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**SAFER HEALTHCARE NOW! PROGRAM
REVIEW: LESSONS LEARNED FROM PHASE 1
OF THE CAMPAIGN
VOLUME II – APPENDICES**

July 17, 2007

Prepared for:

Canadian Patient Safety Institute

APPENDICES

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APPENDIX A

Teleconference questions and the evaluation overview provided to participants

Agenda **Consultations for Safer Healthcare Now! Evaluation**

We would like to explore the following questions during the consultation.

1. What outcomes does *Safer Healthcare Now! (SHN!)* hope to achieve in the short-term, intermediate-term, or long-term? Which of these outcomes has *SHN!* made progress toward? Is it too soon to evaluate the campaign's progress toward any of these outcomes?
2. What are the key issues affecting the success of the campaign (either positively or negatively) in any of the following areas:
 - ▶ development of the campaign
 - ▶ building awareness of the campaign and enrolling healthcare organizations
 - ▶ implementation of the campaign
 - ▶ promotion of knowledge transfer among participating organizations
 - ▶ increasing capacity of healthcare organizations to implement change
 - ▶ ensuring sustainability of the activities of the campaign and any gains achieved.
3. What issues or questions would you like to see an evaluation of *Safer Healthcare Now!* address? What issues or questions are important for *SHN!* and what issues or questions are important for your organization?
4. Do you have any comments on the proposed methodology of the evaluation (interviews with stakeholders, surveys with participating enrolled healthcare organizations, teams, and partners, and surveys with non-participating organizations)?
5. Do you know how your organization might use the results of the evaluation? What steps need to be taken to ensure that the evaluation is useful to participating healthcare organizations in terms of content, communication of results, etc.?

Overview of the Safer Healthcare Now! Evaluation: Lessons Learned from Phase 1 of the Campaign

Evaluation team profile

PRA Inc. is an independent research firm based in Winnipeg with offices in Ottawa and Regina. For almost two decades, PRA has provided research services to all levels of government, private corporations, and the not-for-profit sector. PRA has extensive experience conducting evaluations and program reviews of health-related initiatives, including national health programs. In 2005, PRA conducted consultations for the Manitoba Institute for Patient Safety that assisted the Institute with developing its strategic directions. PRA has assembled a highly qualified research team for this evaluation:

Project Director — Rita Gunn, M.A. (University of Manitoba). Rita is one of PRA's founding partners and has directed over 100 major evaluations. Rita's expertise in health-related evaluations comes from conducting numerous evaluations of community-based mental health services, reviews of health clinics, home care, and other health services.

Project Manager — Amy Richmond, J.D. (Baylor University), M.A. (Yale University). Amy is also a Partner at PRA. Amy has led numerous complex evaluations of national scope and also served as project manager for the consultations for the Manitoba Institute for Patient Safety.

Expert Advisor — Dr. Alan Katz, MBChB (University of Cape Town), M. Sc. (University of Manitoba), CCFP (College of Family Physicians of Canada). Dr. Katz, a former President of the Manitoba College of Family Physicians of Canada is the Research Director of the Department of Family Medicine. His main research interests encompass primary healthcare in a broad sense, which has quality of care as its main focus.

Research Associate — Brigitte Bouchard-Morris, M.B.A. (University of Ottawa). Brigitte currently manages a national, multi-year project that supports the ongoing evaluation of the Canada Prenatal Nutrition Program. Brigitte is fluent in French and English.

The evaluation plan

The evaluation will occur in two phases: the evaluation design phase, followed by the data collection and reporting phase.

The evaluation design phase. In addition to working closely with the Safer Healthcare Now! project manager, this phase involves consultations with key stakeholder groups to ensure that the evaluation team has a thorough understanding of the Safer Healthcare Now! campaign and the issues that stakeholders want the evaluation to address. We are in the process of organizing four one-hour teleconferences (three English-speaking sessions and one French-speaking session). Each Node Leader is assisting with identifying 10 to 15 stakeholders for the teleconferences, who will represent a cross-section of stakeholders, including nodal steering committee members, members of clinical support groups, representatives of enrolled healthcare organizations, and representatives of enrolled partners. After these consultations, PRA will draft a detailed evaluation plan that includes an evaluation framework and instruments that will be shared with the National Steering Committee (NSC) and discussed at the December 10 meeting. Based on this feedback, PRA will finalize the design of the evaluation.

Data collection and reporting phase. PRA proposes three methods of data collection for the evaluation.

- ▶ **Stakeholder interviews.** We will interview approximately 26 individuals distributed among the stakeholder groups. We have suggested the following distribution but will revise this list based upon feedback during the consultations: representatives of the NSC and Working Groups (n = 5); representatives of the nodes and Nodal Steering Committees (n = 16; 4 from each node); representatives of the clinical support groups (n = 3); and members of the Common Measurement Team (n = 2).
- ▶ **Mail survey of enrolled healthcare organizations, teams, and partners.** We will survey one representative of each participant team, along with the CEO and Key Organizational Contact for each enrolled organization and CEO for each partner. This survey will help determine successful elements of the campaign as well as areas for improvement. The survey will provide both quantitative and qualitative information as it will include a mixture of closed and open-ended questions. The open-ended questions will allow respondents to provide detail and context on key evaluation issues, such as reasons for successes or difficulties, why they considered the campaign successful or not, etc. We estimate surveying about 700 individuals.
- ▶ **Mail survey of non-participating healthcare organizations.** This survey will help determine both the visibility of the *Safer Healthcare Now!* campaign and the level of awareness of the campaign's success stories by non-participating healthcare organizations. The survey can also explore any barriers to participation in *Safer Healthcare Now!* or other reasons for non-participation. We estimate surveying about 120 representatives (CEO and Senior QI / Patient Safety) of non-participating healthcare organizations.

We expect that Node Leaders and the *Safer Healthcare Now!* Project Manager will assist us with identifying individuals to interview and survey.

PRA will provide regular updates to the *Safer Healthcare Now!* Project Manager, and will also produce an interim report of preliminary findings and a final report. PRA will present these reports to the NSC.

Evaluation timelines

PRA understands the need to produce final evaluation findings for the National Learning Series Meeting in March 2007. The projected timelines for the evaluation are:

- ▶ Week of November 20: Stakeholder consultations
- ▶ Early December: Draft evaluation plan and instruments
- ▶ December 10: Feedback from NSC
- ▶ Mid-December: Final evaluation plan and instruments
- ▶ Early January: Begin stakeholder interviews and distribute surveys
- ▶ Mid-February: Interim report of preliminary findings
- ▶ Mid-March: Draft final report and PowerPoint deck of evaluation findings for use at the national meeting
- ▶ End of March: Final report
- ▶ TBD: Presentation of final evaluation findings to NSC.

PRA looks forward to working with the Canadian Patient Safety Institute, the NSC, and its stakeholders on this important work.

APPENDIX B

Evaluation framework

Evaluation Framework — Evaluation of Safer Healthcare Now!		
Issues/Questions	Indicators	Data sources
Rationale		
1. What circumstances and considerations led to the creation of <i>Safer Healthcare Now!</i> (SHN)? What need was the SHN intended to address?	<ul style="list-style-type: none"> • Adverse event statistics for Canada • Opinion on need SHN is addressing 	<ul style="list-style-type: none"> • Document review • Key informant interviews
2. Is there evidence of an ongoing need for a campaign like SHN?	<ul style="list-style-type: none"> • Opinion on ongoing need • Adverse event statistics for Canada 	<ul style="list-style-type: none"> • Key informant interviews • Surveys of participating healthcare organizations, partners, and teams • Document review
Implementation		
3. What is the current state of participation?	<ul style="list-style-type: none"> • Number of enrolled partners, healthcare organizations, and teams by date • Number and type of teams by healthcare organization • Date when teams began implementing interventions • Measures of level of participation (for Med Rec, RRT, VAP, and CR-BSI interventions — % of total patient beds covered by intervention; SSI — % of surgeries covered by intervention — for each measure % within their unit and within hospital) • Activities undertaken by partners • Opinion on whether enrolled healthcare organizations, partners, and teams are fully engaged with campaign 	<ul style="list-style-type: none"> • SHN data and/or CMT data • Survey of participating healthcare organizations, partners, and teams • Key informants
4. What have been the challenges in implementing the campaign at the national, nodal, and team level? How have these challenges been overcome, if at all? What strategies of implementation have been particularly successful?	<ul style="list-style-type: none"> • Opinion on challenges (resources such as staffing and funding; training; time frames for implementation; support from management; support from other healthcare professionals within organization; rural facilities; non-tertiary care facilities; interventions required major changes in protocol) 	<ul style="list-style-type: none"> • Key informant interviews • Surveys of participating healthcare organizations, partners, and teams
5. What are the characteristics of successful teams?	<ul style="list-style-type: none"> • Opinion on characteristics of successful teams (culture, leadership, support from hospital board, CEO, etc.) • Self-assessment of existence of characteristics • Evidence of pre-existing capacity for change (participation in other patient safety initiatives, participation in research studies) 	<ul style="list-style-type: none"> • Key informant interviews • Surveys of participating healthcare organizations, partners, and teams

Evaluation Framework — Evaluation of Safer Healthcare Now!		
Issues/Questions	Indicators	Data sources
Team Support		
6. What resources and materials (electronic and non-electronic) does SHN provide to support teams? Which resources have been the most useful and why? How might current resources be improved? What other information and resources would assist teams?	<ul style="list-style-type: none"> • Types of resources • Website statistics on resource use • Opinion on usefulness of various resources (Getting Started Kits, Communities of Practice, Information calls — national and nodal, national newsletters, communiqués, templates, etc.) • Opinion on improvements (amount of information, content, channels used to provide information) • Opinion on other information and resources that would assist teams • % of survey respondents using 100K materials rather than SHN materials 	<ul style="list-style-type: none"> • SHN documents and website data • Key informant interviews • Surveys of participating healthcare organizations, partners, and teams
7. What other types of assistance or educational opportunities does SHN provide to teams? How useful has this assistance been for teams? What other forms of assistance from SHN do teams need?	<ul style="list-style-type: none"> • Types of assistance • Opinion on usefulness of assistance (learning sessions, workshops, teleconferences with faculty leaders, visits from SHN staff, collaboratives) 	<ul style="list-style-type: none"> • Document review • Key informant interviews • Surveys of participating healthcare organizations, partners, and teams
Measurement and Analysis		
8. What is the rate of compliance with providing measurement data to the CMT (baseline and ongoing measurement)?	<ul style="list-style-type: none"> • % of teams providing baseline data • % of teams providing measurement worksheets monthly to CMT • Opinion on compliance with CMT data collection processes 	<ul style="list-style-type: none"> • CMT reports • Key informant interviews • Survey of teams
9. What are the challenges that teams are facing in providing data for the CMT and/or the HSMR? How might the measurement process be improved?	<ul style="list-style-type: none"> • Opinion on measurement worksheets (clear instructions, easy to complete) • Amount of time required to complete measurement worksheets • Whether teams have previous experience with data collection efforts/research activities • Whether teams were keeping HSMR data before SHN • Opinion on what challenges exist and how measurement could be improved 	<ul style="list-style-type: none"> • Key informant interviews • Surveys of participating healthcare organizations, partners, and teams
10. What assistance with measurement is available for teams? Was this assistance helpful? What other types of assistance do teams need?	<ul style="list-style-type: none"> • Types of assistance available • % of teams accessing types of assistance • Opinion of assistance 	<ul style="list-style-type: none"> • Key informant interviews • Surveys of participating healthcare organizations, partners, and teams

