

COHORT STUDY PROTOCOLS

INTRODUCTION/CONSENT TO BE USED BEFORE EACH PROTOCOL:

Hello, my name is _____ and I am accompanied by [INTRODUCE OTHERS IN THE ROOM AND THEIR ROLES]. We're researchers at RAND Corporation, which is a non-profit, policy research organization. We are working with Office of the Secretary of Defense for Personnel and Readiness and the Office of Force Resiliency's Violence Prevention Cell, to evaluate the Department of Defense's prevention workforce initiative. Thank you for taking the time to talk today about how [FILL IN SITE NAME] approaches integrated primary prevention. Our questions today are going to focus on how integrated primary prevention is organized at this site; your role and how you've been integrated into this site's prevention work; how you plan and solicit feedback on prevention activities; and strengths and challenges related to integrated primary prevention here.

Before we begin, I want to assure you that your answers will be held in confidence by RAND to the extent allowed by law and DoD policy. [If more than one person in the room: However, there are others in the room so please do not say anything you do not want others to know.] While onsite we are having discussions with many folks who are involved in prevention at this site. Our team will also be reviewing documents, data, and other information collected from your installation. Findings from across these sources will be reported in briefings and reports to DoD, but we would not be naming you specifically in any of those documents. We will be taking notes during all meetings during the site visit discussions, but they will not have your name on them. There should be no discussion of open cases or investigations so as to respect the privacy of individuals who may participate in integrated primary prevention activities at this site.

Your participation is voluntary. Refusal to participate will involve no penalty or loss of benefits to which you are otherwise entitled. You may discontinue participation at any time without penalty or loss of benefits to which you are otherwise entitled. If you have questions about your rights as a participant or need to report a participation-related injury or concern, you can contact RAND's Human Subjects Protection Committee using the contact information provided to you in the read ahead. [HAND THEM THE CONTACT INFORMATION SHEET]

Any questions before we begin?

Protocol #1: Integrated Primary Prevention Personnel

NOTE: Numbers in the boxes in the left margin refer to the specific evaluation questions in the evaluation plan. Do not remove.

Background

Before we dive in, I wanted to highlight that our interviews are really focused specifically on primary prevention activities, rather than any role you might plan in intervention or response efforts. We're especially interested in prevention of suicide, sexual assault, harassment, domestic violence, child abuse, substance use, and retaliation. And in particular, we're interested in *integrated primary prevention* activities (meaning, activities that are meant to stop two or more harmful behaviors before they start). In these first few questions, I'll be asking you more about your role, so you'll be able to tell me about how your time is spent on prevention versus other activities – but then we'll be switching gears to really focus on primary prevention.

1. Can you start by telling me a bit about yourself– what is your official title, and how long have you been in the role?
 - a. What percentage of your time is spent on primary prevention activities?

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6.41

2. What type of background did you have in prevention before this job?
 - a. What type of degree or educational background do you have?
 - b. Do you have any prevention-specific credentials, outside of the DoD credential you obtained for this role? (If needed: For example, the Prevention Specialist certification.)
 - c. Before this job, did you have experience with prevention of harmful behaviors/risk factors – for example, designing, implementing, and/or evaluating prevention activities? Can you give me some examples?

Prevention Efforts at this Site

3. Can you tell me about how prevention is organized at this site?

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- a. How many integrated primary preventionist personnel are there at this site – that is, personnel whose work is focused on integrated primary prevention?
- b. (For more senior preventionists) Have all the Integrated Primary Prevention personnel billets been filled at this site?
 - i. If no, which ones are vacant? For how long?
 - ii. When those additional billets get filled, what duties will those personnel be responsible for?
- c. Is the number of Integrated Primary Prevention personnel here enough to properly accomplish the prevention goals here?
- d. [If there are multiple Integrated Primary Prevention personnel] How do you work together with other Integrated Primary Prevention personnel?
 - i. Probe: Do you meet regularly?
- e. What types of other offices or positions are involved in prevention work? Which of these are involved in integrated primary prevention?
- f. If there are multiple commands at this site, who leads prevention efforts? For example, do Integrated Primary Prevention personnel from across commands collaborate, or do they focus on prevention for their command (rather than the site or installation)?

4. Who oversees prevention efforts at this site?

5. What position does your direct supervisor hold– that is, the position of the person to whom you report? (Potential options: installation commander, other installation-level staff, prevention personnel or commander located at a different installation or higher level)
 - a. Potential probes: What role does the installation commander have in supervising your work? Are there other entities at this site that have responsibility for overseeing your work, and if so, what are those?

