

ATTACHMENT 2b

State Quitline Administrator Data Collection Instrument

**NNTCQ State Quitline Administrator Instrument
OMB Version 6/26/2006**

STATE QUITLINE ADMINISTRATOR PERSONAL INFORMATION
[Filled in beforehand; confirm.]

Name: _____

Title: _____

State: _____

Phone number: _____

Email: _____

Appointment information:

Interviewer:

Interview Date:

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.** Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-xxxx*). Do not return the completed form to this address.

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OMB NUMBER: #####
EXPIRES: mm/dd/yyyy

Intro Script

Hello, my name is _____. I am a researcher from Westat, a national health research organization.

The National Cancer Institute and the Centers for Disease Control and Prevention have contracted with Westat to conduct an evaluation of the National Network of Tobacco Cessation Quitlines Initiative. The knowledge and perspective of each state's quitline administrator is a vital component of this evaluation.

I would like to obtain your views on a number of questions and topics related to the Quitline Network Initiative, which I will refer to as the Initiative. Our interview should last about an hour. Is this a convenient time for you? [IF NO: please tell me when you would like me to call back.]

Thank you for agreeing to be interviewed about the Initiative. There are several topics I would like to cover with you today. They include your impressions, experiences, plans and activities surrounding the Initiative.

If you agree, I'd like to record our conversation so that I can pay close attention to what you are telling me without having to stop and write extensive notes. The recording will only be used to review our discussion for a more detailed analysis. Do you agree to have this interview recorded?

[Check here if respondent agrees to recording: _____]

Your participation in this interview is voluntary and there are no penalties if you decide not to respond to the information collection as a whole or any particular question. You can refuse to answer any question and "I don't know" is an acceptable response. The information you provide will be kept confidential and will not be disclosed in identifiable form to anyone. Responses to this interview will be reported in summary form only or will be presented in a way that their source cannot be identified. Do you have any questions before we begin?

In this interview I will be asking you to provide your opinion about some items or events as well as some factual pieces of information. In some instances I will ask you to think about the Initiative as a whole, which includes the launch of the national 1-800-QUIT-NOW number, and other activities your state has engaged in with the various federal agencies involved with the Initiative. At other times, I will ask you to specifically think about the time since the launch of 1-800-QUIT-NOW number.

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General

1. In general, how did you regard the announcement of the Initiative when you first heard of it?

2. In general, how do you regard it now?

3. What about the Initiative did you think was handled well? What could have been handled better?

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Operations

4. NCI's records indicate your state quitline began operation in [MONTH YEAR].

In general, please describe the status of your state's quitline before the launch of 1-800-QUIT-NOW in November 2004 and then again as of the end of December 2005.

[IF NEEDED: We realize your quitline was not (fully) operational during {this time/these times} but you may have engaged in developmental activities.]

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5. [ASK ONLY IF STATE HAD QUITLINE PRIOR TO NOVEMBER 2004]

Now I'd like to know how the Initiative affected your state quitline activities. As I read each activity, please tell me if the Initiative was responsible for an increase, decrease or had no effect on the activity in 2005.

How did the Initiative affect...

[IF AN EXPLANATION IS OFFERED RECORD IN THE MARGIN.]

	INCREA SE	DECREAS E	HAD NO EFFEC T	REF	DK
The types of services provided?	1	2	3	7	8
The days and times when live services were provided?	1	2	3	7	8
The number or variety of formal or informal partnership relationships?	1	2	3	7	8
Eligibility criteria for individuals receiving services?	1	2	3	7	8
Payment requirements for individuals to receive services?	1	2	3	7	8
Specific populations targeted?	1	2	3	7	8
Specific populations actually served?	1	2	3	7	8

6. [ASK ONLY IF STATE HAD QUITLINE PRIOR TO NOVEMBER 2004]

How would you summarize the impact of the Initiative on your capacity to deliver quitline programs and services in 2005?

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ASK 7 - 35 ONLY IF STATE HAD QUITLINE PRIOR TO NOVEMBER 2004

For my next series of questions I will ask you about changes to your quitline or quitline services during 2005. Please answer each question using 2004 as your comparison period.

7. Now I'd like to talk about your capacity to deliver quitline programs and services in 2005.

First, please think about your quitline's *hours of operation*.

During 2005, was there a change in the...

	YES	NO	REF	DK	IF YES: Did this reflect an increase or a decrease?	
					INCREASE	DECREASE
Total number of hours per week your quitline operated?	1	2	7	8	3	4
Number of hours per day your quitline operated?	1	2	7	8	3	4
Number of days per week your quitline operated?	1	2	7	8	3	4

IF NO TO ALL IN 7, SKIP TO 9. ELSE CONTINUE WITH 8.

8. On a scale of 1 to 5 where 1 means none and 5 means all, how much of this overall change in *operating hours* would you attribute to the Initiative in 2005?

NONE	SOME			ALL
1	2	3	4	5

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9. [Now I'd like to talk about your capacity to deliver quitline programs and services in 2005.]

