**The Data to Care (D2C) Public Health Strategy: Successes, Challenges, and Lessons Learned in Identifying, Linking, and Reengaging Persons Diagnosed with HIV to Medical Care**

**Attachment 3b: D2C Program Staff Interview Guide**

# Data to Care (D2C) Program Staff Interview Guide

Date: _____

Respondent ID: _____

Interviewer Three Digit Initials: _____

Start Time: ____:____AM/PM

## INTRODUCTION AND PURPOSE OF THE INTERVIEW

[INTERVIEWER NOTE: INTERVIEWER INSTRUCTIONS APPEAR IN ALL CAPS AND SHOULD NOT BE READ VERBATIM]

INTERVIEWER READ INTRODUCTION: "My name is [*Interviewer name*]. I am part of a study team selected by the CDC's Division of HIV/AIDS Prevention that is working to understand the successes and challenges of Data to Care program implementation. We are speaking with health department staff, HIV care providers, other key stakeholders, and persons living with HIV in three states. We have asked to talk to you because of your own experience with the < LOCAL AGENCY DATA TO CARE EFFORTS/PROGRAM NAME> > in <JURISDICTION>. We appreciate your participation in this study.

Before we begin, here is a consent form that explains the study in more detail. Please read it and let me know if you have any questions. When you have finished reading the form, please sign your name at the end of the form. We will provide you with a copy of the consent form for you to keep. If you consent, we will record the interview today. The recording will ensure that our notes of today's conversation are complete and accurate. We will destroy the recording at the end of the study.

ANSWER ANY QUESTIONS, AND WITNESS RESPONDENT SIGNING CONSENT FORM.

Thank you. Here is a copy of the consent form for you to keep. As a reminder, your participation is voluntary. If there are any questions that you prefer not to answer, please tell me and I'll move on to the next question.

HAND COPY TO RESPONDENT. TURN ON TAPE RECORDERS.

Now that I have the recorders going, may I also have your verbal permission to record our interview?

### SECTION A: DEMOGRAPHIC AND BACKGROUND QUESTIONS

INTERVIEWER READ INTRODUCTION: We are speaking with you today because you have been identified as someone who plays a key role in reengaging HIV positive people back into HIV care and in the Data to Care program here in <JURISDICTION>. I am now going to ask a few quick questions about you and your current position to provide context to the remainder of the interview.

**1. How would you classify your current employer? [GIVE SHOWCARD]**

| | |
|---|---|
| City or County Health Department............ ☐ | 1 |
| State Department of Health .................... ☐ | 2 |
| Community-based organization............... ☐ | 3 |
| HIV clinic or care provider...................... ☐ | 4 |
| Independently employed, consultant...... ☐ | 5 |
| Other _____ ☐ | 6 |

**2. How long have you been working with your current employer? |____|____| MONTHS/YEARS (CIRCLE ONE)**

**3. How long have you been working in HIV care or treatment?**    |____|____| MONTHS/YEARS (CIRCLE ONE)

**4. What is the title of your current position?**

PROBE: IF HEALTH DEPARTMENT STAFF, ASK WHAT OFFICE OR DIVISION THEY ARE AFFILIATED WITH

**5. How would you describe your position and role at your current organization: is it administrative, supervisory, staff, or something else?**

SECTION B: QUESTIONS ABOUT D2C

INTERVIEWER READ: Thank you for the information you've provided so far. The rest of the interview is less structured so we can have more of a free-flowing discussion. I am now going to ask you questions specifically about Data to Care.

---

READ IF WE HAVE PREPOPULATED INFORMATION ABOUT THIS JURISDICTION:

I have reviewed documents and materials about the Data to Care program in <JURISDICTION>, and I will ask you to confirm, update, or correct that information as we go.

---

1.    **How long have you been participating in Data to Care efforts in <JURISDICTION>?**

   |____|____| MONTHS/YEARS (CIRCLE ONE)

2.    **Within your <LOCAL AGENCY/PROGRAM NAME> who do you interact with regularly to execute Data to Care program functions?**

3.    **Within your role in <LOCAL AGENCY/PROGRAM NAME> how do you define "out of care" or identify individuals who are out of care?**

4. **Thinking about the out of care population, what are the most common characteristics of those out of HIV medical care in <JURISDICTION>?**

   PROBE: DEMOGRAPHICS (RACE/ETHNICITY; AGE; SES; INSURANCE STATUS; EMPLOYMENT STATUS; SEXUAL ORIENTATION)


