

Attachment B: RHEC Subcommittee Chairs Group Interview

## **Interview Guide for Regional Health Equity Council (RHEC) Subcommittee Chairs**

Your name and organization will not be attached to specific comments that you share today. Your response may be included with those of other respondents in aggregate form in reports or journal articles. In addition, participants' names will not be included in any information viewed by officials at the Office of Minority Health or any other HHS agency.

Methods will also be taken to protect study data. Data from the survey and interviews will not identify any person. Data from the surveys and interviews will be stored in a password-protected database. Only authorized Community Science staff working on the evaluation will have access to the database. The briefs and reports produced for the evaluation will not identify specific individuals. All potentially identifying information will be destroyed at the study's conclusion.

**INTERVIEWER: Before the group interview, please review the survey responses of RHEC members and refer to the responses where appropriate in order to probe for further insights into their experiences, accomplishments, and challenges.**

1. How has your Subcommittee helped the RHEC achieve its goals?
2. What knowledge or expertise did RHEC members have that helped the RHEC achieve these accomplishments, if at all? How did this knowledge or expertise contribute to your Subcommittee's accomplishments, if at all?
3. What resources or partnerships have your Subcommittee leveraged? How did these resources or partnerships contribute to your Subcommittee's accomplishments, if at all?

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According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-XXXX . The time required to complete this information collection is estimated to average 1 hour 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 537-H, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

4. How did the support from Federal Interagency Health Equity Team members, Office of Minority Health staff, or contractors involved in the implementation of the National Partnership for Action to End Health Disparities contribute to these accomplishments, if at all?
5. What else might have contributed to these accomplishments?
6. How has the RHEC engaged federal agencies (or their regional offices) in its plan and actions to end health disparities?
7. How has your Subcommittee engaged state agencies, organizations, or coalitions in its plan and actions to end health disparities, if at all?
8. How has your Subcommittee engaged city or county agencies, organizations, or coalitions in its plan and actions to end health disparities, if at all?
9. How has your Subcommittee engaged neighborhood, rural, or grassroots groups in its plan and actions to end health disparities?
10. What challenges has your Subcommittee faced in carrying out its work? What have you done to overcome these challenges?
11. What do you see as opportunities for your Subcommittee in the upcoming year to help advance the RHEC towards its goals?
12. What technical assistance and support do you need to help you advance your Subcommittee's work?