

Online Supplementary Material

Jaén CR, Crabtree BF, Palmer RF, et al. Methods for evaluating practice change toward a patient-centered medical home. *Ann Fam Med*. 2010;8(Suppl 1):S9-S20.

http://annfammed.org/content/8/Suppl_1/S9

Shorter Adaptive Reserve Measures

The 23-item adaptive reserve measure reported in this article¹ is consistent with the theoretical description of its source.² In response to several requests from researchers in the field, we would like to report 2 shorter versions that were identified during our factor analysis of the original data.

One set of 14 items had an item loading of >0.60 on the adaptive reserve factor across all samples (Cronbach's $\alpha = .96$):

1. Mistakes have led to positive changes here.
2. I have many opportunities to grow in my work.
3. People in our practice actively seek new ways to improve how we do things.
4. People at all levels of this office openly talk about what is and isn't working.
5. Leadership strongly supports practice change efforts.
6. After trying something new, we take time to think about how it worked.
7. Most of the people who work in our practice seem to enjoy their work.
8. Recode: It is hard to get things to change in our practice.
9. This practice is a place of joy and hope.
10. This practice learns from its mistakes.
11. Practice leadership promotes an environment that is an enjoyable place to work.
12. People in this practice operate as a real team.
13. When we experience a problem in the practice we make a serious effort to figure out what's really going on.
14. Leadership in this practice creates an environment where things can be accomplished.

Another set of 3 items had an item loading of >0.70 across all samples (Cronbach's $\alpha = .86$):

1. People in this practice operate as a real team.
2. When we experience a problem in the practice, we make a serious effort to figure out what's really going on.
3. Leadership in this practice creates an environment where things can be accomplished.

These more parsimonious measures are likely to have a similar ability to represent the measurement of adaptive reserve³ while providing less direction on the areas that need to be addressed within the practice in terms of content of intervention.

All items are scored on a 5-point Likert scale (strongly disagree, disagree, neutral, agree, strongly agree). The final result is scaled in a 0-1.0 scale with 1.0 being a perfect score.

Original Survey Format

The original Clinician Staff Questionnaire can be found in Supplemental Appendix 4, at: http://www.annfammed.org/content/suppl/2010/06/07/8.Suppl_1.S9.DC1/Jaen_SuppApp4.pdf

References

1. Jaén CR, Crabtree, BF, Palmer RF, et al. Methods for evaluating practice transformation towards a patient-centered medical home in the national demonstration project. *Ann Fam Med.* 2010;8(Suppl 1):S9-S20.
2. Miller, WL, Crabtree, BF, Nutting, PA, Stange, KC, Jaén CR. Primary care practice development: a relationship-centered approach. *Ann Fam Med.* 2010;8(Suppl 1):S68-S79.
3. Nutting, PA, Crabtree, BF, Stewart EE, Miller, WL, Palmer RF, Stange, KC, Jaén CR. Effect of facilitation on practice outcomes in the National Demonstration Project model of the patient-centered medical home. *Ann Fam Med.* 2010;8(Suppl 1):S33-S44.