

Instructions for the interviewer:

The following semi-structured discussion guide is designed to gather the professional perspective and

ATTACHMENT A: Discussion Guides (including consent scripts for verbal consent)

respondents. Ask each of the study of substance use disorder identification and referrals in human services

programs, and use the possible probes to follow

Discussion Guide for Semi Structured Interviews

up as needed to obtain additional information or clarification. Due to time constraints, interviewers

may prioritize and skip some questions or modify questions to reflect his/her role, his/her professional perspective/knowledge, or information obtained before the interview. Use the follow-up questions or probes (if not taking the time to speak with additional information or clarification. If you are short of time, prioritize the most important questions.

Read out to the interviewer:

Before you begin the interview, read the verbal consent script to describe the study to respondents, answer any questions they have about the study, and ask for their consent to participate in the study and to audio-record the interview. contracted with JBS

Information to understand if or how

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Sponsor: U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation

[Directions for Interviewers]: Read the script to the participant(s) and ask each participant to respond to the two requests for consent: (1) for study participation and (2) for permission to record the interview. Do not start recording until after the participant consents. Do not record the interview if you do not have the participant's consent to so.]

engage in services; and how the substance use

disorder (SUD) treatment system responds. The study also seeks to understand how you refer your clients to wrap-around services

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 0990-0421. The time required to complete this information collection is estimated to average 1 hour 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

DISCUSSION GUIDE

Roles/Responsibilities

1. What human services system or program do you currently work in and what is your role?

System	<input checked="" type="checkbox"/>	Role (therapist, program administrator, etc.)
TANF and employment programs		
Domestic violence/intimate partner violence (DV/IPV)		
Head Start		
Child welfare		
Other (please specify):		

Identification/Screening

2. Do all individuals served by your organization undergo a screening process for unhealthy substance use or are screens conducted only if unhealthy substance use is suspected?

- a. **PROBE:** If screening is a standard practice for all, please describe how it is conducted (e.g., observation, drug testing, standardized screening tools).
 - i. **PROBE:** Is the screening process you use a formalized tool (e.g., SBIRT, UNCOPE)?
 - ii. **PROBE:** Are you aware if there has been research to establish its accuracy or effectiveness?
 - iii. **PROBE:** Who funds this screening process?
 - iv. **PROBE:** Is the screening process available virtually (telemental health)? If yes, please indicate if that is solely due to COVID-19 or if it is available in this format at all times.
- b. **PROBE:** If screening is conditional, please describe the criteria used to make a screening decision.
 - i. **PROBE:** Is the screening process you use a formalized tool evidence-based (e.g., SBIRT, TAPS, UNCOPE)?
 - ii. **PROBE:** Who funds this screening process?
 - iii. **PROBE:** Is the screening process available virtually (telemental health)? If yes, please indicate if that is solely due to COVID-19 or if it is available in this format at all times.

Assessment

3. **What is the process when an individual screens positive (e.g., do you conduct a diagnostic assessment *directly* using your system or program, refer out for a diagnostic assessment by another system or program, report to a referring agency, deliver a brief intervention)?**
 - a. **PROBE:** Does your program conduct the assessment or do you refer out?
 - i. **PROBE:** If you refer out, what percentage of individuals actually follow up and attend the assessment interview?
 - ii. **PROBE:** If you refer out, which system or program provides this service? Please name and describe.
 - b. **PROBE:** Is the assessment voluntary? Do you obtain consent? If the individual refuses the assessment, are sanctions initiated?
 - c. **PROBE:** If known, what is the name of the assessment instrument? Is the assessment instrument a formalized tool evidence-based (e.g., CAAPE-5, GAIN)?
 - d. **PROBE:** Who funds this assessment process?
 - e. **PROBE:** Is the assessment process available virtually (telemental health)? If yes, please indicate if that is solely due to COVID-19 or if it is available in this format at all times.
4. **Do assessments differ by type of substance - e.g. alcohol, opioids, vs other illicit substances? If so what are the different assessment tasks used to identify alcohol, opioids, and other illicit substances?**
5. **Is a brief intervention available immediately if an individual is using substances but is not yet addicted? If yes:**
 - a. **PROBE:** What is the name of the model and is it evidence-based? Please name and describe.
 - b. **PROBE:** Which system or program provides this service? Please name and describe.
 - c. **PROBE:** Who funds this assessment process?

Referral

6. **When an individual's assessment or self-disclosure results in the need for referral to SUD treatment, who is responsible for arranging the referral? Please describe in detail.**
 - a. **PROBE:** In the case of peer recovery or case management services, do you know the name of the model and if it is a formalized tool? Please name and describe.
7. **Do you collaborate with other human services programs to provide services to clients with an identified SUD?**
 - a. **PROBE:** If so, what would that collaboration look like?
 - b. **PROBE:** Can you please detail all the steps in the process?

8. Can you describe the relationship between your human services system/program, and your local SUD program(s)/treatment facility/buprenorphine program/naltrexone program (in terms of participating in planning, service design, evaluation or process improvement, participation in regular client staffing)?

a. PROBE: Regarding this relationship, if you have one, is there anything specific that would strengthen the relationship to maximize the benefit to individuals being served? Please describe.

9. Once an individual has been referred to an SUD treatment facility, does your human services system or program have a process in place that monitors an individual's participation and progress in treatment?

a. PROBE: If so, are you able to obtain the monitoring and progress results from the SUD treatment facility? If yes, is the information timely and useful? If not, do you have any specific recommendations to improve this feedback process?

Barriers

10. When screening individuals with a SUD (using methods such as, observation, drug testing, or standardized screening tools), what are the main barriers and challenges your system or program faces?

a. PROBE: Please describe in detail and identify whether you/your program experienced the barrier(s) while trying to help the individual access services or whether it was reported by the individuals themselves, or both.

11. What are the main barriers and challenges your system or program faces to effectively, appropriately, and formally assess SUD in individuals?

a. PROBE: Please describe in detail and identify whether you/your program experienced the barrier(s) while trying to help the individual access services or whether it was reported by the individuals themselves, or both.

12. What are the main barriers and challenges your system or program faces to effectively and appropriately refer individuals to SUD treatment?

a. PROBE: Please describe in detail and identify whether you/your program experienced the barrier(s) while trying to help the individual access services or whether it was reported by the individuals themselves, or both.

b. PROBE: Are any of the barriers described more significant than others? If so, which?

- 13. What *specific solutions*, if any, have you/your system or program implemented to reduce or address SUD service barriers? Please describe the associated results. If any of the solutions involved evidence-based policies or practices, please specify them by name.**
- 14. What are the main barriers and challenges your system or program faces in working with other human services programs to support individuals with SUD?**
- 15. Are there consequences to the difficulties in working with other human services programs? If so, what are examples?**

Outcomes

- 16. Does your human services system or program have trouble achieving its expected outcomes owing to the unhealthy substance use of its clientele? Please describe specific examples.**
- 17. How can federal agencies like the U.S. Department of Health and Human Services (HHS) support state and local human services agencies and programs to implement more effective SUD identification and referrals?**
- 18. How can federal agencies like the U.S. Department of Health and Human Services (HHS) support state and local human services agencies and programs develop and maintain more effective interactions with SUD providers?**