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**In-Depth Assessment – Exploratory Assessment Recipient Interview Guide – Community Clinical Links – The National Cardiovascular Health Program & The Innovative Cardiovascular Health Program**

***Note:*** *Public reporting burden of this collection of information is estimated to average 90 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-24XXX)*

**Exploratory Assessment**

**Recipient Interview Guide**

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| --- | --- |
| **Date of Interview** |  |
| **Interviewer** |  |
| **Notetaker** |  |
| **Organization Name** |   |
| **Organization Type** |  |
| **State** |  |  |  |
| **Organization City** |  | **Zip Code**  |  |
| **Cooperative Agreement** | [ ]  The National CVH Program[ ]  The Innovative CVH Program  |
| **Strategy** | Strategy 3: Link Community Resources and Clinical Service |
| **Interviewee Name(s)**  |  |
| **Interviewee Role(s) or Title(s)** |  |

**Introduction**

*Thank you for taking the time to participate in this interview. My name is <Insert name> and I am with the Deloitte evaluation team. Our team is working with the CDC Division for Heart Disease and Stroke Prevention to evaluate the <Insert Cooperative Agreement>. As part of the larger evaluation, we are seeking to learn more about the effectiveness of Strategy 3: Link Community Resources and Clinical Service at the site level and gain insights on sustainability and program replicability. The information you share will provide valuable insights on supporting engagement of community health workers in patient care, promoting use of self-measured blood pressure monitoring, and strengthening patient referrals to social support services to support the needs of populations at risk of CVD and help us understand which approaches seem to work well in specific contexts.*

*This interview is expected to take no longer than 90 minutes. Your participation in this interview is completely voluntary. You may choose not to respond to questions at any time and it will not in any way impact the funding or technical assistance to your organizations receive from CDC. All information will be kept secure and any personally identifiable information will be removed when results are aggregated for analysis.*

*During this interview we will be referencing back to information gathered during the Evaluability Assessment interviews to further understand how things may have changed or remained the same since <September 2024 through September 2025>. If you did not participate in the Evaluability Assessment or were not yet with <recipient organization> we understand that you may not be able to speak to everything that is referenced. We still value your input and are interested in learning about what is currently happening at your organization.*

*If at any time during the interview you are not clear about what we are asking, be sure to let me know. Please answer questions based on your own knowledge and experience. We appreciate your candid answers and hope that today’s interview can be a conversation among participants. Please let us know when things your colleagues are saying resonate with your experience or when your experience has been different.*

*Do you consent to this interview?*

[ ]  Yes

[ ]  No

*With your permission, we would like to record this interview for transcription purposes.*

*Do we have your permission to record?*

[ ]  Yes

[ ]  No

*Do you have any questions or concerns before we start the interview?*

**Background**

*Thank you again for agreeing to participate in this interview. For reference, for today’s interview we will be talking about Strategy 3, which is defined as*

*Link community resources and clinical services that support bidirectional referrals, self-management, and lifestyle change to address social determinants that put the priority populations at increased risk for CVD with a focus on hypertension and high cholesterol. (The National CVH Program)*

*Link community resources and clinical services that support comprehensive bidirectional referrals and follow-up systems aimed at mitigating social services and support barriers for optimal health outcomes within approved populations of focus. (The Innovative CVH Program)*

*We will discuss the following sub-strategies under Strategy 3:*

[*Interviewer Note:* Only describe the relevant sub-strategies for which the recipient organization has self-nominated]

***3A:*** *Create and enhance community-clinical links to identify SDOH (e.g., inferior housing, lack of transportation, inadequate access to care, and limited community resources) and respond to the social services and support needs*

* *of populations at highest risk of CVD with a focus on hypertension and high cholesterol The National CVH Program)*
* *within approved populations of focus (The Innovative CVH Program)*

***3B:*** *Identify and deploy dedicated CHWs (or their equivalents) to provide a continuum of care and services which extend the benefits of clinical interventions and address social services and support needs leading to optimal health outcomes*

