Form Approved
OMB Control No. 0920-1193
Exp. Date XX/XX/202X

Attachment 4g.

Case Study Interview Informed Consent

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Case Study Interview Informed Consent

Thank you for agreeing to speak with me today. ICF, on behalf of the Centers for Disease Control and Prevention (CDC), is conducting case studies to explore programs that have supported and helped to build the capacity of the CDC's National Comprehensive Cancer Control Program (NCCCP) awardee programs via training and technical assistance (TTA). Specifically, CDC and ICF are collaborating on this project to conduct case studies of organizations funded under the cooperative agreement titled *Provision of Technical Assistance and Training Activities to Assure Comprehensive Cancer Control Outcomes (DP18-1805)* (hereafter referred to as DP18-1805) to support NCCCP awardees and partners. The purpose of this project is to: 1) gain a deeper understanding of the TTA provided under the cooperative agreement; and 2) determine how the TTA efforts helped build the capacity of NCCCP programs.

We are conducting this interview with you because you have been identified as a person who can describe the management, design, and/or implementation of your organization's efforts to support and build the capacity of select NCCCP awardee programs via TTA, under DP18-1805. Your opinions and thoughts are extremely valuable to our project, and there are no right or wrong answers. This interview is not meant to evaluate you; rather, it is meant to gain insights from you about how your program operates and is managed.

Our discussion will take approximately **[60-90 minutes for program director/program manager, up to 60 minutes for all other interviewees]** of your time. We are planning to interview up to 8 individuals that are familiar with your program.

Information obtained through this interview will be treated in a secure manner and will not be disclosed. In addition, only the ICF project team will have access to data that can link your answers to you. There are no known risks to those who participate. The benefit of participating in this study is that your organization's experiences will help inform CDC's future efforts to build capacity among their funded programs. We will <u>not</u> link your name or your role/title to specific responses in any reports developed from this assessment, and your identity and your answers to any questions that I ask you during this interview will be kept private. We will use information we learn from this interview to supplement aggregate findings across cases, and information will be synthesized and shared with project team members (ICF and CDC staff) in a final report which will include the examination of the data collected across programs, and this information will be reported in aggregate so that any information you share cannot be linked to you or your organization.

<u>Your participation is completely voluntary. You may choose not to answer some of the questions or you may choose not to participate without penalty. You can choose to discontinue the interview at any time, for any reason.</u> If you choose to stop participating in the interview, we will ask you whether you wish to withdraw all of your responses or allow the responses we have already collected to be used. If you choose to withdraw all of your responses, we will immediately discard all of your responses, and all ICF project team members have signed a non-disclosure agreement ensuring that they will not discuss any data collected outside of the project team.

As the interviewer, with your permission, I will audio record our conversation; an additional member of the ICF project team will take notes during our discussion. We will use the information we learn from this interview to supplement our final report.

If you have questions about your rights as a participant, you may contact Isabela Lucas, the project manager, by phone at 404-434-3154 or email at Isabela.lucas@icf.com.

Before we begin the discussion, I would like to get verbal consent to proceed. Do you agree to participate in this interview?

- Yes → Thank-you. I am confirming you are willing to answer questions during this discussion and will note your verbal consent. We also would like to record the conversation to make sure we don't miss anything.
- No → *Thank participant for his or her time and end conversation.*

Do I have your permission to turn on the audio recorder?

- Yes → Thank-you. *Turn on recorder.*
- No → Thank-you. I will refrain from recording the session.

Do you have any questions for me before we begin?

Pause for participant response(s). Answer any questions the respondent has. Proceed to conducting the interview using the Interview Guide