

INTERVIEW PROTOCOL – ANESTHESIOLOGISTS

Introductory script

Thank you for agreeing to participate in this interview. My name is [Melissa Hafner or Stefanie Pietras] and I work as a researcher for Mathematica Policy Research. I estimate that this interview will take approximately 1 hour.

Background on cataract adverse events and project description:

The Betsy Lehman Center (BLC) issued an advisory bulletin in May 2015 in response to an increase in serious reportable events related to cataract surgeries reported by Massachusetts hospitals and ambulatory surgical centers in 2014.

The Betsy Lehman Center is conducting a project to better understand and address the risk of patient harm during cataract surgery and Mathematica is providing research support for this project. Some examples of patient harm include errors in administering anesthesia, implantation of the wrong intraocular lens, wrong site, wrong patient, and wrong procedure surgeries. The Betsy Lehman Center's goals are to develop and pilot a process process to identify critical patient safety risks using adverse event data and respond to them by raising awareness, understanding root causes, and sharing strategies to reduce future harm to patients.

Purpose of interview:

The Center has convened an expert panel on improving patient safety in cataract surgery. We are gathering information from a variety of sources for the expert panel. As part of the process we are interviewing a range of stakeholders including surgeons, anesthesiologists, patient advocates, and patient safety experts.

The purpose of this interview is to gather information about risks, current best practices in patient safety used in cataract surgery, gaps in patient safety efforts related to cataract surgery, suggestions for improving the safety of cataract surgery, and suggestions for how to communicate patient safety information.

How results will be used:

We will summarize the major themes and findings from these interviews to support the work of the expert panel which has been convened by the Betsy Lehman Center. The expert panel will produce a report of key findings from the information gathering process and develop recommendations for strategies to improve patient safety in cataract surgery. If we plan to attribute any statements directly to you in this summary or in the panel's final report, we will provide the statement to you for your review and approval. Do you have any questions?

We will take notes during the interview; however, we would like to audiotape the interview to ensure that we have accurately captured your responses. Do we have your permission to record the interview?

Major risks associated with cataract surgery and incident reporting

I'd like to ask some questions about patient safety risks, adverse events related to anesthesia, and patient safety best practices in cataract surgery, and also ask you about your suggestions for improving patient safety.

1. What would you say are the most significant patient safety risks in cataract surgery? That is, where do you see the greatest vulnerabilities for patient harm?

Probe if needed: volume of surgeries, inadequate training, lack of teamwork, for example?

2. What is your understanding of how commonly adverse events occur in cataract surgery?

Probe: How did you come to this understanding? What is your source of information?

3. Do you think the available data accurately reflect the full extent of the incidence of adverse events in cataract surgery?

Anesthesiologist-specific questions

4. What are some of the protocols used in your facility to avoid anesthesia-related errors in cataract surgery? [If interviewee does not currently practice, do not ask #5]
5. How do these compare to commonly accepted patient safety procedures in cataract surgery?
6. What are the challenges to employing current best practices on a day-to-day basis?

Anesthesia practices

7. In your facility, what is the process for determining the most appropriate anesthetic for a cataract surgery patient?

Probe: Who makes the decision? How is the decision shared between the surgeon and the anesthesiologist?

8. What have been some of the recent major milestones in anesthesia practice related to cataract surgery? That is, have there been any changes in how anesthesia is administered for cataract surgery or who administers anesthesia? (For example, a surgeon or anesthesiologist.)

Probe: Have there been changes in the type of anesthesia that is administered? What have been some of the reasons for these clinical changes in anesthesia?

9. The Betsy Lehman Center's May 2015 advisory noted several adverse events due to retrobulbar blocks. We are interested in learning more about the training required for

this procedure. Are you aware of standards or credentialing requirements for anesthesiologists to perform retrobulbar blocks? If yes, can you direct me to the resource describing these standards?

Suggested safety improvements

10. Where are there gaps in patient safety practices in cataract surgery?
11. Do you have suggestions on how to address these gaps to make cataract surgery safer for patients?
12. What members of the clinical team or staff do you think should be responsible for implementing patient safety protocols and ensuring that they are followed?

Barriers to change and facilitators of change

13. In thinking about the changes that would be required to improve patient safety in cataract surgery, what would you say are the main barriers to implementing change?

Probe, if needed: Would you consider any of the following to be barriers to change: lack of training, resources, or time; concerns about assigning blame or quality ratings, or issues over who has the authority to make change?

14. What conditions or circumstances facilitate improving patient safety in cataract surgery?

Best ways to communicate information to stakeholders

15. Thinking about other professionals like yourself, what do you think are the best ways to reach them to communicate new information and best practices related to patient safety in cataract surgery?

Probe: Are there any specific publications, newsletters, websites, or social media outlets that would help communicate this information?

16. What are the best ways to promote patient safety information and increase the adoption of best practices? Do you have thoughts about what has worked? What has not worked?

Conclusion

17. Is there anything else you would like to share? Can you suggest anyone else we should interview?

Thank you for your time. We know how busy you are.