Now I'd like you to think about the types of *counseling services* offered by your quitline.

During 2005, did your quitline start or stop using...

	YES	NO	RE F	D K	IF YES: Did you start or stop?	
					START	STOP
Brief interventions?	1	2	7	8	3	4
Single sessions?	1	2	7	8	3	4
Multiple reactive sessions?	1	2	7	8	3	4
Multiple proactive sessions?	1	2	7	8	3	4

IF NO TO ALL IN 9, SKIP TO 11. ELSE CONTINUE WITH 10.

- 10 On a scale of 1 to 5 where 1 means none and 5 means all, how much of the overall change in *counseling services* would you attribute to the Initiative?

NONE		SOME		ALL
1	2	3	4	5

11. [Now I'd like to talk about your capacity to deliver quitline programs and services in 2005.]

[Now I'd like you to think about *counseling services* offered by your quitline.]

During 2005, was there a change in the standard...

	YES	NO	RE F	D K	IF YES: Did this represent an increase or a decrease?	
					INCREA SE	DECREA SE
Number of counseling sessions offered to a caller?	1	2	7	8	3	4
Length of the counseling	1	2	7	8	3	4

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sessions offered to a caller?

--	--

IF NO TO ALL IN 11, SKIP TO 13. ELSE CONTINUE WITH 12.

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12. On a scale of 1 to 5 where 1 means none and 5 means all, how much of the overall change in *individual treatment dose* would you attribute to the Initiative?

NONE		SOME		ALL
1	2	3	4	5

13. [Now I'd like to talk about your capacity to deliver quitline programs and services in 2005.]

Now I'd like you to think about *some other major services* offered by your quitline.

During 2005, was there a change in the...

	YES	NO	RE F	D K	IF YES: Did this represent an increase or a decrease?	
					INCREA SE	DECREA SE
Types of informational services to smokers?	1	2	7	8	3	4
Types of web services?	1	2	7	8	3	4
Types of referral services?	1	2	7	8	3	4
Provision of full cost medications?	1	2	7	8	3	4
Provision of reduced cost medications?	1	2	7	8	3	4
Provision of free medications?	1	2	7	8	3	4

IF NO TO ALL IN 13, SKIP TO 16. ELSE CONTINUE WITH 14.

14. On a scale of 1 to 5 where 1 means none and 5 means all, how much of the overall change in these *other major services* would you attribute to the Initiative?

NONE		SOME		ALL
1	2	3	4	5

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15. Overall, how would you describe the impact of the Initiative on your *counseling services* in 2005?

16. [Now I'd like to talk about your capacity to deliver quitline programs and services in 2005.]

Now I'd like you to think about *live counseling language services* offered by your quitline.

During 2005, ...

					IF YES: Did this represent an increase or a decrease?	
	YE S	N O	RE F	D K	INCREAS E	DECREA SE
Did you add Spanish language services?	1	2	7	8		
Other than English or Spanish, did you increase or decrease the total number of languages in which you provided services?	1	2	7	8	3	4

IF NO TO ALL IN 16, SKIP TO 19. ELSE CONTINUE WITH 17.

17. On a scale of 1 to 5 where 1 means none and 5 means all, how much of the overall change in *live counseling services in non-English languages* would you attribute to the Initiative?

.....	NONE	SOME	ALL
1	2	3	4	5		

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18. Overall, how would you describe the impact of the Initiative on the *spoken and print languages you supported* in 2005?

19. [Now I'd like to talk about your capacity to deliver quitline programs and services in 2005.]

Now I'd like you to think about *specialized services for priority populations* offered by your quitline.

During 2005, was there a change in services provided to...

					IF YES: Did this reflect an increase or a decrease?	
	YE S	N O	RE F	D K	INCREAS E	DECREA SE
Pregnant women?	1	2	7	8	3	4
Youth or young adults?	1	2	7	8	3	4
Blacks or African Americans?	1	2	7	8	3	4
Hispanics?	1	2	7	8	3	4
Asians?	1	2	7	8	3	4
Native Americans?	1	2	7	8	3	4
Low SES individuals?	1	2	7	8	3	4
Any other priority population? SPECIFY:						
_____	1	2	7	8	3	4

IF NO TO ALL IN 19, SKIP TO 21. ELSE CONTINUE WITH 20.

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20. On a scale of 1 to 5 where 1 means none and 5 means all, how much of the overall change in *specialized services for priority populations* would you attribute to the Initiative?

NONE		SOME		ALL
1	2	3	4	5

21. [Now I'd like to talk about your capacity to deliver quitline programs and services in 2005.]

Now I'd like you to think about *informational services provided to non-smokers* offered by your quitline.

During 2005, was there a change in the types of informational services provided to...

	Y E S	N O	R E F	D I K	IF YES: Did this represent an increase or a decrease?	
					INCREAS E	DECREA SE
Health care professionals?	1	2	7	8	3	4
Proxy callers?	1	2	7	8	3	4

IF NO TO ALL IN 21, SKIP TO 23. ELSE CONTINUE WITH 22.

