

DISCUSSION GUIDE INTRODUCTION

Opening Remarks and Introduction Hello. My name is John Stieger, and I'm the moderator for today's group discussion. I am a project manager with the National Public Health Information Coalition. As you may know from our emails prior to this call, the main purpose of this project and this interview is to obtain feedback from selected Immunization Awardees to improve CDC's vaccine coverage data reports, making them more useful to all awardees.

We are working together with CDC to get your opinions about the best ways to share vaccine coverage data with awardees. Our call with you today should take about an hour.

On the call with me, are:

- Name/title
- Name/title
- Name/title

Before we get started, please let us know who is on the call from your department. We already have your bio information, so we just need names.

Disclosures The session is being taped so we can write an accurate report afterward, not of "who said what," but "what was said." Individual names will not be used in any reports from this project. We will report results by awardee name because we expect that each awardee's data preferences will be unique based on their needs.

Guidelines To make this a useful session, here are some guidelines for us to follow:

1. Please talk one at a time and in a voice at least as loud as mine.
2. If we use acronyms that you are not familiar with, please stop us to ask what they mean.
3. I want to hear from everyone who has comments to share, and to the degree possible, let's have equal "air time," so that everybody talks about the same amount—nobody talks too much and nobody talks too little. For some questions, I may ask everyone to take turns so that we are able to hear everyone's ideas.
4. There are no right or wrong answers to the questions—there are only different points of view. It's valuable to hear all points of view, so it's especially important to speak up when you disagree with what someone else has said. I also want to assure you that nobody will be penalized by any criticism you might have.

Public reporting burden of this collection of information is estimated to average 50 minutes 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 CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0735)

5. I may need to move to another topic sooner than you are ready, and I may have to cut a conversation short in the interest of time. If I interrupt you, it is not personal; I just want to get to everything that is planned. You're welcome to speak to us after the call so we can be sure to get all your thoughts and comments. Or, you can always send a follow-up email with your thoughts.
6. Please say your name before responding to a question. This will help us tie comments to specific positions—not specific people.
7. If you have any questions about this process, please feel free to contact Dr. Suchita Lorick at 404-639-1969 or dvl7@cdc.gov.

Permission

If at any time you need to excuse yourself, please do so. If possible, please mute your phone while others are talking.

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Partner Data Assessment Project: Key Informant Interview

Italics = Notes/probes for Interviewer

Interviewer will note when 30 minutes have passed and give everyone a heads up about how much subject matter needs to be covered (e.g., almost done, halfway through, much more to cover).

Let's start with some questions about vaccination coverage data.

1. Which sources or types of vaccination coverage data are currently used by your program?
 - a) How do you use these data? Which staff use the data?
 - b) You didn't mention one or more of the sources that some awardees report using. Can you tell us why you don't use *mention x, y, z, from list below.*
 - i. *AFIX*
 - ii. *BRFSS*
 - iii. *IIS*
 - iv. *NIS*
 - v. *NIS Teen*
 - vi. *School vaccination assessment*
 - vii. *State or locally-conducted surveys*
2. Please describe any data needs that are NOT being met by the sources we just discussed?
 - a. *Ask about Race/Ethnicity, education, poverty status, insurance, VFC.*
3. CDC shares vaccination coverage data in different ways, in MMWRS, journal articles, online data tables, and online reports on FluVaxView. Which of these do you use and why?
 - a) Prior to this call, we sent an email with several vaccination coverage reports and web links. Which of these has your program used? Please describe how you have used these data reports and links? Which staff use the data? Can you tell us why you don't use *mention x, y, z, from list below.*
 - i. *Data-to-action sheets*
 - ii. *Fluvaxview*
 - iii. *Data tables (excel files)*
 - iv. *County level data in the Surveillance summary*

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- b) Additionally, how does your program utilize MMWR and journal articles that include vaccination coverage data?
 - c) What would be the most preferred format would you like CDC to share vaccination coverage data with your program? *(Formats could include MMWRs, journal articles, grantee messages, or web reports like FluVaxView.)*
4. How important are data showing vaccination trends? Why?
 5. Please briefly describe some ways your program shares your vaccination coverage data with the public?
 - a) How about with other stakeholders?
 6. How has your program used vaccination coverage data while working with state/ local government or administrators to promote vaccinations to increase vaccination coverage?
 - a) Can you please briefly describe these activities?
 7. One purpose of vaccination coverage data is to identify populations with low vaccination coverage. How does your program currently identify groups of people with low vaccination coverage (by geography or other characteristics)?
 - a. If not able to identify populations with low vaccination coverage: What data do you need to identify these groups?
 8. Has your program conducted your own vaccination survey(s)? *(This could include surveys of vaccination coverage alone or vaccination coverage with knowledge, attitude, and behavior questions.)*
 - a. *If yes:* Please briefly describe these surveys.
 - b. Do you know of any of your local jurisdictions that have conducted surveys for their areas?
 - i. *If yes:* Please briefly describe these surveys.
 9. Assessment Branch in the Immunization Services Division administers vaccination coverage surveys. They also provide technical assistance to programs who have vaccination coverage questions or need a specific analysis done. Have you used their technical assistance in the past?

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- a. *If yes:* Please briefly describe the activity and your experience.
- b. What kind of technical assistance do you need from the Assessment Branch regarding your program's vaccination coverage data?

10. Finally, is there anything else we haven't asked about that you'd like share with us?

11. Do you have any questions for us?

12. Now, I'd like to ask our CDC colleagues on the line if they have any questions or comments.

Thank you very much for participating in this discussion. Your input is very valuable. We will be taking all of the input from our 11 discussions like this to develop a more detailed data needs assessment survey – the next step in this evaluation. All the data will be used to improve how we provide vaccination coverage data. We will keep you informed on our progress through AIM calls and the all-awardee message system.

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