Appendix D

RUDI Part A and B Administrative Recipient Discussion Guide

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Interviewer: Gather the following information before you conduct the interview.

Information	Source
Respondent information	
Interviewee title and description of role in organization:	Introductory email exchange
Recipient organization name	List of recipients – fill NAME OF ORGANIZATION below
Recipient and survey information	
City:	[NA for Part B recipients]
State:	
Name of system-level initiative they implemented, if applicable	Survey, Q7 – fill NAME OF INITIATIVE below
Estimated number of times they directed subrecipients to TargetHIV disseminated resources:	Survey, Q15a
Percent of the time the recipients used the resources:	Survey, Q17 -- fill X% below
Reasons for use of TargetHIV resources:	Survey, Q5 (if =1, include Section D below; if =2, include Section E below, if = 3, include Section F below)
Use of HAB resources	Survey, Q5 (if =3, fill Section F below HAS USED HAB RESOURCES, othewise fill HAS NOT USED HAB RESOURCES
TargetHIV sections helpful	Survey, Q3
Resourc(es) that were helpful	Survey, Q25
Name of regional AETC nearest the recipient	[Welcome	AIDS Education and Training Centers National Coordinating Resource Center (AETC NCRC) (aidsetc.org)](https://aidsetc.org)

*We will not speak the italicized material below; rather, we include it as an aid to the interviewer during the interview. Bracketed words that are **not** italicized indicate where we intend to tailor the guide based on the information collected before the interview (if capitalized), or in real time (if not capitalized) per the instructions in the box above.*

A. Introduction (4 min)

Thank you for taking the time to speak with us today. My name is [NAME] and I am joined on the call today by my colleague from Mathematica [NAME]. As you know from the invitation we sent, we are working with the HIV/AIDS Bureau (HAB) at HRSA on a study to learn about how Ryan White recipients and subrecipients access and use the intervention resources and materials that HAB disseminates to improve care for people with HIV. We are calling the efforts you take to improve care for people with HIV "interventions," or "system-level initiatives" if it is really broad effort, not something an individual organization would implement on its own. You could use the terms "program" or "strategies" as well to describe these efforts.

As reflected in the list of topics we shared with you, we would like to talk with you about how [RECIPIENT ORGANIZATION] uses the intervention resources and materials that HAB makes available to its grantees, the feedback you may have received from your subrecipients about those resources, and potential opportunities to improve the usefulness of those resources. This is an opportunity for you to provide feedback to HAB to help maximize the impact of the resources they make available to help improve the delivery of care and end the HIV epidemic in the U.S. We will summarize what we learn from you and others we interview for this study in a report to HAB.

Please note, we are not evaluating your organization, this is not a HAB site visit, and there are no wrong answers. Nothing today will affect your participation in the Ryan White HIV/AIDS Program. Your participation is totally voluntary. If you'd like to skip a question or stop the interview at any point, that is okay. We will pull together information from interviews with multiple organizations to share overall themes and illustrative examples in a final report. We won't share any identifying information about you or your organization, but our final report may include anonymized examples from our discussion. Also, the information you provide will only be used for the RUDI Evaluation. Do you consent to participate in the study?

*[Interviewer: Record respondent's verbal response: **Yes/No**. If NO, we CANNOT conduct the interview. Thank the respondent for their time and end the call.]*

If OK, we would like to record the audio of our discussion to ensure accurate notes. We will not share the recording with anyone outside of the Mathematica research team and the transcriptionist. Nor will we share the transcript outside the Mathematica research team. We will destroy the transcript and recording from this interview at the end of our study. Is it okay with you if we record the interview?

*[Interviewer: Record respondent's verbal response: **Yes/No**. If NO, we can conduct the interview and take notes but not record it.]*

B. Background (2 min)

Let's start with some background.

1. Could you briefly describe your role and responsibilities at [NAME OF ORGANIZATION] and how long you have worked there?