Evaluation Framework — Evaluation of Safer Healthcare Now!		
Issues/Questions	Indicators	Data sources
Communications		
11. What activities at the national, node, and team level have been undertaken to inform the public and professional community about the campaign? Have these activities been effective? How could the visibility of the SHN campaign be increased?	<ul style="list-style-type: none"> • Documentation of activities • Participants' reports of activities • Awareness of success stories by participating healthcare organizations and their staff • Participants' perception of the awareness of SHN by patients and the general public • Participants' perception of the awareness of SHN of other staff in participating healthcare facilities • Participants' perception of the awareness of SHN in healthcare facilities in which implementation has not begun • Participants' opinion on effectiveness and potential improvements 	<ul style="list-style-type: none"> • Review of SHN documents • Key informant interviews • Surveys of participating healthcare organizations, partners, and teams
Leadership		
12. How does the structure of SHN support or detract from effective collaboration with enrolled healthcare organizations, teams, and partners?	<ul style="list-style-type: none"> • Opinion on clarity of roles (national, nodal, team) • Opinion on open sharing of information among levels • Opinion on whether expectations of participants are clearly communicated • Opinion on whether communications from national level are timely, sufficient, clear 	<ul style="list-style-type: none"> • Surveys of participating healthcare organizations, partners, and teams • Key informant interviews
13. Has SHN been an effective leader in promoting collaboration among healthcare professionals? Why or why not? How well does SHN integrate with other quality improvement initiatives?	<ul style="list-style-type: none"> • Opinion of participants • Key informant opinion 	<ul style="list-style-type: none"> • Surveys of participating healthcare organizations, partners, and teams • Key informant interviews
Performance management		
14. How have participating healthcare organizations integrated SHN intervention outcomes into their own performance assessments, if at all? How else is the information on outcomes used, if at all?	<ul style="list-style-type: none"> • SHN indicators reported to the hospital board, quality councils, etc. • Key informant opinion 	<ul style="list-style-type: none"> • Surveys of participating healthcare organizations • Key informant interviews

Evaluation Framework — Evaluation of Safer Healthcare Now!		
Issues/Questions	Indicators Effectiveness/Impacts	Data sources
15. To what extent has there been progress toward achieving SHN's objectives: <ul style="list-style-type: none"> decreasing the number of adverse events that interventions are targeting and thereby reducing mortality and morbidity increasing the rate of participation of healthcare organizations increasing knowledge transfer and uptake of learning among participating organizations increasing the capacity of organizations to effect change that leads to safer patient care (Note: Objectives as identified in the SHN RFP) 	<ul style="list-style-type: none"> Opinion of key informants and survey respondents on the extent that objectives have been met Compliance with intervention practices Reduction in adverse events See indicators in Q3 for increasing rate of participation See Q20 for increasing capacity indicators 	<ul style="list-style-type: none"> Surveys of participating healthcare organizations, partners, and teams Key informant interviews CMT data SHN data
16. What other changes to the healthcare system has occurred as a result of SHN, if any?	<ul style="list-style-type: none"> Opinion on other changes (improving processes at hospitals more generally; increasing profile of patient safety) 	<ul style="list-style-type: none"> Key informant interviews Surveys of participating healthcare organizations, partners, and teams
Satisfaction		
17. How satisfied are stakeholders with the SHN campaign? How might the campaign be improved for Phase 2?	<ul style="list-style-type: none"> Satisfaction level with Phase 1 Suggested improvements for Phase 2 	<ul style="list-style-type: none"> Key informant interviews Surveys of participating healthcare organizations, partners, and teams
Spread and Sustainability		
18. Have the best practices of the interventions of SHN been integrated into everyday healthcare delivery functions and protocols?	<ul style="list-style-type: none"> Spread of interventions to other units in hospital Spread of interventions to other hospitals in region Adoption of new interventions within hospital Affects outside of SHN interventions on healthcare practices 	<ul style="list-style-type: none"> Key informant interviews Surveys of participating healthcare organizations and teams CMT data
19. What steps have healthcare organizations taken to support SHN interventions? If no additional resources have been added, how have healthcare organizations accommodated the demands on resources that the interventions require?	<ul style="list-style-type: none"> Provision of additional resources (money, staffing) Leveraging resources Opinion on other steps taken (e.g., shifting resources from other areas, steps to minimize additional resource demands) 	<ul style="list-style-type: none"> Survey of participating healthcare organizations and teams
20. Has SHN affected the capacity of healthcare	<ul style="list-style-type: none"> Extent of engagement of hospital board with 	<ul style="list-style-type: none"> Key informant interviews

Evaluation Framework — Evaluation of Safer Healthcare Now!		
Issues/Questions	Indicators	Data sources
organizations to implement change in the area of patient safety?	interventions <ul style="list-style-type: none"> • Inclusion of interventions in budgetary plans, strategic plans, reports to regional quality councils, reports to hospital board • Changing attitudes on patient safety interventions, invigorating healthcare professionals' desire to make change 	<ul style="list-style-type: none"> • Surveys of participating healthcare organizations and teams
21. What factors are necessary to ensure that the interventions continue in participating healthcare organizations?	<ul style="list-style-type: none"> • Opinion of key informants and survey respondents 	<ul style="list-style-type: none"> • Key informant interviews • Surveys of participating healthcare organizations, partners, and teams

APPENDIX C

Stakeholder interview guide

Evaluation of *Safer Healthcare Now!* Stakeholder interview guide

The Canadian Patient Safety Institute (CPSI) is undertaking an evaluation of Phase 1 of *Safer Healthcare Now!* CPSI has hired PRA Inc., an independent research firm based in Winnipeg with offices in Ottawa and Regina, to conduct the evaluation. The evaluation of *Safer Healthcare Now!* will assess the project's implementation and achievements. The results of the evaluation will provide best practices and lessons learned to assist both this patient safety campaign and future patient safety initiatives. The evaluation includes interviews with key stakeholder groups as well as surveys with campaign participants (healthcare organizations, teams, and partners) and non-participating healthcare organizations.

This interview should take about 45 minutes and, with your permission, will be tape-recorded to ensure the accuracy of information reported. The information that you provide will be reported in aggregate form; individual responses will not be shared outside of PRA Inc. All tape recordings will be erased at the end of the evaluation.

We realize that you may not be in a position to address some of the questions. If you cannot answer a question, please let us know.

Rationale

1. What circumstances and considerations led to the creation of *Safer Healthcare Now!* (SHN)? What need was SHN intended to address?
2. Is there evidence of an ongoing need for a campaign like SHN?

Implementation — General

3. How would you describe the level of engagement of healthcare organizations, teams, and partners with the campaign? (*Probe: Are most partners/healthcare organizations/teams fully/somewhat/not engaged with campaign?*) If some participants are not fully engaged, what could be done to encourage more active participation?
4. What activities (at the national, node, and team level) has SHN undertaken to inform the public and professional community about the campaign? Have these activities been effective? (*Probe: Are success stories being communicated? Are communications reaching appropriate people within healthcare organizations?*) How could the visibility of the SHN campaign be increased?
5. What strategies (at the national, node, and team level) for implementing SHN have been particularly successful? In particular, what do you think are the key factors that cause teams to be successful in implementing the interventions? (*Probe: culture, leadership, pre-existing capacity for change*)

6. What have been the challenges in implementing the campaign at the national, nodal, and team level? (*Probe: resources, training, time frame of implementation, engaging stakeholders, support within healthcare organization for changes*) How have these challenges been overcome, if at all?
7. How does the structure of SHN support or detract from effective collaboration with enrolled healthcare organizations, teams, and partners? (*Probe: clarity of roles and responsibilities among the different SHN participants, e.g., NSC, secretariat, working groups, node leaders, team leaders, partners, clinical supports; information-sharing issues; clarity of communication among different participants*)
8. How does the SHN support enrolled healthcare organizations, teams, and partners? (*Probe: electronic and non-electronic resources and materials, educational sessions, other in-person assistance*) Based on your experience, which supports have been the most useful to participants and why? How might SHN improve its supports for teams?

Implementation — measurement

9. (For CMT interviewees) What is the rate of compliance with providing measurement data to the CMT? (*Probe: baseline and ongoing measurement*)
10. What are the challenges that teams are facing in providing data for the CMT and/or the HSMR? How might the measurement process be improved?
11. What assistance with measurement is available for teams? Based on your experiences, are teams finding this assistance helpful? What other types of assistance do teams need, if any?

Effectiveness/Impacts

12. In your opinion, to what extent has there been progress toward achieving SHN's objectives:
 - ▶ decreasing the number of adverse events that interventions are targeting and thereby reducing mortality and morbidity
 - ▶ increasing the rate of participation of healthcare organizations, partners, and teams
 - ▶ increasing knowledge transfer and uptake of learning among participating organizations
 - ▶ increasing the capacity of organizations to effect change that leads to safer patient care
13. What other changes to the healthcare system have occurred as a result of SHN, if any?

14. To your knowledge, have participating healthcare organizations integrated their SHN intervention outcomes into their own performance assessments? (*Probe: staff use in performance reviews, reports to hospital board, other*) How else do participants use the information on outcomes, if at all?
15. Are you aware of examples where the best practices of the interventions of SHN have been integrated into everyday healthcare delivery functions and protocols?
16. To your knowledge, what steps have healthcare organizations taken to support SHN interventions? (*Probe: new funding or reallocation of funds; leveraging resources; new staffing or reorganization of current staff; other*)
17. In your opinion, what factors are necessary to ensure that the interventions continue in participating healthcare organizations?
18. In your opinion, has SHN been an effective leader in promoting collaboration among healthcare professionals? Why or why not? How well does SHN integrate with other quality improvement initiatives?

Satisfaction and possible improvements

19. How satisfied are you with the SHN campaign? Based on your experiences, how satisfied are other stakeholders?
20. Do you have any suggestions for improving the campaign for Phase 2?
21. Do you have any other comments?

APPENDIX D

Team leader survey questionnaire

Survey of Team Leaders

Safer Healthcare Now!

Canadian Patient Safety Institute

An evaluation of Phase 1 of the *Safer Healthcare Now!* campaign is currently underway. PRA Inc., an independent research firm based in Winnipeg, with offices in Ottawa and Regina, has been retained by the Canadian Patient Safety Institute to conduct the evaluation.

