# Appendix D – Post-test Interview Protocol

**AHRQ – Building Diagnostic Safety Capacity – Measurement**

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

**Post-test Interview Protocol for Quality and Safety Personnel**

MedStar Health Research Institute (MHRI) will conduct interviews for 20 implementation sites during the pilot testing of the Diagnostic Safety Measurement Resource. The pilot test evaluation interviews will be conducted approximately 4-6 months after implementation.

* 60 interviews with clinicians and quality and safety personnel (2-3 participants per site x 20 sites); each interview will last approximately 60 minutes

**Recruitment Criteria**

We will aim to recruit participants in the following manner:

* Clinicians and other personnel who routinely participate in organizational quality and safety activities
* Personnel with and without prior experience specific to diagnostic safety measurement
* Diversity among practice staff and clinicians

MHRI staff will work with the site coordinators to identify individuals to participate in the interviews.

**Interview Goals**

The goals of the focus groups/interviews will be to:

* Obtain feedback on the resource materials
* Obtain feedback on the barriers and facilitators encountered for the resource
* Obtain feedback on satisfaction with the resource
* Obtain feedback on receptivity and enhancements to the resource to improve adoption

**Materials**

* Copies of the Diagnostic Safety Measurement Resource materials
* Informed consent documents
* Digital recorder

**Location**

Interviews will take place at the setting at a time convenient to the participants and may be conducted remotely 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.

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 (0935-0179) AHRQ, 5600 Fishers Lane, Mail Stop Number 07W41A, Rockville MD 20857

**AHRQ – Building Diagnostic Safety Capacity – Measurement**

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

**Post-test Interview Protocol for Quality and Safety Personnel**

**WELCOME AND INTRODUCTION**

* Thank you for agreeing to speak with me!
* My name is [INSERT NAME OF INTERVIEWER] and I am here to ask you a few questions about the Diagnostic Safety Measurement Resource.
* With your permission we will also be audio recording the session. This will help make sure that I don’t miss anything that you say and can share with other people who are working on this project.
* TODAY/TONIGHT I will be asking you questions about your experiences with the Resource and any specific resource materials you attempted to implement.
* Everything you say here will be kept confidential and included as part of our assessment of 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.
* Do you have any questions before we begin? Ok, great. Let’s get started.

**FEEDBACK ON EXPERIENCE WITH RESOURCE**

1. When you were first given the Diagnostic Safety Measurement Resource, what were your reactions?
	* Were the materials useful? Were they easy to use?
	* Did the materials seem sufficiently comprehensive? If not, what was missing?
	* Can you briefly describe your team’s implementation process?
	* What challenges did you encounter while using the Resource?
2. Which measurement strategy(ies) did you select to implement?

\_\_\_ Strategy A

\_\_\_ Strategy B

\_\_\_ Strategy C

* + 1. How did you make the decision(s) on which strategy to use [Strategy A, B, C]?
		2. Did you discuss the strategy with other people in the organization? If so, who? What was their reaction to the strategy?
		3. How difficult was it to follow the instructions for using the strategy?
	1. Was the training and education about how to use the strategy appropriate? Would you suggest any changes to that?
1. What about the format of the Resource and the resource materials? Is there a better way for us to think about presenting the materials?
2. What about an electronic version? If you had this on a web site or app for a computer or mobile device would that help?

**FEEDBACK ON YIELD OF INFORMATION FOR IMPROVING DIAGNOSTIC SAFETY**

1. How did using the Resource help you to identify diagnostic safety events in your organization? How many cases did you identify? How many of these events led to changes or further investigation?
2. What did you learn from the information you identified?
3. How would you describe the impact of the Resource on the identification and learning from diagnostic safety events?
	1. Why do you think that it was improved/not changed/declined?
	2. Can you share with me any thoughts on what could be improved as part of the resource for improving diagnosis or its materials that could make it more effective?

1. Has your unit or organization changed any policies or processes as a result of implementing the Resource?

Is there anything else you would like to share about your experiences with the materials? If not, let’s move on to learning more about your experiences with the resource overall.

**IMPLEMENTATION POTENTIAL**

1. What was the most helpful part of the Diagnostic Safety Measurement Resource?
2. What was your least favorite thing about the Resource?
3. What would you have changed about the Resource?
4. What about costs of implementing the Resource? Was that a challenge at all for you?
	1. Can you describe how much the time and/or effort it took from yourself or your staff to implement the measurement strategy(ies)?
	2. Was this a barrier?
	3. Are you planning on continuing to use the Resource in the future? Were there other materials within the Resource that you were more interested in or eager to adopt than others?
	4. Do you believe that this is sustainable for your setting?
		1. If yes. Can you describe what makes this approach important enough for you to continue using it?
		2. If no. Can you describe why you wouldn’t consider continuing to use it?
5. Do you have any tips or lessons learned from your experience with the Resource that you can share that might help another setting considering using it?

**CLOSING**

1. Those were all the questions I had today. Are there any questions that I should have asked that I did not?
2. Is there anything else you would like to add on any of the topics we discussed today?

Thank you for your time and participation in this interview. Your comments will be very helpful to this project!

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 (0935-0179) AHRQ, 5600 Fishers Lane, Mail Stop Number 07W41A, Rockville MD 20857