FC1 - Pre-RP Implementation Checklist - v1.00

Survey Flow

EmbeddedData PROT = 0097

SITEValue will be set from Panel or URL.

Block: Site-Level Implementation Team (22 Questions)

EndSurvey:

Page Break

Start of Block: Site-Level Implementation Team

INSTRUCT

Please complete the following items. Each item is an important step in the implementation facilitation.

*

F1TRANDT Date of Transition to Rapid Induction Protocol: (*mm/dd/yyyy*)

Page Break

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F14WEEKS Was an Implementation Team identified and finalized at least 4 weeks prior to the transition date?

(O No (0)
(○ Yes (1)
Page	e Break

Display This Question:
If Was an Implementation Team identified and finalized at least 4 weeks prior to the transition date? = 0
X^{\Rightarrow}
F1TRANS If "No", was an Implementation Team identified and finalized before the transition date?
\bigcirc No. (0)

\bigcirc NO (0)
○ Yes (1)
Page Break

F1TEAMNM How many team members are there at your site?

Page Break

*

If If How many team members are there at your site? Text Response Is Greater Than 0

X-+

F1TEAM01

Select one that best describes the role of each team member. Team Member 1:

O Administrator (01)

Clinician (MD/PA/NP) (02)

O Nurse (03)

O Counselor (04)
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- Social worker (05)
- O Psychologist (06)
- Other, specify: (99)

Page Break -----

If If How many team members are there at your site? Text Response Is Greater Than or Equal to 2

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F1TEAM02 Team Member 2:

	O Administrator (01)
	◯ Clinician (MD/PA/NP) (02)
	O Nurse (03)
	O Counselor (04)
	◯ Social worker (05)
	O Psychologist (06)
	Other, specify: (99)
_	
Pa	age Break

If If How many team members are there at your site? Text Response Is Greater Than or Equal to 3

X→

F1TEAM03 Team Member 3:

	O Administrator (01)
	◯ Clinician (MD/PA/NP) (02)
	O Nurse (03)
	O Counselor (04)
	◯ Social worker (05)
	O Psychologist (06)
	Other, specify: (99)
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Pa	age Break

If If How many team members are there at your site? Text Response Is Greater Than or Equal to 4

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F1TEAM04 Team Member 4:

	O Administrator (01)
	◯ Clinician (MD/PA/NP) (02)
	○ Nurse (03)
	O Counselor (04)
	\bigcirc Social worker (05)
	O Psychologist (06)
	O Other, specify: (99)
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Pa	age Break

If If How many team members are there at your site? Text Response Is Greater Than or Equal to 5

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F1TEAM05 Team Member 5:

	O Administrator (01)
	◯ Clinician (MD/PA/NP) (02)
	O Nurse (03)
	O Counselor (04)
	◯ Social worker (05)
	O Psychologist (06)
	O Other, specify: (99)
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Pa	age Break

If If How many team members are there at your site? Text Response Is Greater Than or Equal to 6

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F1TEAM06 Team Member 6:

	O Administrator (01)
	◯ Clinician (MD/PA/NP) (02)
	O Nurse (03)
	O Counselor (04)
	◯ Social worker (05)
	O Psychologist (06)
	O Other, specify: (99)
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Pa	age Break

If If How many team members are there at your site? Text Response Is Greater Than or Equal to 7

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F1TEAM07 Team Member 7:

	O Administrator (01)
	◯ Clinician (MD/PA/NP) (02)
	O Nurse (03)
	O Counselor (04)
	◯ Social worker (05)
	O Psychologist (06)
	O Other, specify: (99)
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Pa	age Break

If If How many team members are there at your site? Text Response Is Greater Than or Equal to 8

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F1TEAM08 Team Member 8:

	O Administrator (01)
	◯ Clinician (MD/PA/NP) (02)
	O Nurse (03)
	O Counselor (04)
	◯ Social worker (05)
	O Psychologist (06)
	O Other, specify: (99)
_	
Pa	age Break

If If How many team members are there at your site? Text Response Is Greater Than or Equal to 9

X→

F1TEAM09 Team Member 9:

	O Administrator (01)
	◯ Clinician (MD/PA/NP) (02)
	O Nurse (03)
	O Counselor (04)
	\bigcirc Social worker (05)
	O Psychologist (06)
	O Other, specify: (99)
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Pa	age Break

If If How many team members are there at your site? Text Response Is Equal to 10

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F1TEAM10 Team Member 10:

\bigcirc	Administrator (01)
\bigcirc	Clinician (MD/PA/NP) (02)
\bigcirc	Nurse (03)
\bigcirc	Counselor (04)
\bigcirc	Social worker (05)
\bigcirc	Psychologist (06)
\bigcirc	Other, specify: (99)
Page B	reak

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F1MAP3WK Was site mapping completed at least 3 weeks prior to the transition date?

No (0)
Yes (1)
Page Break

Display This Question:
If Was site mapping completed at least 3 weeks prior to the transition date? = 0
$X \Rightarrow$
F1MAPTRN If "No", was site mapping completed before the transition date?
O No (0)
○ Yes (1)
Page Break

F1TRNNUM How many trainings were completed?