2. To help us narrow in on the topics to focus on during our discussion, it would help if we could get a sense of how your organization is structured. Specifically, who does information about HAB resources get passed to in your organization (for example, who interacts with your HAB project officer), and who is responsible for sharing that information internally within your organization as well as with your subrecipients?

C. How recipients access resources disseminated by HAB (7 min)

Now let's get into how you personally access resources that HAB disseminates. By HAB resources, I mean supporting information and tools – anything from information on interventions you read on the TargetHIV or other HAB websites themselves, to HAB-sponsored webinars you might view online, to things you may download including implementation manuals and tools and toolkits.

1. What website or websites do you typically rely on when looking for and accessing HAB resources?
   a. How often do you access the resources on this/these site(s)?
   b. Why do you use this/these site(s)?

2. [*If not previously mentioned:*] Are you familiar with the intervention resources available on the **TargetHIV** website?
   a. How often you do you access the available resources on TargetHIV?
   b. Can you explain why you use TargetHIV as a source of information for care improvements, and which types of resources you access?
   c. What role, if any, has your HAB project officer played in recommending or encouraging you to use the resources on TargetHIV?

3. Are you familiar with the intervention resources disseminated through your regional **AIDS Education and Training Center** or the AETC National Coordinating Resource Center?

   [Note: Make sure to understand if they use the regional or central website or both. Probe as needed if they use them:]

   a. What role, if any, have AETC staff played in sharing resources with you?
   b. How often you do you access the resources available on the AETC website(s)?
   c. Can you explain why you use the AETC website(s) and/or staff as a source of information for care improvement, and which types of resources you access?
   d. What role, if any, has your HAB project officer played in recommending or encouraging you to use the resources available from the AETC?

[*Note: Both the TargetHIV website and the AETC websites help to disseminate HAB resources. Please listen carefully if they reference a specific website in moving through the sections below.*]

D. Use of resources disseminated by HAB to expand awareness and knowledge of care delivery

[Ask the questions in this section only if survey indicated they used resources to expand their own knowledge, Q5=1.]

In the online RUDI survey that you or one of your colleagues recently completed, you mentioned that staff in your organization used resources disseminated by HAB to increase your knowledge around interventions to improve care delivery.

1. What resources did you or your colleagues access for this reason, and what were you trying to learn about?

2. What led you to access those resources, for example, did you hear about something from a colleague or through a webinar that caused you to want to learn more about the topic?

3. How well did they meet the need? *[Probe if needed: What if anything positive came from your using the resources?]*

E. Use of resources to support implementation of system-level initiatives

[Ask the questions in this section only if survey indicated they used resources to support system-level initiative(s), Q5=2.]

In the online survey that you or one of your colleagues completed, you mentioned that your organization has used HAB resources in the last 2 years to help implement [NAME OF INITIATIVE].

1. I'd like to get some more information about the initiative:

   a. Why did you choose to participate in this initiative and what did it aim to improve?

   b. What core elements or activities did this entail?

   c. Who were the primary staff involved and their roles?

2. What HAB resources, materials, or products did [NAME OF ORGANIZATION] use to implement [NAME OF INITIATIVE]? [*Be ready to characterize or name these resources as referenced in other questions below.*]

   a. How did you hear about [name of resources]?
   b. How did you access [name of resources]?

      • How often do you access HAB resources through this source?

3. What was helpful about the [name of HAB resources] that [NAME OF ORGANIZATION] used to implement [NAME OF INITIATIVE]? [*Note: Listen to open answer and probe as needed on resources' impact on areas below:*]

   a. Deciding to participate in the initiative

   b. Staffing or operationalizing the initiative (e.g., implementation plan)

   c. Conducting outreach to population

   d. Choosing content to interact with population

      e. Improving care delivery

      f. Identifying measures of success

      g. Other

4. What was not helpful about [name of HAB resources] that you used to implement [NAME OF INITIATIVE]?

F. Use of resources to support subrecipients' implementation of care delivery interventions

[Ask the questions in this section only if survey indicated they used resources to support subrecipients' implementation of care delivery interventions, Q5=3.]

