Appendix: AHRQ QI Customer Survey Screen Shots

Enclosed are screen shots of the web survey. All items are labeled and indicate the intended respondent(s) based on survey skip patterns. Note that in some cases the image of one screen carries over multiple pages of this document.

Introduction page

2018 AHRQ QI Survey

Welcome to the Agency for Healthcare Research and Quality (AHRQ) Quality Indicator (QI) Survey. We value feedback from both current AHRQ QI users and those who may use the AHRQ QIs in the future. Your responses to this survey will be used to make improvements to the AHRQ QI program.

About the AHRQ Quality Indicators

AHRQ is a government agency whose mission is to produce evidence to help improve the quality of health care. The AHRQ QIs are standardized, evidence-based quality measures that can be used with readily available hospital inpatient administrative data to measure and track clinical performance and outcomes, including inpatient mortality, surgical complications, and certain hospital-acquired infections. The AHRQ QIs include four sets of measures —Patient Safety Indicators (PSI), Inpatient Quality Indicators (IQI), Prevention Quality Indicators (PQI), and Pediatric Quality Indicators (PDI). The AHRQ QIs address quality of care for patients hospitalized for a broad range of procedures or conditions that are high risk, problem prone, and/or high volume. Software to calculate the AHRQ QIs is publicly available at no cost.

About the survey

The survey will take no more than 10 minutes to complete. The survey asks you to describe your organization's current experience with AHRQ QIs, if any, and with measures to support quality improvement in general. You will also have an opportunity to offer suggestions for improving your experience with the QIs.

Participation in this survey is voluntary. You can decide not to complete the survey. If you start the survey, you don't have to answer any questions you don't want to, or you can stop completing the survey at any time. By taking this survey you are agreeing that your answers will be included anonymously in this effort. If you click the "Save" button, your responses to the survey will be saved. You will be provided with a link on a separate screen and when you click on that link you can continue the survey where you left off.

The survey is being administered by the American Institutes for Research (AIR), a subcontractor of Pantheon, on behalf of the AHRQ. If you have any questions or concerns about your rights as a participant in this survey, you can contact AIR's Institutional Review Board (which is responsible for the protection of participants) at IRB@air.org or toll free at 1-800-634-0797. For questions, concerns, or follow-up on the survey, contact the AHRQ QI Team at QIsupport@ahrq.hhs.gov or 919-918-4507.

To begin the survey questions, please click on the "Next" button below. At the end of the survey, please click "Submit Survey" on the final page.

Next

AHRQ QUALITY INDICATORS

Does your organization currently use the AHRQ QIs for health care quality improvement? *Quality improvement initiatives are those that seek to: (1) improve clinical practice (e.g., adherence to guidelines, coordination of care); (2) improve patient safety or reduce harm; (3) address disparities in health or care; (4) improve prevention practices; or (5) collaborate with community groups to improve health or care.*

- Yes, my organization currently uses the AHRQ QIs
- No, my organization does not currently use the AHRQ QIs, but we have in the past
- No, my organization has never used the AHRQ QIs
- I don't know/I'm not sure



M.2 (Respondent: Users)

How is your organization using the AHRQ QIs for health care quality improvement? (select all that apply)

- Identifying coding/documentation issues
- Identifying clinical/quality of care areas in need of improvement
- Monitoring to identify potential/emerging quality of care issues
- Measure impact of a quality improvement activity
- Benchmarking performance against peers
- Other (Please specify):
- I don't know/I'm not sure



Powered by Verint survey software

M.3 (Respondent: Users)

Why did your organization choose to use the AHRQ QIs for health care quality improvement? (select all that apply)

- AHRQ measures provide a national benchmark/standard for comparison
- AHRQ QIs are scientifically sound
- AHRQ QIs are available at no charge for public use
- AHRQ QIs include measures for a broad range of clinical areas
- AHRQ QIs can be reliably constructed from hospital administrative data
- AHRQ QIs are easy to use
- There are a high level of resources and support for the AHRQ QI program
- The technical specifications are clearly defined
- The availability of the free SAS QI or WinQI software
- Other (Please specify):
- I don't know/I'm not sure



M.4 (Respondent: Potential Users)

What are the primary reasons your organization does not use or stopped using the AHRQ QIs? (select all that apply)
The software platforms (e.g. SAS, WinQI) are difficult to use
There is not enough guidance on the uses of the AHRQ QIs for quality improvement
It is too difficult to communicate the AHRQ QI results to non-expert audiences