Page Break

*

If If How many trainings were completed? Text Response Is Greater Than 0

X⇒

GRID: TRAINING 1 Training:

Topic			lf "Other" specify:	# Staff Attended				
(01)	In- person session during regular work hours (01)	In- person session outside regular work hours (02)	Virtual session during regular work hours (03)	Virtual session outside regular work hours (04)	Pre- recorded videos (05)	Other (99)	(01)	(01)

Training 1 (F1TRAI01)	0	0	0	0	0	0	
Training 2 (F1TRAI02)	0	0	0	0	0	0	
Training 3 (F1TRAI03)	0	0	0	0	0	0	
Training 4 (F1TRAI04)	0	0	0	0	0	0	
Training 5 (F1TRAI05)	0	0	0	0	0	0	
Training 6 (F1TRAI06)	0	0	0	0	0	0	
Training 7 (F1TRAI07)	0	0	0	0	0	0	
Training 8 (F1TRAI08)	0	0	0	0	0	0	

Training 9 (F1TRAI09)	\bigcirc	0	0	0	0	0	
Training 10 (F1TRAI10)	0	0	0	0	0	0	
Training 11 (F1TRAI11)	0	0	0	0	0	0	
Training 12 (F1TRAI12)	0	0	0	0	0	0	
Training 13 (F1TRAI13)	0	0	0	0	0	0	
Training 14 (F1TRAI14)	0	0	0	0	0	0	
Training 15 (F1TRAI15)	0	0	0	0	0	0	
Training 16 (F1TRAI16)	0	0	0	0	0	0	

Training 17 (F1TRAI17)	0	0	0	0	\bigcirc	0	
Training 18 (F1TRAI18)	0	0	0	0	0	0	
Training 19 (F1TRAI19)	0	0	0	0	0	0	
Training 20 (F1TRAI20)	0	0	0	0	0	0	
Training 21 (F1TRAI21)	0	0	0	0	\bigcirc	0	
Training 22 (F1TRAI22)	0	0	0	0	\bigcirc	0	
Training 23 (F1TRAI23)	0	0	0	0	0	0	
Training 24 (F1TRAI24)	0	0	0	0	\bigcirc	0	

Training 25 (F1TRAI25)	0	0	0	0	0	0	
Training 26 (F1TRAI26)	0	0	0	0	0	0	
Training 27 (F1TRAI27)	0	0	0	0	0	0	
Training 28 (F1TRAI28)	0	0	0	0	0	0	
Training 29 (F1TRAI29)	0	0	0	0	0	0	
Training 30 (F1TRAI30)	0	0	0	0	0	0	
Training 31 (F1TRAI31)	0	0	0	0	0	0	
Training 32 (F1TRAI32)	0	0	0	0	0	0	

Training 33 (F1TRAI33)	0	0	0	0	0	0	
Training 34 (F1TRAI34)	0	0	0	0	0	0	
Training 35 (F1TRAI35)	0	0	0	0	0	0	
Training 36 (F1TRAI36)	0	0	0	0	0	0	
Training 37 (F1TRAI37)	0	0	0	0	0	0	
Training 38 (F1TRAI38)	0	0	0	0	0	0	
Training 39 (F1TRAI39)	0	0	0	0	0	0	
Training 40 (F1TRAI40)	0	0	0	0	0	0	

Training 41 (F1TRAI41)	0	0	0	0	\bigcirc	0	
Training 42 (F1TRAI42)	0	0	0	0	0	0	
Training 43 (F1TRAI43)	0	0	0	0	0	0	
Training 44 (F1TRAI44)	0	0	0	0	0	0	
Training 45 (F1TRAI45)	0	0	0	0	0	0	
Training 46 (F1TRAI46)	0	0	0	0	0	0	
Training 47 (F1TRAI47)	0	0	0	0	0	0	
Training 48 (F1TRAI48)	0	0	0	0	0	0	

Training 49 (F1TRAI49)	0	\bigcirc	\bigcirc	0	0	0	
Training 50 (F1TRAI50)	0	0	0	0	0	0	
Page Break	 						

 $X \rightarrow$

F1PROGRS Structured Progress Note integrated into clinical workflow and patient medical records?

\bigcirc No (C))																
◯ Yes (1)																
		 	-	 -	 -	 -	 -	 	 								
Page Break																 	

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F1EMR Order set integrated into clinical workflow?

No (0)
Yes (1)
Page Break

F1PHRPRT Has a local pharmacy been identified prior to RP transition date and have standard protocols been set up to allow for delivery of low dose natlrexone by day 3 after admission?

○ No (1)

○ Yes (2)

End of Block: Site-Level Implementation Team

FC2 - Post-RP Implementation Checklist - v1.00

Survey Flow

EmbeddedData

PROT = 0097

SITEValue will be set from Panel or URL.

DATEValue will be set from Panel or URL.

Block: FC2 - Fidelity to Implementation Checklist (6 Questions)

EndSurvey:

Page Break

Start of Block: FC2 - Fidelity to Implementation Checklist

INSTRUCT

Please complete the following items. These items are about the follow-up and support provided in the implementation facilitation.

Page Break —

FCRIPDT Date of transition to Rapid Induction protocol: (*mm/dd/yyyy*)

Page Break —

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Page 3 of 13

FCCCHNUM How many follow-up and support coaching calls were there?

Page Break ------

*

Page 4 of 13

If If How many follow up and support coaching calls were there? Text Response Is Greater Than 0

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GRID: COACH CALL Follow-up and Support Coaching Calls:

Date <i>(mm/dd/yyyy)</i>	# Staff Attended
(1)	(1)

Coaching call 1 (FCCHC1)	
Coaching call 2 (FCCHC2)	
Coaching call 3 (FCCHC3)	
Coaching call 4 (FCCHC4)	
Coaching call 5 (FCCHC5)	
Coaching call 6 (FCCHC6)	
Coaching call 7 (FCCHC7)	
Coaching call 8 (FCCHC8)	
Coaching call 9 (FCCHC9)	
Coaching call 10 (FCCHC10)	

Coaching call 11 (FCCHC11)	
Coaching call 12 (FCCHC12)	
Coaching call 13 (FCCHC13)	
Coaching call 14 (FCCHC14)	
Coaching call 15 (FCCHC15)	
Coaching call 16 (FCCHC16)	
Coaching call 17 (FCCHC17)	
Coaching call 18 (FCCHC18)	
Coaching call 19 (FCCHC19)	
Coaching call 20 (FCCHC20)	

Coaching call 21 (FCCHC21)	
Coaching call 22 (FCCHC22)	
Coaching call 23 (FCCHC23)	
Coaching call 24 (FCCHC24)	
Coaching call 25 (FCCHC25)	
Page Break	

FCCOLNUM How many learning and collaborative calls were there?