22. On a scale of 1 to 5 where 1 means none and 5 means all, how much of the overall change in *informational services provided to non-smokers* would you attribute to the Initiative?

NONE		SOME		ALL
1	2	3	4	5

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23. [Now I'd like to talk about your capacity to deliver quitline programs and services in 2005.]

Now I'd like you to think about the *eligibility requirements and service restrictions* of your quitline.

During 2005, was there a change in your quitline's eligibility requirements to receive...

					IF YES: Does this represent more or less restrictive eligibility requirements?	
	YES	NO	RE	D	MORE	LESS
			F	K		
Free services?	1	2	7	8	3	4
Services on a fee basis?	1	2	7	8	3	4
Services on any basis (for example, you will only service specific priority populations regardless of whether other type of caller is willing to pay)?	1	2	7	8	3	4
Free medications?	1	2	7	8	3	4
Discounted medications?	1	2	7	8	3	4

IF NO TO ALL IN 23, SKIP TO 25. ELSE CONTINUE WITH 24.

24. On a scale of 1 to 5 where 1 means none and 5 means all, how much of the overall change the *eligibility requirements and service restrictions* of your quitline would you attribute to the Initiative?

NONE	SOME			ALL
1	2	3	4	5

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25. [Now I'd like to talk about your capacity to deliver quitline programs and services in 2005.]

Now I'd like you to think about the *callers served* by your quitline.

During 2005, was there a change in the total number...

					IF YES: Did this represent an increase or a decrease of callers served in this way?	
	YE S	N O	RE F	D K	INCREAS E	DECREA SE
Served with written materials only?	1	2	7	8	3	4
Served with a brief intervention?	1	2	7	8	3	4
Served with a single session?	1	2	7	8	3	4
Served with multiple sessions?	1	2	7	8	3	4

IF NO TO ALL IN 25, SKIP TO 27. ELSE CONTINUE WITH 26.

26. On a scale of 1 to 5 where 1 means none and 5 means all, how much of the overall change the *services provided* by your quitline would you attribute to the Initiative?

NONE		SOME		ALL
1	2	3	4	5

27. Now I'd like to talk about your capacity to handle calls in 2005.

Please think about the *call volume* handled by your quitline.

During 2005, was there a change in the total number of...

					IF YES: Did this represent an increase or a decrease?	
	YE S	N O	RE F	D K	INCREAS E	DECREA SE

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Calls received?	1	2	7	8	3	4
Calls made directly to your state quitline number?	1	2	7	8	3	4

IF NO TO ALL IN 27, SKIP TO 29. ELSE CONTINUE WITH 28.

28. On a scale of 1 to 5 where 1 means none and 5 means all, how much of the overall change in *call volume* would you attribute to the Initiative?

NONE		SOME		ALL	
1	2	3	4	5	

29. [Now I'd like to talk about your capacity to handle calls in 2005.]

Please think about *call handling* by your quitline.

During 2005, was there a change in the total number of calls...

	Y E S	N O	R E F	D I K	IF YES: Did this represent an increase or a decrease?	
					INCREAS E	DECREA SE
Answered live by a counselor?	1	2	7	8	3	4
Answered by voicemail?	1	2	7	8	3	4
Abandoned by the callers?	1	2	7	8	3	4

31

IF NO TO ALL IN 29, SKIP TO 33. ELSE CONTINUE WITH 30.

30. On a scale of 1 to 5 where 1 means none and 5 means all, how much of the overall change in *how calls were handled* would you attribute to the Initiative?

NONE		SOME		ALL	
1	2	3	4	5	

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31. Now I'd like to talk about the different *types of calls* you were receiving in 2005.

During 2005, was there a change in the total number of...

					IF YES: Did this represent an increase or a decrease?	
	YE S	N O	RE F	D K	INCREAS E	DECREA SE
Smokers calling for themselves?	1	2	7	8	3	4
Proxy callers?	1	2	7	8	3	4
Health professional seeking cessation information?	1	2	7	8	3	4
Callers referred by health care providers or other outside parties?	1	2	7	8	3	4

IF NO TO ALL IN 31, SKIP TO 33. ELSE CONTINUE WITH 32.

32. On a scale of 1 to 5 where 1 means none and 5 means all, how much of the overall change in the *types of callers* would you attribute to the Initiative?

NONE		SOME		ALL
1	2	3	4	5

33. Now I'd like to talk about different *evaluations* you were conducting in 2005.

During 2005, was there a change in the amount or degree of...

					IF YES: Did this represent an increase or a decrease?	
	YE S	N O	RE F	D K	INCREAS E	DECREA SE
Customer satisfaction surveys?	1	2	7	8	3	4

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Measuring caller quit rates?	1	2	7	8	3	4
Evaluating staff performance?	1	2	7	8	3	4

IF NO TO ALL IN 37, SKIP TO 39. ELSE CONTINUE WITH 38.

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34 On a scale of 1 to 5 where 1 means none and 5 means all, how much of the overall change in the *evaluations activities* would you attribute to the Initiative?