- There are not enough composite indicators
- There is not a standard format for reporting AHRQ QI results
- My organization does not have enough data to create valid results
- Our clinicians are skeptical of measures based on administrative/claims data
- Other (Please specify):
- I don't know/I'm not sure



Powered by Verint: Conduct your own online surveys

Save & Exit

M.5 (Respondent: Users)

Which AHRQ QI modules does your organization currently use for Quality Improvement? (select all that apply)

- Inpatient Quality Indicators (IQIs)
- Patient Safety Indicators (PSIs)
- Pediatric Quality Indicators (PDIs)
- Prevention Quality Indicators (PQIs)
- I don't know/l'm not sure



Powered by Verint survey software

M.6a (Respondent: Users who indicated they use the IQIs in M.5)

Please select which Inpatient Quality Indicators (IQIs) your organization currently uses. (select all that apply)

If you select 'I don't know/I'm not sure' or 'My organization uses all 25 IQIs', you do not need to select individual indicators.

IQI	Yes, currently use
l don't know/l'm not sure	
My organization uses all 25 IQIs	
IQI 01 Esophageal Resection Volume	
IQI 02 Pancreatic Resection Volume	•
IQI 04 Abdominal Aortic Aneurysm (AAA) Repair Volume	
IQI 05 Coronary Artery Bypass Graft (CABG)	
IQI 06 Percutaneous Coronary Intervention (PCI) Volume	
IQI 07 Carotid Endarterectomy Volume.	
IQI 08 Esophageal Resection Mortality Rate	

IQI 09 Pancreatic Resection Mortality Rate	•
IQI 11 Abdominal Aortic Aneurysm (AAA) Repair Mortality Rate	
IQI 12 Coronary Artery Bypass Graft (CABG) Mortality Rate	•
IQI 13 Craniotomy Mortality Rate	
IQI 14 Hip Replacement Mortality Rate	•
IQI 15 Acute Myocardial Infarction (AMI) Mortality Rate	
IQI 16 Heart Failure Mortality Rate	
IQI 17 Acute Stroke Mortality Rate	
IQI 18 Gastrointestinal Hemorrhage Mortality Rate	•
IQI 19 Hip Fracture Mortality Rate	•
IQI 20 Pneumonia Mortality Rate	•
IQI 21 Cesarean Delivery Rate, Uncomplicated	0

IQI 22 Vaginal Birth After Cesarean (VBAC) Delivery Rate, UncomplicatedIQI 30 Percutaneous Coronary Intervention (PCI) Mortality RateIQI 31 Carotid Endarterectomy Mortality RateIQI 32 Acute Myocardial Infarction (AMI) Mortality Rate, Without Transfer CasesIQI 33 Primary Cesarean Delivery Rate, UncomplicatedIQI 34 Vaginal Birth After Cesarean (VBAC) Rate, All		
Intervention (PCI) Mortality Rate	0	
Rate IQI 32 Acute Myocardial Infarction (AMI) Mortality Rate, Without Transfer Cases IQI 33 Primary Cesarean Delivery Rate, Uncomplicated IQI 34 Vaginal Birth After Cesarean	-	
Mortality Rate, Without Transfer Cases IQI 33 Primary Cesarean Delivery Rate, Uncomplicated IQI 34 Vaginal Birth After Cesarean		•
Uncomplicated IQI 34 Vaginal Birth After Cesarean		
	5	•



Powered by Verint survey software

M.6b (Respondent: Users who indicated they use the PSIs in M.5)

Please select which Patient Safety Indicators (PSIs) your organization currently uses. (select all that apply)

If you select 'I don't know/I'm not sure' or 'My organization uses all 19 PSIs', you do not need to select individual indicators.

PSI	Yes, currently use
I don't know/I'm not sure	
My organization uses all 19 PSIs	
PSI 02 Death Rate in Low-Mortality Diagnosis Related Groups (DRGs)	
PSI 03 Pressure Ulcer Rate	
PSI 04 Death Rate among Surgical Inpatients with Serious Treatable Conditions	
PSI 05 Retained Surgical Item or Unretrieved Device Fragment Count	
PSI 06 latrogenic Pneumothorax Rate	
PSI 07 Central Venous Catheter-Related Blood Stream Infection Rate	
PSI 08 In Hospital Fall with Hip Fracture Rate	
PSI 09 Perioperative Hemorrhage or Hematoma Rate	
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	
PSI 11 Postoperative Respiratory Failure Rate	•

PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	
PSI 13 Postoperative Sepsis Rate	
PSI 14 Postoperative Wound Dehiscence Rate	
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	
PSI 16 Transfusion Reaction Count	
PSI 17 Birth Trauma Rate – Injury to Neonate	
PSI 18 Obstetric Trauma Rate – Vaginal Delivery With Instrument	
PSI 19 Obstetric Trauma Rate-Vaginal Delivery Without Instrument	
PSI 90 Patient Safety for Selected Indicators	



Powered by Verint survey software

M.6c (Respondent: Users who indicated they use the PDIs in M.5)

Please select which Pediatric Quality Indicators (PDIs) your organization currently uses. (select all that apply)

If you select 'I don't know/I'm not sure' or 'My organization uses all 24 PDIs', you do not need to select individual indicators.

