**INSTRUMENT 4  
   
Listening visit topic guide for clinical service providers**

OMB Control No: 0990-new

Expiration Date: XX/XX/XXXX

**Implementation Study of the Title X Program**

**Topic Guide for Service Providers**

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| --- | --- | --- | --- | --- |
| Lead Interviewer | Note-taker | Start time | End time | Date |
|  |  |  |  |  |

1. **Respondent information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Title | Org name | Grantee Name (if applicable) | Email/Phone |
|  |  |  |  |  |

1. **Introductions and purpose of study**

Hello, my name is [Name] and my colleague [Name] is also joining us today. Thank you so much for meeting with us today. We are with Mathematica, an independent research team studying the implementation of the Title X program as part of a recent study sponsored by the Office of Population Affairs (OPA). The purpose of our discussion is to learn more about your experiences as a [Title X service provider] and about the work you do here. This is not an assessment of performance. This study is an effort to tell the rich stories of the Title X program, to hear from those directly involved in and impacted by the program and its services, and to derive important lessons to help sustain and improve those services for families across the country. We are especially interested in lessons about approaches for achieving access, quality, and equity that you think would be useful to share with the field and other providers like yourself. In designing this study and applying principles of equitable evaluation, we have consulted with staff from grantee organizations and clinics on all the topics that are important for us to discuss and learn about. Your point of view is valuable so that our findings reflect the varied perspectives of partners and stakeholders at all levels of the program. Once the study is complete, OPA will publish and share the study’s overall findings publicly.

We expect this discussion to take up to an hour. I will be taking notes as we go, but we would like to audio-record this interview so that we can refer to it to make sure that our notetaking is accurate. The recording is for our internal use only, and after we are sure that we have good notes, we will delete the recording. Are you OK with us recording the interview?

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1. **Privacy and confidentiality**

Before we start, I want to let you know that your participation in this conversation is voluntary, and there are no penalties or consequences for deciding not to participate in today’s conversation.

I also want to inform you of several important notes about how we plan to use the information you provide the study team. We will produce summary reports on themes emerging from the information we collect across all grantees, such as the different strategies grantees use to ensure access to equitable, affordable, and client-centered services. These responses will not contain confidential information. We may use quotes to illustrate findings, but if we do, we will not report any information that will allow a quote to be identified with you. The notes and recording from this discussion will not be shared with anyone beyond the research team. The recording will be erased once we have finalized our notes. I want to emphasize again that there are no right or wrong answers to our questions. By voluntarily agreeing to participate in this study, you are agreeing to answer these questions with responses that are true for you.

* Do you understand the purpose of our conversation today?
* Do you have any questions or concerns before we begin?

1. **Project Contact Information**

If you have further questions about this project, you may contact the project survey director, Jennifer Walzer, at (312) 994-1042 or [jwalzer@mathematica-mpr.com](mailto:jwalzer@mathematica-mpr.com).

**List of Topics** [Note: These will be tailored based on each grantee and service site’s context]

1. **Background and role**
   1. Respondent role and responsibilities
      1. Current role
      2. Primary responsibilities
      3. Motivation for doing current work
   2. Respondent background
      1. Relevant experience and qualifications
      2. Length of time in current role
      3. Length of time in similar/related role(s)
2. **Implementation of family planning and related preventative health services**
   1. Client characteristics and needs (Goal 1.4)
      1. FP and related health needs (e.g. STI prevention and treatment) in the community served by [clinic name] (Goal 1.4)
      2. Client characteristics and service needs at [clinic name] (Goal 1.4)
   2. Service provision
      1. Title X services provided by [clinic name] (Goal 1.3)
      2. Other services provided by [clinic name] (Goal 1.3)
      3. Description of a typical clinical encounter from appointment scheduling to discharge and follow-up (Goal 1.1)
         1. Description of health topics addressed in a typical appointment
      4. Service delivery strategies in place to ensure delivery of affordable, client-centered, quality family planning and other health services at [clinic] (Goal 1.2)
         1. Awareness and use of OPA’s Quality Family Planning guidelines (QFP) or other structured clinical protocols (e.g. PrEP planning guide)
         2. Contraceptive methods available, including contraceptive methods stocked on site and availability of same-day services (e.g., same-day LARC insertion and removal) (Goal 1.2, 1.3)
         3. Referral process for services not provided on site (Goal 1.2, 1.3)
         4. Provider approach to reproductive life plan/contraceptive counseling (Goal 1.2, 1.3)
         5. Provider approach to pregnancy testing and counseling (Goal 1.2, 1.3)
         6. Provider approach to other health services, such as STI prevention and treatment (Goal 1.2, 1.3)
         7. Experiences of client-provider interaction and communication (Goal 2.2.1)
            1. Areas for improvement in client-provider communication (Goal 2.2.1)
      5. Provider strategies for delivering high quality care to diverse populations (*e.g.* adolescents, LGBTQ+, indigenous communities, persons with limited English proficiency, remote and rural populations) and populations that are underserved by family planning programs (Goal 2.1)
         1. Successes and challenges in providing care for diverse populations and those that are underserved by FP and other related health programs (Goal 2.2.3)
         2. Participation in trainings and professional development focused on serving diverse populations
            1. Changes made to clinical care or approach to service delivery as a result of trainings
            2. Areas for improvement in content or delivery of trainings
      6. Service delivery changes/adjustments made by [clinic] and providers in response to the COVID-19 pandemic (Goal 3.1, Goal 3.3)
         1. Adaptations and adjustments that have been integrated into standard practice (Goal 3.4)
         2. Benefits and challenges of adaptations, such as telemedicine, including impact on clients’ access to affordable, client-centered, quality family planning and other related services (Goal 3.1.1, 3.3.1)
      7. Systems-level factors impacting provision of affordable, client-centered, quality family planning and other related services (Goal 1.5, 1.6)
         1. Clinical factors (e.g. availability of trained providers, availability of equipment or supplies, perception of staffing needs) (Goal 1.5)
         2. External factors that challenge service delivery (e.g. societal, geographic, political, physical) (Goal 1.6)
      8. Perceived changes in clinic operations, services provided, and staff and provider approach to counseling since rule change permitting counseling, referral for, and co-location of abortion services (Goal 1.5)
3. **Outreach and community engagement**
   1. Provider role in raising community awareness, and engaging with the community to increase access to services (Goal 2.2)
   2. [If applicable] Key achievements and areas for growth related to community outreach and engagement
4. **Training and technical assistance**
   1. Most/least useful type of training and/or technical assistance received
   2. Types of training and/or technical assistance that are missing and could fill gaps in provider knowledge and skills
5. **Lessons learned**
   1. Assessment of impact
      1. Clinic-level or provider-level achievements and successes in delivering equitable, client-centered, high quality care (i.e. “what is going well’?)
      2. Key challenges and areas for improvement in ensuring equitable access to quality client-centered services (Goal 2.3 or 4.4.)
      3. Changes in service delivery since participating in Title X
      4. Steps that providers can take to increase delivery of client-centered care (Goal 2.3.1)
   2. Use of data to drive program delivery (Goal 4.1)
      1. Provider involvement in clinic-level data collection (Goal 4.1, 4.2 4.2.1)
      2. Use and usefulness of different types of data collected (Goal 4.1, 4.2, 4.2.2)
      3. Suggestions for improvements to data gathering and evaluation efforts to reduce burden on clinic and providers and increase effectiveness (Goal 4.4)