NONE		SOME		ALL
1	2	3	4	5

Funding

35. In general, how do you think the Initiative impacted the amount, sources and allocation of state funding for the quitline in 2005?

36. In 2005, did the Initiative impact the amount of funding for the quitline and related activities from...

			IF YES & STATE HAD QUITLINE BEFORE DECEMBER 2005:			
	YE S	NO	RE F	DK	INCREA SE	DECREA SE
The State Health Department budget?	1	2	7	8	3	4
The State Tobacco Control budget?	1	2	7	8	3	4
MSA funds?	1	2	7	8	3	4
Earmarked taxes or other dedicated funding sources?	1	2	7	8	3	4
The Federal government?	1	2	7	8	3	4

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Other public or private sources?	1	2	7	8	3	4
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37. In 2005, did the Initiative impact the allocation or use of funding for the quitline with respect to the...

			IF YES & STATE HAD QUITLINE BEFORE DECEMBER 2005:			
			Did it cause an increase or decrease this funding?			
	YE S	NO	RE F	DK	INCREA SE	DECREA SE
Services budget?	1	2	7	8	3	4
Promotions budget?	1	2	7	8	3	4
Total quitline budget?	1	2	7	8	3	4

Priority Populations

38. **[ASK ONLY IF STATE HAD QUITLINE PRIOR TO DECEMBER 2005]**

Now I'd like to talk about any special focus on priority populations. First, think about *services* provided to different priority populations.

In 2005, as a result of the Initiative did your state provide enhanced, specialized or appropriate services to...

	YES	NO	REF	DK
Pregnant women?	1	2	7	8
Blacks or African Americans?	1	2	7	8
Hispanics?	1	2	7	8
Asians?	1	2	7	8
Native Americans?	1	2	7	8
Youth?	1	2	7	8
Low SES populations?	1	2	7	8
Any other priority population?				
SPECIFY: _____	1	2	7	8

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39. **[ASK ONLY IF STATE HAD QUITLINE PRIOR TO DECEMBER 2005]**

On a scale of 1 to 5 where 1 means none and 5 means all, how much of the expansion of *service* levels for priority populations in 2005 would you attribute to the Initiative?

NONE		SOME		ALL
1	2	3	4	5

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40. Now I would like to turn to the topic of promotions.

In your original application for supplemental CDC funds you outlined how your state proposed to use Initiative funds earmarked for promotions related to the quitline.

The application indicates that you proposed to use promotion funding for [INSERT ITEM]. During 2005, did you actually use funds for this activity?	Y E S	N O	R E F	D K	IF YES: Please provide a brief description of the major promotions, such as media or methods used and the specific populations targeted.	IF NO: Can you tell me why you didn't use the Initiative funds for [INSERT ITEM]?
	1	2	7	8		
	1	2	7	8		
	1	2	7	8		
	1	2	7	8		

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41. IF NOT INCLUDED IN THE LIST IN ITEM 40 ABOVE:

In addition to the things we just discussed, did you use the Initiative funds for...

	Y S	N O	RE F	D K	IF YES: Please provide a brief description of the major [PROMOTION TYPE], such as the media or methods used and the specific populations targeted.
Paid advertising?	1	2	7	8	
Earned media?	1	2	7	8	
Outreach to health care providers or systems?	1	2	7	8	
Generally increasing the number or types of channels used to promote your quitline?	1	2	7	8	
Anything else?	1	2	7	8	

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Promotions

42. My next questions address your assessment of your overall quitline promotion activities between November 2004 and the end of December 2005.

On a scale of 1 to 5 (where 1 is not at all successful and 5 is highly successful), overall, how successful do you think your quitline promotions were at *reaching* specific populations targeted in 2005?

NOT AT ALL SUCCESSFUL					HIGHLY SUCCESSFUL
1	2	3	4	5	
	NA	6			
	REF	7			
	DK	8			

43. **[ASK ONLY IF STATE HAD QUITLINE PRIOR TO DECEMBER 2005]**

Overall, how successful do you think your quitline promotions were at prompting those targeted populations *to call* your quitline in 2005?

NOT AT ALL SUCCESSFUL					HIGHLY SUCCESSFUL
1	2	3	4	5	
	REF	7			
	DK	8			

44. **[ASK ONLY IF STATE HAD QUITLINE PRIOR TO DECEMBER 2005]**

Do you think that your 2005 promotional activities contributed to a significant increase in calls to your quitline, a moderate increase or had no direct effect on the number of calls to your quitline?

A SIGNIFICANT INCREASE	1
A MODERATE INCREASE	2
NO DIRECT EFFECT	3
REF	7

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DK

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45. [ASK ONLY IF STATE HAD QUITLINE PRIOR TO DECEMBER 2005]

Now I would like you to think about the different types of media you may have used to promote your quitline. For each type of media, I will ask if your quitline used it only before November 2004, between November 2004 and December 2005, or during both time periods.

When promoting your quitline, did you use any ...