* *within approved populations of focus (The Innovative CVH Program)*

***3C:*** *Promote use of self-measured blood pressure monitoring (SMBP) with clinical support*

*within populations at highest risk of hypertension The National CVH Program)*

* + *within approved populations of focus (The Innovative CVH Program)*

*I’d like to start with some questions to understand* *the work <name of recipient organization> is doing to support patients at risk of or with high blood pressure or high cholesterol****,*** *and also understand your roles within the organization.*

1. During the Evaluability Assessment it was shared that you <personal role in relation to supporting strategy approaches>. Is this still true or has this changed since we last spoke?

**Probes:**

* How long have you been working with <organization name>?
* How long have you been in this role?
* Can you tell me about your role in relation to supporting the implementation of CCL approaches?
* How many years have you been working on CCL-related work within your organization?

**Support for CCL Strategies**

*We’d like to learn more about how recipients are supporting CCL strategies. We are particularly interested in learning how things have changed since our last round of discussions in <insert time e.g., Fall 2025> during the Evaluability Assessment. For each participant, we will summarize what we heard about implementation during the key informant interviews and ask you to confirm if the activities are the same or have changed.*

1. In the Evaluability Assessment interview, <you, key personnel from your organization> shared that <recipient organization> supports the implementation of <CCL activities> by <actions described in the last interview>.

**Probes:**

* What has changed in the past two years? Why did you make these changes?
	+ How has your role and the support you provide changed?
	+ How have you expanded <activities>? What progress has been made? Tell us more about key achievements and major milestones.
	+ Are there any unique or novel approaches that you would like to highlight?
* [If no longer implementing the program activity] Why are you no longer implementing? What are you doing in place of the <activity>?

*For the next topic of discussion, we would like to explore the partnerships between the <recipient organization>, learning collaboratives (LCs), and partner organizations. Please think about the process of working together to implement <activities related to CCL strategies>.*

1. Does your organization still have a partnership with <names of partners reported in the Evaluability Assessment>?

**Probes:**

* Have there been any changes (i.e., added or removed partnerships) to your organization’s partnerships since we last spoke?
	+ [If partners added] Why was this partner added?
		- Is this partner organization part of the LC?
		- Was this partnership planned?
		- Was there an unexpected gap identified?
	+ [If partner removed] Why was this partner removed?
		- Was this removal planned?
		- Were there challenges that existed with this partnership?
1. During the key informant interviews for the Evaluability Assessment, we learned that <LC support for strategy implementation and influence on partnership networking>. How has the support of the LC evolved since we last spoke?

**Probes:**

* What has changed in the past two years?
	+ How has the LC support for <activities related to CCL strategy implementation> changed?
1. How has the LC affected the exchange of ideas and strategies?

**Probes:**

* How has the LC influenced partnership networking?
* How has the LC impacted program reach?
1. Can you describe any key actions or characteristics you feel mattered most in facilitating an effective and beneficial partnership with your partner organizations?
2. Is there anything you would want to change in your collaboration to improve your partnerships?

**Probes:**

* What are the gaps in your current partnerships?
* What are the gaps in your LC?
	+ [If there are gaps] How does your organization plan to overcome these gaps?

*Next, we’d like to discuss any new or ongoing challenges that <Recipient Organization> is encountering when implementing or supporting the implementation of <activities related to CCL> and ways that the organization has overcome these challenges or any additional support the organization may need to overcome them.*

[*Interviewer* *Note:* Reference challenges and barriers mentioned in the Evaluability Assessment key informant interviews by participants, probe for new or ongoing challenges.]

1. During the key informant interviews for the Evaluability Assessment, we heard that <challenges and barriers referenced> were some of the challenges for implementing or supporting the implementation of CCL strategies. Have these challenges persisted?

[*Interviewer Note:* For the next question, only describe relevant sub-strategies for which the recipient organization has self-nominated.]