PDI	Yes, currently use
I don't know/I'm not sure	
My organization uses all 24 PDIs	
NQI 01 Neonatal latrogenic Pneumothorax Rate	
NQI 02 Neonatal Mortality Rate	
NQI 03 Neonatal Blood Stream Infection Rate	
PDI 01 Accidental Puncture or Laceration Rate	•
PDI 02 Pressure Ulcer Rate	
PDI 03 Retained Surgical Item or Unretrieved Device Fragment Count	
PDI 05 latrogenic Pneumothorax Rate	
PDI 06 RACHS-1 Pediatric Heart Surgery Mortality Rate	•
PDI 07 RACHS-1 Pediatric Heart Surgery Volume	
PDI 08 Perioperative Hemorrhage or Hematoma Rate	•
PDI 09 Postoperative Respiratory Failure Rate	

PDI 10 Postoperative Sepsis Rate	•
PDI 11 Postoperative Wound Dehiscence Rate	
PDI 12 Central Venous Catheter-Related Blood Stream Infection Rate	
PDI 13 Transfusion Reaction Count	
PDI 14 Asthma Admission Rate	•
PDI 15 Diabetes Short-term Complications Admission Rate	
PDI 16 Gastroenteritis Admission Rate	•
PDI 17 Perforated Appendix Admission Rate	
PDI 18 Urinary Tract Infection Admission Rate	
PDI 19 Pediatric Safety for Selected Indicators	
PDI 90 Pediatric Quality Overall Composite	•
PDI 91 Pediatric Quality Acute Composite	0
PDI 92 Pediatric Quality Chronic Composite	•



Verint survey software

f you select 'I don't know/I'm not sure' or 'My organization uses all 17 PQIs', you do not need to selec	t individual indicators.
PQI	Yes, currently use
I don't know/I'm not sure	
My organization uses all 17 PQIs	
PQI 01 Diabetes Short-termComplications Admission Rate	
PQI 02 Perforated Appendix AdmissionRate	
PQI 03 Diabetes Long-termComplications Admission Rate	
PQI 05 Chronic Obstructive PulmonaryDisease (COPD) or Asthma in Older Adults Admission Rate	
PQI 07 Hypertension Admission Rate	
PQI 08 Heart Failure Admission Rate	
PQI 09 Low Birth Weight Rate	
PQI 10 Dehydration Admission Rate	
PQI 11 Community Acquired PneumoniaAdmission Rate	
PQI 12 Urinary Tract InfectionAdmission Rate	
PQI 14 Uncontrolled Diabetes AdmissionRate	
PQI 15 Asthma in Younger AdultsAdmission Rate	

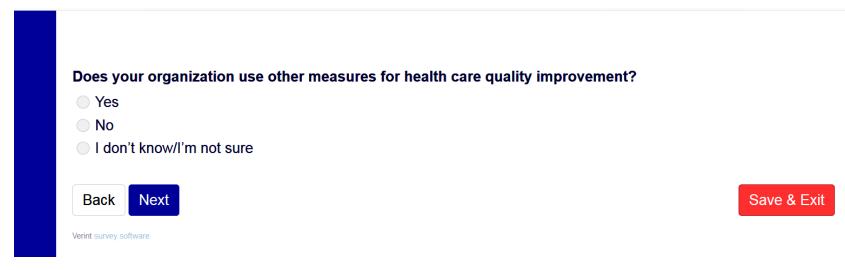
M.6d (Respondent: Users who indicated they use the PQIs in M.5)

PQI 16 Lower-Extremity Amputationamong Patients with Diabetes Rate	
PQI 90 Prevention Quality OverallComposite	
PQI 91 Prevention Quality AcuteComposite	
PQI 92 Prevention Quality ChronicComposite	
PQI 93 Prevention Quality DiabetesComposite	





M.7 (Respondent: Users and Potential Users)





- Measures associated with federal programs or reporting requirements
- Measures associated with state programs or reporting requirements
- Measures associated with local or regional programs or reporting requirements
- Measures developed or selected internally within my organization
- Other (Please specify):
- I don't know/I'm not sure



Powered by Verint survey software

T.1 (Respondent: Users)

AHRQ QI TOOLKIT

Has your organization ever used the Toolkit for Using the AHRQ Quality Indicators (QI Toolkit)? The QI Toolkit is a free and easy-to-use resource for hospitals planning to use the AHRQ Quality Indicators (QIs) to track and improve inpatient quality and patient safety. The QI Toolkit also may serve as a general guide to applying improvement methods in a hospital setting.