The evaluation of *Safer Healthcare Now!* will assess the project's implementation and achievements. The results of the evaluation will provide best practices and lessons learned to assist both this patient safety campaign and future patient safety initiatives. The evaluation includes interviews with key stakeholder groups as well as surveys with representatives of enrolled healthcare organizations (key organizational contacts, team leaders, and senior leaders such as CEOs) and partner organizations. This survey is for team leaders.

Your response is very important to us. We understand your busy schedule, so most questions only ask you to check the appropriate circle. The questionnaire should take about 20 minutes to complete.

Your responses will be kept confidential, although compiled data and survey responses will be used in reports. Information will be grouped together in the reports, and no individual's responses will be identifiable. A summary of the evaluation findings will be available to campaign participants and members of the public.

We would appreciate receiving your completed questionnaire by March 7, 2007.

If you have any questions about this study, please call Amy Richmond of PRA at 1-888-877-6744 (toll-free) or Debbie Barnard of *Safer Healthcare Now!* at 780-498-7259.



Background

1. For which team are you the team leader? (If you are the leader of more than one team, please answer for the team that has been active in Safer Healthcare Now! for the longest period of time)

- ±1 Improved care for Acute Myocardial Infarction
- ±2 Prevent Central Line-Associated Blood Stream Infection
- ±3 Implement Medication Reconciliation
- ±4 Deploy Rapid Response Team
- ±5 Prevent Surgical Site Infection
- ±6 Prevent Ventilator Associated Pneumonia

2. Which of the following best describes your healthcare facility?

<p>Location:</p> <p>±1 Urban ±2 Rural/Northern</p>	<p>Size/type (based on CIHI classifications) <i>Please check one</i></p> <p>±1 1-49 beds</p> <p>±3 100-199 beds</p> <p>±5 400+ beds, non-teaching</p> <p>±7 Paediatric</p>	<p>±2 50-99 beds</p> <p>±4 200-399 beds</p> <p>±6 Teaching</p> <p>±8 Don't know</p>
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Implementation

3. Please indicate the implementation stage of your team based on the definitions below. These definitions apply to all interventions and measures.

Baseline stage: Pre-intervention. Data collected for the baseline should be collected before implementing small tests of change and should reflect the current processes in your facility. ±1

Early (partial) implementation stage: The team has: set a clear aim(s) for this intervention; identified which measures will indicate if the changes will lead to improvement; and started to implement small tests of change (PDSA) to identify and refine processes, procedures, and practices, which will lead to improvement and achieving the aim. When the team is close to the goal, they are ready to move to full implementation. ±2

Full implementation stage: The processes, procedures, and practices are finalized and have led to significant improvement. All team members in selected units are consistently implementing these processes, procedures, and practices, showing a sustained performance at or close to the goal. The team has achieved its aim, and they are ready to spread the intervention to other units. ±3

Note: These definitions are based on the descriptions of implementation that are contained in each intervention's Getting Started Kit.

4. (If your team is in early or full implementation) When did your team begin implementing the interventions?
_____ (Month/year)

±88 Don't know

5. What factors have contributed to the success of your team? (Please check all that apply)

- Nothing/not successful ±00
- Previous experience with other quality improvement projects ±01
- Support from clinical leaders in organization ±02
- Commitment of team members ±03
- Support from senior management ±04
- Existence of strong patient safety culture in healthcare organization ±05
- Additional staff to support team ±06
- Additional funding to support team ±07
- Leveraging funds (using additional funding from one source to attract money from another source)..... ±08
- Other (Please specify): _____ ±66
- _____
- Don't know..... ±88



6. What challenges has your team experienced in implementing the intervention? *(Please check all that apply)*

None/no challenges	±00
Limited previous experience with other quality improvement projects	±01
Insufficient clinical leadership	±02
Low level of commitment of team members.....	±03
Insufficient senior management support	±04
Lack of a strong patient safety culture in healthcare organization	±05
Insufficient staffing	±06
Insufficient funding.....	±07
Inability to sustain project momentum due to other priorities in organization	±08
Interventions required major changes in protocol/procedures/guidelines/hospital standards of practice.....	±09
Other <i>(Please specify)</i> : _____	±66

Don't know	±88

Team supports

7. Please rate how useful you have found the following supports provided to teams.

	Very useful	Useful	Neutral	Not so useful	Not at all useful	Don't know	Not applicable, did not use this support
a) Getting Started Kits (GSK).....	±4	±3	±2	±1	±0	±8	±7
b) Communities of Practice (CoP).....	±4	±3	±2	±1	±0	±8	±7
c) National Information calls with web demonstration.....	±4	±3	±2	±1	±0	±8	±7
d) National information calls – intervention specific	±4	±3	±2	±1	±0	±8	±7
e) National information calls (overall)	±4	±3	±2	±1	±0	±8	±7
f) Information calls (nodal).....	±4	±3	±2	±1	±0	±8	±7
g) National SHN newsletter.....	±4	±3	±2	±1	±0	±8	±7
h) SHN templates.....	±4	±3	±2	±1	±0	±8	±7
i) Any of the three SHN National Learning Series conferences	±4	±3	±2	±1	±0	±8	±7
j) SHN Node workshops.....	±4	±3	±2	±1	±0	±8	±7
k) Onsite visits from Node staff	±4	±3	±2	±1	±0	±8	±7
l) Telephone and e-mail consultations with Node staff	±4	±3	±2	±1	±0	±8	±7
m) Node newsletters/updates	±4	±3	±2	±1	±0	±8	±7
n) Canadian Intensive Care Unit Collaborative	±4	±3	±2	±1	±0	±8	±7
o) CAPHC Paediatric Medication Reconciliation Collaborative	±4	±3	±2	±1	±0	±8	±7
p) Western Node collaboratives (SSI/Medication Reconciliation)	±4	±3	±2	±1	±0	±8	±7
q) Ontario Trailblazers.....	±4	±3	±2	±1	±0	±8	±7
r) Other #1 <i>(Please specify)</i> _____	±4	±3	±2	±1	±0	±8	±7

s) Other #2 <i>(Please specify)</i> _____	±4	±3	±2	±1	±0	±8	±7



8. In general, how would you characterize the information you receive from SHN (both at the national level and from the nodes) across the following dimensions.

- a) Amount of information ±₃ Too much ±₂ Acceptable ±₁ Too little ±₈ Don't know
- b) Usefulness ±₃ Very clear ±₂ Acceptable ±₁ Difficult to understand ±₈ Don't know
- c) Timeliness ±₃ Very timely ±₂ Acceptable ±₁ Late ±₈ Don't know

9. How would you prefer to receive information from SHN? Please rate the following channels of communication based on your preference for receiving information in that format. Please note: not every channel of communication listed below is currently offered by SHN.

	Most prefer		Neutral		Least prefer	Don't know
a) Website — text	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
b) Website — audio	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
c) Videotape.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
d) Videoconference	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
e) Teleconference.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
f) E-mail	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
g) In person.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
h) Other #1 (specify) _____	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
i) Other #2 (specify) _____	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈

10. How does the SHN website compare with other websites that provide quality improvement information and support, such as IHI 100K Lives? For each of the following aspects of service, please indicate whether you think the SHN website is better, about the same, or worse than other websites in providing quality improvement information and support.

- a) Website design and layout ±₃ Better ±₂ About the same ±₁ Worse ±₈ Don't know
- b) Quality of information on website ±₃ Better ±₂ About the same ±₁ Worse ±₈ Don't know
- c) Usefulness of information on website..... ±₃ Better ±₂ About the same ±₁ Worse ±₈ Don't know



Measurement and analysis

11. What form of measurement worksheet do you use for reporting your data?

- ±₀₁ Excel ±₀₂ MS Word ±₆₆ Other _____ ±₈₈ Don't know

12. Please rate your level of agreement with the following statements about the measurement data collection strategy.

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree	Don't know	Not applicable
a) Measurement worksheet instructions are clear.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈	± ₇
b) Measurement worksheets are easy to complete	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈	± ₇
c) The measurement data collection strategy is too time-consuming	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈	± ₇
d) Our team does not have experience with similar data collection efforts	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈	± ₇
e) My organization receives and tracks our Hospital Standardized Mortality Ratio (HSMR)	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈	± ₇
f) My organization has found the HSMR data useful.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈	± ₇
g) My organization could use more training on the sampling and measurement aspects of the quality improvement model.	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈	± ₇
h) The assistance provided by the Central Measurement Team (CMT) is helpful.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈	± ₇
i) The assistance provided by the Node or SIA is helpful..	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈	± ₇
j) The Central Measurement Team (CMT) quarterly reports are useful	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈	± ₇

13. We submit data:

- ±₁ Monthly ±₂ Quarterly ±₃ Irregularly ±₀ Have not submitted any data yet ±₈ Don't know

14. On average, how much time does the data collection and worksheet completion take for your healthcare organization's intervention(s) for each data submission?

_____ (in hours)

15. How could the measurement process be improved?



Communications

16. In your opinion, what is the level of awareness of the SHN campaign and its activities among the following groups?

	Very aware	Somewhat aware	Neutral	Mostly unaware	Not at all aware	Don't know	Not applicable
a) Other healthcare professionals in your facility.....	±4	±3	±2	±1	±0	±8	±7
b) Healthcare professionals outside of your facility who are not involved in SHN interventions or have not begun implementing them	±4	±3	±2	±1	±0	±8	±7
c) Senior management of your facility	±4	±3	±2	±1	±0	±8	±7
d) Patients your team serves	±4	±3	±2	±1	±0	±8	±7
e) General public in your community	±4	±3	±2	±1	±0	±8	±7
f) Media representatives in your area	±4	±3	±2	±1	±0	±8	±7
g) Provincial/territorial health ministers.....	±4	±3	±2	±1	±0	±8	±7

17. Does your team do any of the following to increase the awareness of your SHN work? (Please check all that apply)

Promotional messages/posters/brochures in facility	±01
Workshops/presentations to other staff in your facility	±02
Workshops/presentations to staff in other facilities without interventions in your region/province.....	±03
Media releases.....	±04
Other (Please specify): _____	±66

Don't know	±88

Effectiveness and impacts

18. Please rate how effective the campaign has been at the following:

	Very effective	Somewhat effective	Neutral	Somewhat ineffective	Very ineffective	Don't know	Not applicable
a) Sharing best practices and "success stories" among campaign participants.	±5	±4	±3	±2	±1	±8	±7
b) Communicating campaign goals to participants.....	±5	±4	±3	±2	±1	±8	±7
c) Responding to your questions about the campaign	±5	±4	±3	±2	±1	±8	±7
d) Having clearly defined roles between the SHN National Steering Committee and the Nodes	±5	±4	±3	±2	±1	±8	±7
e) Having clearly defined expectations of participants	±5	±4	±3	±2	±1	±8	±7
f) Sharing information with participants	±5	±4	±3	±2	±1	±8	±7
g) Serving as an effective leader in quality improvement support and information.....	±5	±4	±3	±2	±1	±8	±7

INSTRUCTIONS: Please read each question carefully and check (✓) or write in the appropriate response. Return your completed questionnaire in the postage-paid envelope provided or by toll-free fax to PRA at 1-800-717-5456.