	Only before November 2004	Between November 2004 and December 2005	During both time periods	NOT AT ALL	REF	DK
TV?	1	2	3	4	7	8
Radio?	1	2	3	4	7	8
Published print media?	1	2	3	4	7	8
Any other form of media?	1	2	3	4	7	8

**IF OTHER FORM OF MEDIA
USED:**

Please briefly describe the other form of media you used during each time period. If you used more than one, pick the one you used for the most creative or effective promotion.

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**46. [ASK ONLY IF STATE HAD QUITLINE PRIOR TO DECEMBER 2005
AND HAD THEIR OWN STATE QUITLINE NUMBER]**

In 2005, did you typically promote only your own state quitline number, only the 1-800-QUIT-NOW number, or both your own number and the 1-800-QUIT-NOW number?

PROMOTED ONLY STATE NUMBER	1
PROMOTED ONLY 1-800-QUIT-NOW NUMBER	2
PROMOTED BOTH	3
PROMOTED NEITHER	4
REF	7
DK	8

46a. Please describe the reasons for your decision to promote {RESPONSE FROM ABOVE.}

47. [ONLY ASK IF 46 = 2 OR 3]

Thinking about the various types of promotion activities during 2005, how prominent was the 1-800-QUIT-NOW number itself in these promotions? Would you describe 1-800-QUIT-NOW as...

A focal point,	1
A major element but not a focal point,	2
A secondary piece of information,	3
A minor aspect of the promotional effort, or	4
Not a part of the promotions at all?	5

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REF 7
DK 8

Third-Party Promotions

48. I'm going to read a list of organizations that might promote 1-800-QUIT-NOW to their members or constituents, or as part of their own broader promotional campaigns. As I read each one, please tell me if that type of organization promoted the number in your state during 2005.

Was 1-800-QUIT-NOW promoted in your state by any...

	YE S	N O	RE F	DK	IF YES: Please briefly describe the promotion.
Public health agencies or clinics?	1	2	7	8	
Other health care delivery organizations or systems, such as a hospital or HMO?	1	2	7	8	
Health insurers?	1	2	7	8	
Volunteer service organizations or other public or non-profit social service agencies?	1	2	7	8	
Special interest or advocacy organizations?	1	2	7	8	
Volunteer health organizations, such as the American Lung Association?	1	2	7	8	
Anti-tobacco coalitions or advocacy groups?	1	2	7	8	
School, church, community-based coalitions or related organizations?	1	2	7	8	
Pharmaceutical companies?	1	2	7	8	
Public or private employers?	1	2	7	8	
Labor union or workers groups?	1	2	7	8	
Media, advertising, or PR organizations?	1	2	7	8	
Health care professionals?	1	2	7	8	

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49. Now I'd like to talk about priority populations that you may have targeted with *your promotions*. In 2005, did your state use Initiative funds to target...

	YES	NO	RE F	DK
Pregnant women?	1	2	7	8
Blacks or African Americans?	1	2	7	8
Hispanics?	1	2	7	8
Asians?	1	2	7	8
Native Americans?	1	2	7	8
Youth?	1	2	7	8
Low SES populations?	1	2	7	8
Any other priority population?				
SPECIFY: _____	1	2	7	8

Media Coverage

50. Now I'd like you to think about the media coverage of the 1-800-QUIT-NOW number.

What is your general assessment of the media coverage of 1-800-QUIT-NOW in your state during 2005?

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51. Think about the media coverage 1-800-QUIT-NOW received in your state during 2005. Overall, would you rate the variety as...

- | | |
|---------------------------------|---|
| Excellent, | 1 |
| Good, | 2 |
| Fair, | 3 |
| Poor, or | 4 |
| There was no
media coverage? | 5 |
| REF | 7 |
| DK | 8 |

Communications

52. Think about your interactions with representatives of the CDC, NCI, or other federal agencies during 2004 and 2005. What types of communication occurred between your state and the federal government in relation to the Initiative? What prompted these communications? What were the main issues addressed?

[IF NEEDED: Examples include group meetings, in-person visits, phone and email exchanges, and so forth.]

IF RESPONSE TO 52 IS NONE, SKIP TO 54, ELSE CONTINUE.

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53. Would you say that these communications with federal representatives were...

Very useful,	1
Somewhat useful, or	2
Not useful at all?	3
REF	7
DK	8

Technical Assistance and Training

54. In the original supplemental funding RFA issued in June 2004, the CDC identified different areas of technical assistance or training that they would provide. As I read each item, please tell me if they provided it to you. Did the CDC provide you with...

					IF YES: How useful did you find this assistance? Would you say very useful, somewhat useful, or not at all useful?		
	YES	N O	RE F	D K	VERY	SOMEWHA T	NOT AT ALL
A list of best practices or guidelines for quitline operations and services?	1	2	7	8	3	4	5
Assistance in contracting for quitline services?	1	2	7	8	3	4	5
Quitline monitoring and surveillance?	1	2	7	8	3	4	5
Anything else? [SPECIFY: _____]	1	2	7	8	3	4	5

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55. Next I'm going to read a list of channels the CDC may have used to deliver technical assistance or training. As I read each one, please tell me if the CDC used this method. Did they use...

