**Interview Guide for National Hypertension Control Initiative: TA Group 2**

**Introduction:**

Thank you for participating in this interview. We appreciate your time and willingness to discuss the National Hypertension Control Initiative, which I’ll refer to as the NHCI moving forward. My name is [interviewer name] and I am part of the team that HRSA has contracted to support health centers engaged in the NHCI. Today, we are interested in learning more about your health center’s experience with NHCI program implementation, including any challenges or accomplishments. The information you share with us today will lead to more targeted support for your efforts to achieve the goal of hypertension control among your patients.

Your personal identity will remain anonymous. You can speak candidly. Additionally, when we report findings to HRSA, we will not share your identity or your health center affiliation. We may share your job title/position in our cumulative report to HRSA to help them understand the context of your responses.

Questions today will range from basic background information about your health center to details about NHCI program implementation — for instance, how you engage patients and monitor their hypertension. If there is any question that you don’t feel comfortable answering, we can skip it. You can also stop your participation at any time.

I would like to record this interview so that I can listen carefully instead of taking notes. Only those with a role in this evaluation will be allowed to listen to the recording. Is it okay for me to begin recording? [If yes, start recording.]

**Background Information**

Let’s start with some background information about you and your health center.

1. Can you tell me your title and your role in implementing the SMBP program?

*[If there are multiple interview participants, ask for this information about each of them.]*

1. Going back to the very beginning, do you remember why your health center wanted to participate in this program and how you felt about the focus on improvement in hypertension control for your patients?

1. I would like to understand the diversity of your SMBP program’s participant population.
	* How would you describe the demographic make-up in terms of urban vs. rural?
	* What languages are most commonly spoken amongst your program participants?
	* What age ranges do you most commonly see among program participants?
	* How would you describe typical income levels or wealth among program participants?
	* How would you describe typical health literacy levels among program participants?
	* How would you describe typical physical activity levels among program participants?
	* How prevalent is being overweight or obese among your program participants?
	* To your knowledge, to what extent do program participants take their antihypertensive medication(s) as prescribed?

Thank you for that description. As we go through this interview, I will refer to the reported patient demographics. We are particularly interested in learning about how your experience implementing the SMBP program potentially differs across patient populations.

1. Which brand(s) and model(s) of SMBP device(s) does your program use?
	* Does your program use any third-party apps or technologies with the SMBP devices? Please provide the name.

**Staffing**

Thank you for providing some baseline project information. I’d now like to learn more about your team’s experience implementing the SMBP program. Let’s start with staffing.

1. The presence and consistent engagement of a program champion (a person who promotes or leads the SMBP program) is supportive to successful program implementation. Do you have a program champion or champions? *If yes:* Can you tell us about the involvement of program champions for the SMBP program at your health center?
2. Tell me about your program’s staffing model. What are the main roles and responsibilities for your team members as they relate to SMBP program implementation?
	* Who is accountable for your center’s performance in SMBP program implementation? *Prompt:* Is this the program champion or someone else?
	* To what extent does your clinic have the necessary staffing in place to fully implement your SMBP program? *If insufficient staffing, probe:* How has insufficient staffing impacted program implementation?
3. Describe how staff responsible for different components of patient hypertension identification and management coordinate with each other to provide optimal care to SMBP program participants. *Prompts:* For example, do you follow a team-based care model? Do you have regular care coordination meetings?
	* What barriers has your team experienced in changing clinical practices or workflows to meet your center’s SMBP program goals?
	* What barriers has your team experienced with different patient populations?
4. What topics has your center had staff trainings on to improve SMBP program implementation? What additional training would benefit your team?

**Patient Engagement**

I would like to now learn more about how your clinic engages program participants.

1. Describe your clinic’s process for recruiting and enrolling eligible patients in your SMBP program.
	* What is working well about this process?
		+ How does this vary across different demographics of patients? Specifically, different demographics we discussed earlier such as income, race/ethnicity, culture, language, health literacy, acute care needs, age, and neighborhood setting.
	* What have been the main barriers to recruiting and enrolling eligible patients?
		+ Tell me more about the different strategies used to recruit potential participants for different demographics of patients?
2. Thank you for helping me understand your recruitment process. Now I’d like to learn more about patients who decline the program.
	* What percentage or proportion of patients typically decline? Are there trends in the patient population that declines program participation? If so, please describe.
	* What reasons do patients provide when they decline program participation?
	* Tell me about the strategies staff use to motivate reluctant patients to enroll? What strategies have been most effective?
3. Tell me about your health center’s strategies for maintaining participant engagement*,* includingcontinued communications, engagement, and hypertension monitoring.
	* How might these processes differ across patient demographics?
4. What have SMBP program participants said about the impact of the program on their health and well-being?

**SMBP Devices**

Thank you. Again, I am going to transition our conversation to focus on SMBP devices.

1. What has been your team’s experience with SMBP devices, including the blood pressure cuffs and any third-party apps or technologies your team uses for this program?
	* Describe the teams’ experience in engaging patients in setting up SMBPs.
		+ Tell me how the experience differs across patient demographics?
	* Do your SMBP devices interface well with your electronic health record (EHR)?
		+ How has the quality of the interface impacted SMBP program implementation?
	* Describe barriers your team has experienced, if any at all, in obtaining enough devices to meet the needs of your program.
2. What have program participants said about using SMBP devices?
	* What has seemed to work well for program participants? Tell me how this differs, if at all, across different patient demographics.
	* Tell me more about the challenges program participants experience. Describe the differences, if any, across different patient demographics.
3. Tell me how data is collected from SMBP devices.
	* How is the data used to improve hypertension control in your patient population?
	* What is the process and frequency for reviewing SMBP data by your team?
	* Describe how your center uses SMBP data to support clinical oversight and decision-making for patients in your SMBP program.
	* What has worked well about these processes?
	* What improvements would you make?