Yes

No No

I don't know/I'm not sure



T.2 (Respondent: Users who indicated they used the Toolkit in T.1)

	Not at all useful	Slightly useful	Somewhat useful	Moderately useful	Extremely useful	l don't know/l'm not sure
Assessing Readiness to Change						
Applying QIs to Your Hospital's Data						
Identifying Priorities for Quality Improvement						
Implementing Evidence-based Strategies to Improve Clinical Care						
Monitoring Progress and Sustainability of Improvements						
Analyzing Return on Investment						
Other Quality Improvement Resources						

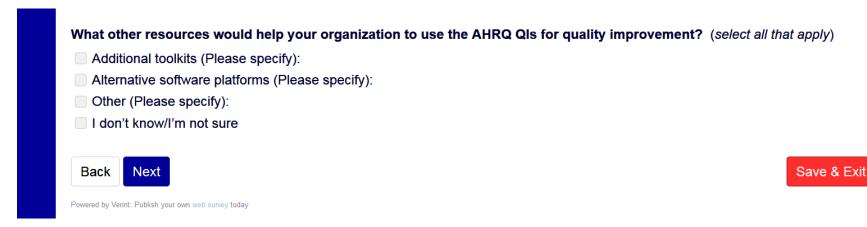
How useful are each of the following sections of the QI Toolkit as a resource for quality improvement?



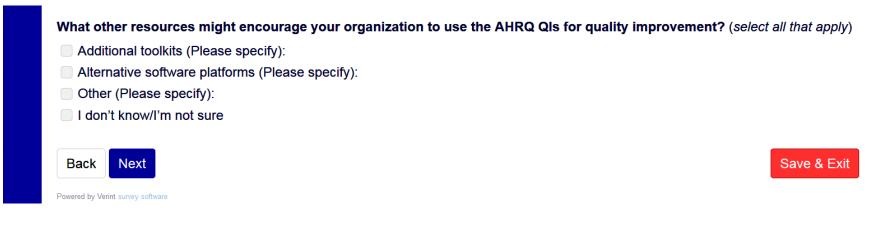
Save & Exit

Powered by Verint survey software

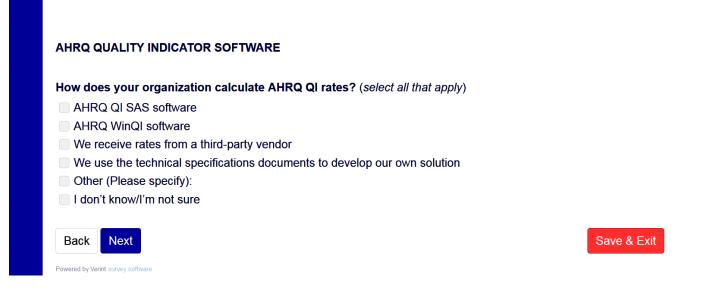
T.3a (Respondent: Users)



T3.b (Respondent: Potential Users)



S.1 (Respondent: Users)



S.2 (Respondent: Users)



S.3 (Respondent: Users who use the WinQI software)

WinQl Software Questions

How useful do you find each of the following WinQl features to calculate Ql rates?

	Not at all useful	Slightly useful	Somewhat useful	Moderately useful	Extremely useful	l don't know/l'm not sure
Case-level details report to help with troubleshooting						
Automation capabilities						
Ability to export reports and raw data as .csv file						



Save & Exit

Powered by Verint survey software

S.4 (Respondent: Users who use the WinQI software)

Indicate how useful you would find each of the following new WinQl features to calculate rates, if they were to be added to the software

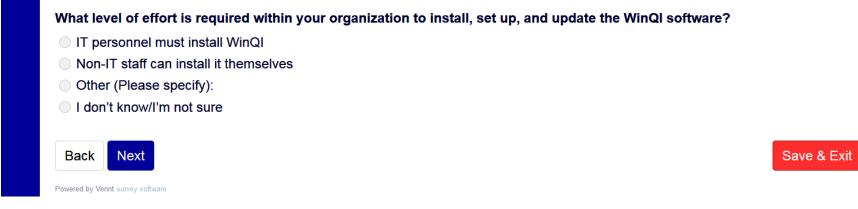
S.5 (Respondent: Users who use the WinQI software)

How much of a role does cost play in your organization's decision to use WinQI software (v. SAS QI software or other software) to calculate AHRQ QI rates?