**Probes:**

* Have challenges persisted with:
	+ 3A: enhancing CCLs?
	+ 3B: integrating CHWs into the continuum of care?
	+ 3C: promoting the use of self-measured blood pressure monitoring (SMBP)?
* How did your organization resolve these challenges?
1. Have any new challenges emerged?

**Probes:**

* How is your organization addressing these challenges?
* What support, TA, or resources does your organization need to overcome these challenges?
1. What factors have helped to support <activities related to linking community resources and clinical services>?

**Probe:**

* How did these factors provide support for <CCL activities>?

*We are interested in learning about changes since we last spoke related to the external or contextual factors that may support or hinder <CCL activities> such as state or organizational policies or guidelines, other initiatives or cooperative agreements, and reimbursement mechanisms.*

1. During the Evaluability Assessment it was shared that <contextual factors that support or hinder activities related to linking community resources and clinical services>. Have there been any changes in these contextual factors?

**Probe:**

* Have there been any recent policy level or other external changes within your jurisdiction that impact your <CCL efforts>? What about changes within your organization or your partner organizations?

[*Interviewer Note*: Only ask the next set of questions if the recipient organization participates in more than one NOFO. Otherwise, move on to the Effectiveness of CCL section.]

*In addition to receiving funding from <insert cooperative agreement being interviewed for> you also receive funding from <The National CVH Program, The Innovative CVH Program, WISEWOMAN program>. [If applicable to recipient: We are also aware that <recipient in same state or jurisdiction> received funding from <name of cooperative agreement> and are interested in how your organization is coordinating with <other recipient organization>. These next questions will focus on any changes since we last spoke related to participating in and coordinating with multiple cooperative agreements.*

1. During the Evaluability Assessment we learned that your organization was <coordination across NOFO name(s)>. Is this still an accurate reflection of how your organization is coordinating across <NOFO name(s)>? Have there been any changes since we last spoke?

**Probes:**

* How is your organization coordinating across <NOFO name(s)> to maximize resources and avoid duplication of effort?
	+ How does your organization leverage funding across NOFOs?
	+ How does your organization leverage partnerships across NOFOs?
	+ How has your organization coordinated resources for shared impact across NOFOs?
	+ [If implementing both the National and Innovative CVH Programs] How are you coordinating learning collaboratives for The National and Innovative CVH Programs?
1. During our last interview we heard that <advantages of participating in or coordinating with multiple NOFOs referenced in previous interview>, have these advantages persisted?

**Probes:**

* Have any new advantages of participating in and/or coordinating with multiple NOFOs emerged?
* How has participating in and/or coordinating with multiple NOFOs helped to maximize the impact of hypertension control and other CVD outcomes?

1. In the previous interview <you/your colleague> referenced that challenges to participating in more than one NOFO or coordinating with other NOFOs included <challenges referenced in previous interview>. Have these challenges persisted?

**Probe:**

* Have any new challenges emerged?

**Effectiveness of CCL**

*The following questions are going to ask you about effective practices for implementing program strategies. We are interested in learning more about the resources and support provided to partner organizations for implementing <CCL activities>.*

[*Interviewer Note:* Only ask questions aligned to the sub-strategy for which the recipient has self-nominated.]

[*Interviewer Note:* For Questions 15 through 17, be familiar with the previous logic model/measures so that we can probe if there is no mention about outcomes that were going to be tracked or were previously reported, as indicated in the Evaluability Assessment/Performance Measure Monitoring/Evaluation Reports.]

1. [3A] How have community-clinical links affected the identification of SDOH and responses to social services and support needs?