Page Break

*

Display This Question:

If If How many learning and collaborative calls were there? Text Response Is Greater Than 0

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GRID: COLLAB CALL Learning and Collaborative Calls:

Date <i>(mm/dd/yyyy)</i>	# Staff Attended
(1)	(1)

Learning collaborative call 1 (FCLCC1)	
Learning collaborative call 2 (FCLCC2)	
Learning collaborative call 3 (FCLCC3)	
Learning collaborative call 4 (FCLCC4)	
Learning collaborative call 5 (FCLCC5)	
Learning collaborative call 6 (FCLCC6)	
Learning collaborative call 7 (FCLCC7)	
Learning collaborative call 8 (FCLCC8)	
Learning collaborative call 9 (FCLCC9)	

Learning collaborative call 10 (FCLCC10)	
Learning collaborative call 11 (FCLCC11)	
Learning collaborative call 12 (FCLCC12)	
Learning collaborative call 13 (FCLCC13)	
Learning collaborative call 14 (FCLCC14)	
Learning collaborative call 15 (FCLCC15)	
Learning collaborative call 16 (FCLCC16)	
Learning collaborative call 17 (FCLCC17)	
Learning collaborative call 18 (FCLCC18)	

Learning collaborative call 19 (FCLCC19)	
Learning collaborative call 20 (FCLCC20)	
Learning collaborative call 21 (FCLCC21)	
Learning collaborative call 22 (FCLCC22)	
Learning collaborative call 23 (FCLCC23)	
Learning collaborative call 24 (FCLCC24)	
Learning collaborative call 25 (FCLCC25)	

End of Block: FC2 - Fidelity to Implementation Checklist

OLC - Organization Level Clinical Implementation - v1.00

Survey Flow

EmbeddedData PROT = 0097

SITEValue will be set from Panel or URL.

Block: OLC - Organization Level Clinical Implementation (4 Questions)

EndSurvey:

Page Break

Start of Block: OLC - Organization Level Clinical Implementation

INSTRUCT Organization Level Clinical Implementation Data Collection Form

[*****] _{X→}

GRID: OUD ADMISSIONS How many patients with OUD have been admitted to the unit in the past 14 weeks?

		Not available
	(01)	(96)
Number of patients: (OLOUDADM)		
Page Break		



GRID: XR-NTX Of these, how many patients have been successfully inducted onto XR-NTX while on the unit in the past 14 weeks?

		Not available
	(01)	(96)
Number of patients: (OLOUDNTX)		

Display This Question:

If How many patients with OUD have been admitted to the unit in the past 14 weeks? : Not available = Number of patients: []

***** X→

GRID2: XR-NTX How many patients have been successfully inducted onto XR-NTX while on the unit in the past 14 weeks?

	Not available
(01)	(96)

Number of patients: (OLOUDNTX2)

End of Block: OLC - Organization Level Clinical Implementation

OR1 - Pre-RP Implementation - v1.01

Survey Flow

EmbeddedData PROT = 0097 SITEValue will be set from Panel or URL.

Standard: UQID (5 Questions)

EmbeddedData

UQID =

\${q://QID33/ChoiceTextEntryValue}\${q://QID34/ChoiceTextEntryValue}\${q://QID35/ChoiceTextEntryValue}

Standard: Readiness Ruler (2 Questions) Block: Background (ORCA) (4 Questions) Standard: Evidence Assessment (ORCA) (6 Questions) Standard: Context Assessment (ORCA) (7 Questions)

EndSurvey:

Page Break

Start of Block: UQID

INSTRUCT

Instructions: The purpose of this study is to learn some basic characteristics of the providers and staff working at your organization. This survey should take you approximately 15 minutes to complete. By clicking the forward arrows at the bottom of this screen, you are agreeing to take part in this study and understand that your responses will be used for research purposes. This study is being administered through Columbia University Irving Medical Center and has received Institutional Review Board (IRB) approval from BRANY. Your participation in this interview is completely voluntary and you can decline to answer any question or discontinue the interview at any time. Your identity and responses will be confidential, and any reports generated from this survey will include only de-identified responses that will not impact your job role.

Page Break —

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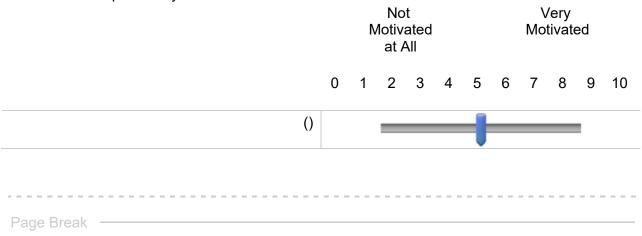
O1UQID1 First, we need you to create a unique identifier so that we can link your pre- and post-implementation data.

Enter the first 2 letters of your last name:	
O1UQID2 Enter the first 2 letters of the city you were born in:	
Image: Second system O1UQID3 Enter the 2 digits of the day you were born:	
O1UQID4 Enter the first 2 letters of your mother's maiden name:	
Page Break	

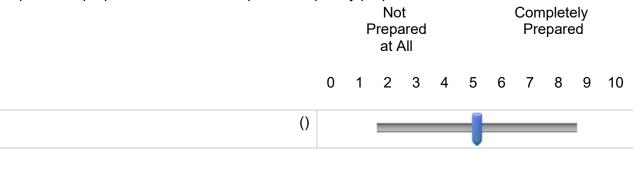
End of Block: UQID

Start of Block: Readiness Ruler

O1RULMOT On a scale from 0 to 10, how <u>motivated</u> do you feel about using the rapid protocol for starting patients on long-acting injectable naltrexone (Vivitrol), where 0 equals "not motivated at all" and 10 equals "very motivated"?



