## The AHRQ Safety Program for Improving Surgical Care and Recovery (ISCR) Qualitative Evaluation

## Appendix A: Interview Protocol

- Briefly describe why your hospital decided to implement the Improving Surgical Care and Recovery Program (ISCR).
  PROBE AS NEEDED:
  - a. What was the impetus?
  - b. How did you get started? How did you get all of the stakeholders involved?
  - c. Who, if anyone, championed the program?
  - d. How much support was there for the program in the beginning?
- 2. We're interested in hearing about your experience with implementing ISCR across several surgical lines. But to start off, describe your experience implementing the intervention in the colorectal surgical line.
  - a. Briefly, what went/has gone well?
  - b. Briefly, what did not go/has not gone well?
    - i. Were you able overcome any of these challenges? How so?
- 3. What was the impetus for extending the intervention to *additional* surgical lines?
- 4. What was the process like moving into these lines?
  - a. How did it compare to implementation in the colorectal (or other previous) line?
  - b. How, if at all, did any lessons learned in one surgical line influence implementation of other surgical lines?

IF NEEDED: What strategies did the hospital use to facilitate communication/training between surgical lines? For example, were there meetings held with staff from multiple surgical lines? (IF YES, ask for who attended, who facilitated, what kind of information was discussed.)

- c. How was implementation going in the colorectal surgical lines as you were implementing the new surgical lines? PROBE ON CHALLENGES AND SUCCESSES AND PERCEIVED CAUSES OF EACH
- 5. What do you foresee happening with the ISCR program in this hospital over the next 12 months? PROBE: Has this become the standard of care? ASK THE RESPONDENT TO EXPLAIN ON QUESTION 1, REGARDLESS OF WHETHER ANSWER TO QUESTION 2 IS YES OR NO.

- 6. What would you recommend to other hospitals trying to expand the implementation of the ISCR program? PROBE SPECIFICALLY ABOUT HOW TO SUSTAIN The INTERVENTION ACROSS <u>MULTIPLE</u> <u>SERVICE LINES</u>
- 7. Thank you for your time. Is there anything else about your enhanced surgical care and recovery efforts that you'd like to share?

This interview is authorized under 42 U.S.C. 299a. The confidentiality of your responses provided during this interview 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 interviewee, based on the estimated time required to complete the interview 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 (XXXX-XXXX) AHRQ, 5600 Fishers Lane, Room #07W42, Rockville, MD 20857.