



Healthy Hearts Northwest Follow-up Staff Member Survey (#2)

MD, ND, DO, NP, PA version

Name of your practice: _____

Address of your practice: _____

Today's date: ___ / ___ / _____

1. Please rate your level of agreement with the following statements about your practice (select one for each row):

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
Mistakes have led to positive changes here	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have many opportunities to grow in my work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in our practice actively seek new ways to improve how we do things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People at all levels openly talk about what is/isn't working	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership strongly supports practice change efforts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After trying something new, we take time to think about how it worked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most people who work in our practice enjoy their work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is hard to get things to change in our practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
This practice is a place of joy and hope	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
This practice learns from its mistakes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practice leadership promotes an environment that is an enjoyable place to work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in this practice operate as a real team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When we experience a problem in the practice, we make a serious effort to figure out what's really going on	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership in this practice creates an environment where things can be accomplished	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
We regularly take time to reflect on how we do things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most people in this practice are willing to change how they do things in response to feedback from others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can rely on others in this practice to do their jobs well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Difficult problems are solved through face-to-face discussions in this practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Members of this practice are able to bring up problems and tough issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. The next three questions help us understand your perceptions of how your practice addresses patients' needs. Please indicate your level of agreement with the following statements:

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
Our practice does a good job of assessing patients' needs and expectations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Our practice uses data from patients to improve care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Our practice uses data on patients' expectations and/or experience when developing new services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Using your own definition of burnout - please indicate which of the following statements best describes how you feel about your situation at work (select only one response):

- I enjoy my work. I have no symptoms of burnout.
- Occasionally I am under stress and I don't always have as much energy as I once did, but I don't feel burned out.
- I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion.
- The symptoms of burnout I experience won't go away. I think about frustrations at work a lot.
- I feel completely burned out and often wonder if I can go on practicing. I am at the point where I may need some changes.

4. How many years have you worked in this practice? Please round to the nearest year. If you have worked in the practice less than 1 year, please write 0 for years worked.

___ ___ years

5. How many hours per week do you work at this practice on average?

___ ___ hours

6. In 2013, the American College of Cardiology and the American Heart Association released new guidelines for treating blood cholesterol to reduce atherosclerotic cardiovascular disease (ASCVD) risk in adults. This included changes to prescribing statins. Statin therapy is now recommended for patients who meet one of the following criteria:

1. Diagnosed with clinical arteriosclerotic cardiovascular disease (ASCVD)
2. Primary elevation of LDL ≥ 190 mg/dL
3. Diagnosed with DM, 40-75 years old, LDL 70-189 mg/dL, and no diagnosis of ASCVD
4. No diagnosis of ASCVD or DM, LDL 70-189 mg/dl but 10-year ASCVD risk $\geq 7.5\%$

Please rate your agreement whether these new guidelines will lead to better outcomes for your patients:

	Improve outcomes for all my patients	Improve outcomes for some patients	Have no impact on outcomes	Negatively impact some patients	Negatively impact all of my patients
Patients diagnosed with ASCVD should be prescribed a statin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient with a primary elevation of LDL >190 mg/dL should be prescribed a statin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patients with a diagnosis of DM, between 40-75 years old, with LDL between 70-189 mg/dL, and no diagnosis of ASCVD should be prescribed a statin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patients with no diagnosis of ASCVD or DM, LDL 70-189 and estimated 10-year ASCVD risk $\geq 7.5\%$ should be prescribed a statin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. In 2014, the JNC8 released new guidelines for treating patients with hypertension that included the following two major changes:

1. BP target for adults over age 60 was changed from $<140/90$ mmHg to $<150/90$ mmHg
2. Initial antihypertensive treatment should NOT include an ACE or ARB for black patients

Please rate your level of agreement regarding whether these new guidelines will lead to better outcomes for your hypertensive patients:

	Improve outcomes for all my patients	Improve outcomes for some patients	No impact on outcomes	Negative impact for some patients	Negative impact for all of my patients
BP target $<150/90$ mmHg for patients over 60 years of age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initial antihypertensive treatment should NOT include ACE or ARB for black patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. In determining whether to recommend statin therapy, do you prefer a risk cut-off higher than 7.5% (using an ASCVD calculator) for patients without an ASCVD or DM diagnosis, or those with LDL 70- 189?

Yes

No

8a. If yes, you prefer a higher cut-off, what % cut-off do you prefer?

_____ % cut-off preferred

9. For **adult patients you saw in the last 3 months** for routine medical care, how often did you calculate their ASCVD risk?

- Never
- Rarely
- Sometimes
- Usually
- Almost always or Always

10. When you calculated ASCVD risk in the last 3 months, how often did you discuss risk level with the patient?

- Never
- Rarely
- Sometimes
- Usually
- Almost always or Always

11. To what extent do you agree that each of the following factors has influenced your decision regarding your use of a CVD Risk Calculator in your practice?

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know
It addresses a common or high priority problem in my practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is simple to implement in my practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is something I could try out in my practice prior to using it regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is modifiable to meet the needs of my practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It requires additional training for my office staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

We appreciate you taking the time to complete this survey. Your anonymous responses will be used in aggregate with others to help better understand your practice. **If you have any other feedback for us, please leave comments below.**

Thank you!!