**APPENDIX**

# HOSPITAL SITE VISIT INTERVIEW GUIDE

**BACKGROUND**

First, let us THANK YOU for agreeing to participate in our research project. We are (NAMES) and we are researchers from The Ohio State University. Our five-year study has been funded by the Agency for Healthcare Research and Quality (AHRQ) and is entitled “Searching for Management Approaches to Reduce HAI Transmission” (SMART).

As background, this study emerged from prior research into prevention and reduction of central line-associated blood stream infections (CLABSIs) in U.S. hospitals. In that work, we found little management guidance to accompany clinical practice “bundles” that were being implemented. Our SMART project is now focused on increasing our understanding of management techniques that can influence an organization’s ability to reduce and prevent Heathcare­Associated Infections (HAIs). We are specifically interested in prevention of CLABSIs and catheter-associated urinary tract infections (CAUTIs), and we are interested in learning from both intensive care unit and medical/surgical unit settings.

You have been identified as someone who would provide invaluable information about this topic. In this interview, we will ask you several general and open-ended questions about your perspectives and experience with CLABSI and CAUTI prevention.

**OVERVIEW OF INTERVIEW TOPICS**

In this interview, I will ask you a series of open-ended questions to get your perspectives. These questions cover several different areas:

## Section 1: Goal Setting and Support

## Section 2: Strategic Alignment/Communication and Information Sharing

## Section 3: Use of Information Technologies

## Section 4: Systematic Education

## Section 5: Inter-professional Collaboration

## Section 6: Meaningful Use of Data

## Section 7: Recognition for Success

**INTRODUCTION TO INTERVIEW**

We have scheduled the next 30 minutes to discuss these topics with you. Before we begin the discussion, we need to take you through an informed consent process. In particular, let me make sure that you understand that:

1. Your participation is completely voluntary. If you do choose to talk with me, you may end the interview at any time.
2. We consider this discussion to be confidential. Your participation is confidential in the sense that your name will not be used in any reports or articles.
3. We would also like to record the interview for the purposes of data collection for our research. The recording will not be used to identify you in any way.
4. Do you have any questions about our study or this interview process?

# INTERVIEW GUIDE

**Introduction: *Interviewee Background***

* To start, for our records, please tell us your name, your current role or title, and how long you have been in that position?

## Section 1: *Goal Setting and Support*

*High­performing hospitals that are successful in reducing and preventing healthcare­ associated infections (HAIs) such as central line-associated blood stream infections (CLABSIs) and catheter-associated urinary tract infections (CAUTIs) have established aggressive goals. In prior work we have identified a variety of structural practices that are important for successful goal setting and support. If these are in place at your hospital, we would like to learn how these strategies have been implemented and are used.*

* Does your hospital have specific goals for HAIs?
  + What is the goal for the number of CLABSIs in your hospital?
  + What is the goal for the number of CAUTIs in your hospital?
  + How are the actions you and your colleagues should take to support these goals communicated to you?
* How does your hospital communicate about HAI prevention goals?
  + Written communications—can be electronic (e.g., emails, posters, fliers, employee intranet, bulletin boards)
  + Oral communications (e.g., huddles, unit meetings, rounds, leadership meetings, presentations to the Board, quality meetings, town hall meetings, lectures)
* Do you give any guidance to staff or units about how they can change what they do to meet these goals?
* Who is responsible for infection prevention in your hospital?
* How does your hospital define accountability (for goals)?
  + How is accountability ensured?
* How is hospital leadership involved in and aware of HAI prevention?
  + How does your hospital demonstrate that leaders have bought in to HAI prevention goals? (e.g., visible presence, leadership rounds, etc.)
* How does your hospital ensure sufficient resources are in place to help prevent HAIs?
  + Personnel Resources (i.e., staff, staffing priorities)
  + Supply Resources (i.e., supplies, equipment, technologies)

**Section 2: *Strategic Alignment/Communication and Information Sharing***

*High­performing hospitals that are successful in reducing HAIs such as CLABSIs and CAUTIs use strategic communications and widely share information about infection prevention. Again, several structural practices have been identified as important to strategic alignment and information sharing, and if these are in place at your hospital, we would like to learn how these strategies have been implemented and are used.*

* What clinical processes are in place in your hospital that promote infection prevention? (e.g., nurse-driven protocols, standard of care policy documents, standardized order sets)
* What operational processes are in place? (e.g., audits of the processes, handoff reports, checklists)
* What kind of information is included on nurse checklists?
* What management processes are in place to promote infection prevention? (e.g., identify and use champions, rounding of infection preventionists, leadership rounding, team development)
* At your hospital, who generates surveillance data?
* How are surveillance data shared?
* What is done to investigate when infections are found? (e.g., on the floor investigations, talk to staff, track trends)
* If an infection is found that seems not to be associated with a stay in your hospital, what happens?
* How is information about infections and infection prevention shared at your hospital?
  + Unit-level communications (e.g., huddles, unit meetings, rounds etc.)
  + System-level communications (e.g., employee Intranet, public display of data, signage)
  + Does your organization send out newsletters? (How frequently? How regularly do you read these newsletters? Are the issues addressed relevant?)
* Does your hospital use storytelling to emphasize the importance of infection prevention? (e.g., about patients with infections, about financial impact)

