ATTACHMENT E1

**SITE VISIT DISCUSSION GUIDE- GROUP INTERVIEW WITH KEY ADMINISTRATIVE STAFF**

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**WISEWOMAN EVALUATION**

**SITE VISIT DISCUSSION GUIDE**

**GROUP INTERVIEW WITH KEY ADMINISTRATIVE STAFF**

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WISEWOMAN evaluation

SITE VISIT Discussion guide

group interview with key Administrative staff

(PROGRAM DIRECTOR, PROGRAM MANAGER, DATA MANAGERS)

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| **Q.1. Introductions**  (5 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 75 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 project. We will not attribute any statements or quotes to you without permission. Is it OK for me to begin recording? |
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|  | First, let’s go around and please tell me a bit about yourself and your job. What is your position at WISEWOMAN? |
|  | What are your roles and responsibilities? |
|  | How long have you been in this position? |
| **Q.2. Implementation/ Background on WISEWOMAN**  (15 minutes) | Next, I am interested in hearing more about your funded WISEWOMAN program. How long has your organization been a WISEWOMAN grantee? |
|  | How many participants does your WISEWOMAN program serve during the course of a year? |
|  | In how many locations does your WISEWOMAN program provide screening services? Healthy behavior support services?   * In which communities does the program operate? |
|  | How does your WISEWOMAN program recruit and enroll participants?   * Does your program determine participant eligibility during office visits with clinical providers? * Does your program review the Breast and Cervical Cancer Early Detection Program (BCCEDP) list of women and follow up with eligible individuals? * Does your program partake in any mass media or community-based outreach? * How content are you with your program’s outreach efforts? Would you say your program does a good job reaching its target population in your community or are there things that could be improved? |
|  | Thinking about the strategies you use to recruit participants, what do you think are the most successful? What are the least successful strategies? What makes some strategies work better than others? |
| **Q.3. Clinical Services**  (20 minutes) | Now I’d like to ask your program’s processes for conducting *screening and clinical referrals* for various cardiovascular risk factors. |
| *Screening* | At how many sites does your WISEWOMAN program conduct screenings?  Does your program have official contracts with these sites?  How does your program reimburse for these services? |
|  | How many providers conduct WISEWOMAN screenings?  What types of staff are involved in the screenings and what are their roles? |
|  | Please describe the typical sequence in which WISEWOMAN screenings are conducted.  What are the biggest challenges in the screening process?  In which ways do you think that the screening process could be improved? |
|  | When does your program 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)?  IF YES: 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?  How do women get the lab results? |
| *Team-Based Care* | Does your organization support team-based care?  Who are the different members of the team? What is the role of each of the different members?  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? |
| *Clinical Referrals* | Now let’s talk about the types of medical referrals made for women who need additional medical attention. |
|  | What types of clinical referrals are made for WISEWOMAN participants? Please describe the specific situations in which these types of referrals might be made.  Who makes clinical referrals? |
|  | 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? |
| *Health Risk Assessment* | Now we are going to talk about health risk assessments. When are health risk assessments conducted with participants?   * 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 clients assigned to risk categories? 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? |
| *Risk Reduction Counseling* | Next we will discuss risk reduction counseling. When is risk reduction counseling conducted with WISEWOMAN participants?   * 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? |
| *Medication Access*  (2 minutes) | Does your program partner with any organizations or programs that help provide affordable medications to participants? With what types of organizations or programs does your organization partner?  What services or supports does your WISEWOMAN program provide to facilitate medication access? |
|  | How much trouble do participants have getting affordable medication? |
| **Q.4. Healthy Behavior Supports**  (10 minutes) | Now let’s talk about your program’s referrals to lifestyle programs, health coaching, and other community-based resources. |
| *Healthy Behavior Staff* | What type of staff typically make referrals to lifestyle programs, health coaching, and/or other community-based resources?  How is it determined which clients will be referred to lifestyle programs versus health coaching? What about community-based resources?   * What factors does your program consider when referring women to these resources? * How are results from health risk assessments and risk reduction counseling used in this determination?   Are there participants in specific categories of risk who get referred? |
| *Lifestyle Programs* | To what types of lifestyle programs does your program refer women?  How many lifestyle programs does the program offer to participants?  With how many lifestyle program providers does your WISEWOMAN program have relationships? (In other words, what are the lifestyle program 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? |
| *Health Coaching* | What types of places does your program send women to for health coaching?  To how many health coaching providers does the program 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.5. Staffing and Professional Development**  (10 minutes) | Now we will talk about the staff employed by your WISEWOMAN program.  How many staff members are employed by your program? Include contract staff, such as those who help you develop and maintain your data system and provide evaluation support.  Including the staff employed by your program and those employed by lifestyle program (LSP) and health coaching (HC) providers, would you say you have enough staff to cover the needs of all participants? |
|  | What levels of education or degrees of certification are required for staff employed by WISEWOMAN? Include both those employed by WISEWOMAN and LSP and HC providers.  How do staff requirements vary by role? |
|  | How often are staff members required to receive in-house or external trainings? Include both those employed by WISEWOMAN and LSP and HC providers.  Are joint trainings ever offered with other organizations in the community? |
|  | What types of topics are covered during trainings? Please give me some examples of recent professional development opportunities for staff and what types of staff were invited to attend. |
|  | To what extent do staff find professional development to be helpful and effective (either through evaluations or through word of mouth)? |
|  | What are the challenges in finding staff with the right skills or retaining them?   * How often do staff turn over? Does this vary by type of staff? |
| **Q.6. Data and Evaluation**  (5 minutes) | Now we will briefly discuss how your WISEWOMAN program collects and uses data. We have discussed this in greater depth during the capacity assessment, so we will just touch on these topics. |
|  | Have there been any recent changes to the system, method or processes, validation procedures, or roles and responsibilities for data collection?  What challenges does your program face collecting and entering data? |
|  | What data does your program currently collect in addition to minimum data elements (MDEs)? What are the purposes for additional data collection?  In which ways does your program use the data that it collects?   * Is it for program monitoring, evaluation, quality improvement, program improvement, and so on? |
| **Q.7. Community**  (5 minutes) | Let’s talk about the community in which your program operates. |
|  | 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 your program serves? * 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.8. Challenges/ Strengths**  (5 minutes) | We are almost done. We will ask you a few more questions about your perceptions of your 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. |