

Appendix 9: Quality Improvement Implementation Survey II
(Used with permission from School of Public Health, University of California, Berkeley)

PART 1: PARTICIPANT'S INFORMATION:

1. What is your profession? Select one:

- a. Neonatologist
- b. Pediatrician
- c. Pediatrics / Neonatology resident or trainee
- d. Clinical Assistant
- e. Nurse practitioner
- f. Unit manager
- g. Bedside nurse
- h. Nurse Clinician
- i. Nurse Educator
- j. Nurse, Other
- k. Respiratory therapist
- l. Respiratory supervisor/manager
- m. Dietitian
- n. Pharmacist
- o. Social worker
- p. Other, please specify

2. Where do you work? Select all that apply:

- a. Queen Elizabeth II Hospital
- b. Sturgeon Community Hospital, Edmonton
- c. Misericordia Community Hospital, Edmonton
- d. Grey Nuns Community Hospital, Edmonton
- e. Royal Alexandra Hospital, Edmonton
- f. Red Deer Regional Hospital, Red Deer
- g. Peter Lougheed Centre, Calgary
- h. Foothills Medical Centre, Calgary
- i. Rockyview General Hospital, Calgary
- j. South Health Campus, Calgary
- k. Chinook Regional Hospital, Lethbridge
- l. Medicine Hat Regional Hospital, Medicine Hat

3. Years of experience:

- a. Less than five years
- b. Five to ten years

- c. Eleven to twenty years
- d. More than 20 years

PART 2: UNIT CULTURE

Instructions: These questions relate to the type of unit that your institution is most like.

Each of these items contains four descriptions of Units. Please distribute 100 points among the four descriptions depending on how similar the description is to your unit. None of the descriptions is any better than the others; they are just different. For each question, please use all 100 points.

For example: In question 1, if Unit A seems very similar to mine, B seems somewhat similar, and C and D do not seem similar at all, I might give 70 points to A and the remaining 30 points to B.

4. Unit Character (Please distribute 100 points)

- _____ Unit A is a very personal place. It is a lot like an extended family. People seem to share a lot of themselves.

- _____ Unit B is a very dynamic and entrepreneurial place. People are willing to stick their necks out and take risks.

- _____ Unit C is a very formalized and structured place. Bureaucratic procedures generally govern what people do.

- _____ Unit D is very production oriented. A major concern is with getting the job done. People aren't very personally involved.

5. Unit's Managers (Please distribute 100 points)

- _____ Managers in unit A are warm and caring. They seek to develop employees' full potential and act as their mentors or guides.

- _____ Managers in unit B are risk-takers. They encourage employees to take risks and be innovative.

- _____ Managers in unit C are rule-enforcers. They expect employees to follow established rules, policies, and procedures.

- _____ Managers in unit D are coordinators and coaches. They help employees meet the unit's goals and objectives.

6. Unit Cohesion (Please distribute 100 points)

_____ The glue that holds unit A together is loyalty and tradition. Commitment to this unit runs high.

_____ The glue that holds unit B together is a commitment to innovation and development. There is an emphasis on being first.

_____ The glue that holds unit C together is formal rules and policies. Maintaining a smooth-running operation is important here.

_____ The glue that holds unit D together is the emphasis on tasks and goal accomplishment. A production orientation is commonly shared.

7. Unit Emphases (Please distribute 100 points)

_____ Unit A emphasizes human resources. High cohesion and morale in the organization are important.

_____ Unit B emphasizes growth and acquiring new resources. Readiness to meet new challenges is important.

_____ Unit C emphasizes permanence and stability. Efficient, smooth operations are important.

_____ Unit D emphasizes competitive actions and achievement. Measurable goals are important.

8. Unit Rewards (Please distribute 100 points)

_____ Unit A distributes its rewards fairly equally among its members. It's important that everyone from top to bottom be treated as equally as possible.

_____ Unit B distributes its rewards based on individual initiative. Those with innovative ideas and actions are most rewarded.

_____ Unit C distributes rewards based on rank. The higher you are, the more you get.

_____ Unit D distributes rewards based on the achievement of objectives. Individuals who provide leadership and contribute to attaining the unit's goals are rewarded.

PART 3: QUALITY OF CARE AND SERVICES

Instructions: In this section, you are asked to assess your unit's efforts to improve the quality of care and services it provides. Please read each statement carefully. Indicate the extent to which you agree or disagree that the statement characterizes your unit by selecting the appropriate response (1 = Strongly Disagree, 5 = Strongly Agree). In answering the questions, you should think about what the unit is **actually like now**, not how you think it might be in the future or how you might wish it to be.

