1) **How does a project get started?**
Projects are generated based on member interest, what would have the most impact, and feasibility of project (i.e. is it a Quality Improvement project or something else? Can it be done relatively easily, no extra data collection requirements). After a topic has been identified, SARs are reviewed to determine if there is some consistency in how PSQC member hospitals perform. If there is wide variability, the project may not be feasible. If the project is feasible, a project lead is identified and then individuals from PSQC member hospitals are invited to join a workgroup.

2) **Who is on the workgroups?**
The workgroup should be comprised of 5-8 surgeons, 2 SCRs and the PSQC program manager (PM). Occasionally, medical students, residents on a research year, or fellows, may participate under the mentorship of a member surgeon.

3) **What does the workgroup do?**
The workgroup examines the data as presented by the PSQC PM and works toward identifying a strategy for project launch. To date, PSQC QI projects have been qualitative in nature. On the particular metric chosen, member PSQC hospitals’ data is presented in a blinded fashion to the workgroup using random identifiers. The workgroup is able to create inclusion criteria and select which hospitals should be invited to participate in the qualitative interview process.

Once the blinded hospitals have been chosen, the PSQC executive director (ED) reaches out to each hospital, asks if they want to participate and if they give permission to unblind themselves only to the workgroup members. The PSQC PM will coordinate identifying individuals to interview from each assenting hospital and scheduling of interviews using workgroup members’ availability.

4) **How frequently does the workgroup meet?**
At the start of the project, meeting frequency will be determined through consensus among workgroup members. Typically, beginning of protects have more frequent meeting (2x month), and as the project progresses, meeting frequency will reduce (1x month). Workgroup meetings last for an hour (unless additional time is needed).
5) **Am I expected to attend every workgroup meeting?**
   You are not expected to attend every meeting, although every effort should be made to attend as many as possible. If you find the meeting frequency does not suit your schedule, you should resign from the group. There will be other opportunities. Each meeting is recording and available for review if you are not able to attend in person. The PSQC PM provides notes of each meeting to every workgroup member.

6) **What would I actually be doing?**
   Each project will have its own workgroup structure and tasks. Not all projects will require qualitative interviews. Workgroup members are expected to actively engage in development of inclusion criteria, actual interviews (if indicated), and review of the final work product.

   If qualitative interviews are determined by the workgroup to be the best approach, members will participate in interviewing those sites which have agreed to participate in the project, using an interview guide based on the Theoretical Domains Framework (TDF). Each interview is one hour long. You will typically participate in 2-3 interviews over a 3-4-month period.

7) **How long does a project typically last?**
   Each project will have its own timeline. To date, the active portion of reviewing data, creating strategy, gathering information from participating sites (interviews), and review of the final work product takes between 8-12 months.

8) **What is the work product?**
   The final work product will be an implementation guide shared with all PSQC member hospitals. The guide highlights findings from the qualitative interviews-including best practices, protocol development, change strategies-, as well as tools and reference material sites can use in implementing change at their respective hospital.

9) **What happens after the work product is completed?**
   After the work product is completed, PSQC may host one-on-one coaching sessions with those hospitals that might like an opportunity to discuss issues they face and hear how coaches have addressed these challenges along with suggestions on how to overcame the barriers. These coaching sessions are one hour and occur approximately 1x month over 3-6 months after the work product has been introduced to the PSQC as a whole. Coaches are recruited from the workgroup team as well as staff from PSQC hospital member who are good performers on the metric.