%</li> <li>50% to 74%</li> <li>75% to 99%</li> <li>All (100%)</li> </ul>

The following questions ask about the total number of tests ordered in the practice (i.e., combining orders from all clinicians in the practice).

- 4. During a typical <u>month</u>, approximately how many patients does your practice refer for screening mammography? (Your best estimate is fine.)
  - 0
  - 1 to 5
  - 6 to 10
  - 11 to 20
  - More than 20

Public reporting burden for this collection of information is estimated to average 12 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, 540 Gaither Road, Room # 5036, Rockville, MD 20850.

(FIT) OR screening colonoscopy? (Your best estimate is fine.)
<ul> <li>0</li> <li>1 to 5</li> <li>6 to 10</li> <li>11 to 20</li> <li>More than 20</li> </ul>
6. <b>In the last <u>12 months</u></b> , how many times has your practice referred a patient for low dose computed tomography (CT) for lung cancer screening? (Your best estimate is fine.)
<ul> <li>0</li> <li>1 to 5</li> <li>6 to 10</li> <li>11 to 20</li> <li>More than 20</li> </ul>
The following questions ask about any existing supports within your practice to improve diagnosis or the diagnostic process, specifically, the degree to which diagnoses are accurate, timely, and communicated effectively to patients.
7. Does your practice use an electronic health record system? OYes No
7a. If yes, which one (text box or drop down with list of EHRs)
7b. If yes, has your practice implemented any prompts in the EHR to assist with tracking and follow-up of test results and/or referrals? Yes No Not sure
8. Can your practice easily extract data related to cancer testing from your electronic health record; for instance, the last five patients with positive FIT or last five patients with abnormal mammograms? Yes No Not sure
Please provide additional explanation as needed:
9. Does your practice have a quality improvement (QI) program, team, or person responsible for QI-related activities?  Yes No Not sure
10. Has your practice used a team-based safety program (e.g., comprehensive unit-based safety program) to drive improvement activities in the practice in the past? Yes No Not sure
10a. If yes, please describe previous initiatives that have used a team-based safety approach.
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5. During a typical month, approximately how many patients does your practice refer for fecal immunochemical test

diagnos	stic processes through quality improvement activities? $\bigcirc$ Yes $\bigcirc$ No $\bigcirc$ Not sure
11a	. If yes, please describe.
diagnos	re mechanisms (e.g., incident reporting, EHR reports) that help your team become aware of breakdowns sis or diagnostic processes, such as when follow-up of a certain abnormality is delayed?  No Not sure
12a	. If yes, please describe.
process	our practice use any other tools or programs to safely improve diagnosis or the diagnostic s? Yes No Not sure I. If yes, please describe.

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