	YES	NO	RE	D	IF YES: How useful did you find this method of technical assistance? Would you say very useful, somewhat useful, or not at all useful?		
	1	2	7	8	VERY	SOMEWHA	NOT AT ALL
			F	K	T	T	
Workshops?	1	2	7	8	3	4	5
Conferences?	1	2	7	8	3	4	5
Training sessions?	1	2	7	8	3	4	5
Individualized in-person assistance?	1	2	7	8	3	4	5
Email communication?	1	2	7	8	3	4	5
Verbal communication?	1	2	7	8	3	4	5
The electronic center for State information sharing?	1	2	7	8	3	4	5
The State Forum?	1	2	7	8	3	4	5

Partnerships

56. One of the key objectives of the Initiative has been to foster partnerships between the state quitlines and public and private entities who share a common interest with them.

My next questions are related to the creation or enhancement of relationships with agencies or quitlines in *other states*.

As a specific result of the Initiative, did your state engage in any *new partnership* activities during 2005 with agencies or state quitlines in other states?

YES 1

NO 2

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REF	7
DK	8

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57. As a specific result of the Initiative, did your state *expand* any existing partnerships during 2005 with agencies or state quitlines in other states?

- YES 1
- NO 2
- REF 7
- DK 8

IF 56 OR 57 ARE ANSWERED YES CONTINUE, ELSE SKIP TO 62.

58. What goals did you have in mind when deciding to establish or expand these partnerships with *other states*?

59. On a scale of 1 to 5 where 1 means none and 5 means all, how much of the communication you engaged in with *other states* during 2005 would you attribute to the Initiative?

NONE		SOME		ALL
1	2	3	4	5

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60. Next I am going to read a list of possible activities your quitline might participate in with *other states*. For each, please tell me if, during 2005, your quitline was in a partnership that engaged in the activity.

Was the quitline in a partnership that...

	YES	N O	REF	DK
Engaged in joint promotion activities?	1	2	7	8
Held in meetings or conferences?	1	2	7	8
Shared information, provided technical assistance or advice regarding general quitline issues?	1	2	7	8
[Shared information, provided technical assistance or advice] regarding quitline treatment, service or vendor related issues?	1	2	7	8
[Shared information, provided technical assistance or advice] regarding telephone and information technology issues?	1	2	7	8
[Shared information, provided technical assistance or advice] regarding serving special populations?	1	2	7	8
[Shared information, provides technical assistance and advice] regarding training?	1	2	7	8

IF ANY OF THE QUESTIONS ABOUT SHARED INFORMATION (ABOVE) ARE RESPONDED YES, ASK NEXT QUESTION, ELSE SKIP TO 75.

61 . On a scale of 1 to 5 where 1 means none and 5 means all, how much of the information sharing and activities you engaged in during 2005 would you attribute to the Initiative?

NONE	SOME			ALL
1	2	3	4	5

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62 My next questions are about your quitline’s partnerships with organizations or agencies *within your state*. Please think about the relationships or coalitions your quitline was engaged in during 2005. As I read each type, tell me if your quitline was involved in any type of working relationship with this type of organization during 2005.

During 2005, was your quitline in a partnership with any...

			IF YES: Was this partnership newly created, expanded, or unchanged as a result of the Initiative?				
	YES	N O	REF	D K	NEW	EXPANDE D	UNCHANGED
Public health agencies or clinics?	1	2	7	8	3	4	5
Other health care delivery organizations or systems, such as a hospitals or HMOs?	1	2	7	8	3	4	5
Health insurers?	1	2	7	8	3	4	5
Volunteer service organizations or other public or non-profit social service agencies?	1	2	7	8	3	4	5
Special interest or advocacy organizations?	1	2	7	8	3	4	5
Volunteer health organizations, such as the American Lung Association?	1	2	7	8	3	4	5
Anti-tobacco coalitions or advocacy groups?	1	2	7	8	3	4	5
Schools, churches, community-based coalitions or related organizations?	1	2	7	8	3	4	5
Pharmaceutical companies?	1	2	7	8	3	4	5

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62. [My next questions are about your quitline’s partnerships with organizations or agencies *within your state*. Please think about the relationships or coalitions your quitline was engaged in during 2005. As I read each type, tell me if your quitline was involved in any type of working relationship with this type of organization during 2005.

cont

During 2005, was your quitline in a partnership with...]

			IF YES: Was this partnership newly created, expanded, or unchanged as a result of the Initiative?				
	YES	N O	REF	DK	NE W	EXPANDED	UNCHANGE D
Public or private employers?	1	2	7	8	3	4	5
Labor unions or workers groups?	1	2	7	8	3	4	5
Media, advertising, or PR organizations?	1	2	7	8	3	4	5

[USE WITH THE FOLLOWING CATEGORIES IF NEEDED: These include relationships involving these professionals directly as clinical practitioners or through their professional associations. During 2005, did you partner with...]