Note: If interviewee describes having a supervisor at this site who is someone other than the commander (e.g., someone within the Fleet and Family Support Center or another prevention/intervention program), we should interview that person using Protocol #4.

6. How prepared were you to start as an Integrated Primary Prevention personnel? (Inner Setting – Readiness for Implementation – Access to Knowledge and Information)
 - a. What types of trainings did you have, if any, as you started in your role? What topics did they cover? Were they topics that were relevant or helpful in the work you're now performing?
 - b. Who provided these trainings?
7. What are your responsibilities as part of the Integrated Primary Prevention Workforce?
 - a. Potential probes: Develop integrated prevention plan, Support command climate assessment, Plan and execute prevention activities, Collect and analyze data to evaluate prevention efforts, Collaborate with key stakeholders

Readiness for Preventionists and Site Climate

8. When you were hired, how prepared did it seem [this site] was to integrate Integrated Primary Prevention personnel into the site? (Baseline) (Inner Setting – Readiness for Implementation – Access to Knowledge and Information)
 - a. Was your role well understood by senior leaders?
 - b. How were you oriented to your role?
 - c. How well are IPP personnel currently integrated? How has this changed over time?
9. Have you had all the resources you need to **plan** high quality prevention activities (Resources can include having the budget, staff, materials, space, or time with service members needed for prevention) (Baseline, Follow-up) (Inner Setting – Readiness for Implementation – Available Resources)
 - a. What about to **deliver** high quality prevention activities within your normal duty hours? (Potential probes: Budget, installation resources or facilities, time availability)
 - b. What types of resources have been most beneficial?
 - c. What types of resources are missing? Are you going to be able to get these resources? Why or why not?
10. How do you interact with your site's leadership? About what types of topics or situations? (Baseline, Follow-up) (Inner Setting – Readiness for Implementation – Leadership Engagement)
 - a. For example, do they provide input or feedback on the site's prevention needs?
 - i. If so, what is their input based on? (Potential probes: Data-informed, observation, opinion)
 - b. Do you brief [leader] on the progress of your prevention efforts? Do they review

evaluation findings?

- c. Has the relationship between site leadership and Integrated Primary Prevention personnel changed over time? How so? (Follow-up)

11. How supportive has the leadership of this site been of prevention activities? (Baseline, Follow-up) (Inner Setting – Readiness for Implementation – Leadership Engagement)

- a. What types of leaders have been most supportive of prevention activities?
b. What kind of support, if any, have they given you? Can you provide specific examples?
c. Have they put up any barriers? If yes, what are examples?
d. Have leaders been receptive to the prevention activities that have occurred since entered this role?

1.93
6.22

12. Have you been collaborating with other Integrated Primary Prevention personnel at this site (i.e., the newly hired ones)? Can you give me some examples? (Baseline, Follow-up)

2.13

13. How have you and your efforts been integrated into any prevention processes that predated your start? For example, this could include meetings of all prevention staff, running prevention efforts, collection of data related to prevention, or things like that?

14. What type of communication and/or support do you receive from Integrated Primary Prevention personnel at other levels – for example, those at the operational or strategic level?
a. How do they communicate with you?
b. What types of things do they communicate with you?
c. Do you feel like you have enough support from Integrated Primary Prevention personnel at those levels? Why or why not?

15. What types of interactions do you have with other stakeholders outside this site about prevention – for example, with Integrated Primary Prevention personnel at other installations or leadership outside of this site? (Baseline, Follow-up)

- a. Are there ways that you communicate or share information with them? How so? About what types of topics? (Outer Setting - Cosmopolitanism)

16. How receptive are service members at this site to prevention activities? (Baseline, Follow-up) (Inner Setting – Implementation Climate – Compatibility; Tension for Change)

1.83

- a. Can you give an example of a time that they were particularly receptive? Can you give an example of a time that it seemed that they were not receptive?
b. Are there certain types of activities that seem to be better received? What are examples are they?

17. Can you tell me about your role supporting the command climate assessments?

2.2.5

Integrated Prevention Plan and Approach to Planning Prevention Activities

Now, I have some questions about this site's integrated prevention plan and approach to planning prevention activities.

2.2.5

18. Have you been involved in the development or update of a comprehensive integrated prevention plan since being hired? (If yes) What is the current status of the plan? (Potential probes: Completed, in progress, in planning stages)

a. Was there a prevention plan in place when you arrived?

19. What collaborators or partners have been involved in the development of the integrated prevention plan, and what have their roles been? (Key Stakeholders)

20. Did you have sufficient access to data to develop the plan?

6.2.1

a. What data or sources of information were used to develop the plan? (Potential probes: Community needs assessment, Other sources)

b. How did you use the command climate assessment data?

c. How did you use these sources of data to develop the plan?