O1RULPRP On a scale from 0 to 10, how **prepared** are you to use the rapid protocol for starting patients with opioid use disorder on long-acting injectable naltrexone (Vivitrol), where 0 equals "not prepared at all" and 10 equals "completely prepared"?



End of Block: Readiness Ruler

Start of Block: Background (ORCA)

INSTRUCT *Instructions:* We need your help assessing you and your colleagues' readiness to implement the rapid induction protocol for extended-release injectable naltrexone (XR-NTX) for patients with opioid use disorder in your facility. Please consider each question carefully and select the answer that best reflects your opinion.

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Page Break —

O1PROFES

What is your primary professional role on this unit?

O MD/DO (01)

○ NP/PA (02)

O Nurse (RN/LPN) (03)

O Therapist or Counselor (PhD, LCSW, Certified Substance Abuse Counselor) (04)

Administrative, specify: (05)

Other, specify: (99)_____

X-

O1PROFYR How long have you practiced in this professional role?

\bigcirc Less than 1 year (01)	
○ 1 - 2 years (02)	
○ 3 - 5 years (03)	
○ 6 - 10 years (04)	
◯ 11 - 20 years (05)	
◯ Greater than 20 years (06)	

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O1UNITYR How long have you worked on this unit?

 \bigcirc Less than 1 year (01)

○ 1 - 2 years (02)

○ 3 - 5 years (03)

○ 6 - 10 years (04)

○ 11 - 20 years (05)

◯ Greater than 20 years (06)

End of Block: Background (ORCA)

Start of Block: Evidence Assessment (ORCA)

INSTRUCT

The following set of questions are about the evidence for the rapid induction protocol for extended-release injectable naltrexone (XR-NTX). For each of the following statements, please rate the strength of your agreement with the statement from 1 (strongly disagree) to 5 (strongly agree).

Page Break —

X-+

O1DISCD1 In my opinion, the rapid method to induct opioid-dependent patients onto extendedrelease injectable naltrexone (XR-NTX) will improve the induction process for patients compared to the longer induction method (treatment as usual) and increase the utilization of XR-NTX as a treatment for opioid use disorder.

Strongly Disagree (01)	
O Disagree (02)	
O Neither Agree nor Disagree (03)	
O Agree (04)	
◯ Strongly Agree (05)	
O Don't Know (97)	
O Not Applicable (96)	
Page Break	

X-+

O1DISCD2 Respected clinical experts in my institution feel that the rapid method to induct patients onto XR-NTX will improve the induction process for patients compared to the longer induction method (treatment as usual) and increase the utilization of XR-NTX as a treatment for opioid use disorder.

◯ Stron	ngly Disagree (01)
◯ Disaį	gree (02)
◯ Neith	er Agree nor Disagree (03)
	e (04)
◯ Stron	ngly Agree (05)
◯ Don't	t Know (97)
◯ Not A	Applicable (96)
Page Break	

GRID: RESEARCH EVIDE Changes to improve and systematize induction onto XR-NTX by a rapid procedure at my site:

	Strongly Disagree (01)	Disagree (02)	Neither Agree nor Disagree (03)	Agree (04)	Strongly Agree (05)	Don't Know (97)	Not Applicable (96)
Are supported by randomized controlled trials (RCTs) or other scientific evidence at my organization (O1RESEA1)	0	0	0	0	0	0	0
Are supported by randomized controlled trials (RCTs) or other scientific evidence from other health care systems (O1RESEA2)	0	\bigcirc	\bigcirc	0	\bigcirc	0	\bigcirc
Should be effective in routine clinical practice and based on current scientific knowledge (O1RESEA3)	0	0	0	0	\bigcirc	0	\bigcirc

Page Break —

X→

GRID: CLINICAL PRACT

The rapid method for XR-NTX induction among patients with opioid use disorder:

	Strongly Disagree (01)	Disagree (02)	Neither Agree nor DIsagree (03)	Agree (04)	Strongly Agree (05)	Don't Know (97)	Not Applicable (96)
Is supported by clinical experience with my patients (O1CLINC1)	0	0	0	0	0	0	0
Is supported by clinical experiences with patients in other health care systems (O1CLINC2)	0	\bigcirc	0	\bigcirc	\bigcirc	0	\bigcirc
Conforms to the opinions of clinical experts in this setting (O1CLINC3)	0	\bigcirc	0	0	0	\bigcirc	0
Page Break							

X→

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GRID: PATIENT NEEDS

The rapid method for XR-NTX induction among patients with opioid use disorder:

·	Strongly Disagree (01)	Disagree (02)	Neither Agree nor Disagree (03)	Agree (04)	Strongly Agree (05)	Don't Know (97)	Not Applicable (96)
Has been well-accepted by patients at my organization and is preferred over the longer induction method for XR-NTX (treatment as usual) (O1NEEDS1)	0	\bigcirc	0	0	0	0	\bigcirc
Is consistent with clinical practices that have been accepted by patients at my organization (O1NEEDS2)	0	0	0	0	0	0	0
Takes into consideration the needs and preferences of patients (O1NEEDS3)	0	0	0	0	0	0	0
Has more advantages than disadvantages compared to the longer method of induction (treatment as usual) for XR- NTX (O1NEEDS4)	0	\bigcirc	0	0	0	0	\bigcirc

End of Block: Evidence Assessment (ORCA)

Start of Block: Context Assessment (ORCA)

INSTRUCT

The following set of questions is about your experiences at your organization. For each of the following statements, please indicate how frequently you have observed the following sets of behaviors, from 1 (very infrequently) to 5 (very frequently).