19. Please rate how effective the campaign has been at supporting your healthcare facility in its efforts to achieve the following objectives:

	Very effective	Somewhat effective	Neutral	Somewhat ineffective	Very ineffective	Don't know	Not applicable
a) Decreasing the number of preventable injuries and deaths in the patient population that is targeted by your intervention (in your facility).....	±5	±4	±3	±2	±1	±8	±7
b) Increasing knowledge transfer and uptake of learning among participating organizations in the area of patient safety.....	±5	±4	±3	±2	±1	±8	±7
c) Increasing the capacity of your facility to effect change that leads to safer patient care	±5	±4	±3	±2	±1	±8	±7
d) Spreading the interventions to other units in your facility	±5	±4	±3	±2	±1	±8	±7
e) Adopting additional SHN interventions in your facility	±5	±4	±3	±2	±1	±8	±7
f) Increasing the attention paid to patient safety in your in your facility.....	±5	±4	±3	±2	±1	±8	±7
g) Stimulating other process improvements in your facility targeted at improving the quality of care (in addition to the interventions)	±5	±4	±3	±2	±1	±8	±7
h) Integrating SHN with other quality improvement initiatives in your facility.....	±5	±4	±3	±2	±1	±8	±7

20. In your opinion, is there evidence of an ongoing need for a campaign like SHN?

Yes, strong evidence	Yes, some evidence	Neutral	No, unconvincing evidence	No evidence at all	Don't know
±4	±3	±2	±1	±0	±8

21. To your knowledge, is your facility or health region taking steps to sustain the current work on the six interventions?

±1 Yes ±0 No ±88 Don't know

22. If yes to Question 21, please describe the steps being taken by your facility or health region.

23. What do you think is necessary to ensure that interventions continue and expand in your facility?



24. Overall, how satisfied have you been with the SHN campaign in Phase 1 (April 2005 to December 2006)?

Very satisfied	Somewhat satisfied	Neutral	Somewhat dissatisfied	Very dissatisfied	Don't know
±5	±4	±3	±2	±1	±8

25. Planning has begun for the next phase of the campaign. Do you have any suggestions for improving the campaign for Phase 2?

26. Do you have any other comments or concerns about SHN?

Thank you for taking the time to complete this survey.
Please return the questionnaire in the enclosed self-addressed, postage-paid envelope to:

PRA Inc.
500 – 363 Broadway
Winnipeg, Manitoba R3C 3N9

Or you can fax it back to us toll-free at:
1-800-717-5456



APPENDIX E

Key organizational contact and team leader survey questionnaires

Survey of Healthcare Organizations Key Organizational Contacts

Safer Healthcare Now!

Canadian Patient Safety Institute

An evaluation of Phase 1 of the *Safer Healthcare Now!* campaign is currently underway. PRA Inc., an independent research firm based in Winnipeg with offices in Ottawa and Regina, has been retained by the Canadian Patient Safety Institute to conduct the evaluation. The evaluation of *Safer Healthcare Now!* will assess the project's implementation and achievements. The results of the evaluation will provide best practices and lessons learned to assist both this patient safety campaign and future patient safety initiatives. The evaluation includes interviews with key stakeholder groups as well as surveys with representatives of enrolled healthcare organizations (key organizational contacts, team leaders, and senior leaders such as CEOs) and partner organizations. This survey is for key organizational contacts.

Your response is very important to us. We understand your busy schedule, so most questions only ask you to check the appropriate circle. The questionnaire should take about 20 minutes to complete.

Your responses will be kept confidential within PRA Inc., although compiled data and survey responses will be used in reports. Information will be grouped together in the reports, and no individual's responses will be identifiable. A summary of the evaluation findings will be available to campaign participants and members of the public.

The number on the bottom of the questionnaire is simply used to ensure that our survey is accurately tracked. This number allows us to re-contact only those who have not yet replied. In doing so, we minimize costs and unnecessary interruptions to respondents.

We would appreciate receiving your completed questionnaire by March 2, 2007 by toll-free fax 1-800-717-5456.

If you have any questions about this study, please call Amy Richmond of PRA at 1-888-877-6744 (toll-free) or Debbie Barnard of *Safer Healthcare Now!* at 1-780-498-7259.



Implementation

8. Please indicate the implementation stage of your teams that are identified in Question 4 based on the definitions below. Place the number of teams in each stage in the space provided. If a team works in multiple units, indicate the stage of implementation of the most advanced unit.

These definitions apply to all interventions and measures.

	No. of teams
Pre-baseline stage: Team(s) is/are being organized and data collection for the baseline has not started	_____
Baseline stage: Pre-intervention. Data collected for the baseline should be collected before implementing small tests of change and should reflect the current processes in your healthcare organization	_____
Early (partial) implementation stage: The team has: set a clear aim(s) for this intervention; identified which measures will indicate if the changes will lead to improvement; and started to implement small tests of change (PDSA) to identify and refine processes, procedures, and practices, which will lead to improvement and achieving the aim. When the team is close to the goal, they are ready to move to full implementation.....	_____
Full implementation stage: The processes, procedures, and practices are finalized and have led to significant improvement. All team members in selected unit(s) is/are consistently implementing these processes, procedures, and practices, showing a sustained performance at or close to the goal. The team has achieved its aim, and they are ready to spread the intervention to other units	_____

These definitions are based on the descriptions of implementation that are contained in each intervention's Getting Started Kit.

9. **(If your team is in early or full implementation)** When did your organization begin implementing the intervention(s)? *(Please use the date when the first intervention began implementation)*

_____ (month/year)

±88 Don't know

10. What factors have contributed to the success of the teams in your healthcare organization? *(Please check all that apply)*

Nothing/not successful.....	±00
Previous experience with other quality improvement projects.....	±01
Support from clinical leaders in organization.....	±02
Commitment of team members.....	±03
Support from senior management.....	±04
Existence of strong patient safety culture in healthcare organization.....	±05
Additional staff to support team	±06
Additional funding to support team.....	±07
Leveraging funds (using additional funding from one source to attract money from another source)	±08
Other <i>(please specify)</i> : _____	±66

Don't know	±88



11. What challenges has your healthcare organization experienced in implementing the intervention(s)? (Please check all that apply)

- None/no challenges ±00
- Limited previous experience with other quality improvement projects ±01
- Insufficient clinical leadership..... ±02
- Low level of commitment of team members..... ±03
- Insufficient senior management support ±04
- Lack of a strong patient safety culture in healthcare organization..... ±05
- Insufficient staffing ±06
- Insufficient funding ±07
- Inability to sustain project momentum due to other priorities in organization ±08
- Interventions required major changes in the protocol/procedures/guidelines/hospital standards of practice ±09
- Other (please specify): _____ ±66
- _____
- Don't know ±88

Team supports

12. Please rate how useful your healthcare organization has found the following Safer Health Care Now! (SHN) supports:

	Very useful	Useful	Neutral	Not so useful	Not at all useful	Don't know	Not applicable, did not use this support
a) Getting Started Kits (GSK)	±4	±3	±2	±1	±0	±8	±7
b) Communities of Practice (CoP).....	±4	±3	±2	±1	±0	±8	±7
c) National Information calls with web demonstration	±4	±3	±2	±1	±0	±8	±7
d) National information calls – intervention specific	±4	±3	±2	±1	±0	±8	±7
e) National information calls (overall)	±4	±3	±2	±1	±0	±8	±7
f) Information calls (nodal).....	±4	±3	±2	±1	±0	±8	±7
g) National SHN newsletter	±4	±3	±2	±1	±0	±8	±7
h) SHN templates	±4	±3	±2	±1	±0	±8	±7
i) Any of the three SHN National Learning Series conferences.....	±4	±3	±2	±1	±0	±8	±7
j) SHN Node workshops.....	±4	±3	±2	±1	±0	±8	±7
k) Onsite visits from Node staff	±4	±3	±2	±1	±0	±8	±7
l) Telephone and e-mail consultations with Node staff.....	±4	±3	±2	±1	±0	±8	±7
m) Node newsletters/updates.....	±4	±3	±2	±1	±0	±8	±7
n) Canadian Intensive Care Unit Collaborative	±4	±3	±2	±1	±0	±8	±7
o) CAPHC Paediatric Medication Reconciliation Collaborative	±4	±3	±2	±1	±0	±8	±7
p) Western Node collaboratives (SSI/Medication Reconciliation).....	±4	±3	±2	±1	±0	±8	±7
q) Ontario Trailblazers.....	±4	±3	±2	±1	±0	±8	±7
p) Other #1 (Please specify) _____	±4	±3	±2	±1	±0	±8	±7

q) Other #2 (Please specify) _____	±4	±3	±2	±1	±0	±8	±7



13. In general, how would you characterize the information your organization receives from SHN (both at the national level and from the nodes) across the following dimensions:

- a) Amount of information ±₃ Too much ±₂ Acceptable ±₁ Too little ±₈ Don't know
- b) Usefulness ±₃ Very useful ±₂ Acceptable ±₁ Not useful ±₈ Don't know
- c) Timeliness ±₃ Very timely ±₂ Acceptable ±₁ Late ±₈ Don't know

14. How would you prefer to receive information from SHN? Please rate the following channels of communication based on your preference for receiving information in that format. Please note: not every channel of communication listed below is currently offered by SHN.

	Most prefer		Neutral		Least prefer	Don't know
a) Website — text.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
b) Website — audio	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
c) Videotape	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
d) Videoconference.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
e) Teleconference	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
f) E-mail.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
g) In person	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
h) Other #1(<i>specify</i>) _____ _____	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
i) Other #2(<i>specify</i>) _____ _____	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈

15. How does the SHN website compare with other websites that provide quality improvement information and support, such as IHI 100K Lives? For each of the following aspects of service, please indicate whether you think the SHN website is better, about the same, or worse than other websites in providing quality improvement information and support.