Physicians?	1	2	7	8	3	4	5
Nurses, nurse practitioners, or physicians assistants?	1	2	7	8	3	4	5
Dentists or other dental professionals?	1	2	7	8	3	4	5
Pharmacists?	1	2	7	8	3	4	5
Any other type of health professionals? SPECIFY: _____	1	2	7	8	3	4	5

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63 Now I'm going to ask if your quitline worked with partners in some specific areas. For each area any partnership addressed, I will ask if your quitline was involved *only before* November 2004, *only after* November, 2004, or *both before and after*. Have your quitline's partnerships involved...

	Only before November 2004	Only after November 2004	Both before and after November 2004	NOT AT ALL	REF	DK
Partners referring patients or clients to the quitline?	1	2	3	4	7	8
Your quitline referring callers to the partners?	1	2	3	4	7	8
A formal arrangement in which your quitline contracts with a partner to provide tobacco cessation services to the partner's patients or clients?	1	2	3	4	7	8
A formal arrangement in which your quitline contracts with a partner for them to provide in-person or other types of tobacco cessation services for your quitline's callers?	1	2	3	4	7	8
The partner furnishing over-the-counter nicotine replacement products to the quitline or its callers?	1	2	3	4	7	8
The partner furnishing prescription nicotine replacement or pharmacotherapy products to your quitline's callers?	1	2	3	4	7	8
The partners promoting the quitline to their members, constituents, or employees?	1	2	3	4	7	8

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63. [Now I'm going to ask if your quitline worked with partners in some specific areas. For each area any partnership addressed, I will ask if your quitline was involved *only before* November 2004, *only after* November, 2004, or *both before and after*. Have your quitline's partnerships involved...]

cont

	Only before November 2004	Only after November 2004	Both before and after November 2004	NOT AT ALL	REF	DK
The partners promoting the quitline to the general public?	1	2	3	4	7	8
The partners promoting the quitline to health care providers?	1	2	3	4	7	8
The partners promoting other tobacco cessation to their members, constituents, or employees?	1	2	3	4	7	8
The partners promoting other tobacco cessation to the general public?	1	2	3	4	7	8
The partners promoting other tobacco cessation to health care providers?	1	2	3	4	7	8
Collaborating on general tobacco-related health outreach or education campaigns?	1	2	3	4	7	8
Collaborating on broad anti-tobacco coalitions or missions, such as smoke-free air tobacco taxation policies, or regulation of tobacco advertising?	1	2	3	4	7	8
Participating in conferences or workgroups related to quitline programs, activities, and services?	1	2	3	4	7	8

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64. In general, what were the major goals your quitline intended to achieve though these *in-state* partner relationships?

65. On a scale of 1 to 5 where 1 means a strong negative effect and 5 means a strong positive effect, what effect did the Initiative have on your state's development of partnerships during 2005? Did it have...

STRONG NEGATIVE						STRONG POSITIVE
1	2	3	4	5		

Telecommunications

66. Now I would like to briefly discuss the telecommunication aspect of using a national 800 number as a portal and routing mechanism to the state quitlines.

Think about your perceptions *prior to implementation* of the Initiative. In your opinion, what benefits and/or barriers did you see to using this technological approach to providing national access to the quitline services, versus some other type of approach?

[IF NEEDED: Please consider cost, staffing, available technology, performance of the technology and implementation requirements.]

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67. [ASK ONLY IF STATE HAD QUITLINE PRIOR TO DECEMBER 2005]

Please describe your perceptions of the benefits and/or barriers regarding this telecommunications system *after* implementation.

[IF NEEDED: Consider cost, staffing, available technology, performance of the technology and implementation requirements.]

68. [ASK ONLY IF STATE HAD QUITLINE PRIOR TO DECEMBER 2005]

In terms of your telephone system; please briefly describe how your quitline prepared for hooking up with and handling calls routed from 1-800-QUIT-NOW.

[IF NEEDED: This could include working with your telecommunications provider, your quitline service provider, and NCI's Cancer Information Services.]

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ASK 69 ONLY OF NEW (AS OF NOVEMBER 2004) QUITLINES

69. On a scale of 1 to 5, where 1 is extremely difficult and 5 is extremely easy; how difficult or easy was it to integrate your quitline's phone system with 1-800-QUIT-NOW?

EXTREMELY DIFFICULT					EXTREMEL Y EASY
1	2	3	4	5	
REF	7				
DK	8				

ASK 70 ONLY OF EXISTING (PRIOR TO NOVEMBER 2004) QUITLINES

70. On a scale of 1 to 5, where 1 is extremely difficult and 5 is extremely easy; how difficult or easy was it to change or enhance your quitline's phone system to accommodate 1-800-QUIT-NOW?

EXTREMELY DIFFICULT					EXTREMEL Y EASY
1	2	3	4	5	
REF	7				
DK	8				

71. [ASK ONLY IF STATE HAD QUITLINE PRIOR TO DECEMBER 2005]

Were there any *major* problems or disruptions of incoming calls from the 1-800-QUIT-NOW number during 2005?