Page Break —

GRID: LEADER CULTURE How frequently have you observed senior leadership/clinical management (e.g. medical director):

c	Very Infrequently (01)	Infrequently (02)	Neither Frequently nor Infrequently (03)	Frequently (04)	Very Frequently (05)	Don't Know (97)	Not Applicable (96)
Reward clinical innovation and creativity to improve patient care (O1MNRW)	0	0	0	\bigcirc	\bigcirc	0	0
Solicit opinions of clinical staff regarding decisions about patient care (O1MGOP)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	0
Seek ways to improve patient education and increase participation in treatment (O1MGPT)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
Page Break							

 $X \rightarrow$

GRID: STAFF CULTURE How frequently have you observed staff members at your organization:

	Very Infrequently (01)	Infrequently (02)	Neither Frequently nor Infrequently (03)	Frequently (04)	Very Frequently (05)	Don't Know (97)	Not Applicable (96)
Have a sense of personal responsibility for improving patient care and outcomes (O1SFRS)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	0
Cooperate to maintain and improve effectiveness of patient care (O1SFCO)	0	0	0	\bigcirc	\bigcirc	0	0
Be willing to innovate and/or experiment to improve clinical outcomes (O1SFIN)	0	0	0	\bigcirc	\bigcirc	0	0
Be receptive to change in clinical processes (O1SFRC)	0	0	0	\bigcirc	0	0	0
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Page Break —

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GRID: LEADERSHIP How frequently have you observed senior leadership/clinical management (e.g. medical director) at your organization:

	Very Infrequently (01)	Infrequently (02)	Neither Frequently nor Infrequently (03)	Frequently (04)	Very Frequently (05)	Don't Know (97)	Not Applicable (96)
Provide effective management for continuous improvement of patient care (O1MGIM)	0	0	0	0	0	0	0
Clearly define areas of responsibility and authority for clinical managers and staff (O1MGSF)	0	0	0	\bigcirc	\bigcirc	0	\bigcirc
Promote team building to solve clinical care problems (O1MGTE)	0	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
Promote communication among clinical services and units (O1MGCM)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
Page Break —							

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GRID: LEADER MEASURE How frequently have you observed senior leadership/clinical management (e.g. medical director) at your organization:

	Very Infrequently (01)	Infrequently (02)	Neither Frequently nor Infrequently (03)	Frequently (04)	Very Frequently (05)	Don't Know (97)	Not Applicable (96)
Provide staff with information on your organization's performance measures and guidelines (O1MGGU)	0	0	\bigcirc	\bigcirc	\bigcirc	0	0
Establish clear goals for patient care processes and outcomes (O1MGGO)	0	0	0	\bigcirc	\bigcirc	0	0
Provide staff members with feedback/data on effects of clinical decisions (O1MGFD)	0	0	0	\bigcirc	\bigcirc	0	0
Hold staff members accountable for achieving results (O1MGAC)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0

Page Break -

X→

GRID: OPINION ON RTC How frequently have you observed opinion leaders at your organization:

	Very Infrequently (01)	Infrequently (02)	Neither Frequently nor Infrequently (03)	Frequently (04)	Very Frequently (05)	Don't Know (97)	Not Applicable (96)
Express belief that the current practice patterns can be improved (O1OLBE)	0	0	0	\bigcirc	\bigcirc	0	0
Encourage and support changes in practice patterns to improve patient care (O10LSU)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Demonstrate willingness to try new clinical protocols (O1OLDE)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	0
Work cooperatively with senior leadership/clinical management (e.g. medical director) to make appropriate changes (O1OLCO)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
Page Break							-

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GRID: RESOURCES In general at your organization, where there is agreement that change needs to happen, how frequently have you or your colleagues:

	Very Infrequently (01)	Infrequently (02)	Neither Frequently nor Infrequently (03)	Frequently (04)	Very Frequently (05)	Don't Know (97)	Not Applicable (96)
Had the necessary support in terms of budget or financial resources (O1SUBU)	0	0	0	0	0	0	0
Had the necessary support in terms of training (O1SUTR)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Had the necessary support in terms of facilities (O1SUFC)	0	0	0	\bigcirc	\bigcirc	\bigcirc	0
Had the necessary support in terms of staffing (O1SUSF)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc

End of Block: Context Assessment (ORCA)

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OR2 - Post-RP Implementation - v2.00

Survey Flow

EmbeddedData PROT = 0097 SITEValue will be set from Panel or URL.

Standard: UQID (6 Questions)

EmbeddedData

UQID =

\${q://QID33/ChoiceTextEntryValue}\${q://QID34/ChoiceTextEntryValue}\${q://QID35/ChoiceTextEntryValue}

Standard: Readiness Ruler (2 Questions) Block: Background (ORCA) (4 Questions) Standard: Evidence Assessment (ORCA) (6 Questions) Standard: Context Assessment (ORCA) (7 Questions) Standard: Facilitation Assessment (10 Questions)

EndSurvey:

Page Break

Start of Block: UQID

INSTRUCT

Instructions: The purpose of this study is to learn some basic characteristics of the providers and staff working at your organization. This survey should take you approximately 15 minutes to complete. By clicking the forward arrows at the bottom of this screen, you are agreeing to take part in this study and understand that your responses will be used for research purposes. This study is being administered through Columbia University Irving Medical Center and has received Institutional Review Board (IRB) approval from BRANY. Your participation in this interview is completely voluntary and you can decline to answer any question or discontinue the interview at any time. Your identity and responses will be confidential, and any reports generated from this survey will include only de-identified responses that will not impact your job role.

Page Break —

O2PRESVY Did you complete the pre-implementation survey?

○ No (1)	
○ Yes (2)	
Page Break	

Display This Question: If Did you complete the pre implementation survey? = 2

*

O2UQID1 Please re-create the same exact unique identifier you created when you completed the pre-implementation version of this survey so that we can link your pre- and post-implementation data.