- a) Website design and layout ±₃ Better ±₂ About the same ±₁ Worse ±₈ Don't know
- b) Quality of information on website ±₃ Better ±₂ About the same ±₁ Worse ±₈ Don't know
- c) Usefulness of information on website..... ±₃ Better ±₂ About the same ±₁ Worse ±₈ Don't know



Measurement and analysis

16. Please rate your level of agreement with the following statements about the measurement data collection strategy.

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree	Don't know	Not applicable
a) Measurement worksheet instructions are clear.....	±5	±4	±3	±2	±1	±8	±7
b) Measurement worksheets are easy to complete	±5	±4	±3	±2	±1	±8	±7
c) The measurement data collection strategy is too time-consuming.....	±5	±4	±3	±2	±1	±8	±7
d) Our team does not have experience with similar data collection efforts	±5	±4	±3	±2	±1	±8	±7
e) My organization receives and tracks our Hospital Standardized Mortality Ratio (HSMR). .	±5	±4	±3	±2	±1	±8	±7
f) My organization has found the HSMR data useful.....	±5	±4	±3	±2	±1	±8	±7
g) My organization could use more training on sampling and measurement aspects of the quality improvement model.	±5	±4	±3	±2	±1	±8	±7
h) The assistance provided by the Central Measurement Team (CMT) is helpful	±5	±4	±3	±2	±1	±8	±7
i) The assistance provided by the Node or SIA is helpful	±5	±4	±3	±2	±1	±8	±7
j) The Central Measurement Team (CMT) quarterly reports are useful.....	±5	±4	±3	±2	±1	±8	±7

17. We submit data:

- ±1 Monthly
- ±2 Quarterly
- ±3 Irregularly
- ±0 Have not submitted any data yet
- ±8 Don't know

18. How could the measurement process be improved?



Communications

19. In your opinion, what is the level of awareness of the SHN campaign and its activities among the following groups?

	Very aware	Somewhat aware	Neutral	Mostly unaware	Not at all aware	Don't know	Not applicable
a) Other healthcare professionals in your healthcare organization (hospital or region).....	±4	±3	±2	±1	±0	±8	±7
b) Healthcare professionals outside of your organization who are not involved in SHN interventions or who have not begun implementing them.....	±4	±3	±2	±1	±0	±8	±7
c) Senior management of your healthcare organization.....	±4	±3	±2	±1	±0	±8	±7
d) Patients in your healthcare organization.....	±4	±3	±2	±1	±0	±8	±7
e) General public in your community.....	±4	±3	±2	±1	±0	±8	±7
f) Media representatives in your area.....	±4	±3	±2	±1	±0	±8	±7
g) Provincial/territorial Ministries of Health.....	±4	±3	±2	±1	±0	±8	±7

20. Does your healthcare organization do any of the following to increase awareness of your SHN work?

Promotional messages/posters/brochures internal to your organization.....	±01
Workshops/presentations to other staff in facilities with the interventions.....	±02
Workshops/presentations to staff in other facilities without interventions in your region/province.....	±03
Media releases.....	±04
Other (Please specify): _____	±66

Don't know.....	±88

Effectiveness and impacts

21. Please rate how effective the campaign has been at the following:

	Very effective	Somewhat effective	Neutral	Somewhat ineffective	Very ineffective	Don't know	Not applicable
a) Sharing best practices and "success stories" among campaign participants.....	±5	±4	±3	±2	±1	±8	±7
b) Communicating campaign goals to participants....	±5	±4	±3	±2	±1	±8	±7
c) Responding to your questions about the campaign.....	±5	±4	±3	±2	±1	±8	±7
d) Having clearly defined roles between the SHN National Steering Committee and the Nodes.....	±5	±4	±3	±2	±1	±8	±7
e) Having clearly defined expectations of participants.....	±5	±4	±3	±2	±1	±8	±7
f) Sharing information with participants.....	±5	±4	±3	±2	±1	±8	±7
g) Serving as an effective leader in quality improvement support and information.....	±5	±4	±3	±2	±1	±8	±7



22. Please rate how effective the campaign has been at supporting your organization in its efforts to achieve the following objectives:

	Very effective	Somewhat effective	Neutral	Somewhat ineffective	Very ineffective	Don't know	Not applicable
a) Decreasing the number of preventable injuries and deaths in the patient population that is targeted by your intervention (in your healthcare organization.)	±5	±4	±3	±2	±1	±8	±7
b) Increasing the knowledge transfer and uptake of learning among participating organizations in the area of patient safety	±5	±4	±3	±2	±1	±8	±7
c) Increasing the capacity of your organization to effect change that leads to safer patient care	±5	±4	±3	±2	±1	±8	±7
d) Spreading the interventions to other units in your healthcare organization.....	±5	±4	±3	±2	±1	±8	±7
e) Adopting additional SHN interventions in your healthcare organization.....	±5	±4	±3	±2	±1	±8	±7
f) Increasing the attention paid to patient safety in your healthcare organization.....	±5	±4	±3	±2	±1	±8	±7
g) Stimulating other process improvements in your healthcare organization targeted at improving the quality of care (in addition to the interventions).....	±5	±4	±3	±2	±1	±8	±7
h) Integrating SHN with other quality improvement initiatives in your organization.....	±5	±4	±3	±2	±1	±8	±7

23. In your opinion, is there evidence of an ongoing need for a campaign like SHN?

Yes, strong evidence	Yes, some evidence	Neutral	No, unconvincing evidence	No evidence at all	Don't know
±4	±3	±2	±1	±0	±8

24. To your knowledge, has your healthcare organization done any of the following to support SHN interventions?

	Yes	No	Don't know	Not applicable
a) Contribution of additional staffing	±1	±0	±8	±7
b) Contribution of additional funding.....	±1	±0	±8	±7
c) Obtaining outside funding/leveraging funding.....	±1	±0	±8	±7
d) Creating a coordinator or support position for interventions	±1	±0	±8	±7
e) Interventions are included in strategic plans.....	±1	±0	±8	±7
f) Interventions are included in budgetary plans	±1	±0	±8	±7
g) Interventions are included in reports to the board	±1	±0	±8	±7
h) Interventions are included in reports to quality councils	±1	±0	±8	±7
i) Other actions to support SHN interventions (<i>Please specify</i>) _____ _____	±1	±0	±8	±7

25. To your knowledge, are there plans to do any of the following:

Spread the SHN interventions to other units within facility(ies) that already have interventions.....	±1 Yes	±0 No	±8 Don't know
If applicable, expand the SHN interventions to other facilities within your region.....	±1 Yes	±0 No	±8 Don't know
Enroll in additional applicable interventions when they are announced by SHN.....	±1 Yes	±0 No	±8 Don't know



26. What do you think is necessary to ensure that interventions continue and expand in your healthcare organization?

27. Overall, how satisfied have you been with the SHN campaign in Phase 1 (April 2005 to December 2006)?

Very satisfied	Somewhat satisfied	Neutral	Somewhat dissatisfied	Very dissatisfied	Don't know
±5	±4	±3	±2	±1	±8

28. Planning has begun for the next phase of the campaign. Do you have any suggestions for improving the campaign for Phase 2?

29. Do you have any other comments or concerns about SHN?

Thank you for taking the time to complete this survey.

Please return the completed questionnaire to us by toll-free fax:

1-800-717-5456



Survey of Healthcare Organizations Senior Leaders

Safer Healthcare Now!

Canadian Patient Safety Institute

An evaluation of Phase 1 of the *Safer Healthcare Now!* campaign is currently underway. PRA Inc., an independent research firm based in Winnipeg with offices in Ottawa and Regina, has been retained by the Canadian Patient Safety Institute to conduct the evaluation. The evaluation of *Safer Healthcare Now!* will assess the project's implementation and achievements. The results of the evaluation will provide best practices and lessons learned to assist both this patient safety campaign and future patient safety initiatives. The evaluation includes interviews with key stakeholder groups as well as surveys with representatives of enrolled healthcare organizations (key organizational contacts, team leaders, and senior leaders such as CEOs) and partner organizations. This survey is for senior leaders.

Your response is very important to us. We understand your busy schedule, so most questions only ask you to check the appropriate circle. The questionnaire should take about 10 minutes to complete.

Your responses will be kept confidential within PRA Inc., although compiled data and survey responses will be used in reports. Information will be grouped together in the reports, and no individual's responses will be identifiable. A summary of the evaluation findings will be available to campaign participants and members of the public.

The number on the bottom of the questionnaire is simply used to ensure that our survey is accurately tracked. This number allows us to re-contact only those who have not yet replied. In doing so, we minimize costs and unnecessary interruptions to respondents.

We would appreciate receiving your completed questionnaire by March 2, 2007 by toll-free fax 1-800-717-5456.

If you have any questions about this study, please call Amy Richmond of PRA at 1-888-877-6744 (toll-free) or Debbie Barnard of *Safer Healthcare Now!* at 1-780-498-7259.



Background

1. Is your healthcare organization ... (check one)

±01 a single hospital/health centre/health facility? ±02 a health region/health authority/multi-facility?

The rest of the questionnaire refers to your healthcare organization.

Please answer based on your response to Question 1 (for your facility or for your health region).

2. If applicable, how many hospitals/health centres are included in your healthcare organization? _____

3. Which of the following describes your healthcare organization's facility(ies)?

Single facility (see Q1)		Health region (see Q1)	
Location:		Smallest facility	Largest facility
±1 Urban	±2 Rural/Northern	±1 Urban ±2 Rural/Northern	±1 Urban ±2 Rural/Northern
Size/type (based on CIHI classifications) Please check one		Size/type (based on CIHI classifications) Please check one	Size/type (based on CIHI classifications) Please check one
±1 1-49 beds	±2 50-99 beds	±1 1-49 beds	±1 1-49 beds
±3 100-199 beds	±4 200-399 beds	±2 50-99 beds	±2 50-99 beds
±5 400+ beds, non teaching	±6 Teaching	±3 100-199 beds	±3 100-199 beds
±7 Paediatric	±8 Don't know	±4 200-399 beds	±4 200-399 beds
		±5 400+ beds, non teaching	±5 400+ beds, non teaching
		±6 Teaching	±6 Teaching
		±7 Paediatric	±7 Paediatric
		±8 Don't know	±8 Don't know

Challenges for healthcare organizations

The next two questions will provide the evaluation with information on the current context in which healthcare organizations are operating.

4. What do you see as the top five challenges facing your healthcare organization over the next 1 to 5 years? Please list the challenges starting with one as the biggest challenge.

1. _____
2. _____
3. _____
4. _____
5. _____

5. Given these challenges, what would you rank as your top five priorities in the next 1 to 5 years? Please list in order starting with one as your first priority.

1. _____
2. _____
3. _____
4. _____
5. _____



Effectiveness and impacts of SHN

The remaining questions ask about the SHN campaign and how your organization has responded to it.