YES	1
NO	2
REF	7
DK	8

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72. [ASK ONLY IF STATE HAD QUITLINE PRIOR TO DECEMBER 2005]

What are your general impressions of how the national telecommunications system worked the first year 1-800-QUIT-NOW was operational.

73. [ASK ONLY IF STATE HAD QUITLINE PRIOR TO DECEMBER 2005]

During the first year following the launch of the 1-800-QUIT-NOW number, how were technical difficulties or problems related to the telecommunications infrastructure resolved *within your state*?

74. [ASK ONLY IF STATE HAD QUITLINE PRIOR TO DECEMBER 2005]

During the first year following the launch of the 1-800-QUIT-NOW number, how were technical difficulties or problems related to the telecommunications infrastructure resolved *between your state and the NCI's Cancer Information Services*?

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ASK 75 & 76 ONLY IF QUITLINE EXISTED PRIOR TO NOVEMBER 2004

75. As a result of the launch of the 1-800-QUIT-NOW number, did you add telephone lines in 2005?

YES	1
NO	2
REF	7
DK	8

76. As a result of the launch of the 1-800-QUIT-NOW number, did you add telephone call handling features, such as internal call routing, call queuing, or statistical reporting features.

YES	1
NO	2
REF	7
DK	8

→ 76a. Please describe the types of features your quitline added.

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General

77. Finally, I would like you to reflect upon two broad aspects of the Initiative.
How would you describe the Initiative's overall effect on tobacco cessation in {STATE}?

78. In your opinion, what would be the most significant difference if the Initiative had not occurred?

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79. We are interested in getting quitline partners' perspective on the Initiative. We would like you to nominate two partners that your quitline worked with in 2005. Your choice might be because they played a significant role in your quitline efforts or they may be able to offer interesting insights into the way the Initiative has affected your quitline and the broader tobacco control landscape in your state.

[NOMINEES MAY REPRESENT NEW OR EXISTING RELATIONSHIPS AS OF NOVEMBER, 2004, BUT SHOULD HAVE BEEN ACTIVE IN 2005.]

Name: _____ Organization: _____
Title: _____ Phone: () -
Email: _____
Comments: _____

Name: _____ Organization: _____
Title: _____ Phone: () -
Email: _____
Comments: _____

- 80 Is there anything else about the Initiative you would like to discuss?

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N1. Now, I would like to ask a few questions about your quitline's experience with the North American Quitline Consortium's Minimal Data Set. For convenience, I will refer to this as the MDS.

Has your quitline implemented any aspect of the 17 MDS *intake* questions?

YES 1 SKIP TO N3

NO 2

REF 7 SKIP TO N3

DK 8 SKIP TO N3



N2 Are you making any preparations to implement the MDS intake questions in the future?

YES 1 SKIP TO N8

NO 2 SKIP TO N8

REF 7 SKIP TO N8

DK 8 SKIP TO N8

N3 Which of the following best describes your quitline's adoption of the MDS intake questions? Our quitline has...

Implemented all 17 of the questions without modifying them in any way. 1

Implemented all 17 of the questions, but made some modifications. 2

Implemented some of the questions, without any modifications. 3

Implemented some of the questions, and made some modifications. 4

REF 7

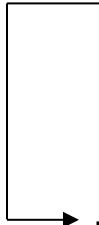
DK 8

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N4 Have you reported any data from the MDS to stakeholders or funders?

.

YES	1
NO	2
REF	7
DK	8



N5. What is the main reason why you have not reported MDS data?

N6. What barriers did your quitline face when *preparing* to implement the MDS intake questions?

IF N1=NO, SKIP TO N8, ELSE CONTINUE WITH N7.

N7. What barriers did your quitline face when *actually implementing* the MDS intake questions?

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N8. What do you believe are the benefits (if any) to having *your quitline* implement the intake questions from the MDS?

N9. What do you believe are the benefits (if any) to having *all quitlines* implement the intake questions from the MDS?

N10 . Quitline administrators vary in their beliefs about the importance of implementing the MDS. How important do you believe implementing MDS is to furthering the mission of NAQC?

- | | |
|------------------------|---|
| Very important, | 1 |
| Moderately important, | 2 |
| Slightly important, or | 3 |
| Not important at all? | 4 |
| REF | 7 |
| DK | 8 |

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N11 Given the benefits and barriers you previously described, how committed is your state's quitline to implementing the MDS? Would you say the quitline is ...

Strongly committed,	1
Moderately committed,	2
Neither committed or opposed,	3
Moderately opposed, or	4
Strongly opposed?	5
REF	7
DK	8

N12 The NAQC is exploring the possibility of conducting some case studies of states' experiences with the Minimal Data Set. Would your state be willing to participate in such a study, if you were selected for it?

YES	1
NO	2
REF	7
DK	8

→ N13 May I furnish your name to NAQC as someone who is interested in participating?

YES	1
NO	2
REF	7
DK	8