ATTACHMENT 7C

GRANTEE PARTNER INTERVIEW GUIDE

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INTERVIEW GUIDE GRANTEE PARTNER FOR GRANTEE PROGRAM

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Hello. My name is [*full name*], and I'm with ICF Macro. We are working with the Centers for Disease Control and Prevention, or CDC, to better understand how States implement their Colorectal Cancer Control Program (or CRCCP) and how that changes over time. This interview should take no more than 1 hour of your time. Let me share a copy of our Informed Consent Form; you can follow along as I read it aloud.

[Provide the participant with a copy of the Informed Consent Form. Read the form aloud.]

We want to make sure you know that your answers to any questions that I ask you during this interview will be treated in a secure manner. In evaluation reports, manuscripts, and other materials developed to dissemination information about the evaluation, descriptive data for each program will be presented so that various program models can be shared. Specific quotes will not be attributed to any *particular individual*.

I want to ask for your permission to audiotape our interview. This will allow me to capture all the details of our discussion. The tape will be kept secure and used only by the evaluation team to supplement the notes we take. Your name will be removed from the notes and transcript.

Do you have any questions?

Let's begin.

BACKGROUND OF RESPONDENT

- 1. Can you briefly describe your agency and how long it has been involved with:
 - [Name of State]'s CRCCP
 - Work related to colorectal cancer control and prevention
- 2. Can you briefly describe the role you play in CRCCP?
- 3. What are your specific duties related to these efforts?
- 4. Approximately how much time per week do you spend working with CRCCP?
- 5. How long have you been involved with CRCCP?
- 6. How did you become involved with your CRCCP?
- 7. How has your involvement with CRCCP changed over time?
- 8. What would you say are the goals of CRCCP?

IMPLEMENTATION ACTIVITIES

One of the goals of this site visit is to better understand how CRCCP is working with partners to implement their colorectal cancer- (or CRC)-related efforts. If there are

any key issues, concerns, or considerations that we do not ask about, please let us know.

Screening Provision

- 1. Are you or your organization currently working with CRCCP to provide CRC screening to underinsured individuals? If, yes, please describe these.
 - Do you have a formalized relationship with CRCCP (e.g., contract, memorandum of understanding [MOU])?
 - Are you or your organization working with CRCCP to recruit individuals for CRC screening? If yes, please describe how. [Probe by asking about the following:]
 - Providing support for small and large media campaigns
 - Promoting the availability of screening in community-based or workplace settings
 - Referring eligible individuals
- 2. If you or your organization is assisting with recruitment, to date which activities have been most effective at recruiting individuals for screening?
- 3. Do you or your organization help CRCCP enroll qualified individuals into available health insurance programs? If yes, please describe your role.
 - What procedures are used to identify these individuals?
 - What is the process used to enroll them?
 - What challenges, if any, have been encountered?
- 4. Do you or anyone from your organization work with CRCCP's medical advisory board (MAB)? If yes, can you describe the group's composition and primary activities?
- 5. In your opinion, what factors, if any, have facilitated CRCCP's screening provision efforts thus far?
- 6. In your opinion, what factors, if any, have posed challenges to CRCCP's screening provision efforts thus far?
- 7. Do you think CRCCP's screening provision activities would have occurred in the absence of CDC funding?

Screening Promotion

For the purposes of these questions, screening promotion refers to program activities that promote the implementation of policy-, systems-, and community-level, evidence-based interventions¹ aimed at increasing population-level screening rates.

¹ Grantees are encouraged to implement evidence-based CRC activities endorsed by the Guide to Community Preventive Services, which can be accessed at <u>http://www.thecommunityguide.org/cancer/index.html</u>

