

**ATTACHMENT A**

**OFFICE OF MINORITY HEALTH  
STATE AND TERRITORIAL HEALTH DISPARITIES SURVEY  
INTERVIEW PROTOCOL**

**Introduction and Consent**

Hello and thank you for taking the time to participate in the Office of Minority Health State and Territorial Health Disparities Survey. My name is {name} and I work for Westat, a private research company in Rockville, Maryland. Westat was contracted by the Office of Minority Health (OMH) of the U.S. Department of Health and Human Services to develop and administer this survey to State/Territorial Minority Health Entity (SMHE) organizations nationwide.

The purpose of the survey is to provide OMH with an overview of the infrastructure, resources and efforts within your state/territory to address minority health, health disparities, and health equity issues. The survey will collect information about program goals and activities; partnerships; organizational structure; and funding in your state/territory. Your participation in this study will assist OMH in identifying the most appropriate strategies and approaches for addressing social determinants of health and reducing health disparities through state/territorial partnerships.

This survey is structured as a discussion - we know every state and territory is different, so please don't feel constrained by the framing or terminology that I use. I will look to you to help me capture a thorough picture of minority health, health disparities, and health equity initiatives in your state/territory. Throughout the discussion, please feel free to reference any materials you may find helpful in responding to the questions.

Your participation in this survey is voluntary. You may skip any question you do not want to answer and you may discontinue your participation at any point. We expect the interview to take about 1 hour. Your responses will be compiled with responses from other state/territory agencies, analyzed, and summarized into a final health disparities report that will be shared with OMH and may be made publicly available. A profile of your state/territory's activities will be highlighted in the report; however, your name/identity will not be included.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-XXXX. The time required to complete this information collection is estimated to average 90 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

Do you have any questions before we begin the interview?

In order to accurately capture your responses to the questions, I would like to tape record our interview so that we can listen to it later. Is that okay?

**TURN ON THE RECORDER:** I need to ask your permission again so that it is recorded: Today is {mo/day/year} at {time}. Do you agree to participate in this interview and to have it audio recorded?

### **Program Goals and Activities**

The first set of questions asks about minority health, health disparities, and health equity priorities and activities underway in {state/territory}.

1. Does {state/territory} have a strategic plan regarding minority health, health disparities, and health equity?

*IF YES:*

- a. Is the plan a “stand alone” document or integrated into another set of plans and priorities?
  - i. *IF INTEGRATED:* please describe
- b. Is the plan publicly available?
- c. How long has your state/territory had a strategic plan regarding minority health, health disparities, and health equity?
- d. How often is the plan updated?
- e. When was the plan last updated?
- f. Do you have a related assessment plan to measure outcomes or progress?

*IF NO:*

- g. Are plans regarding minority health, health disparities, and health equity integrated into another set of plans and priorities?
  - i. *IF YES:* please describe
- h. Is there discussion or activity currently underway to prepare a state/territorial strategic plan regarding minority health, health disparities, and health equity?

- i. *IF YES:* please describe
- i. Do you have an assessment plan to measure outcomes or progress toward reducing health disparities and achieving health equity?

*PROBE AS APPROPRIATE:* Based on an environmental scan conducted in the summer of 2014, we identified a publicly available document {title of document} – are you familiar with that document? How does that document relate to the minority health, health disparities, and health equity plans in your state/territory?

2. Thinking about strategies in your state/territory, what are the major strategies being used to reduce health disparities, improve minority health, and ultimately achieve health equity?? Probe: And what else?

*[Interviewer: After the list of strategies has been provided, for each strategy ask:]*

- a. What department, division, or other organization leads {strategy}? Probe: Is it the {SMHE} or another department?
- b. What initiatives and activities are underway to support {strategy}?
- c. What initiatives and activities are planned to support {strategy}?
- d. What, if any, initiatives and activities have already been completed to support {strategy}?
- e. What populations are served or supported by {strategy}?

*PROBE:* Are there other significant trainings or activities offered to support or advance minority health/health disparities/health equity in your state/territory?

3. Within {state/territory} how are minority health, health disparities, and health equity priorities set?
  - a. What departments and agencies contribute to identifying priorities?
  - b. What information helps guide decision making?
  - c. Is there a legislative mandate regarding minority health, health disparities, and health equity?
  - d. Are there other governmental regulations or guidance regarding minority health, health disparities, and health equity?
  - e. Are non-governmental stakeholders involved in priority setting?

- f. Are there other factors or groups that help identify or determine priorities?

## **Partnerships**

I would like to switch gears now and ask about partnerships and collaborations.

4. Thinking about minority health, health disparities, and health equity within your state/territory, who are the primary partner agencies or collaborators? *Probe:* And who else? Any other government partners? How about non-governmental partners?

*[Interviewer: After the list of partners has been provided, for each partner ask:]*

- a. What kind of agency/organization is {partner} (e.g. federal government, state government, non-governmental, not-for-profit, for profit entity, etc.)?
- b. How do you interact with {partner} (e.g. collaborate on an on-going basis, keep each other informed of initiatives, work closely on a specific initiative, etc.)?
- c. Do you have a contract or memorandum of understanding (MOU) or other document that formalizes your partnership with {partner}?
- d. Are there specific priorities or goals that you are working with {partner} to achieve?