Enter the first 2 letters of your last name:

Display This Question: If Did you complete the pre implementation survey? = 2

O2UQID2 Enter the first 2 letters of the city you were born in:

Display This Question:

If Did you complete the pre implementation survey? = 2

*

O2UQID3 Enter the 2 digits of the day you were born:

Display This Question:

If Did you complete the pre implementation survey? = 2

*

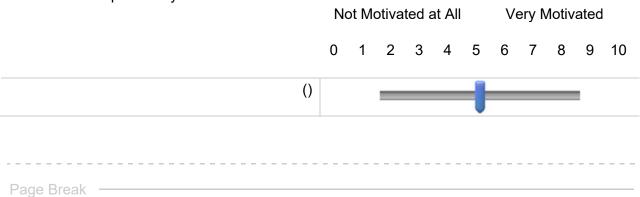
O2UQID4 Enter the first 2 letters of your mother's maiden name:

Page Break ------

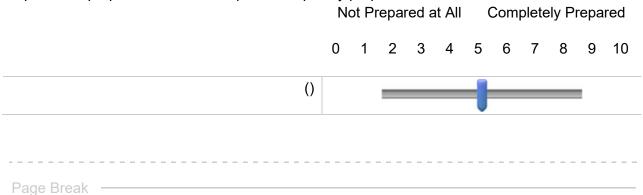
End of Block: UQID

Start of Block: Readiness Ruler

O2RULMOT On a scale from 0 to 10, how <u>motivated</u> do you feel about using the rapid protocol for starting patients on long-acting injectable naltrexone (Vivitrol), where 0 equals "not motivated at all" and 10 equals "very motivated"?



O2RULPRP On a scale from 0 to 10, how **<u>prepared</u>** are you to use the rapid protocol for starting patients with opioid use disorder on long-acting injectable naltrexone (Vivitrol), where 0 equals "not prepared all" and 10 equals "completely prepared"?



End of Block: Readiness Ruler

Start of Block: Background (ORCA)

INSTRUCT *Instructions:* We need your help assessing you and your colleagues' readiness to implement the rapid induction protocol for extended-release injectable naltrexone (XR-NTX) for patients with opioid use disorder in your facility. Please consider each question carefully and select the answer that best reflects your opinion.

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O2PROFES What is your primary professional role on this unit?

O MD/DO (01)

O NP/PA (02)

O Nurse (RN/LPN) (03)

O Therapist or Counselor (PhD, LCSW, Certified Substance Abuse Counselor) (04)

Administrative, specify: (05)

Other, specify: (99)

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O2PROFYR How long have you practiced in this professional role?

 \bigcirc Less than 1 year (01)

○ 1 - 2 years (02)

○ 3 - 5 years (03)

○ 6 - 10 years (04)

○ 11 - 20 years (05)

O Greater than 20 years (06)

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O2UNITYR How long have you worked on this unit?

 \bigcirc Less than 1 year (01)

○ 1 - 2 years (02)

○ 3 - 5 years (03)

○ 6 - 10 years (04)

○ 11 - 20 years (05)

Greater than 20 years (06)

End of Block: Background (ORCA)

Start of Block: Evidence Assessment (ORCA)

INSTRUCT

The following set of questions are about the evidence for the rapid induction protocol for extended-release injectable naltrexone (XR-NTX). For each of the following statements, please rate the strength of your agreement with the statement from 1 (strongly disagree) to 5 (strongly agree).

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O2DISCD1 In my opinion, the rapid method to induct opioid-dependent patients onto extendedrelease injectable naltrexone (XR-NTX) will improve the induction process for patients compared to the longer induction method (treatment as usual) and increase the utilization of XR-NTX as a treatment for opioid use disorder.

Strongly Disagree (01)	
O Disagree (02)	
O Neither Agree nor Disagree (03)	
O Agree (04)	
◯ Strongly Agree (05)	
O Don't Know (97)	
O Not Applicable (96)	
Page Break	

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O2DISCD2 Respected clinical experts in my institution feel that the rapid method to induct patients onto XR-NTX will improve the induction process for patients compared to the longer induction method (treatment as usual) and increase the utilization of XR-NTX as a treatment for opioid use disorder.

	○ Strongly Disagree (01)
	O Disagree (02)
	O Neither Agree nor Disagree (03)
	O Agree (04)
	O Strongly Agree (05)
	O Don't Know (97)
	O Not Applicable (96)
-	
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GRID: RESEARCH EVIDE Changes to improve and systematize induction onto XR-NTX by a rapid procedure at my site:

	Strongly Disagree (01)	Disagree (02)	Neither Agree nor Disagree (03)	Agree (04)	Strongly Agree (05)	Don't Know (97)	Not Applicable (96)
Are supported by randomized controlled trials (RCTs) or other scientific evidence at my organization (O2RESEA1)	0	0	0	0	0	0	0
Are supported by randomized controlled trials (RCTs) or other scientific evidence from other health care systems (O2RESEA2)	0	\bigcirc	0	0	\bigcirc	0	\bigcirc
Should be effective in routine clinical practice and based on current scientific knowledge (O2RESEA3)	0	0	\bigcirc	0	\bigcirc	0	\bigcirc

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GRID: CLINICAL PRACT

The rapid method for XR-NTX induction among patients with opioid use disorder:

	Strongly Disagree (01)	Disagree (02)	Neither Agree nor Disagree (03)	Agree (04)	Strongly Agree (05)	Don't Know (97)	Not Applicable (96)
Is supported by clinical experience with my patients (O2CLINC1)	0	0	0	0	0	0	0
Is supported by clinical experiences with patients in other health care systems (O2CLINC2)	0	\bigcirc	\bigcirc	0	\bigcirc	0	\bigcirc
Conforms to the opinions of clinical experts in this setting (O2CLINC3)	0	\bigcirc	\bigcirc	0	0	\bigcirc	\bigcirc
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GRID: PATIENT NEEDS

The rapid method for XR-NTX induction among patients with opioid use disorder:

