

Opioid State Targeted Response (STR) Evaluation

Community/Program Baseline Interview Protocol for Data Manager

Public Burden Statement: 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. The OMB control number for this project is 0930-0xxx. Public reporting burden for this collection of information is estimated to average 90 minutes per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 5600 Fishers Lane, Room 15E57-B, Rockville, Maryland, 20857.

CHAPTER I: INFORMATION AND DIRECTIONS

Purpose. The primary purpose of this protocol is to:

- Document how programs have used community/program-level data to inform their opioid use disorder prevention, treatment and recovery strategies
- Gain insights into the strengths and limitations of existing community/program-level data sources to track opioid use and related outcomes

* Except where noted, all questions refer to data-related activities in the community/program **BEFORE** receiving Opioid STR funding.

Content. Specific topics include the use of data for planning prevention, treatment, and recovery services; the use of data for measuring progress with addressing opioid use disorder; and the use of Opioid STR funding to improve data systems on opioid use disorder.

Pre-Interview. The interviewer will prepare for the interviews by:

- Scheduling on-site interviews with staff at programs that have agreed to participate in the evaluation and who are willing to be interviewed in fall 2017 or early 2018 during the site visit;
- Asking each participant to sign a written consent form to conduct and record the interview; and
- Reviewing Community/Program Baseline Instrument responses, and other relevant documents.

Site Visit. Site visits will consist of individual in-person interviews with data managers at programs that are receiving Opioid STR funds. The interviewer will record data using questions/items found in this protocol. Interviews may be audio-recorded, pending consent (see Preparation for Interviews above), to ensure data integrity. The audio-recordings and completed interviews will be stored securely to ensure confidentiality. Any information or quotes used from the interview and included in community/program reports shall remain anonymous as to the individual and their position in the community/program.

Post-Interview. The interviewer will complete the interview process by:

- Transcribing the audio-recordings;
- Comparing the audio-recordings to the written interview responses for accuracy;
- Providing a draft copy of the interview notes to the interviewee for review;
- Contacting interviewees to clarify responses or to obtain additional information (if needed);
- Obtaining any feedback from the interviewees and making any additions to the notes;
- Destroying the audio-recording; and
- Filing any written materials obtained from the grantee.
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INTERVIEWER: READ THE FOLLOWING INTRODUCTION VERBATIM TO THE INTERVIEWEE

Hello, my name is _____ and I work for the [INSERT CONTRACTOR NAME] as part of the team conducting an evaluation of the State Targeted Response to Opioid Abuse Grants, commonly known as the Opioid STR grants, which is sponsored by the Substance Abuse and Mental Health Services Administration, or SAMHSA. We are interviewing data managers at these grantee sites to get their unique perspectives on several important topics related to improving data systems for prevention, treatment and recovery strategies/services to address opioid use disorder.

The overall goal of the evaluation is to document and assess the effectiveness of Opioid STR in providing prevention, treatment, and recovery strategies/services for opioid use disorder. We also want to gain insights to improve Opioid STR grant processes and future efforts to prevent, treat, and help individuals recover from opioid use disorder.

This is the first interview that will be conducted as part of the Opioid STR program evaluation process. You are one of several other program data managers that agreed to be interviewed across selected community/program sites. All data managers will be asked the same questions. Interview results may be reported in the Opioid STR evaluation report and the community/program reports, but information and quotes will not be attributed to you or your position as your name and role in the program will not be identified in any report. We will provide you with a copy of the interview notes and ask for your review and feedback.

As we progress through the interview, we will ask about how your data system operates and how the Opioid STR funding will be used to enhance opioid prevention, treatment, and recovery strategies/services. Please think about the data sources that your program uses to plan and implement strategies or services to address opioid use disorder. We are especially interested in hearing your success stories and lessons-learned regarding data systems that could help other communities/programs.

This interview will take about 30 minutes. In addition, we may contact you after this interview to clarify responses or to obtain additional information. In preparation for this interview, you consented to audio-recording. We are audio-recording this interview as a backup to our written/typed notes. The audio-recording will remain confidential and be destroyed after the interview notes are finalized.

Is it OK if I begin recording now?

[IF YES, START RECORDING.]

Thank you for agreeing to participate in this interview. Do you have any questions for me before we begin?

[IF YES, ANSWER QUESTIONS]

[IF NO, SAY: WE WILL NOW START GOING THROUGH THE INTERVIEW QUESTIONS]

SECTION I. ROLES & RESPONSIBILITIES

Before we begin, we would like to ask you a little about yourself.

1. What is your current position title? _____.
2. How long have you been in this position? _____(enter # followed by MONTH or YEAR, if <6 months enter 0)

SECTION II. USE OF DATA SOURCES FOR PLANNING AND IMPLEMENTATION

Next, I'd like to hear more about data resources your community/program was using to help plan and implement strategies or services to address opioid use disorder.