*PROBE:* Are there other significant partners or collaborators with whom you are working to advance minority health/health disparities/health equity in your state/territory?

## **Organizational Structure**

5. *IF SMHE KNOWN:* We understand that in your state/territory the {SMHE name} was established solely to address minority health/health disparities/health equity. Is that right?

*IF YES, GO TO B*

*IF NO, CONTINUE*

*IF SMHE UNKNOWN:* Is there an office or other entity whose sole responsibility it is to address minority health/health disparities/health equity in {state/territory}?

*IF YES:*

- a. What is the name of the entity?
- b. How does the entity fit within the state/territorial health department (*e.g. beginning from the top or Governor level walk me through the levels or groups to describe where the minority health entity fits into the state/territorial structure*)?
- c. Do you have a committee or panel that advises you on minority health, health disparities, and health equity? *IF YES:* Please describe

*IF NO:*

- d. Which office, group, division, or agency has primary responsibility for minority health/health disparities/health equity in your state/territory?
- e. How does the primary contact for minority health/health disparities/health equity in {state/territory} fit into the state/territorial structure? (*e.g. beginning from the top or Governor level walk me through the levels or groups to describe where the primary contact fits into the state/territorial structure*)?
- f. Do you have a committee or panel that advises you on minority health, health disparities, and health equity? *IF YES:* Please describe

*PROBE:* Are there additional offices that address minority health/health disparities, etc.? If so, name, etc.

6. How many staff are hired or spend some portion of their work time on minority health/health disparities/health equity in your state/territory? Does that include staff who only support minority health/health disparities/health equity part time? I would like to ask a little about each staff member please – we will be walking through the staffing table that was sent to you.

- a. How many senior staff do you have?

*FOR EACH:*

- i. What role does {staff} hold?
- ii. What is {staff's} primary agency? And does this person support a secondary agency?
- iii. What percent time does {staff} spend in support of minority health/health disparities/health equity?

- b. How many mid-level staff do you have?

*FOR EACH:*

- i. What role does {staff} hold?
  - ii. What is {staff's} primary agency? And does this person support a secondary agency?
  - iii. What percent time does {staff} spend in support of minority health/health disparities/health equity?
- c. How many other staff do you have?  
*FOR EACH:*
- i. What role does {staff} hold?
  - ii. What is {staff's} primary agency? And does this person support a secondary agency?
  - iii. What percent time does {staff} spend in support of minority health/health disparities/health equity?
- d. Do you use volunteers to support minority health, health disparities, and health equity initiatives or activities?

*[STAFFING TABLE TO BE SENT IN ADVANCE OF INTERVIEW]*

<b>Staff Member Title/Role</b>	<b>Primary Department/Division/Agency</b>	<b>Secondary Department/Division/Agency</b>	<b>% Time Working on Minority Health Initiatives</b>
<b>Senior Staff</b>			
<i>E.g.: Program Director</i>	<i>Office of Minority Health</i>	<i>N/A</i>	<i>75%</i>
<b>Mid-Level Staff</b>			
<i>E.g.: Program Coordinator</i>	<i>Office of Minority Health</i>	<i>Mental Health/ Substance Abuse</i>	<i>100%</i>
<b>Other Staff</b>			

7. Do you expect staffing allocations to change over the next two years? *IF SO: How?*

**Funding**

8. What was the total FY 2014 annual funding for minority health, health disparities, and health equity in your state/territory? *IF NEEDED COLLECT FUNDING FOR UPCOMING YEAR, QUARTER, OR OTHER MEASUREMENT UNIT THAT IS EASIER FOR RESPONDENT TO REPORT.*
- Is funding for minority health, health disparities, and health equity initiatives separate from funding for the State health department?
9. What are the primary sources of funding for minority health, health disparities, and health equity in your state/territory? I would like to ask a little about each please - we will be walking through the sources of funding table that was sent to you.
- What is your largest source of funding?
  - What type of funding is that? (*E.g. State, Federal, non-governmental, general fund, statutorily dedicated funding,, other*)
  - Is that funding on-going, or one-time? (*E.g. Would you expect to receive that funding again next year?*)
  - What was the total dollar amount of that funding for in FY 2014?
  - Any notes or comments regarding that source of funding?

*[Interviewer: Repeat series 9a-e for each funding source from largest to smallest.]*

*[FUNDING TABLE TO BE SENT IN ADVANCE OF INTERVIEW]*

Source	Type: State, Federal, Other	On-going or One-time	Amount	Comments
<i>E.g.: State of Virginia</i>	<i>State</i>	<i>On-going</i>	<i>\$500,000</i>	<i>State funding has been consistent at this level for 3 years.</i>
<b>Total funding for FY 2014</b>			<b>\$</b>	

10. Do you expect sources or amounts of funding to change over the next two years? *IF SO: How?*

11. Does your state/territory office of health equity fund other entities or projects? If so, please describe projects including project periods, amounts, types of project.

That concludes our interview. Thank you very much for the time you have taken to provide this important information and help the Office of Minority Health to better understand how {state/territory} addresses minority health, health disparities, and health equity.