- 1. Are you or your organization currently working with CRCCP to promote CRC screening to the general population? If, yes, please describe your current activities. [Probe by asking about the following:]
 - o Small media
 - o Provider assessment and feedback
 - o Provider reminders
 - o Client reminders
 - o Reducing structural barriers
 - o Quality assurance initiatives
 - o Promotion of EHRs
 - o Organizational or legislative policy change
 - Is there existing State legislation related to CRC screening? If yes, please describe it.
 - When was it passed?
 - Is it at the city, county, regional, or State level?
 - o What has been the impact to date? How has it influenced your CRC efforts?
- 2. For EACH activity, please answer the following:
 - How did you and your organization become involved?
 - Who is responsible for implementing the activity?
 - What is the intended scope of the activity? (e.g., system- or organizationwide, communitywide, statewide)
 - Has this activity been implemented at the intended level?
 - o If yes, please describe how you were able to achieve this.
 - Do you have a formal agreement (MOU or memorandum of agreement [or MOA]) with CRCCP?
 - o If so, were there any challenges in establishing this agreement?
 - Does your organization receive funding from CRCCP to implement the activity?
 - o If yes, how much funding?
 - o How is the funding provided (e.g., contract)?
 - o What challenges have you and your organization encountered while trying to implement this activity? (e.g., staffing, resources, etc.)
- 3. What facilitators have helped your implementation efforts?
- 4. Did you or your organization play a role in CRCCP's process to select and prioritize activities to promote CRC screening? If yes
 - o What role did research or data play in the selection process?
 - o What challenges, if any, were encountered during the selection process?
 - o What factors facilitated the process?

- 5. Have you or your organization been involved in any policy changes, either organizational or legislative, related to colorectal cancer screening? If yes, please describe.
- 6. Do you think these screening promotion activities would have occurred in the absence of your CRCCP's efforts?
- 7. From your perspective, what CRC screening promotion activities have been particularly effective?
- 8. Besides the CRCCP, are you or your organization working with any other partners to promote CRC to the general population? If yes, please describe.
- 9. In general, what have been the challenges to developing and implementing screening promotion activities that support systems and organizational change?

PARTNERSHIP INVOLVEMENT AND INFLUENCE

- 1. Do you think people in your State are aware of your organization's and/or CRCCP's screening efforts?
- 2. What aspect(s) of your partnership with CRCCP have been the most important in advancing CRC screening at the population level? Please explain why.
- 3. Has there been any difficulty in developing and sustaining your relationship with CRCCP to achieve the desired organization- and system-level changes?
- 4. Do you think your organization and CRCCP have a common understanding about what CRCCP is trying to achieve with respect to CRC screening? Please explain.
- 5. What impact do you think participation in CRCCP's efforts has had on your organization?

EVALUATION

- 1. Do you have an evaluation plan to assess the effectiveness of your organization's CRC screening and/or promotion activities? If yes, please answer the following:
 - What is the focus of the evaluation?
 - What are key measures or indicators for the evaluation?
 - Have you encountered any difficulties in using these measures? If so, please describe the difficulties.
 - What data sources are being used?
 - Is there baseline data? If so, please describe these.
- 2. Do you provide data about your organizational efforts to CRCCP? If yes, please describe these. Have you entered into data sharing agreements with CRCCP? If so, please describe the agreement.

3. What does this evaluation activity tell you about the success of your organization's efforts thus far?

TECHNICAL ASSISTANCE AND TRAINING

- 1. Have you received any technical assistance or training that has been especially valuable to your organization's CRC efforts? If yes, from whom? Why was it valuable?
- 2. Have you or your organization provided any technical assistance or training to others interested in CRC screening provision or promotion? If yes, please describe what was provided.

CONCLUSION

Now we would like to hear your thoughts on how well you think your State's CRC efforts are currently working.

- 1. In your opinion, what are the key strengths of CRCCP?
- 2. In your opinion, what are the key limitations of CRCCP?
- 3. What has been accomplished as a result of CRCCP that otherwise would not have been?
- 4. Overall, do you think CRCCP uses an effective approach to improve colorectal cancer screening?
 - If so, why?
 - If not, why?
 - Is there another approach you would recommend using? Why?
- 5. What concerns, if any, do you have about future efforts to evaluate CRCCP's efforts?
- 6. Is there anything else you would like to say about CRCCP that we have not discussed?

Those are all the questions I have for you at this time. Before we wrap up, do you have any questions for me about anything we've talked about?

Thank-you again for taking the time to speak with me. We sincerely appreciate and value your input!