GLOSSARY/SPECIAL INSTRUCTIONS

Unit	In responding to questions that ask you to make a global judgment about the "unit" please respond based upon your knowledge and experience of the department or area in which you are currently employed, the other departments or areas you come in contact within the course of doing your job, and the information you have on the Unit as a whole.
Quality of Care and Services	Throughout the survey, you are asked to make judgments about the "quality of care and services provided." In these questions, "quality of care and services" refers to how well the Unit performs the many activities and functions involved in patient care. The term "quality of care and services" is not limited to the technical quality of care provided to patients; "quality of care and services" is a broader, more general category that includes not only the technical quality of care but also includes how well patient service needs are met.
Senior Executives	In general, the senior executives have the overall responsibility for unit operation and administration. President (CEO, administrator), senior or other vice presidents, chair or vice-chair of nursing, executive director, and medical director are some of the titles held by people who occupy senior executive positions. In some Units, these employees have the title of associate administrator.
Middle Managers	Middle managers include site leads, unit medical directors, unit managers, and first line supervisors that are not part of the senior executive staff.

RESPONSE CATEGORIES

In indicating a response, please keep in mind the following general guidelines regarding the choices of response categories:

- You should indicate **Strongly Agree** when, for example, the statement represents a completely accurate description of your Unit.
- You should indicate **Strongly Disagree** when the description is completely inaccurate.
- The response **Neither Agree Nor Disagree** should be indicated when, based upon your experience, you believe the statement is neither a particularly accurate nor a particularly inaccurate description of your Unit. This situation may arise because there is wide variation in the activities the statement describes. For example, you might circle neither agree nor disagree when the statement is true of some departments but not of others.
- If you do not have enough information to answer a question, please choose **"Don't Know."**

Appendix Materials: Alberta (AB) Collaborative Quality Improvement Strategies to Improve Outcomes of Preterm Infants 32 – 36 Weeks’ Gestation: A Protocol for a Multi-centre, Stepped-Wedge Cluster Randomized Trial (The ABC-QI Trial)

	<u>STRONGLY DISAGREE</u>	<u>DISAGREE</u>	<u>NEITHER DISAGREER NOR AGREE</u>	<u>AGREE</u>	<u>STRONGLY AGREE</u>	<u>DON'T KNOW</u>
Leadership:						
9. The senior executives provide highly visible leadership in maintaining an environment that supports quality improvement.	1	2	3	4	5	0
10. The senior executives consistently participate in activities to improve the quality of care and services.	1	2	3	4	5	0
11. The senior executives have demonstrated an ability to manage the changes (e.g., organizational, technological) needed to improve the quality of care and services.	1	2	3	4	5	0
12. The senior executives act on suggestions to improve the quality of care and services.	1	2	3	4	5	0
13. The senior executives generate confidence that efforts to improve quality will succeed.	1	2	3	4	5	0
Human Resource Utilization						
14. Unit employees are given education and training in how to identify and act on quality improvement opportunities.	1	2	3	4	5	0
15. Unit employees are given education and training in statistical and other quantitative methods that support quality improvement.	1	2	3	4	5	0
16. Unit employees are given the needed education and training to improve job skills and performance.	1	2	3	4	5	0
17. Unit employees are rewarded and recognized (e.g., financially and/or otherwise) for improving quality.	1	2	3	4	5	0
Employee Quality Planning Involvement:						
18. Unit employees are involved in developing plans for improving quality.	1	2	3	4	5	0

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19.	Middle managers (e.g., site leads, program directors, and first line supervisors) are playing a key role in setting priorities for quality improvement.	1	2	3	4	5	0
20.	Unit employees have the authority to correct problems in their area when quality standards are not being met.	1	2	3	4	5	0
21.	Unit employees are supported when they take necessary risks to improve quality.	1	2	3	4	5	0
22.	The unit has an effective system for employees to make suggestions to management on how to improve quality.	1	2	3	4	5	0

Patient Satisfaction:

23.	The unit does a good job of assessing current patient needs and expectations.	1	2	3	4	5	0
24.	Unit employees promptly resolve patient complaints.	1	2	3	4	5	0
25.	Patients’ complaints are studied to identify patterns and prevent the same problems from recurring.	1	2	3	4	5	0
26.	The unit uses data from patients to improve services.	1	2	3	4	5	0
27.	The unit uses data on customer expectations and/or satisfaction when designing new services.	1	2	3	4	5	0