6. Please rate how effective the campaign has been at supporting your organization in its efforts to achieve the following objectives:

	Very effective	Somewhat effective	Neutral	Somewhat ineffective	Very ineffective	Don't know	Not applicable
a) Decreasing the number of preventable injuries and deaths in the patient population that is targeted by your intervention (in your healthcare organization.).....	±5	±4	±3	±2	±1	±8	±7
b) Increasing knowledge transfer and uptake of learning among participating organizations in the area of patient safety.....	±5	±4	±3	±2	±1	±8	±7
c) Increasing the capacity of your organization to effect change that leads to safer patient care.....	±5	±4	±3	±2	±1	±8	±7
d) Spreading the interventions to other units in your healthcare organization.....	±5	±4	±3	±2	±1	±8	±7
e) Adopting additional SHN interventions in your healthcare organization.....	±5	±4	±3	±2	±1	±8	±7
f) Increasing the attention paid to patient safety in your healthcare organization.....	±5	±4	±3	±2	±1	±8	±7
g) Stimulating other process improvements in your healthcare organization targeted at improving the quality of care (in addition to the interventions).....	±5	±4	±3	±2	±1	±8	±7
h) Integrating SHN with other quality improvement initiatives in your organization.....	±5	±4	±3	±2	±1	±8	±7

7. In your opinion, is there evidence of an ongoing need for a campaign like SHN?

Yes, strong evidence	Yes, some evidence	Neutral	No, unconvincing evidence	No evidence at all	Don't know
±4	±3	±2	±1	±0	±8

8. Has your healthcare organization done any of the following to support SHN interventions?

	Yes	No	Don't know	Not applicable
a) Contribution of additional staffing.....	±1	±0	±8	±7
b) Contribution of additional funding.....	±1	±0	±8	±7
c) Obtaining outside funding/leveraging funding.....	±1	±0	±8	±7
d) Creating a coordinator or support position for interventions.....	±1	±0	±8	±7
e) Interventions are included in strategic plans.....	±1	±0	±8	±7
f) Interventions are included in budgetary plans.....	±1	±0	±8	±7
g) Interventions are included in reports to the board.....	±1	±0	±8	±7
h) Interventions are included in reports to quality councils.....	±1	±0	±8	±7
i) Other actions to support SHN interventions (<i>Please specify</i>): _____ _____	±1	±0	±8	±7



9. How likely is your healthcare organization to do any of the following **in the future** to support the SHN interventions.

	Very likely	Somewhat likely	Neutral	Somewhat unlikely	Very unlikely	Don't know	Not applicable
a) Contribution of additional staffing.....	±5	±4	±3	±2	±1	±8	±7
b) Contribution of additional funding.....	±5	±4	±3	±2	±1	±8	±7
c) Obtaining outside funding/leveraging funding	±5	±4	±3	±2	±1	±8	±7
d) Creating a coordinator or support position for interventions	±5	±4	±3	±2	±1	±8	±7
e) Interventions are included in strategic plans	±5	±4	±3	±2	±1	±8	±7
f) Interventions are included in budgetary plans.....	±5	±4	±3	±2	±1	±8	±7
g) Interventions are included in reports to the board	±5	±4	±3	±2	±1	±8	±7
h) Interventions are included in reports to quality councils	±5	±4	±3	±2	±1	±8	±7
i) Spread the SHN interventions to other units within the current facility	±5	±4	±3	±2	±1	±8	±7
j) If applicable, expand the SHN interventions to other facilities within your region.....	±5	±4	±3	±2	±1	±8	±7
k) Enroll in additional applicable interventions when they are announced by SHN.....	±5	±4	±3	±2	±1	±8	±7

10. What do you think is necessary to ensure that the SHN interventions continue and expand in your healthcare organization?

11. Overall, how satisfied have you been with the SHN campaign?

Very satisfied	Somewhat satisfied	Neutral	Somewhat dissatisfied	Very dissatisfied	Don't know
±5	±4	±3	±2	±1	±8



12. Do you have any suggestions for how the SHN campaign can work better with healthcare organizations?

Thank you for taking the time to complete this survey.

Please return the completed questionnaire to us by toll-free fax:

1-800-717-5456



APPENDIX F

Partner survey questionnaire

Survey of Healthcare Organizations Partners

Safer Healthcare Now!

Canadian Patient Safety Institute

An evaluation of Phase 1 of the *Safer Healthcare Now!* campaign is currently underway. PRA Inc., an independent research firm based in Winnipeg with offices in Ottawa and Regina, has been retained by the Canadian Patient Safety Institute to conduct the evaluation. The evaluation of *Safer Healthcare Now!* will assess the project's implementation and achievements. The results of the evaluation will provide best practices and lessons learned to assist both this patient safety campaign and future patient safety initiatives. The evaluation includes interviews with key stakeholder groups as well as surveys with representatives of enrolled healthcare organizations (key organizational contacts, team leaders, and senior leaders such as CEOs) and partner organizations. This survey is for enrolled partners.

Your response is very important to us. We understand your busy schedule, so most questions only ask you to check the appropriate circle. The questionnaire should take about 15 minutes to complete.

Your responses will be kept confidential within PRA Inc., although compiled data and survey responses will be used in reports. Information will be grouped together in the reports, and no individual's responses will be identifiable. A summary of the evaluation findings will be available to campaign participants and members of the public.

The number on the bottom of the questionnaire is simply used to ensure that our survey is accurately tracked. This number allows us to re-contact only those who have not yet replied. In doing so, we minimize costs and unnecessary interruptions to respondents.

We would appreciate receiving your completed questionnaire by February 23, 2007.

If you have any questions about this study, please call Amy Richmond of PRA at 1-888-877-6744 (toll-free) or Debbie Barnard of *Safer Healthcare Now!* at 780-498-7259.



Background

1. Which of the following describes your organization? *(Please check one answer)*

- ±01 Health region/Health authority
- ±02 Provincial health ministry/department
- ±03 Professional association/society
- ±04 Professional accreditation organization
- ±05 Industry association
- ±06 Corporation
- ±07 Non-profit organization
- ±66 Other *(Please specify)* _____
- ±88 Don't know

2. When did your organization enrol as a partner in *Safer Healthcare Now!* (SHN)?

_____ *(month/year)*

±88 Don't know

Involvement in campaign

3. How has your organization participated in SHN? For each activity, please check all types of involvement that apply.

SHN activities	Type of involvement					
	Sponsored (money)	Sponsored(in kind)	Attended, used, or serve on	Not involved	Don't know	Not applicable
a) Communities of Practice	±1	±2	±3	±0	±8	±7
b) National Information calls with web demonstration	±1	±2	±3	±0	±8	±7
c) National information calls – intervention specific.....	±1	±2	±3	±0	±8	±7
d) National information calls (overall)	±1	±2	±3	±0	±8	±7
e) Information calls (nodal)	±1	±2	±3	±0	±8	±7
f) SHN workshops	±1	±2	±3	±0	±8	±7
g) Any of the three SHN National Learning Series conferences	±1	±2	±3	±0	±8	±7
h) National Steering Committee	±1	±2	±3	±0	±8	±7
i) Nodal steering committee	±1	±2	±3	±0	±8	±7
j) Clinical support groups	±1	±2	±3	±0	±8	±7
k) Other #1 <i>(specify)</i> _____	±1	±2	±3	±0	±8	±7
l) Other #2 <i>(specify)</i> _____	±1	±2	±3	±0	±8	±7
m) Other #3 <i>(specify)</i> _____	±1	±2	±3	±0	±8	±7

4. Does your organization do any of the following to increase awareness of SHN? *(Please check all that apply)*

- Make available SHN promotional messages/posters/brochures/newsletters to your members ±01
- Host workshops/presentations/educational sessions on SHN for your membership..... ±02
- Include SHN activities in your newsletter
- Include link to SHN on your website
- Include descriptions of SHN activities on your website
- Include SHN activities in your organization's media releases, when relevant..... ±06
- Other *(Please specify)*: _____ ±66
- _____ ±66
- Don't know
- _____ ±88



5. Does your organization do any of the following to promote enrolment in SHN? *(Please check all that apply)*

- Encourage members to join SHN on your website..... ±01
- Include information in your newsletter on how to enroll in SHN ±02
- Promote participation in SHN at meetings of your members ±03
- Other *(Please specify)*: _____ ±66
- _____
- Don't know ±88

Campaign supports

6. Please rate how useful you believe the following supports are for healthcare organizations:

	Very useful	Useful	Neutral	Not so useful	Not at all useful	Don't know
a) Getting Started Kits (GSK)	±4	±3	±2	±1	±0	±8
b) Communities of Practice (CoP)	±4	±3	±2	±1	±0	±8
c) National Information calls with web demonstration	±4	±3	±2	±1	±0	±8
d) National information calls – intervention specific	±4	±3	±2	±1	±0	±8
e) National information calls (overall)	±4	±3	±2	±1	±0	±8
f) Information calls (nodal)	±4	±3	±2	±1	±0	±8
g) National SHN newsletter	±4	±3	±2	±1	±0	±8
h) SHN templates	±4	±3	±2	±1	±0	±8
i) Any of the three SHN National Learning Series conferences.....	±4	±3	±2	±1	±0	±8
j) SHN Node workshops	±4	±3	±2	±1	±0	±8
k) Onsite visits from Node staff	±4	±3	±2	±1	±0	±8
l) Telephone and e-mail consultations with Node staff.....	±4	±3	±2	±1	±0	±8
m) Node newsletters/updates.....	±4	±3	±2	±1	±0	±8
n) Canadian Intensive Care Unit Collaborative	±4	±3	±2	±1	±0	±8
o) CAPHC Paediatric Medication Reconciliation Collaborative	±4	±3	±2	±1	±0	±8
p) Western Node collaboratives (SSI/Medication Reconciliation).....	±4	±3	±2	±1	±0	±8
q) Ontario Trailblazers.....	±4	±3	±2	±1	±0	±8
r) Other #1 <i>(specify)</i> _____	±4	±3	±2	±1	±0	±8

s) Other #2 <i>(specify)</i> _____	±4	±3	±2	±1	±0	±8



7. In general, how would you characterize the information your organization receives from SHN (both at the national level and from the Nodes) across the following dimensions:

- a) Amount of information ±₃ Too much ±₂ Acceptable ±₁ Too little ±₈ Don't know
- b) Usefulness ±₃ Very useful ±₂ Acceptable ±₁ Not useful ±₈ Don't know
- c) Timeliness ±₃ Very timely ±₂ Acceptable ±₁ Late ±₈ Don't know

8. How would you prefer to receive information from SHN? Please rate the following channels of communication based on your preference for receiving information in that format.

Please note: not every channel of communication listed below is currently offered by SHN.

	Most prefer		Neutral		Least prefer	Don't know
a) Website — text.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
b) Website — audio.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
c) Videotape.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
d) Videoconference.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
e) Teleconference.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
f) E-mail.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
g) In person.....	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈
h) Other #1 (specify) _____	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈

i) Other #2 (specify) _____	± ₅	± ₄	± ₃	± ₂	± ₁	± ₈

9. How does the SHN website compare with other websites that provide quality improvement information and support, such as IHI 100K Lives? For each of the following aspects of service, please indicate whether you think the SHN website is better, about the same, or worse than other websites in providing quality improvement information and support.