3. During the one-year period prior to receiving Opioid STR funding (from about May 1, 2016 to April 30, 2017), did your community/program use data to make decisions about opioid use disorder prevention strategies? (For example, prescription drug monitoring program (PDMP) data, data from emergency departments and/or hospitals.)

PROBES: (Option 1): If response indicates that data were used:

- What data sources did your community/program use to make decisions about opioid use disorder prevention strategies?
 - What community data are available on:
 - Number of individuals receiving prevention services or programming?
 - Number of OUD prevention providers?
- What do you see as the strengths and limitations of these data sources?
- Are there any additional data resources that might have helped your program make decisions about opioid use disorder prevention strategies?
 - What prevented the community/program from using these additional data sources?

PROBES: (Option 2): If response indicates that data were not used:

- What prevented the community/program from using data to make decisions about opioid use disorder prevention strategies?
- How did your community/program make decisions about opioid use disorder prevention strategies without access to data resources?
- Are there any data resources that could have helped your program make decisions about opioid use disorder prevention strategies?

4. During the one-year period prior to receiving Opioid STR funding (from about May 1, 2016 to April 30, 2017), how did your community/program use data to make decisions about how to provide opioid use disorder treatment and/or recovery services? (e.g., Prescription Drug Monitoring Program (PDMP) data, opioid death, opioid emergency department visits/hospitalizations.)

PROBES: (Option 1): If response indicates that data were used:

- What data sources did your community/program use to make decisions about opioid use disorder treatment and/or recovery services
 - What community/program data are available on:
 - Number of individuals receiving treatment through the program?
 - Number of OUD treatment providers in the program?

- Number of providers receiving training in the program?
 - Number of opioid overdoses and deaths in the area served by the program?
- What do you see as the strengths and limitations of these data sources?
- How does your program use these data to monitor quality and outcomes of care? (For example, do you generate specific quality measures on treatment of opioid use disorder? Do you examine treatment and recovery program retention or completion rates?)
- Do clinicians have real-time access to data to inform their care decisions? (We are referring to non-PDMP data.)
- Are there any additional data resources that might have helped your program make decisions about treatment and/or recovery services for individuals or populations at risk for opioid use disorder?
 - What prevented the community/program from using these additional data sources?

PROBES: (Option 2): If response indicates that data were not used:

- What prevented the community/program from using data to make decisions about opioid use disorder treatment and/or recovery services?
 - How did your community or program make decisions about opioid use disorder treatment and/or recovery services without access to data resources?
 - Are there any data resources that you think might have helped your program in making decisions about opioid use disorder treatment and/or recovery services?
 - How might your community/program have used such data resources in making decisions about opioid use disorder treatment and/or recovery services?
5. During the one-year period prior to your community/program receiving Opioid STR funding (from about May 1, 2016 to April 30, 2017), did your program integrate across different data sources (e.g. criminal justice, health care, social services)?
- For each data source mentioned:
 - How was the data source for this system integrated with your community/program's data system?
6. During the one-year period prior to your community/program receiving Opioid STR funding (from about May 1, 2016 to April 30, 2017), how did your community/program use data to monitor the progress of your efforts to provide opioid use disorder prevention strategies, treatment, and/or recovery services (please discuss in general terms)?
- Is there one or more staff person who is responsible for managing and analyzing these data?
 - Please describe the roles and responsibilities of all staff who are responsible for monitoring and reporting efforts.
 - To which agencies or audiences does your community/program report on your efforts to provide opioid use disorder prevention strategies, treatment, and/or recovery services?

Now I'd like to ask you a few questions more specifically related to your program's use of data from the prescription drug monitoring program, or PDMP.

7. As of May 1, 2017, did your community/program have access to community-level/program-level PDMP data?

PROBES (Option 1): If community/program had access to the PDMP data.

- How was the information from the PDMP used within the community/program?
- Who had access to the PDMP data?
- How often (on average) did your community/program access the data?

PROBES: (Option 2): If community/program did not have access to PDMP data:

- Why did the community/program not have access to the PDMP data?
- How might access to the PDMP data/information have been helpful to the community/program?

8. Our final question. From your perspective, how do you think the Opioid STR funding will help your community/program address opioid use disorder?
9. Would you like to add anything else that we did not talk about regarding your community or program's ability to provide prevention, treatment and/or recovery services for opioid use disorder services?

[IF YES, PROBE AND RECORD AS NEEDED]

If you have any questions or concerns about this interview, please contact [INSERT NAME] by telephone message (at XXX-XXX-XXXX), or by email (to email address). You can request assistance at any time and someone will respond to you on the next business day. As mentioned, we will provide you with a draft copy of the interview notes to ensure we captured your perspective accurately.

Thank you for your time.

[STOP RECORDING]