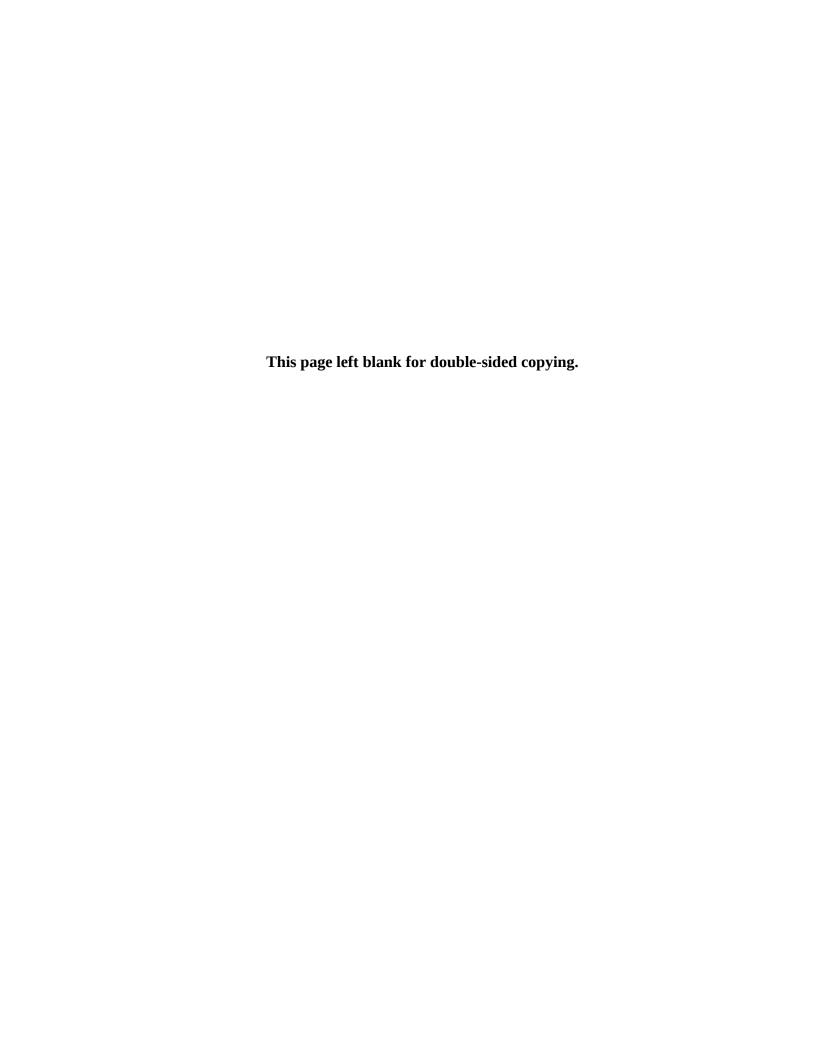
ATTACHMENT E3

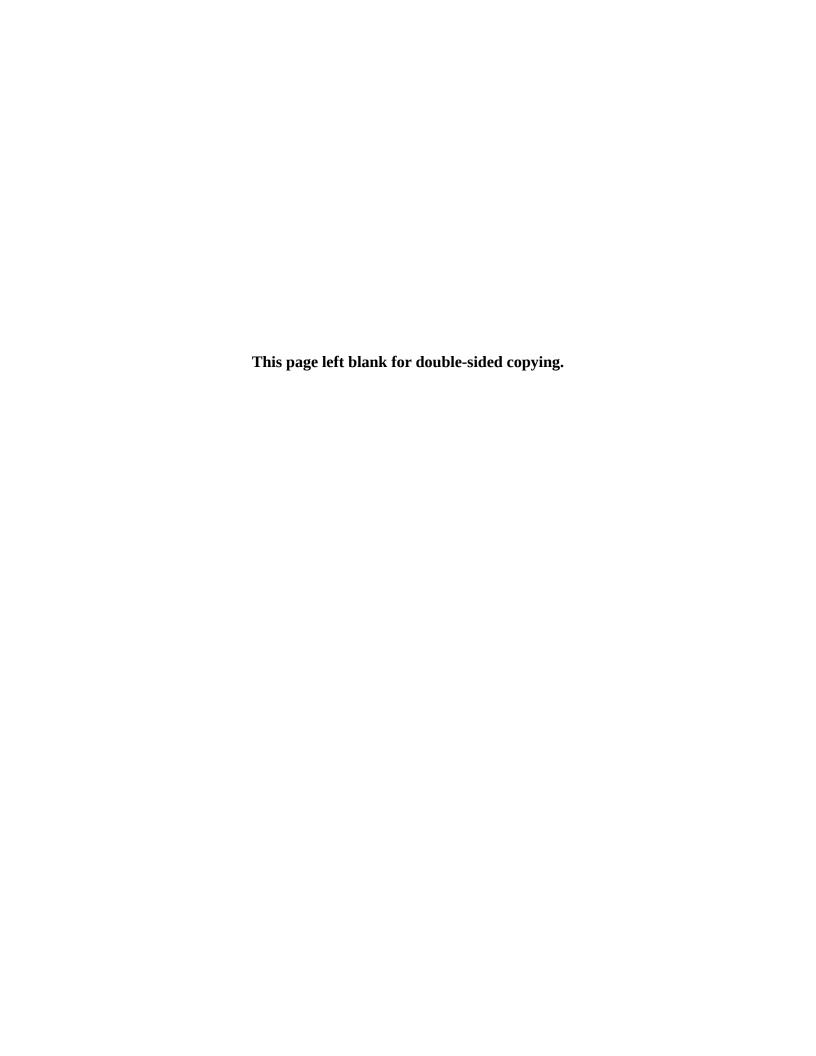
SITE VISIT DISCUSSION GUIDE- GROUP INTERVIEW WITH STAFF AT PARTNER CLINICAL PROVIDERS