**Probes:**

* What types of resources or support were most helpful to partners?
* What was the role of the LC in supporting <strategy 3A implementation>?
* What activities were most helpful for:
	+ Identifying SDOH?
	+ Responding to social services and support needs?
* What activities have been most successful for increasing CCL to address social support service needs?
* What specific changes have you observed that have resulted from <above activities>?
* How has the use of <above activities> contributed to achieving <short-term outcomes identified in Evaluability Assessment and other program materials>? How has it contributed to achieving <intermediate outcomes>?
* How has the use of <above activities> contributed to addressing health disparities?
1. [3B] How has the identification and engagement of CHWs by your partners affected continuum of care and services provided?

**Probes:**

* What types of resources or support were most helpful to you partner health systems/clinics?
* What was the role of the LC in supporting <strategy 3B implementation>?
* What activities were most helpful for:
	+ Providing a continuum of care?
	+ Addressing social services and support needs?
* What are best practices for establishing or strengthening new processes or workflows to engage CHWs to provide a continuum of care?
* What specific changes have you observed that have resulted from <above activities>?
* How has the use of <above activities> contributed to achieving <short-term outcomes identified in Evaluability Assessment and other program details>? How has it contributed to achieving <intermediate outcomes>?
* How has the use of <above activities> contributed to addressing health disparities?
1. [3C] How has the use of self-measured blood pressure monitoring (SMBP) with clinical support by partner health systems/clinics address SDOH?

**Probes:**

* What types of resources or support were most helpful to partners?
* What was the role of the LC in supporting <strategy 3C implementation>?
* What activities were most helpful for promoting the use of SMBP?
* What are best practices to enhance or strengthen processes or workflows related to the use of SMBP?
* What specific changes have you observed that have resulted from <above activities>?
* How has the use of <above activities> contributed to achieving <short-term outcomes identified in Evaluability Assessment and other program materials>? How has it contributed to achieving <intermediate outcomes>?
* How has the use of <above activities> contributed to addressing health disparities?

*Now we will ask you questions about reaching your population of focus and health outcomes. We’re interested in outcomes related to advancing healthy equity particularly through identifying and addressing social determinants of health (SDOH) and reducing CVD disparities.*

1. As indicated from <Evaluability Assessment, document review, etc.>, the population of focus for your organization are <population of focus identified>. How effective is your organization in reaching your population of focus?

**Probes:**

* How are <CCL activities> designed to address the specific needs of the <population of focus>?
* How does your organization ensure that <CCL activities> are adaptable to meet the needs of <population of focus>?
* What are examples of how program feedback (e.g., from quality improvement efforts, program data, evaluation data) has been incorporated to improve program implementation?
* How does your organization define reach?
	+ What metrics did your organization use to measure reach?
	+ What are the findings?
* How has reach amongst the <population of focus> changed?
* What are barriers that your organization encountered in reaching the population of focus?
	+ What has helped your organization reach your population?

[*Interviewer Note:* For Question 19, be familiar with the previous logic model/measures so that we can probe if there is no mention about outcomes that were going to be tracked or were previously reported, as indicated in the Evaluability Assessment/Performance Measure Monitoring/Evaluation Reports.]

1. How do <CCL activities being implemented by the Recipient and partner organizations> contribute to patient level outcomes?

**Probes:**

* What changes in health outcomes has your organization observed or measured?
* How do <CCL activities being implemented by the Recipient and partner organizations> support patients to control their blood pressure?
* How has the LC contributed to patient level outcomes?
* What factors support or hinder your organization’s ability to meet patient needs?
1. How have the <CCL activities implemented by the Recipient and partner organizations> contributed to addressing drivers of health inequities?

**Probes:**

* What health inequity drivers have been addressed (e.g., health system and organizational level practices and policies?
* How do <CCL activities being implemented by the Recipient and partner organizations> affect social services and support needs of patients?
* Did the Learning Collaborative provide support for QI and other multidisciplinary partnership efforts to address identified disparities in the diagnosis, care, or health outcomes for your population of focus?
	+ [If yes]- in what ways did the LC provide support?
* In what ways has the reduction in SDOH barriers influenced CVD-related outcomes?