- a) Website design and layout ±₃ Better ±₂ About the same ±₁ Worse ±₈ Don't know
- b) Quality of information on website ±₃ Better ±₂ About the same ±₁ Worse ±₈ Don't know
- c) Usefulness of information on website..... ±₃ Better ±₂ About the same ±₁ Worse ±₈ Don't know

Communications

10. In your opinion, what is the level of awareness of the SHN campaign and its activities among the following groups?

	Very aware	Somewhat aware	Neutral	Mostly unaware	Not at all aware	Don't know	Not applicable
a) Healthcare professionals who are members of your organization.	± ₄	± ₃	± ₂	± ₁	± ₀	± ₈	± ₇
b) Healthcare professionals outside of your organization who are not involved in SHN interventions or who have not begun implementing them.....	± ₄	± ₃	± ₂	± ₁	± ₀	± ₈	± ₇
c) Senior management of hospitals.....	± ₄	± ₃	± ₂	± ₁	± ₀	± ₈	± ₇
d) Patients	± ₄	± ₃	± ₂	± ₁	± ₀	± ₈	± ₇
e) General public.....	± ₄	± ₃	± ₂	± ₁	± ₀	± ₈	± ₇
f) Media representatives.....	± ₄	± ₃	± ₂	± ₁	± ₀	± ₈	± ₇
g) Provincial/territorial Ministries of Health	± ₄	± ₃	± ₂	± ₁	± ₀	± ₈	± ₇



Effectiveness and impacts

11. Please rate how effective the campaign has been at the following:

	Very effective	Somewhat effective	Neutral	Somewhat ineffective	Very ineffective	Don't know	Not applicable
a) Sharing best practices and "success stories" among campaign participants.....	±5	±4	±3	±2	±1	±8	±7
b) Communicating campaign goals to participants....	±5	±4	±3	±2	±1	±8	±7
c) Responding to your questions about the campaign	±5	±4	±3	±2	±1	±8	±7
d) Having clearly defined roles between the SHN National Steering Committee and the Nodes.....	±5	±4	±3	±2	±1	±8	±7
e) Having clearly defined expectations of participants.....	±5	±4	±3	±2	±1	±8	±7
f) Sharing information with participants	±5	±4	±3	±2	±1	±8	±7
g) Serving as an effective leader in quality improvement support and information.....	±5	±4	±3	±2	±1	±8	±7

12. Based on your experience with SHN, please rate how effective the campaign has been at supporting participating healthcare organizations in their efforts to achieve the following objectives:

	Very effective	Somewhat effective	Neutral	Somewhat ineffective	Very ineffective	Don't know	Not applicable
a) Increasing knowledge transfer and uptake of learning among participating organizations in the area of patient safety	±5	±4	±3	±2	±1	±8	±7
b) Increasing the capacity of the participating healthcare organizations to effect change that leads to safer patient care.....	±5	±4	±3	±2	±1	±8	±7
c) Adopting additional SHN interventions in participating healthcare organizations.....	±5	±4	±3	±2	±1	±8	±7
d) Increasing the attention paid to patient safety within participating healthcare organizations.....	±5	±4	±3	±2	±1	±8	±7
e) Stimulating other process improvements in participating healthcare organizations targeted at improving the quality of care (in addition to the interventions)	±5	±4	±3	±2	±1	±8	±7
f) Integrating SHN with other quality improvement initiatives in participating healthcare organizations	±5	±4	±3	±2	±1	±8	±7

13. In your opinion, is there evidence of an ongoing need for a campaign like SHN?

Yes, strong evidence	Yes, some evidence	Neutral	No, unconvincing evidence	No evidence at all	Don't know
±4	±3	±2	±1	±0	±8



14. What do you think is necessary to ensure that healthcare organizations can continue and expand SHN interventions?

Four horizontal lines for handwritten response.

15. Overall, how satisfied have you been with the SHN campaign in Phase 1 (April 2005 to December 2006)?

Very satisfied	Somewhat satisfied	Neutral	Somewhat dissatisfied	Very dissatisfied	Don't know
±5	±4	±3	±2	±1	±8

16. Planning has begun for the next phase of the campaign. Do you have any suggestions for improving the campaign for Phase 2?

Eight horizontal lines for handwritten response.

Thank you for taking the time to complete this survey. Please return the questionnaire in the enclosed self-addressed, postage-paid envelope to:

PRA Inc.
500 – 363 Broadway
Winnipeg, Manitoba R3C 3N9

Or you can fax it back to us toll-free at:
1-800-717-5456



APPENDIX G

Detailed survey results

Implementation (Section 4.2)

Table 1: Challenges experienced by healthcare organizations/teams				
	KOC (n=75)		Team leader (n=86)	
	#	%	#	%
Insufficient staffing	51	68%	46	54%
Inability to sustain project momentum	48	64%	39	45%
Insufficient funding	37	49%	34	40%
Interventions required major changes in protocol	21	28%	29	34%
Limited experience with other quality improvement projects	11	15%	16	19%
Insufficient senior management support	9	12%	15	17%
Lack of a strong patient safety culture	18	24%	10	12%
Insufficient clinical leadership	15	20%	9	11%
Low level of commitment of team members	14	19%	7	8%
Lack of physician support	--	--	4	5%
Difficulty with teams/not all equally active/staff changes	--	--	4	5%
Data collection	2	3%	3	3%
Lack of resources (unspecified)	--	--	3	4%
Required culture change/natural resistance	--	--	2	2%
Time to implement	2	3%	1	1%
Competing priorities/initiatives	1	1%	1	1%
Other	4	5%	8	9%
None/no challenges	--	--	3	4%
Don't know/no response	6	8%	--	--

Note: Respondents could choose more than one answer. Totals may sum to more than 100%.

Team supports (Section 4.3)

Table 2: Usefulness of various supports – Team Leader Survey (n=86)					
	# using support	Very useful/ useful	Neutral	Not so useful/Not at all useful	DK/NR
Getting Started Kits	85	88%	8%	2%	1%
Communities of Practice	83	55%	30%	12%	2%
National information calls with web demonstration	66	44%	32%	21%	3%
National information calls – intervention specific	75	61%	20%	16%	3%
National information calls - overall	73	41%	33%	23%	3%
Information calls (nodal)	66	52%	24%	15%	9%
National SHN Newsletter	82	45%	39%	10%	6%
SHN templates	83	74%	19%	6%	1%
Any of the three National Learning Series conferences	64	83%	13%	3%	2%
SHN node workshops	61	85%	10%	3%	2%
Onsite visits from Node staff	39	62%	15%	15%	8%
Telephone and e-mail consultations with Node staff	65	72%	15%	11%	2%
Node newsletters/updates	73	52%	33%	14%	1%
Canadian ICU Collaborative	26	58%	23%	12%	8%
CAPHC Paediatric Medication Reconciliation Collaborative	16	25%	44%	13%	19%
Western Node collaborates (SII/Med Rec)*	17	88%	6%	6%	--
Ontario Trailblazers*	30	47%	33%	13%	7%

Note: Totals may not sum to 100% due to rounding.
Base: Respondents who used the supports.
*Respondents within the relevant nodes.

Table 3: Usefulness of various supports – KOC Survey (n=75)					
	# using support	Very useful/ Useful	Neutral	Not so useful/Not at all useful	DK/NR
Getting Started Kits	72	83%	7%	1%	8%
Communities of Practice	70	56%	26%	6%	13%
National information calls with web demonstration	60	55%	17%	7%	22%
National information calls – intervention specific	63	67%	10%	6%	18%
National information calls - overall	62	45%	31%	7%	18%
Information calls (nodal)	54	50%	19%	7%	24%
National SHN Newsletter	69	59%	16%	12%	13%
SHN templates	69	74%	7%	1%	17%
Any of the three National Learning Series conferences	53	70%	6%	2%	23%
SHN node workshops	54	70%	7%	2%	20%
Onsite visits from Node staff	36	44%	11%	--	44%
Telephone and e-mail consultations with Node staff	55	58%	16%	--	26%
Node newsletters/updates	58	57%	17%	2%	24%
Canadian ICU Collaborative	34	38%	9%	3%	50%
CAPHC Paediatric Medication Reconciliation Collaborative	30	33%	7%	--	60%
Western Node collaborates (SII/Med Rec)*	11	82%	9%	--	9%
Ontario Trailblazers*	36	50%	25%	8%	17%
Note: Totals may not sum to 100% due to rounding. Base: Respondents who used the supports. *Respondents within the relevant nodes.					

Measurement and analysis (Section 4.4)

Table 4: Opinion on measurement data collection strategy – Team Leader Survey (n=76)				
	Strongly agree/ Agree	Neutral	Strongly disagree/ Disagree	NA/DK/NR
Worksheet instructions are clear	57%	20%	21%	3%
Worksheets are easy to complete	61%	17%	17%	5%
The measurement of data is too time-consuming	43%	32%	22%	3%
Our team does not have experience with similar data collection efforts	46%	17%	28%	9%
My organization receives and tracks our Hospital Standardized Mortality Ratio (HSMR)	41%	5%	11%	43%
My organization has found the HSMR data useful	22%	13%	7%	58%
My organization could use more training on sampling and measurement aspects of the quality improvement model	55%	25%	12%	8%
The assistance provided by the Central Measurement Team (CMT) is helpful	41%	30%	8%	21%
The assistance provided by the Node or SIA is helpful	50%	33%	5%	12%
The Central Measurement Team (CMT) quarterly reports are useful	45%	26%	13%	16%
Note: Totals may not sum to 100% due to rounding. Base: Respondents with teams submitting data.				

Table 5: Opinion on measurement data collection strategy – KOC Survey (n=56)				
	Strongly agree/ Agree	Neutral	Strongly disagree/ Disagree	NA/DK/NR
Worksheet instructions are clear	57%	9%	25%	9%
Worksheets are easy to complete	52%	9%	30%	9%
The measurement of data is too time-consuming	54%	20%	20%	7%
Our team does not have experience with similar data collection efforts	41%	18%	27%	14%
My organization receives and tracks our Hospital Standardized Mortality Ratio (HSMR)	46%	5%	9%	39%
My organization has found the HSMR data useful	29%	14%	4%	54%
My organization could use more training on sampling and measurement aspects of the quality improvement model	61%	14%	14%	11%
The assistance provided by the Central Measurement Team (CMT) is helpful	57%	20%	4%	20%
The assistance provided by the Node or SIA is helpful	68%	16%	2%	14%
The Central Measurement Team (CMT) quarterly reports are useful	52%	23%	5%	20%
Note: Totals may not sum to 100% due to rounding. Base: Respondents with teams submitting data.				

Communications (Section 4.5)

Table 6: Effectiveness of communications – Team Leader Survey (n=86)				
	Very effective/ Somewhat effective	Neutral	Somewhat ineffective/ Very ineffective	NA/DK/NR
Sharing best practices and “success stories” among campaign participants	81%	11%	2%	6%
Communicating campaign goals to participants	79%	16%	2%	2%
Responding to your questions about the campaign*	75%	10%	11%	4%
Sharing information with participants	83%	13%	4%	1%

Note: Totals may not sum to 100% due to rounding.
 *Out of number who indicated they had asked the campaign questions.