·	Strongly Disagree (01)	Disagree (02)	Neither Agree nor Disagree (03)	Agree (04)	Strongly Agree (05)	Don't Know (97)	Not Applicable (96)
Has been well-accepted by patients at my organization and is preferred over the longer induction method for XR-NTX (treatment as usual) (O2NEEDS1)	0	\bigcirc	0	0	0	0	\bigcirc
Is consistent with clinical practices that have been accepted by patients at my organization (O2NEEDS2)	0	0	0	0	0	0	0
Takes into consideration the needs and preferences of patients (O2NEEDS3)	0	0	0	0	0	0	0
Has more advantages than disadvantages compared to the longer method of induction (treatment as usual) for XR- NTX (O2NEEDS4)	0	\bigcirc	0	0	\bigcirc	\bigcirc	\bigcirc

End of Block: Evidence Assessment (ORCA)

Start of Block: Context Assessment (ORCA)

INSTRUCT

The following set of questions is about your experiences at your organization. For each of the following statements, please indicate how frequently you have observed the following sets of behaviors, from 1 (very infrequently) to 5 (very frequently).

Page Break —

GRID: LEADER CULTURE How frequently have you observed senior leadership/clinical management (e.g. medical director):

c	Very Infrequently (01)	Infrequently (02)	Neither Frequently nor Infrequently (03)	Frequently (04)	Very Frequently (05)	Don't Know (97)	Not Applicable (96)
Reward clinical innovation and creativity to improve patient care (O2MNRW)	0	0	0	\bigcirc	\bigcirc	0	0
Solicit opinions of clinical staff regarding decisions about patient care (O2MGOP)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	0
Seek ways to improve patient education and increase participation in treatment (O2MGPT)	0	\bigcirc	0	\bigcirc	\bigcirc	0	0
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GRID: STAFF CULTURE How frequently have you observed staff members at your organization:

J	Very Infrequently (01)	Infrequently (02)	Neither Frequently nor Infrequently (03)	Frequently (04)	Very Frequently (05)	Don't Know (97)	Not Applicable (96)
Have a sense of personal responsibility for improving patient care and outcomes (O2SFRS)	0	0	0	0	0	0	0
Cooperate to maintain and improve effectiveness of patient care (O2SFCO)	0	0	0	\bigcirc	\bigcirc	0	0
Be willing to innovate and/or experiment to improve clinical outcomes (O2SFIN)	0	0	0	\bigcirc	\bigcirc	0	\bigcirc
Be receptive to change in clinical processes (O2SFRC)	0	0	0	\bigcirc	\bigcirc	\bigcirc	0
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GRID: LEADERSHIP How frequently have you observed senior leadership/clinical management (e.g. medical director) at your organization:

	Very Infrequently (01)	Infrequently (02)	Neither Frequently nor Infrequently (03)	Frequently (04)	Very Frequently (05)	Don't Know (97)	Not Applicable (96)
Provide effective management for continuous improvement of patient care (O2MGIM)	0	0	0	0	0	0	0
Clearly define areas of responsibility and authority for clinical managers and staff (O2MGSF)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	0
Promote team building to solve clinical care problems (O2MGTE)	0	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
Promote communication among clinical services and units (O2MGCM)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
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GRID: LEADER MEASURE How frequently have you observed senior leadership/clinical management (e.g. medical director) at your organization:

	Very Infrequently (01)	Infrequently (02)	Neither Frequently nor Infrequently (03)	Frequently (04)	Very Frequently (05)	Don't Know (97)	Not Applicable (96)
Provide staff with information on your organization's performance measures and guidelines (O2MGGU)	0	0	\bigcirc	\bigcirc	\bigcirc	0	0
Establish clear goals for patient care processes and outcomes (O2MGGO)	0	0	0	\bigcirc	\bigcirc	0	0
Provide staff members with feedback/data on effects of clinical decisions (O2MGFD)	0	\bigcirc	0	\bigcirc	\bigcirc	0	0
Hold staff members accountable for achieving results (O2MGAC)	0	0	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc

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GRID: OPINION ON RTC How frequently have you observed opinion leaders at your organization:

Ū	Very Infrequently (01)	Infrequently (02)	Neither Frequently nor Infrequently (03)	Frequently (04)	Very Frequently (05)	Don't Know (97)	Not Applicable (96)
Express belief that the current practice patterns can be improved (O2OLBE)	0	0	0	0	0	0	0
Encourage and support changes in practice patterns to improve patient care (O2OLSU)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
Demonstrate willingness to try new clinical protocols (O2OLDE)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Work cooperatively with senior leadership/clinical management (e.g. medical director) to make appropriate changes (O2OLCO)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
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GRID: RESOURCES In general at your organization, where there is agreement that change needs to happen, how frequently have you or your colleagues:

	Very Infrequently (01)	Infrequently (02)	Neither Frequently nor Infrequently (03)	Frequently (04)	Very Frequently (05)	Don't Know (97)	Not Applicable (96)
Had the necessary support in terms of budget or financial resources (O2SUBU)	0	0	0	0	0	0	\bigcirc
Had the necessary support in terms of training (O2SUTR)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Had the necessary support in terms of facilities (O2SUFC)	0	0	0	\bigcirc	\bigcirc	\bigcirc	0
Had the necessary support in terms of staffing (O2SUSF)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc

End of Block: Context Assessment (ORCA)

Start of Block: Facilitation Assessment

INSTRUCT The following set of questions relates to the recent project where patients with opioid use disorder underwent a rapid induction protocol for extended-release injectable naltrexone (XR-NTX). This is referred to as "intervention" below. For each of the following

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statements, please rate the strength of your agreement with the statement from 1 (strongly disagree) to 5 (strongly agree).