5. **How do you think individuals who are out of care here in <JURISDICTION> are similar or different from individuals who are out of care in other parts of the state?**


6. **What are the factors that might explain why some people living with HIV are out of care in <JURISDICTION>, especially where <LOCAL AGENCY DATA TO CARE EFFORTS/PROGRAM NAME> is being implemented?**

   PROBE AS NEEDED:

   - WHAT ARE SOME OF THE BARRIERS TO CARE FOR OUT OF CARE PERSONS?
   - HOW ARE YOU ABLE TO ENGAGE OUT OF CARE INDIVIDUALS BY ADDRESSING THESE FACTORS?

7. **You described how <LOCAL AGENCY/PROGRAM NAME> identifies people who are out of care. Now I want to ask you about the step-by-step process of engaging or reengaging people living with HIV into HIV medical care, once they have been identified.** <IF PREPOPULATED BELOW, REVIEW WITH RESPONDENT WHAT WE KNOW.>

   PROBE: WHAT ADDITIONAL FOLLOW-UP DO YOU HAVE WITH CLIENTS? FOR HOW LONG?

8. **Is it easier to engage or reengage some clients compared to others? Why?**
   PROBE AS NEEDED:

   - WHAT ARE SOME OF THE FACTORS ASSOCIATED WITH UNSUCCESSFUL ATTEMPTS?
   - DO YOU SEE ANY HESITATION OR RELUCTANCE FROM CLIENTS?
       - o   IF YES: WHAT DO YOU THINK MAKES THEM RELUCTANT?
   - WHAT HAS WORKED IN ENGAGING OR REENGAGING OUT OF CARE PLWH INTO CARE?
   - WHY DO YOU THINK IT HAS WORKED?
   - WHAT HAS NOT WORKED?
   - WHY DO YOU THINK IT HASN'T WORKED?

9. **What steps do you take to ensure clients remain engaged in care after initial reengagement?**

   PROBE AS NEEDED:

   - IS THERE A PROCESS IN PLACE AT **LOCAL AGENCY/PROGRAM NAME** FOR CONTINUED FOLLOW-UP?
   - IF YES, HOW DO CLIENT'S RESPOND TO ADDITIONAL FOLLOW-UP AFTER INITIAL REENGAGEMENT?

10. **What do you see as the strengths of the** <small>LOCAL AGENCY DATA TO CARE EFFORTS/PROGRAM NAME></small> **here in** <small>JURISDICTION></small>**?**

    <small>PROBE: WHAT HAS WORKED PARTICULARLY WELL?</small>

11. **What changes would you recommend in order to improve the** <small>LOCAL AGENCY DATA TO CARE EFFORTS/PROGRAM NAME></small> **in** <small>JURISDICTION></small>**?**

    <small>PROBE AS NEEDED:</small>

- <small>WHAT ARE SOME OF THE WEAKNESSES OR CHALLENGES WITH THE CURRENT **<LOCAL AGENCY DATA TO CARE EFFORTS/PROGRAM NAME>** >?</small>
- <small>WOULD YOU RECOMMEND CHANGES IN IDENTIFYING THE OUT OF CARE, IN APPROACHING PERSONS LIVING WITH HIV, IN CONNECTING PERSONS LIVING WITH HIV TO PROVIDERS, IN CLIENT FOLLOW UP?</small>
- <small>HOW DO YOU THINK YOUR**<LOCAL AGENCY DATA TO CARE EFFORTS/PROGRAM NAME>** PROCESSES COULD BECOME MORE EFFICIENT, BOTH IN TERMS OF IDENTIFYING PERSONS WHO TRULY ARE OUT OF CARE, AND ALSO HOW CLIENTS ARE RE-ENGAGED IN CARE?</small>

12. **What are some of the lessons learned from setting up Data to Care in** <small>JURISDICTION></small>**?**

    <small>PROBE: IF YOU WERE STARTING OVER WITH THE DESIGN OF THE PROGRAM, WHAT WOULD YOU DO DIFFERENTLY?</small>

<small>**SECTION C: CLOSING**</small>

13. **Thinking of everything we've just discussed, is there anything else you think is important for other Data to Care programs to know -- either in your state or region or in the U.S. as a whole-- that you would like to share today?**

Thank you so much for your time!

    END TIME: ___:____ AM/PM

<small>PROVIDE INCENTIVE AND TURN OFF RECORDERS</small>