[*Interviewer Note:* For Question 21, be familiar with the previous logic model/measures so that we can probe if there is no mention about outcomes that were going to be tracked or were previously reported, as indicated in the Evaluability Assessment/Performance Measure Monitoring/Evaluation Reports.]

1. Have there been any measured reductions in health disparities as a result of <CCL activities being implemented by the Recipient and partner organizations>?

**Probes:**

* If yes:
	+ What are examples of how health disparities were reduced through implementation of <CCL strategies>?
	+ How does <Recipient and partner activities related to CCL strategy implementation> address gaps in care for your population of focus?
	+ Has the LC impacted capacity to address SDOH and systematic barriers to care?
		- [*If yes*]- in what ways?
* If no:
	+ Are there any barriers that affect your ability to mitigate health disparities? Please describe.
	+ Are there any barriers to measuring changes in health disparities?
* What additional resources are needed to address patient’s unmet SDOH needs?
1. What other outcomes, intended or unintended, have occurred as a result of the sub-strategies?

**Probe:**

* [If recipient reports an unintended outcome] Can you elaborate on the unintended outcome and why this may have resulted?
1. Can you tell us about any processes or outcomes that your organization has achieved as a result of these implemented strategies that you are especially proud of?

**Sustainability** [The National CVH Program]

*For the following questions, we are interested in learning more about your plans and preparation for sustaining the activities related to CCL after the completion of the cooperative agreement.*

1. [3A] What steps has your organization taken to ensure that partners can sustain community-clinical links?

**Probe:**

* Can you share any challenges faced in supporting partners in establishing and strengthening community-clinical links and how they were addressed?
1. [3B] What steps has your organization taken to ensure that partners can sustain using CHWs to provide a continuum of care?

**Probe:**

* Can you share any challenges faced in supporting partner health systems and clinics to engage CHWs in the continuum of care and how they were addressed?
1. [3C] What steps has your organization taken to ensure that partners can sustain the use of SMBP with clinical support?

**Probe:**

* Can you share any challenges faced in supporting partners to use SMBP and how they were addressed?
1. Are any modifications needed to ensure sustainability? If so, what modifications are needed?

**Probe:**

* What additional support, TA, or resources are needed to improve sustainability?

[*Interviewer Note:* Only ask the questions that align with the sub-strategy for which the recipient organization self-nominated]

1. [3A] How do you plan to proceed with activities related to supporting community-clinical links to respond to social services and support needs of patients at highest risk of CVD after completing the cooperative agreement?
2. [3B] How do you plan to proceed with activities related to supporting the engaging CHWs in the continuum of care after completing the cooperative agreement?
3. [3C] How do you plan to proceed with activities to supporting the use of SMBP with clinical support within patients at highest risk of CVD after completing the cooperative agreement?
4. Once the cooperative agreement ends, are there any aspects of <CCL related activities> you will not continue? Are there aspects that you would like to continue but do not feel like you could sustain?
5. Aside from funding, is there any resource, tool, or any type of additional support that would be beneficial to continuing <CCL activities being implemented by the Recipient and partner organizations> after the cooperative agreement? Please explain the impact of this.

**Scalability and Replicability** [The Innovative CVH Program]

*Now we’d like to learn more about the potential for scalability and replicability of program strategies.*

1. Can you describe the community clinical link activities that have been successful in your organization and partner organizations, and for <activities implemented by partners> and could potentially be scalable or replicable?

**Probe:**

* What factors contribute to their scalability?
1. What intervention components would be difficult to replicate or scale up? Please describe why.
2. What program modifications are needed to support replication and scale-up?

**Probe:**

* What changes would you have to make in order to expand your program?
1. What resources are needed to support replication and scale-up?
2. Is there anything else you would like to add about implementation, scalability, or replicability of CCL strategies?