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WISEWOMAN EVALUATION SITE VISIT DISCUSSION GUIDE GROUP INTERVIEW WITH STAFF AT PARTNER CLINICAL PROVIDERS

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WISEWOMAN EVALUATION SITE VISIT DISCUSSION GUIDE

GROUP INTERVIEW WITH STAFF AT PARTNER CLINICAL PROVIDERS
(STAFF WHO PROVIDE SCREENING AND ASSESSMENT, RISK REDUCTION COUNSELING, AND LINKAGE TO COMMUNITY-BASED RESOURCES)

0.1	My name is [fill in]. Thenly you for your times to do. As we recentioned
Q.1. Introductions (3 minutes)	My name is [fill in]. Thank you for your time today. As we mentioned when we scheduled this interview, SRA International and Mathematica Policy Research are supporting the Centers for Disease Control and Prevention (CDC) in conducting an evaluation of the WISEWOMAN program. The purpose of the evaluation is to find best practices in program implementation and develop evidence on the program's effect on outcomes. This year, we are visiting six funded WISEWOMAN programs across the country to meet with administrative staff and clinical and healthy behavior support partners. [IF PROGRAM YEAR 3: We are also conducting focus groups with WISEWOMAN participants to learn more about their experiences.]
	This interview will take about 45 minutes. I would like to record the conversation as a back-up for our notes. We will keep the recording private and use it only for reference purposes for this program. We will not attribute any statements or quotes to you without permission. Is it OK for me to begin recording?
	First, please tell us a bit about yourself and your job.
	 What is your position? (IF CLINICIAN: And what kind of medicine do you practice?)
	 What are your roles and responsibilities in addition to seeing patients?
	 How long have you been in this position?
Q.2. Clinic Background	Please tell me a little about this clinic. How many patients do you serve in a month?
(7 minutes)	 What proportion of your patients would call your clinic their medical home?
	 If they participate in WISEWOMAN, are you likely to know? How would you know?
	 Does [fill clinic or health center] have any sort of tracking system to indicate whether a patient is also a WISEWOMAN participant?
	 IF YES: How many of those patients are WISEWOMAN participants (or roughly what percentage of the total patient population are WISEWOMAN participants)?
	What health care services do you provide to WISEWOMAN participants? How about other services, such as health education, mental health, dental, and so forth?
	How many doctors are on staff at [fill clinic or health center]? How many nurse practitioners are on staff?
	Does your patient-to-staff ratio enable you to schedule appointments promptly and spend enough time with patients during office visits?
	Do patients have access to after-hours consultation?
	If you have an electronic health record (EHR), does it help you get your work done?

	What proportion of your patients have insurance? Does your health center/clinic help patients enroll if they don't have insurance?
	 Among those insured, what are the most common types of insurance?
	Does [fill clinic or health center] have patient navigators on staff?
	 What are the roles and responsibilities of patient navigators?
	 How do they interact with WISEWOMAN clients?
	 Do they help clients keep appointments? Do they help clients complete medical or other referrals?
	If so, in what ways do they help WISEWOMAN clients keep appointments and/or complete referrals?
	Do you provide different services to WISEWOMAN participants than they provide to other clients?
Q.3. Clinical Services	Please describe the typical sequence in which WISEWOMAN screenings are conducted.
(3 minutes)	
	What are the biggest challenges in the screening process?
	How do you think that the screening process could be improved?
	When do you get lab values for participants? Are labs conducted during a woman's initial visit or do you usually make appointments for them to return to the office (especially to get tests requiring fasting)?
	How are the results shared with the participant?
	IF SHARED: Do you ever have trouble getting participants to return for follow-up appointments to conduct additional blood tests and/or finish the WISEWOMAN screening? What are the barriers and facilitators to getting participants back in to finish the screening?
Q.4. Team-Based	Does your organization support team-based care?
Care	IF YES: Who are the different members of the team? What is the role of each of the different members?
(3 minutes)	How do team members communicate with patients and one another? How easy or difficult is it for providers to coordinate care for WISEWOMAN participants? What are the barriers and facilitators to coordinating care for participants? Are these different for other clients?
Q.5. Medical Referrals	Now let's talk about the types of medical referrals made for women who need additional services.
(3 minutes)	What types of clinical referrals are made for WISEWOMAN participants? Please describe the specific situations in which these types of referrals might be made.
	How do you track or follow up on medical referrals? Are there any staff, such as case managers or patient navigators, who make sure that participants attend appointments after they are referred for additional medical services?

