# Appendix C – Pre-test Interview Protocol

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

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

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

MedStar Health Research Institute (MHRI) will conduct interviews with 20 clinicians during the pilot testing of the Diagnostic Safety Calibration Resource. The pre-test interviews will be conducted toward the beginning of resource distribution (approximately 2-3 weeks after delivery of the Resource).

Interviews will be conducted virtually with individual participants. Each interview will last up to 60 minutes and the respondent’s participation in the interview is voluntary.

**Recruitment Criteria**

We will aim to recruit participants in the following manner:

* Clinicians (MD, DO, NP, PA) whose scope of practice includes diagnosis
* Diversity among clinicians (profession, specialty, academic affiliation) and their respective organizations (type, geographic location)

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:

* Assess participants’ understanding of materials and instructions
* Obtain preliminary feedback on the resource materials
* Obtain feedback on the anticipated barriers and facilitators for the resource
* Obtain feedback on needs for additional information or guidance to facilitate implementation
* Provide participants with additional information or clarification to implement the Resource

**Materials**

* Copies of the Diagnostic Safety Calibration 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**

Participants will be offered a $100 stipend for completing all information collection instruments including two surveys and two 60-minute interviews.

Each interview is expected to take no more than 60 minutes. **AHRQ – Building Diagnostic Safety Capacity – Calibration Resource**

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

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.

**Pre-test Interview Protocol for Clinicians**

**WELCOME AND INTRODUCTION**

* Thank you for agreeing to speak with me!
* My name is [INSERT NAME OF INTERVIEWER] and I am here to facilitate our discussion about the Diagnostic Safety Calibration Resource.
* [TODAY/TONIGHT] I will be asking you questions about your impressions of the Resource so far and any plans you might have to use the Resource in practice. Participation in the interview is voluntary.
* 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.
* 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.

**BACKGROUND AND CURRENT PRACTICES**

1. What is your professional background?
2. Tell me about your current job.
   1. [*IF NECESSARY:* What are your current job responsibilities? In what service or unit do you practice?]
3. Have you ever participated in activities that were designed to improve quality of care or patient safety?
   1. IF YES 🡪 Can you tell me about the work you’ve done in this area?
4. Why is it important to you to learn about ways to calibrate your diagnostic performance?

**INITIAL REACTIONS TO THE RESOURCE**

Now that you have had a chance to look over the Diagnostic Safety Calibration Resource, I’d like to ask your thoughts about using it for learning from experiences in your own practice.

1. How easy is it to understand the Resource? How clear are the instructions?
   1. What do you think about the flow or layout of information?
   2. Is there information you expected to find that seems to be missing?
   3. Do you have the information you need to begin using the Resource?
      1. IF NOT🡪 What other information or instructions do you need to begin using the Resource?

*[IF THE PARTICIPANT HAS GENERAL QUESTIONS OR QUESTIONS ABOUT THE INSTRUCTIONS, CLARIFY THEM BEFORE PROCEEDING TO THE NEXT QUESTIONS.]*

Now let’s talk about how you might go about using the Resource. For these next questions please make sure that you have the Resource open and in front of you.

1. Let’s say you were going to begin using it in the next day or two. What would you do to prepare to use the Resource?
   1. How much time would you set aside?
   2. Where would you do this work?
   3. Other than a copy of the Resource itself, what materials or resources would you need to get started? (e.g., pen and paper, your computer, access to your organization’s electronic health record)
   4. What kinds of cases would you choose for calibration? Can you tell me the reasons why you would choose [*TOPIC*]?
2. Alright, let’s say you were ready to begin using the calibration tool using one or more [*TOPIC*] cases. What would you do first? *[Follow up with probes such as, “how would you go about that?”, “how would you find that information?”, etc.]*
   1. What would be your next step? *[Repeat until the participant seems to have reached the end of the case review process. Allow pauses for the participant to read instructions and refer to their own materials, as needed. If the participant seems uncertain of the next step, or if the participant does not respond after about one minute, probe for what information or resources would be needed in order for them to continue. Use these opportunities to clarify instructions, as necessary.]*
   2. Thinking about recent times when you have had these kinds of cases, what do you think you might learn from this process?

**IMPLEMENTATION PLAN**

Thank you for sharing that. It sounds like you now have a good idea of how to use the Resource to calibrate your diagnostic process.

1. What are your next steps for using the Resource after today’s call?
   1. What is your time frame for [NEXT STEPS]?
   2. What do you think will make it challenging to implement these next steps?
2. What do you think you might learn as a result of using the Resource?
3. If you were to learn about something that others in your unit or department might need to know also, how might you share that information?

**QUESTIONS AND CLOSING**

1. Are there any questions we can answer at this point that would help you begin your implementation of the Resource?
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!

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.