

## Appendix H: Clinic Staff Interview Guide

### A. INTRODUCTION

**Thank you for taking the time to talk to us today!**

My name is [\_\_\_\_\_] from RTI International, a non-profit research organization. I also have [\_\_\_\_\_] here on the line who will be taking notes during the call. As we mentioned previously, RTI International is working with the Health Resources and Services Administration (HRSA) to develop, implement, and pilot test short message service (SMS), or text messages, to improve retention in care and HIV medication adherence among racially and ethnically diverse HIV-positive youth who are receiving care at select Ryan White clinics throughout the United States. Before we get started, let me go over a few study details and get your consent to participate.

### B. CONSENT

To help evaluate the pilot study, we are talking to up to 30 staff members from participating Ryan White Clinics. I will be asking for your thoughts and opinions on the text messaging program during today's discussion.

The interview should take about 1 hour. Your participation is voluntary. There are not any physical risks to taking part in this study. There are no direct benefits for your participation. You can stop the interview at any time. We will provide a summary of our conversation to our client, HRSA. We will not provide any personal identifying information that could identify you with your comments. Nor will we provide the audio or an exact transcript.

If you have any questions about your rights as a participant in this interview, you can call RTI's Office of Research Protection at **1-866-214-2043**. If you have any questions about the study, you may call the study director, Dr. Jennifer Uhrig, at **1-866-784-1953, extension 2-3311**.

Do you consent to participate in the interview now?

Yes

No

Interviewer Initials \_\_\_\_\_

I would like to audiotape our conversation so that I can refer back to it if necessary when I am going over our notes. Do I have your permission to tape this conversation? [IF NOT, DO NOT TURN ON RECORDER/IF YES TURN IT ON]

Thank you again for your time and help. Let's get started!

## **B. INTERVIEW QUESTIONS**

### **Background**

1. How would you summarize your current work at your clinic?
2. In what ways have you been involved with the UCARE4LIFE text messaging program at your clinic?

### **Organizational Context**

3. What kinds of programs or interventions has your clinic implemented for HIV positive patients in the past? How successful were these endeavors?
4. Do you feel that staffing is adequate at your clinic to implement the text messaging program with patients? How about to sustain it? Can you tell me a bit more about that?
5. Do you feel that the IT infrastructure at your clinic would be adequate to support the text messaging program?
6. What kind of support is the program getting from leadership at your clinic? Is this support adequate to sustain the program's momentum over time? Why or why not?
7. To what extent did you and your colleagues want to participate in the text messaging program? What do you think drives participation/nonparticipation?

### **Implementation Policies and Practices**

8. Who is responsible for maintaining momentum for the text messaging program at your clinic?
9. How was the text messaging program rolled out or disseminated within the clinic? What do you think about the process? What could have been done differently?
10. What training or technical assistance was available prior to rollout and during the program? What did it consist of? Who offered the training or technical assistance?
11. What types of support, policies or practices were implemented over the course of the program to keep it running? Which were helpful?

### **Implementation Effectiveness**

12. In your opinion, how are patients enrolled in the program reacting to it? What do they like/not like?

13. To what extent do you feel that the text messaging program has benefited patients? What kinds of benefits have been realized?

**[Probe for greater med adherence, improved appointment attendance, increased willingness/ability on patients' part to ask questions during clinical visits, etc.]**

14. In what ways has the program benefited the clinical care you provide to your patients? What about the care the clinic can provide?

**[Probes: Do you feel that the program complements or supplements the care you provide to patients? Why/why not? In what ways has the program increased or decreased your work load?]**

15. Overall, how do you think the text messaging program is going? What did you like/not like about the program? What worked well/didn't work well? How would you do it differently?

16. Did issues about patient privacy every come up? If so, what were they? How were they handled or addressed?

### **Barriers and Facilitators**

17. What kinds of challenges did the program face? To what extent were those challenges overcome? How were they overcome?

18. What factors facilitated and supported the implementation? Probe about organizational factors, workflow factors, policies/practices, staffing.

19. What should we do differently if we were starting over with this program? What features of the program should be changed? Why? How?

### **Patient Satisfaction**

20. How satisfied were patients with the text messages they received?

21. What aspects of the messages did patients like? Dislike?

22. How did patients feel about the timing of the text messages? What about the number of messages and their content?

23. Did family members or guardians ever mention the program, if so what were their comments?

### **Business Case**

24. What are the resources necessary to implement a program like this? Why are they essential?

25. HRSA plans to eventually make this program available to all Ryan White clinics and potentially any clinic that may want to implement it. What do you think about this plan? What pitfalls can be avoided with adequate planning?

Those are all the questions that I had. Did you have any additional comments or thoughts to add before we go? Thank you very much for taking the time to talk with us today.