Now I'd like to ask about your organization's use of resources to support your subrecipients' efforts to improve care for people with HIV. From your or your colleague's recent responses to the RUDI survey, we understand that your organization [HAS USED HAB RESOURCES/HAS NOT USED HAB RESOURCES] to help your subrecipients improve care.

1. Is our understanding correct? Yes/no→*[If incorrect, follow the corrected pathway of questions, either starting just below if they used HAB resources, or starting at Q3 if they did not]*

[Start here if they used HAB resources]

2. Which **HAB resources** has your organization—meaning you yourself or others you're aware of here —encouraged your subrecipients to use to improve care for their clients? Remember resources can be anything from a weblink with information for them to read, to an implementation manual or tool or toolkit from a HAB or AETC website. [*Note: If they listed having used a helpful resource on their survey (Q25), but don't mention it, probe to help ensure complete response, be aware it could be a non-HAB resource.*]

    a. How did you hear about these resources? [*Note: For example, from your Project Officer or through a newsletter*]

    b. How did you access these resources?

    c. How often do you access HAB resources this way?

    d. What aspect of care were the resources trying to address?

    e. How did you share these resources with your subrecipients?

[Start here if they did not use HAB resources]

3. Have you encouraged your subrecipients to use any **non-HAB resources** to improve care?

      1. [*If yes:*] Please describe these resources.

    a. How did you hear about these resources? [*Note: For example, from another HIV care delivery organization or through a listserv*]

    b. How did you access the resources?

    c. How often do you access non-HAB resources this way?

    d. What aspect of care were the resources trying to address?

    e.   How did you share these resources with your subrecipients?

4. [*If they use both HAB and non-HAB resources:*] When and why do you choose to use non-HAB resources vs. HAB resources?

G. Subrecipient feedback on the usefulness of intervention resources

[Ask the questions in this section only if survey indicated they used resources to support subrecipients' implementation of care delivery interventions, Q5=3.]

[If they used HAB resources:]

1. From the RUDI survey, we understand that you estimated that your subrecipients used the resources you recommended about [X%] of the time. Could you tell us anything about your subrecipients' experience using these resources? Starting with…

    a.   Why did some subrecipients not use the resources you had shared with them?

    b.   For those that did use the resources, what was the need they were trying to address?

    c.   Did they **tailor or modify** the resources to better fit their local needs?

        1.   [*If they made changes:*] What changes did they make and why?

        2.   [*If they made changes:*] Did they find it difficult to make these modifications? If so, why?

2. What, if anything, did your subrecipients tell you about what they found **helpful** about the HAB resources they used? [*Note: Listen to open answer and probe as needed on resources' impact on areas below:*]

    a.   Selecting intervention or its components

    b.   Staffing or operationalizing intervention (e.g., implementation plan)

    c.   Conducting outreach to population

    d.   Choosing content to interact with population

    e.   Improving care delivery

    f.   Identifying measures of success

    g.   Other

3. What, if anything, did your subrecipients tell you anything about what they found **unhelpful** about the resources they used?

H. Opportunities to strengthen impact of HAB resources

1. What resources, if any, did you not have that would have helped you to:

    a.   Improve your own knowledge and ability to achieve your Ryan White program goals?

    b.   Better assist subrecipients in implementing interventions to improve HIV care?

2. What would have made the HAB resources you used more useful or accessible?

3. How could HAB improve the way it disseminates intervention resources*? [Probe on:]*

    a.   Ways you'd like to see them publicized for greater awareness?

    b.   Product types or characteristics?

      c. Content?

      d. Population focus?

      e. Types of assistance the resources offer (for example, in person or on the phone)?

4. Is there anything else you would like to share about your experience accessing and using disseminated resources by HAB?

Thank you for your time! [*Stop recording*]