Table 7: Effectiveness of campaign – KOC Survey (n=75)				
	Very effective/ Somewhat effective	Neutral	Somewhat ineffective/ Very ineffective	NA/DK/NR
Sharing best practices and “success stories” among campaign participants	81%	12%	--	7%
Communicating campaign goals to participants	76%	12%	4%	8%
Responding to your questions about the campaign*	72%	15%	--	13%
Sharing information with participants	76%	13%	1%	9%

Note: Totals may not sum to 100% due to rounding.
 *Out of number who indicated they had asked the campaign questions.

Table 8: Effectiveness of campaign – Partners Survey (n=26)				
	Very effective/ Somewhat effective	Neutral	Somewhat ineffective/ Very ineffective	NA/DK/NR
Sharing best practices and “success stories” among campaign participants	65%	4%	4%	27%
Communicating campaign goals to participants	65%	12%	4%	19%
Responding to your questions about the campaign*	60%	15%	5%	20%
Sharing information with participants	58%	4%	15%	23%

Note: Totals may not sum to 100% due to rounding.
 *Out of number who indicated they had asked the campaign questions.

Effectiveness (Section 4.6)

Table 9: Effectiveness of leadership – Team Leader Survey (n=86)

	Very effective/ Somewhat effective	Neutral	Somewhat ineffective/ Very ineffective	NA/DK/NR
Serving as an effective leader in quality improvement support and information	79%	16%	2%	2%
Having clearly defined roles between the SHN National Steering Committee and the Nodes	31%	37%	8%	23%
Having clearly defined expectations of participants	67%	23%	6%	4%

Note: Totals may not sum to 100% due to rounding.

Table 10: Effectiveness of leadership – KOC survey (n=75)

	Very effective/ Somewhat effective	Neutral	Somewhat ineffective/ Very ineffective	NA/DK/NR
Serving as an effective leader in quality improvement support and information	72%	13%	3%	12%
Having clearly defined roles between the SHN National Steering Committee and the Nodes	35%	27%	8%	31%
Having clearly defined expectations of participants	51%	19%	16%	15%

Note: Totals may not sum to 100% due to rounding.

Table 11: Effectiveness of leadership –Partner survey (n=26)

	Very effective/ Somewhat effective	Neutral	Somewhat ineffective/ Very ineffective	NA/DK/NR
Serving as an effective leader in quality improvement support and information	73%	4%	--	23%
Having clearly defined roles between the SHN National Steering Committee and the Nodes	31%	8%	12%	50%
Having clearly defined expectations of participants	38%	12%	15%	35%

Note: Totals may not sum to 100% due to rounding.

	Very effective/ Somewhat effective	Neutral	Somewhat ineffective/ Very ineffective	NA/DK/NR
Decreasing the number of preventable injuries and deaths in the patient population that is targeted by your intervention	51%	16%	5%	28%
Increasing knowledge transfer and uptake of learning among participating organizations in the area of patient safety	73%	9%	6%	12%
Increasing the capacity of your facility to effect change that leads to safer patient care	70%	17%	8%	5%
Spreading the interventions to other units in your facility	43%	19%	12%	27%
Adopting additional SHN interventions in your facility	50%	12%	11%	28%
Increasing the attention paid to patient safety in your facility	81%	8%	6%	5%
Stimulating other process improvements in your facility targeted at improving the quality of care	64%	19%	5%	13%
Integrating SHN with other quality improvement initiatives in your facility	57%	16%	4%	23%

Note: Totals may not sum to 100% due to rounding.

	Very effective/ Somewhat effective	Neutral	Somewhat ineffective/ Very ineffective	NA/DK/NR
Decreasing the number of preventable injuries and deaths in the patient population that is targeted by your intervention	35%	20%	3%	43%
Increasing knowledge transfer and uptake of learning among participating organizations in the area of patient safety	68%	9%	1%	21%
Increasing the capacity of your organization to effect change that leads to safer patient care	67%	11%	4%	19%
Spreading the interventions to other units in your healthcare organization	32%	25%	17%	25%
Adopting additional SHN interventions in your healthcare organization	29%	20%	21%	29%
Increasing the attention paid to patient safety in your healthcare organization	73%	5%	7%	15%
Stimulating other process improvements in your healthcare organization targeted at improving the quality of care	49%	20%	8%	23%
Integrating SHN with other quality improvement initiatives in your organization	44%	21%	11%	24%

Note: Totals may not sum to 100% due to rounding.

Table 14: Campaign effectiveness in meeting objectives – Senior Leaders Survey (n=56)

	Very effective/ Somewhat effective	Neutral	Somewhat ineffective/ Very ineffective	NA/DK/NR
Decreasing the number of preventable injuries and deaths in the patient population that is targeted by your intervention	55%	30%	--	14%
Increasing knowledge transfer and uptake of learning among participating organizations in the area of patient safety	86%	4%	4%	7%
Increasing the capacity of your organization to effect change that leads to safer patient care	84%	9%	4%	4%
Spreading the interventions to other units in your healthcare organization	64%	18%	9%	9%
Adopting additional SHN interventions in your healthcare organization	45%	27%	11%	18%
Increasing the attention paid to patient safety in your healthcare organization	93%	4%	--	4%
Stimulating other process improvements in your healthcare organization targeted at improving the quality of care	71%	16%	7%	5%
Integrating SHN with other quality improvement initiatives in your organization	70%	20%	7%	4%

Note: Totals may not sum to 100% due to rounding.

Table 15: Campaign effectiveness in meeting objectives – Partners Survey (n=26)

	Very effective/ Somewhat effective	Neutral	Somewhat ineffective/ Very ineffective	NA/DK/NR
Decreasing the number of preventable injuries and deaths in the patient population that is targeted by your intervention	Not asked			
Increasing knowledge transfer and uptake of learning among participating organizations in the area of patient safety	69%	4%	4%	23%
Increasing the capacity of the participating healthcare organizations to effect change that leads to safer patient care	58%	15%	4%	23%
Spreading the interventions to other units in participating healthcare organizations	Not asked			
Adopting additional SHN interventions in participating healthcare organizations	39%	8%	12%	42%
Increasing the attention paid to patient safety within participating healthcare organizations	65%	4%	--	31%
Stimulating other process improvements in participating healthcare organizations targeted at improving the quality of care	42%	8%	4%	46%
Integrating SHN with other quality improvement initiatives in participating healthcare organizations	39%	12%	8%	42%

Note: Totals may not sum to 100% due to rounding.

Spread and sustainability (Section 4.7)

Table 16: Describe the steps being taken by your facility or health region to sustain the current work on the six interventions. Team leader survey (n=62)		
	#	%
Planning/encouraging/promoting spread	23	37%
Making interventions permanent/include in other process	13	21%
Work is continuing/no plan to cut back	9	15%
Sharing outcomes/best practices	8	13%
Interventions are included in strategic plans	6	10%
Regular team leader meetings	5	8%
Senior leader commitment	5	8%
Education/awareness/capacity building	5	8%
Additional resources (unspecified)	4	7%
Report results to senior management	4	7%
Contribution of additional staffing	3	5%
Improving medication history/changes in patient info	3	5%
Develop systems to improve data collection	3	5%
Obtaining outside funding/leveraging funding	1	2%
Interventions are included in budgetary plans	1	2%
Interventions are included in reports to the board	1	2%
Other	6	10%
DK/NR	2	3%
Note: Totals may not sum to 100% due to rounding.		
Base: Respondents whose facility is taking steps to sustain the interventions.		

Table 17: What is necessary to ensure that interventions continue and expand in your facility? Team leader survey (n=86)		
	#	%
More/dedicated resources - staff	24	28%
More/dedicated resources - money	14	16%
Continued leadership commitment	14	16%
More/dedicated resources (unspecified)	11	13%
Staff commitment/buy-in	11	13%
Increase resources (funding, staff) for data collection	6	7%
Dissemination of outcomes/examples of changes/successes	5	6%
More technology/equipment/infrastructure	5	6%
Culture change/make part of daily activities	5	6%
Continued support from SHN and nodes	5	6%
Promotion/increase awareness	4	5%
Physician support	2	2%
More conferences/workshops/educational opportunities	1	1%
Other	3	4%
DK/NR	12	14%
Note: Totals may not sum to 100% due to rounding.		

Table 18: Support SHN interventions through the following? – KOC Survey (n=75)			
	Yes	No	NA/DK/NR
Contribution of additional staffing	17%	73%	9%
Contribution of additional funding	17%	72%	11%
Obtaining outside funding/leveraging funding	9%	71%	20%
Creating a coordinator or support position for interventions	25%	65%	9%
Interventions are included in strategic plans	61%	25%	13%
Interventions are included in budgetary plans	21%	63%	16%
Interventions are included in reports to the board	67%	21%	12%
Interventions are included in reports to the quality councils	69%	16%	15%

Note: Totals may not sum to 100% due to rounding..

Table 19: Support SHN interventions through the following? – Senior Leaders Survey (n=56)			
	Yes	No	NA/DK/NR
Interventions are included in reports to the board	89%	4%	7%
Interventions are included in reports to the quality councils	89%	2%	9%
Interventions are included in strategic plans	79%	14%	7%
Interventions are included in budgetary plans	59%	32%	9%
Contribution of additional funding	46%	50%	4%
Creating a coordinator or support position for interventions	41%	55%	4%
Contribution of additional staffing	36%	61%	4%
Obtaining outside funding/leveraging funding	25%	68%	7%

Note: Totals may not sum to 100% due to rounding.

Table 20: Plans for any of the following? – KOC Survey (n=75)			
	Yes	No	DK/NR
Spread the SHN interventions to other units within facilities that already have interventions	51%	24%	25%
If applicable, expand the SHN interventions to other facilities within your region	27%	24%	49%
Enroll in additional applicable interventions when they are announced by SHN	35%	15%	51%

Note: Totals may not sum to 100% due to rounding.

Table 21: Likely to do any of the following? – Senior Leader Survey (n=56)				
	Very likely/ Somewhat likely	Neutral	Somewhat unlikely/Ve ry unlikely	DK/NR
Contribution of additional staffing	43%	18%	34%	5%
Contribution of additional funding	46%	25%	21%	7%
Obtaining outside funding/leveraging funding	41%	29%	18%	13%
Creating a coordinator or support position for interventions	39%	16%	36%	9%
Interventions are included in strategic plans	88%	4%	2%	7%
Interventions are included in budgetary plans	70%	18%	7%	5%
Interventions are included in reports to the board	91%	--	2%	7%
Interventions are included in reports to the quality councils	89%	--	2%	9%
Spread the SHN interventions to other units within facilities that already have interventions	84%	5%	2%	9%
If applicable, expand the SHN interventions to other facilities within your region	57%	13%	2%	29%
Enroll in additional applicable interventions when they are announced by SHN	77%	7%	5%	11%
Note: Totals may not sum to 100% due to rounding.				