

Exploring the Role of Antibiotic Stewardship in Home-Based Primary Care
Interview Guide for Home Based Primary Care Clinicians

Thank you for taking the time to speak with me today. I am working with a team of researchers at the VA Connecticut Healthcare System. We are interested in learning more about antibiotic prescribing in Home-Based Primary Care (HBPC). We understand that there are many challenges associated with the diagnosis of infection in Veterans who receive HBPC, and these challenges may mean that antibiotics are prescribed differently in home than in other healthcare settings.

Did you have a chance to review the consent form? Do you have any questions?

I would like your permission to record this conversation so I can transcribe and analyze it later.

Do I have your permission?

As a reminder, the information you share with me is completely confidential.

I won't be collecting any information that could be used to identify you so please DO NOT identify yourself or give any specific patient information or identify the name of the VA medical center where you work.

I am going to begin by collecting some basic demographic information and work history to provide context to the transcripts.

I will start the recording now.

START RECORDING

This is ID number _____

“Do I have your consent to participate in this study and to record this conversation?”

Today's date is _____. The time is _____.”

“Let's begin by collecting some demographic and work history information.”

What is your age?

What is your biological sex?

What race do you identify with?

What is your ethnicity- Hispanic or Non- Hispanic?

What is your highest level of education?

How many years of clinical experience do you have?

What is your current position at the VA?

How long have you been practicing at the VA?

How long have you been practicing in the HBPC program?

1. Antibiotics Prescribed

A. “I'd like to begin by asking you to think about a recent patient you've cared for that was prescribed antibiotics in the home.” *(If clinician can't remember details on recent visit then move to general questions-start with A 2).*

1. Can you tell me about the patient's presentation and your approach to the patient's diagnosis and treatment?”
2. What challenges did you face in making the diagnosis including the use of diagnostic tests in the home?
3. How did you use testing such as laboratory, microbiological, or radiographic tests?
(i.e. blood, urinalysis, sputum, wound cultures, tissue, nasal swab, body fluids, x-rays)
4. What challenges did you face in obtaining any of these diagnostic tests?
5. How did the presence or absence of diagnostic data influence your decision to prescribe?

B. “Now I want you to think about prescribing in the home in general. “

1. How do you make the decision to treat the patient with antibiotics?
2. What is unique about prescribing antibiotics to homebound patients as compared to non-homebound patients?
3. What are the challenges in prescribing in the home?

- C. "Let's talk about the family/caregivers"
1. What role do the family/caregivers play in your decision to prescribe or not prescribe in the home?
 2. How difficult is it to handle the preferences of the caregiver?
- D. "Can you describe your approach to coding a patient's visit in which you prescribed antibiotics in the home?"
1. How important is it to code the indication for antibiotics?
 2. What challenges did you face when coding the diagnosis for which antibiotics were prescribed?

2. Choice of Antibiotics

"Now I would like to hear about your specific choices of antibiotics"

- A. How do you go about selecting an antibiotic or class of antibiotics?
1. What clinical factors, social factors, (family, psychosocial issues) or logistical factors such as (space, resources, delivery of antibiotics) impact your choice of an antibiotic?
 2. How does the number of home medications and dosing schedule influence your choice of an antibiotic?
 3. How does the length of therapy (such as 5-, 7- or 14-day courses) influence your choice of an antibiotic?
 4. How do you think about spectrum of activity when selecting an antibiotic or class of antibiotics?
- When are broader spectrum or narrow spectrum antibiotics favored in your patients?

3. Antibiotics Not Prescribed

"So far, I asked you about cases in which antibiotics were prescribed.

- A. Can you think about a patient or a situation where you suspected an infection was likely but did NOT prescribe antibiotics? "
1. Why did you decide to WITHHOLD antibiotics when infection is suspected?
 2. Can you describe challenges about making the decision to NOT prescribe antibiotics.
 3. How does the homecare setting contribute to your decision to withhold antibiotics?
- B. In the prior question, I asked about patients with a suspected infection. But there may be patients with presentations for which you are uncertain whether there is an underlying infection.
1. What factors would push you toward prescribing antibiotics?
 2. What factors would push you away from prescribing antibiotics?
 3. In the situation where you weren't sure if there was an infection, can you tell me how the patient, the caregiver, and homecare setting impacted your decision about antibiotic prescribing.

4. Antibiotic Resistance and Adverse Events

"Now I'd like to learn more about antibiotic resistance and other antibiotic-associated adverse events in Home Based Primary Care."

- A. Please describe any challenges you encountered when caring for a patient with an antibiotic -resistant organism or C. difficile infection?
1. How important are the problems of antibiotic resistance and C. difficile infection compared to other health problems faced by your HBPC patients?
- B. Based on your experience, how does the homecare setting contribute to antibiotic resistance in home?
1. How do you think about room contamination, environmental cleaning, hand hygiene and equipment you might bring or not bring into the home?

- C. Can you tell me how you think antibiotic resistance in your HBPC program compares to other HBPC programs throughout the country.
- D. How does antibiotic resistance in your program compare to programs caring for non-homebound patients such as primary care practices in the community, or nursing homes?
- E. Please tell me how you collect information on antibiotic resistance and other antibiotic-associated adverse events in the HBPC program?
 - 1. (-If collect info-) “how is this information used”?

5. Antibiotic Stewardship

“Now I’d like you to think about the patients you described and the issues you discussed regarding antibiotic prescribing and antibiotic-associated adverse events in HBPC.”

- A. How does your HBPC program monitor antibiotic prescriptions?
 - 1. What proportion of your visits with an antibiotic prescription have an associated diagnosis code for infection?
- B. Based on your experience, what are some ways in which you think antibiotic prescribing can be improved with HBPC veterans?
 - 1. What types of information for clinicians and caregivers would be useful?
 - 2. How could data on antibiotic prescriptions and adverse events in antibiotic prescribing be helpful?
 - 3. IF your HBPC program had a pharmacist- what role would that person play in improving antibiotic use?

6. Concluding Questions:

We are at the end of the interview but before I stop is there anything else you would like to add?

Is there anything I should have asked you about but I didn’t?

I’d like to thank you so much for taking the time to talk with me today. “

STOP RECORDING.