**Section 3: *Use of Information Technologies***

*The use of information technologies has also been identified as important in efforts to reduce and prevent HAIs, so we would like to learn how health information technologies are used here.*

* What electronic processes are in place in your hospital that promote infection prevention? (e.g., EMR decision tools, EMR alerts, standardized order sets)
* How do your information technologies or your EMR support operational processes that are focused on infection prevention? (e.g., audits of the processes, information system flags for Foleys, checklists)
* Do you use best practice alerts of any kind for Foley catheters or use of central lines?
* Are there any best practice alerts in your EMR related to infection prevention?
* Does your surveillance process involve the EMR or any information technologies? (If yes, please describe.)
* Are there any other ways your EMR or information technologies are used to help prevent infections?

**Section 4: *Systematic Education***

*High­performing hospitals that are successful in reducing HAIs such as CLABSIs and CAUTIs educate their employees on a regular basis about infection prevention. With respect to systematic education, if these structural practices are in place at your hospital, we would like to learn how these strategies have been implemented and are used.*

* What types of education are provided regarding infection prevention to providers? (e.g., about standards for HAI prevention, standards of care, policies and guidelines)
* Does education content and approach vary by type of provider? (e.g., for staff, for students)
* What approaches to education are used at your hospital? (e.g., CBLs, videos, handouts, in-services, online, train champions, in-person testing annually, journal club/assignments, CEUs, CNE)
  + How frequently do education sessions take place?
  + Does your organization provide reminders or educational refresher or “booster” sessions?
* How does your hospital educate patients (visitors, guests) about infection prevention?

**Section 5: *Inter-professional Collaboration***

*High­performing hospitals that are successful in reducing HAIs such as CLABSIs and CAUTIs collaborate across professions.*

* With respect to inter-professional collaboration (e.g., across physicians, nurses, physical therapists, occupational therapists, case managers), how does your hospital promote or support Inter-professional work? (e.g., create interdisciplinary committees, team building)
* How does your organization facilitate good physician-nurse relationships?
  + Does your hospital intentionally encourage support staff to speak up when they observe breaches of infection prevention protocol or patient safety?
* What does your hospital do to support a culture of collaboration? (e.g., support collaboration, promote a change-oriented culture, build trust)
* Has your hospital considered human factors or physical design in relation to infection prevention? (e.g., room design, accessible supplies)
  + - If so, please explain…
* Are there other ways in which a hospital could support interprofessional collaboration to reduce HAIs? (Probes: For CLABSIs? For CAUTIs? For other infections?)

**Section 6: *Meaningful Use of Data***

*High­performing hospitals that are successful in reducing HAIs such as CLABSIs and CAUTIs use data meaningfully and widely share information about infection prevention.*

* What types of HAI information does your organization share with you? (e.g., specific metrics, current rates, numbers of infections, scorecards, infection rates, process measures, rates of peers, financial burden)
  + How is this information shared with you and your care team? (e.g., email, in-person meetings)
* Do you have concerns about the quality or timeliness of the data shared with you?
* With what groups and individuals does your hospital share HAI rates? (Probes: For CLABSIs? For CAUTIs? For other infections?)
  + Internal audiences (e.g., providers, frontline staff)
  + External audiences (e.g., patients, publicly visible, everyone)
* Does your hospital share information about best practices in infection prevention?
  + At the unit level? (i.e., compare processes between units for successes/challenges in infection prevention)
  + At the hospital level? (i.e., compare processes between hospitals for successes/challenges in infection prevention)
* Are there people or roles on the units that are tasked with guiding quality improvement projects related to infection prevention?

**Section 7: *Recognition for Success***

*High­performing hospitals that are successful in reducing HAIs such as CLABSIs and CAUTIs recognize success at achieving HAI­reduction goals.*

* How is success recognized? (Probes: Unit level? Individual employee? Hospital-wide?)
  + Rewards (bonus system, reward program)
  + Penalties (financial penalties, audits)
* Is there guidance provided for unit managers about standards for rewards/penalties?
* Are there other ways in which a hospital could recognize successes related to reducing and preventing HAIs?
* Does your hospital have particular best practices in infection prevention that you would like to share?

# INTERVIEW CLOSURE AND FOLLOW-UP

* Is there a difference in your approach to infection prevention for CLABSIs and CAUTIs?
* Is there anything you can use from your experience managing CLABSIs/CAUTIs for other patient safety concerns? (i.e. C. Diff; falls)
* Is there anything else you would like to tell us about management strategies promoting CLABSI- or CAUTI-prevention?

# THANK YOU!! Thank you so much for your time and participation. Your comments were extremely helpful.