

Appendix 1 (as supplied by the authors): Readiness Assessment Survey

As our program delivery team begins to plan for the improvement initiatives within the Ontario Surgical Quality Improvement Network, we ask that you take 10 minutes to complete this readiness assessment.

The objective of this readiness assessment is to ask for your opinions about your organization's current quality initiatives, systems, processes, safety culture, and quality improvement (QI) education/ training. Your responses will help our program delivery team to develop QI initiatives to support participants in the Ontario Surgical Quality Improvement Network based on your organization's needs, skill level, and QI experience.

The delivery team would appreciate if you could complete this survey by 23 April 2015. This survey should only take 10 minutes of your time. Thank you for taking the time to complete this survey.

Ontario Surgical Quality Improvement Network

Program Delivery Team

Access to QI resources

1. Have you and/or members of your department ever had any training/ education on quality improvement methodologies?
Response: Yes/ No
2. Does your organization have access to quality improvement resources?
Response: Yes/ No
3. The surgical staff have support from a QI professional when needed.
Response: Strongly agree/ Agree/ Neutral/ Disagree/ Strongly disagree/ N/A

Collaboration within surgical team

1. Our QI staff and our surgical department collaborate to identify and plan improvement initiatives.
Response: Strongly agree/ Agree/ Neutral/ Disagree/ Strongly disagree/ N/A
2. The multidisciplinary surgical team members regardless of their level are able to express their opinions on changes in practice.
Response: Strongly agree/ Agree/ Neutral/ Disagree/ Strongly disagree/ N/A

Active surgical QI initiative

1. Is your hospital involved in “*Safer Healthcare Now*”?

Response: Yes/ No/ Unknown

2. Which “*Safer Healthcare Now*” initiative did our hospital participate in? *

Response: Venous thromboembolism/ Ventilator-associated pneumonia/ Central line-associated blood stream infection/ Surgical site infection/ Medication reconciliation

3. In your opinion, the current protocols, pathways, and standards of care are based on the best available evidence.

Response: Strongly agree/ Agree/ Neutral/ Disagree/ Strongly disagree/ N/A

4. Has your hospital undertaken any surgical quality improvement activities/ initiatives in the past 2 years?

Response: Yes/ No

5. Please list the initiatives/ activities and indicate the status. *

*These questions were conditionally displayed based on the responses to the preceding question.

Organizational engagement in surgical QI

1. Our surgical department contributes to the development of our hospital/s annual Quality Improvement Plan (QIP).

Response: Yes/ No

2. Our QI and our surgical department are successful in sustaining past improvements.

Response: Strongly agree/ Agree/ Neutral/ Disagree/ Strongly disagree/ N/A

Note: The order of the questions was randomized with no headings for each category.