**Special Topics**

[*Interviewer Note:* Only ask these questions if the recipient organization is working on cardiac rehabilitation, hypertension in women, and/or hypertension in pregnant or postpartum people. If not, then skip to end and close out the interview]

[*Interviewer Note*: Ask questions 38-42 if recipient share that they implement cardiac rehab during the Evaluability Assessments]

1. In the Evaluability Assessment interview, <you, key personnel from your organization> shared that <recipient organization> implements cardiac rehabilitation. Is this still true or has it changed since we last spoke?

**Probes:**

* What has changed in the past two years? Why did you make these changes?
	+ How have you expanded <activities>? What progress has been made?
	+ Tell us more about key achievements and major milestones.
	+ Are there any unique or novel approaches that you would like to highlight?
* [If no longer implementing the program activity] Why are you no longer implementing?
1. What factors have helped to support <cardiac rehabilitation activities>?
2. What challenges have you experienced with < cardiac rehabilitation activities >?

**Probes:**

* How are these challenges addressed? What solutions helped to minimize barriers?
* What support, resources, or TA do you need to overcome these barriers?
1. Have there been any measurable improvements in patient level outcomes as a result of <cardiac rehabilitation activities >?

**Probes:**

* + What changes in health outcomes has your organization observed or measured?
1. How do < cardiac rehabilitation activities > contribute to reducing health disparities?

[*Interviewer Note*: Ask questions 43-57 if recipient stated that they implement activities related to hypertension in women during the Evaluability Assessments]

1. In the Evaluability Assessment interview, <you, key personnel from your organization> shared that <recipient organization> focuses on hypertension control in women. Is this still true or has it changed since we last spoke?

**Probes:**

* What has changed in the past two years? Why did you make these changes?
	+ How have you expanded <activities>? What progress has been made?
	+ Tell us more about key achievements and major milestones.
	+ Are there any unique or novel approaches that you would like to highlight?
* [If no longer implementing the program activity] Why are you no longer implementing?
1. What factors have helped to support <activities related to hypertension in women>?
2. What challenges have you experienced with < activities related to hypertension in women >?

**Probes:**

* How are these challenges addressed? What solutions helped to minimize barriers?
* What support, resources, or TA do you need to overcome these barriers?
1. Have there been any measurable improvements in patient level outcomes as a result of < activities related to hypertension in women >?

**Probes:**

* + What changes in health outcomes has your organization observed or measured?
1. How do < activities related to hypertension in women > contribute to reducing health disparities?

[*Interviewer Note*: Ask questions 48-52 if recipient stated that they implement activities related to pregnant or postpartum people during the Evaluability Assessments]

1. In the Evaluability Assessment interview, <you, key personnel from your organization> shared that <recipient organization> focuses on hypertension control in pregnancy and postpartum. Is this still true or has it changed since we last spoke?

**Probes:**

* What has changed in the past two years? Why did you make these changes?
	+ How have you expanded <activities>? What progress has been made?
	+ Tell us more about key achievements and major milestones.
	+ Are there any unique or novel approaches that you would like to highlight?
* [If no longer implementing the program activity] Why are you no longer implementing?
1. What factors have helped to support < activities related to hypertension control in pregnancy or postpartum>?
2. What challenges have you experienced with < activities related to hypertension control in pregnancy or postpartum >?

**Probes:**

* How are these challenges addressed? What solutions helped to minimize barriers?
* What support, resources, or TA do you need to overcome these barriers?
1. Have there been any measurable improvements in patient level outcomes as a result of < activities related to hypertension control in pregnancy or postpartum >?

**Probes:**

* + What changes in health outcomes has your organization observed or measured?
1. How do < activities related to hypertension control in pregnancy or postpartum > contribute to reducing health disparities?

**Close**

*Lastly, what questions do you have for me? Is there anything else you’d like to share?*

*Thank you for your time. This concludes our interview about the clinical-community link strategy for the <Insert cooperative agreement>. If you have any additional questions, please feel free to contact the Comprehensive Evaluation Team,* *hdsp\_nofo\_eval@cdc.gov**.*