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GRID: LEADER PLANNIN For this intervention, senior leadership/clinical management (e.g. medical director) have:

	Strongly Disagree (01)	Disagree (02)	Neither Agree nor Disagree (03)	Agree (04)	Strongly Agree (05)	Don't Know (97)	Not Applicable (96)
Proposed a project that is appropriate and feasible (O2LDPLN1)	0	0	0	0	0	0	0
Provided clear goals for improvement in patient care (O2LDPLN2)	0	0	0	0	0	0	0
Established a project schedule and deliverables (O2LDPLN3)	0	0	0	0	0	0	0
Designated a clinical champion for the project (O2LDPLN4)	0	0	0	0	0	\bigcirc	\bigcirc
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GRID: CLINICAL CHAMP The project clinical champion:

	Strongly Disagree (01)	Disagree (02)	Neither Agree nor Disagree (03)	Agree (04)	Strongly Agree (05)	Don't Know (97)	Not Applicable (96)
Accepts responsibility for the success of this project (O2CHAMP1)	0	0	0	0	0	0	0
Has the authority to carry out the implementation (O2CHAMP2)	0	\bigcirc	\bigcirc	0	0	0	\bigcirc
Is considered a clinical opinion leader (O2CHAMP3)	0	\bigcirc	0	\bigcirc	0	\bigcirc	\bigcirc
Works well with the intervention team and providers (O2CHAMP4)	0	\bigcirc	0	0	0	\bigcirc	0
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	Strongly Disagree (01)	Disagree (02)	Neither Agree nor Disagree (03)	Agree (04)	Strongly Agree (05)	Don't Know (97)	Not Applicable (96)
Agree on the goals for this intervention (O2OPLDR1)	0	\bigcirc	0	\bigcirc	\bigcirc	0	0
Will be informed and involved in the intervention (O2OPLDR2)	0	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
Agree on adequate resources to accomplish the intervention (O2OPLDR3)	0	\bigcirc	0	0	0	0	\bigcirc
Set a high priority on the success of the intervention (O2OPLDR4)	0	\bigcirc	\bigcirc	0	\bigcirc	0	\bigcirc

GRID: OPINION LEADER Senior leadership/clinical management/staff opinion leaders:

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Neither Strongly Strongly Don't Not Agree Disagree Agree Disagree Agree Know nor Applicable (02) (04) (01) Disagree (05) (97) (96) (03) Share responsibility for the success of this \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc project (O2TEAM1) Have clearly defined roles and \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc responsibilities (O2TEAM2) Can accomplish intervention tasks within \bigcirc \bigcirc their regular workload (O2TEAM3) Have staff support and other resources \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc required for the project (O2TEAM4)

GRID: IMPLEMENT TEAM The implementation team members:

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	Strongly Disagree (01)	Disagree (02)	Neither Agree nor Disagree (03)	Agree (04)	Strongly Agree (05)	Don't Know (97)	Not Applicable (96)
Identifies specific roles and responsibilities (O2IMPLN1)	0	\bigcirc	0	0	0	\bigcirc	0
Clearly describes tasks and timelines (O2IMPLN2)	0	\bigcirc	\bigcirc	0	0	0	0
Includes appropriate clinical team and patient education (O2IMPLN3)	0	0	0	0	0	\bigcirc	0
Acknowledges staff input and opinions (O2IMPLN4)	0	0	0	0	0	\bigcirc	0
Page Break —							

GRID: IMPLEMENT PLAN The implementation plan for this intervention:

Neither Strongly Not Strongly Agree Don't Disagree Agree Disagree Agree Know Applicable nor (02) (04) (01) Disagree (05) (97) (96) (03) Regular meetings with the project champion and \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc team members (O2COMM1) Involvement of quality management staff in project \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc planning and implementation (O2COMM2) Regular feedback to clinical management on progress of project \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc activities and resource needs (O2COMM3) Regular feedback to clinicians on effects of practice \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc changes on patient care/outcomes (O2COMM4)

GRID: COMMUNICATION Communication will be maintained through:

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GRID: PROGRESS PROJ Progress of the project will be measured by:

	Strongly Disagree (01)	Disagree (02)	Neither Agree nor Disagree (03)	Agree (04)	Strongly Agree (05)	Don't Know (97)	Not Applicable (96)
Collecting feedback from patients regarding proposed/implemented changes (O2PROG1)	0	0	0	0	\bigcirc	0	0
Collecting feedback from staff regarding proposed/implemented changes (O2PROG2)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
Developing and distributing regular performance measures to clinical staff (O2PROG3)	0	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	0
Providing a forum for presentation/discussion of results and implications for continued improvements (O2PROG4)	0	\bigcirc	\bigcirc	0	0	0	0

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Neither Strongly Strongly Don't Not Agree Disagree Agree Disagree Agree Know Applicable nor (02) (04) (01) Disagree (05) (97) (96) (03) Staff incentives (O2RESRC1) \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc Equipment and materials \bigcirc \bigcirc \bigcirc ()()(O2RESRC2) Patient awareness/need \bigcirc \bigcirc \bigcirc \bigcirc ()()(O2RESRC3) Provider buy-in (O2RESRC4) \bigcirc () \bigcirc \bigcirc ()Intervention team \bigcirc \bigcirc \bigcirc \bigcirc ()(O2RESRC5) Evaluation protocol \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc (O2RESRC6) - - - - - - - -- - - - - -Page Break

GRID: RESOURCES AVL The following are available to make the select plan work:

Neither Strongly Strongly Don't Not Agree Disagree Agree Disagree Agree Know nor Applicable (02) (04) (01) Disagree (05) (97) (96) (03) Periodic outcome measurement \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc (O2EVAL1) Staff feedback \bigcirc \bigcirc ()(O2EVAL2) Patient satisfaction survey \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc (O2EVAL3) Dissemination plan for performance \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcap measures (O2EVAL4) Review of results by clinical \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc leadership (O2EVAL5)

GRID: EVAL PLANS Plans for evaluation and improvement of this intervention include:

End of Block: Facilitation Assessment

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