**Closing**

1. Before we close, is there anything else you’d like to share about your or your center’s participation in this program?

Thank you for your time.

**Interview** **Sampling Frame**

The Altarum/Arbor team will sample 30 centers, stratifying the sample into two groups:

* + centers that have reported little or no progress in NHCI in the most recent semi-annual report; and,
	+ centers that have begun implementing NHCI.

From centers that have made little or no progress, we will learn about program implementation and maintenance challenges to better target the team’s technical assistance (TA) efforts.

From centers that have made substantial progress (e.g., they have fully implemented protocols for the SMBP program, or they are further along than most other centers in the implementation process), we will identify promising practices that the team can package and distribute across the learning community.

The team will select centers in the sample based upon their responses to the most recent semi-annual report data. Additionally, centers that did not respond to the most recent semi-annual report and whose level of progress is unknown will also be included in the sample. Engaging these centers enables the team to gather additional data on centers for which the Altarum/Arbor and HRSA teams have limited to no data.

To the extent possible, within each of the strata, the team will diversify the sample by the following characteristics:

1. ***Proportion of patients with controlled hypertension****:*

Centers that have high, medium, and low % controlled hypertension among their patient population based upon the most recent UDS data will be included. The proportion of patients with controlled hypertension is the primary outcome of NHCI and thus important to select sites at various stages of progress in achieving this goal.

1. ***Race/ethnicity:***

Centers that have high, medium and low % non-Hispanic White participants among their patient population will be included. Closing the gap in racial/ethnic differences in hypertension control is a key focus of this initiative and thus it is important to speak with staff at health centers serving different racial/ethnic demographics.

1. ***Geographic diversity:***

Centers from across the four major US census regions[[1]](#footnote-2). The team will capture perspectives from NHCI participants across the nation.

**Recruitment Materials**

**Email Outreach**

Email title: Request: Interview to learn about the implementation of the National Hypertension Control Initiative (NHCI)

Dear [NHCI contact],

The NHCI Support team invites your team to participate in a 60-minute phone interview to learn more about your health center’s experience implementing the NHCI program. Your health center has been selected based upon your responses to the semi-annual progress reports.

The interview will focus on learning more about your program’s processes, workflow, patient engagement, and hypertension monitoring strategies. To learn about all aspects of your program’s implementation, we’d like to schedule the interview with you and up to three others involved in the NHCI whose participation would further our understanding of program implementation. Our team will use this information to provide more targeted support to your health center to help you achieve program goals and better health outcomes for program participants.

Please send a few dates/times in [insert month] when you and/or your team member(s) are available. We will coordinate schedules and send your team a calendar invite.

If you have any questions, please let us know.

We look forward to hearing from you shortly.

Best,

[Evaluation team member]

**Phone script (can either be used as a follow-up to email or prior to sending email)**

***Reach out to person listed as NHCI contact.***

Hello. My name is [name].I’m part of HRSA’s evaluation team that is assessing the National Hypertension Control Initiative (NHCI). I am following up on an email our team sent you on [insert date] where we requested your team’s participation in a 60-minute phone interview. The interview will focus on learning about your program’s processes, workflow, patient engagement, and hypertension monitoring strategies. Our team will use this information to provide more targeted support to your health center to help you achieve program goals and better health outcomes for program participants.

As a part of the interview, we invite you as the main point of contact for the HRSA contract. We’d also like for you to invite up to three others involved in the NHCI whose participation would further our understanding of program implementation.

While I have you on the phone, is it okay to schedule something now? If not, can you please coordinate calendars across your team, and let us know best dates/times for the interview?

Once we receive some dates and times, I will send you an email to confirm your appointment. The invite will include a conference call number for the interview. Thank you in advance for your time. I look forward to speaking with you and your team!

Thank you!

*If reached voicemail:* Hello. My name is [name].I’m part of HRSA’s evaluation team that is assessing the National Hypertension Control Initiative (NHCI). I am following up on an email our team sent you on [insert date] where we requested your team’s participation in a 60-minute interview. The interview will focus on learning about your program’s processes, workflow, patient engagement, and hypertension monitoring strategies. We’d like to schedule the interview in [insert month]. Can you please call me back at [number] to schedule a time or respond to the email provided on [insert date] from [insert name of sender]. You can reach me at [insert number] or via email at [inset email]. Thank you.

**Text for Outlook invitation for scheduled interview appointment**

Dear [name],

Thank you for confirming your availability for this 60-minute NHCI program implementation interview. I look forward to our conversation. Attached you will find the interview guide to help you prepare for our discussion. I look forward to the conversation. Thank you for making the time.

Best,

[Evaluation team member]

**Confirmation email before interview (day prior or Friday prior if scheduled after the weekend)**

Dear [name],

I look forward to our interview [tomorrow *or* on date] at [time; include time zone]. During the interview, we plan to discuss your program’s processes, workflow, patient engagement, and hypertension monitoring strategies. I have attached the interview guide and included the dial-in information below for your convenience.

Best,

[Evaluation team member]

**Thank you email after interview**

Dear [name],

It was a pleasure speaking with you about the National Hypertension Control Initiative! Thank you for sharing your time and insights so that our team can provide your health center with more targeted support to help you achieve program goals and better health outcomes for program participants.

Best,

[Evaluation team member]

1. <https://www2.census.gov/geo/pdfs/reference/GARM/Ch6GARM.pdf> [↑](#footnote-ref-2)