- Not at all significant
- Slightly significant
- Somewhat significant
- Moderately significant
- Extremely significant
- I don't know/I'm not sure



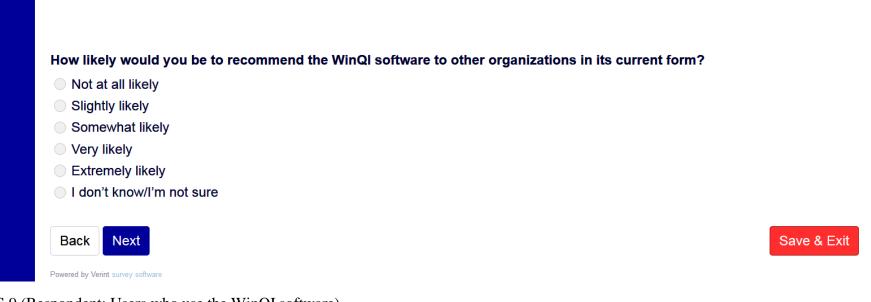
S.6 (Respondent: Users who use the WinQI software)



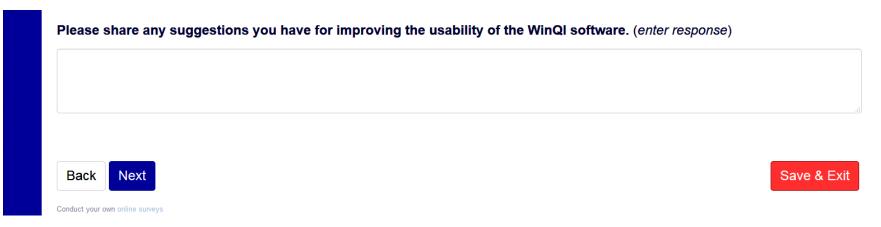
S.7 (Respondent: Users who use the WinQI software)



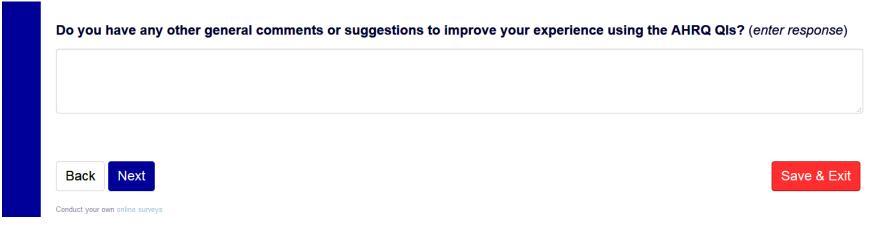
S.8 (Respondent: Users who use the WinQI software)



S.9 (Respondent: Users who use the WinQI software)



S.10 (Respondent: Users and Potential Users)



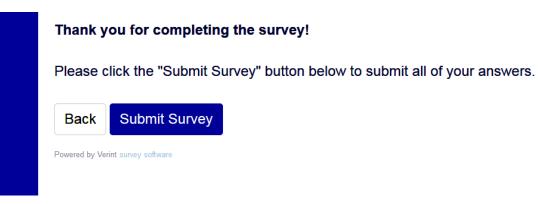
A.1 (Respondent: Users and Potential Users)

Which of the following best describ	es the type of organization you work for?
Individual hospital	
Health system	
Federal, state, or local government	agency
State, regional, or local hospital as	sociation
Quality Innovation Network (QIN)/0 association	Quality Improvement Organization (QIO) or another regional healthcare collaborative State data
Other (Please specify):	
Back Next	Save & Exi

A.2 (Respondent: Users and Potential Users)

What is your role at the organization you work for? Medical director/chief medical officer Vice president of operations or chief operating officer Hospital-wide performance/quality improvement director Service-specific performance/quality improvement director Patient safety officer Performance/quality improvement staff Quality data analyst Front line provider (e.g., physician, nurse) Other (Please specify):

Thank you screen



Save survey screen

Your responses to the survey have been saved. You have not completed the survey.

To continue the survey where you left off or to finish the survey at a later time, use the following link:

https://websurveyor2.airws.org/EFM/se/251137451D8BED8608D5A6E6AE029C2908
Powered by Verint: Conduct your own online surveys