Q.6. Health Risk Assessment	Now we are going to talk about the health risk assessments. When are health risk assessments conducted with participants?
(3 minutes)	- Typically how long after screening is a health risk assessment done?
	What type of staff usually conduct the health risk assessments?
	What are the barriers and facilitators to completing a health risk assessment?
	Are risk categories assigned to clients? If so, what are they?
	How does WISEWOMAN use the results to support the participant's health?
	Are risk assessment results shared with participants?
	Who shares and how do they share the results with participants?
Q.7. Risk Reduction Counseling	Next we will discuss risk reduction counseling. When is risk reduction counseling conducted with WISEWOMAN participants?
(3 minutes)	- Is it after the health risk assessment? How long after the health risk assessment?
	What type of staff conduct risk reduction counseling?
	How long do these staff usually spend with participants conducting risk reduction counseling?
	What types of topics do staff discuss with participants during risk reduction counseling?
	How receptive are participants to risk reduction counseling?
	What would you say are the biggest challenges to conducting risk reduction counseling?
Q.8. Healthy Behavior Supports	Now let's talk about your clinic's referrals to lifestyle programs, health coaching, and other community based resources.
(7 minutes)	What type of staff typically make referrals to lifestyle programs, health coaching, and/or other community-based resources?
	How do you determine which clients to refer to lifestyle programs versus health coaching? What about community-based resources?
	- What factors does your clinic consider when referring women to these resources?
	- How are results from health risk assessments and risk reduction
	counseling used in this determination? - Are participants in specific risk categories referred?
	- Do you refer WISEWOMAN participants more often, less often, or about the same as other clients with similar health issues?

Lifestyle Programs	To what types of lifestyle programs does your clinic refer women?
	How many lifestyle programs does the clinic offer to participants?
	With how many lifestyle program providers does your clinic have relationships? (In other words, what are the lifestyle program providers to which you refer women?)
	What types of contracts or agreements does your clinic have in place with these programs? Are they formal or informal agreements? Are there certain terms and conditions?
Health Coaching	To what types of places does your clinic send women for health coaching?
	To how many health coaching providers does the clinic refer women? (In other words, what are the health coaching providers to which you refer women?)
	What types of contracts or agreements does your organization have in place with these programs? Are they formal or informal agreements? Are there certain terms and conditions?
	How do women usually react to these lifestyle programs and health coaching? Do they usually complete them? Do they provide any other feedback about their experiences with them?
Community-Based Resources	Are WISEWOMAN participants referred to other community-based resources, such as the state Quitline or other resources to support healthy behaviors?
	 To what types of community-based resources are women referred? How do you determine who is referred to these resources? Is there follow-up to see if women used these resources?
	Are these referrals tracked? Is completion of these referrals tracked?
Q.9. Professional Development and	Let's talk about the types of trainings or meetings that you might have to attend as part of participating in the WISEWOMAN program.
Training	Have you attended trainings or meetings for the WISEWOMAN program?
(5 minutes)	When have you attended these trainings or meetings?Are they required trainings or meetings?
	- Who else/what other types of people attended the training?
	- Did all of them work with you or were they from different organizations?
	What types of topics are covered during trainings or meetings?
	 Are they related to data entry, ways to improve your facilitation skills in serving your clients, or new resources and methods related to health promotion?
	 Please give me some examples of the topics and venues for recent trainings or meetings.
	How often do you have to go through each of the trainings you described?
	To what extent do you find these trainings and meetings to be helpful and effective?
	 Do you think the trainings and meetings help you perform your job better? How so?
	What suggestions do you have to improve the trainings?
I	What types of trainings would you like to see offered that are not offered now?

Q.10. Community	Let's talk about the community in which your program operates.
(3 minutes)	
	Can you describe the demographic, cultural, and linguistic characteristics of your community?
	- What languages are most common?
	 In addition to language, are there any special cultural considerations for any populations you serve?
	What different cultural approaches do you take for each population that your program serves?
	What are the biggest barriers to cardiovascular health in the community?
	Based on your interactions with WISEWOMAN participants, does it seem that they value WISEWOMAN services?
	Does it seem that women engage in healthier behaviors after they enroll in the WISEWOMAN program?
Q.11. Challenges/ Strengths (5 minutes)	We are almost done. We will ask you a few more questions about your perceptions of the WISEWOMAN program's greatest strengths and weaknesses.
Strengths	From your perspective, what have been the greatest strengths of the WISEWOMAN program in your community?
	How much of an impact do you think the WISEWOMAN program makes on the community?
	Describe what you see as WISEWOMAN's key achievements toward improving the community.
Weaknesses	What have been the biggest weaknesses or roadblocks to the WISEWOMAN program's success?
	What resources would help the WISEWOMAN program become more successful?
	What else would you like to share about your experiences with the WISEWOMAN program in your community?
Wrap-Up	Is there anything else you would like to share with us about your experiences with the WISEWOMAN program?
	Thank you for taking the time to speak with us today. If you have any additional questions, please feel free to reach out to us.