21. How often is the plan updated?

a. What are the circumstances in which an update is made? (Potential probes: change of command, data related to success of the prevention plan, guidance from service branch)

22. (If prevention plan is available) We've had the chance to review the last version of your prevention plan. Are there any prevention activities that aren't reflected on this? If so, could you describe those in maybe 1-2 sentences?

(If prevention plan is not available) Could you describe the prevention activities you've been involved with in the last 6 months? Just 1-2 sentences for each activity would be helpful – maybe what the focus of the activity was, who the target population is, and what type of activity it was (e.g., a prevention event, developing a new policy).

23. Can you walk me through your approach to planning prevention activities? (Baseline, Follow-up) (Inner Setting – Readiness for Implementation – Access to Knowledge and Information)

a. Who is involved in activity planning?

b. How do you decide what the focus of the activity will be, in terms of content, target population, etc.?

c. Are there any sources of data that you use to guide your prevention planning?

24. What have been the highest-priority prevention activities for this site? (Potential probes: With respect to content, target population) (Baseline, Follow-up) (Inner Setting – Implementation Climate – Relative Priority)

25. Are any of the prevention activities that you plan, required? Can you tell me more about the focus of those activities?

- a. Who decides if the activity is required?
- b. How do you or other stakeholders at the site, such as unit leaders, encourage participation on the part of all service members?

26. Do you collaborate with other personnel (meaning not the newly hired Integrated Primary Prevention personnel) or groups at the site as part of your prevention activities? Which personnel or groups? (Baseline, Follow-up) (Key Stakeholders)

2.13

27. What is your communication or education strategy for getting the word out about this new prevention initiative and the activities you plan? (Baseline, Follow-up) (Key Stakeholders)

2.25

- a. What materials/modes/venues do you use (or plan to use)?
- b. What process do you use (or plan to use) to communicate? For example, going to staff meetings, talking to people informally?
- c. How are these activities reflected in your plan?

Evaluation

28. How do you receive feedback following a prevention activity? (Baseline, Follow-up) (Inner Setting – Implementation Climate – Goals & Feedback)

2.4.2

- a. Is feedback being elicited from service members who participate in prevention activities?
- b. Is feedback being provided by your leadership?
- c. [If yes] What kind of feedback? In what formats (for example, formal versus informal)?
- d. How is it analyzed?
- e. Have there been any barriers to collecting evaluation data, such as approvals needed for data collection or program evaluation, or expertise or resources for data analysis?

29. Have you or your supervisors set goals for **implementation** of prevention activities? For example, in terms of the number of activities or frequency of activities, quality of implementation, or level of participation you expect to achieve? (Baseline, Follow-up) (Process - Reflecting and Evaluating)

6.2.1

- a. How do you assess progress towards implementation goals?
- b. Do you have access to the data you need to evaluate implementation goals?
- c. What data do you use? (Process – Reflecting and Evaluating)

30. Have you or your supervisors set goals for the **outcomes** of your prevention activities on personnel in your setting? For example, in terms of the personnel responses on evaluation surveys or number of incidents of harmful behaviors? (Baseline, Follow-up) (Process - Reflecting and Evaluating)

6.2.1

- a. Do you have access to the data you need to evaluate outcomes?
- b. How do you assess progress towards outcomes?
- c. What data do you use? Do you conduct formal evaluations? (Process – Reflecting and Evaluating)

Overarching Barriers and Facilitators

2.6.1

31. Has the hiring of the Integrated Primary Prevention personnel been implemented according to plan at this site? Has your role been consistent with the guidance you've received? (Baseline, Follow-up) (Process – Executing)
 - c. What has made implementation easier? What has made implementation successful?
 - d. What has gotten in the way?
 - e. What hasn't gone to plan?
 - f. How has the initiative evolved over time at this site? (Follow-up)
32. What are the most significant challenges to providing high-quality integrated primary prevention activities at this site?
33. What have been the most important factors facilitating your efforts to provide high-quality integrated primary prevention activities (e.g., leadership support, centralized preventionist resources, collaborations with other site staff)?

Sample Prevention Activity (all items Baseline, Follow-up)

One thing that we want to do with these interviews is use them to learn more about one of the prevention activities that you've implemented since entering this role. We know that you submit prevention activities via the prevention activity tracker, so we did a review of those submissions and wanted to ask you some questions about [NAME ACTIVITY HERE].

- 6.1.1
1. Can you tell me how this activity came about?
 - a. What was the focus of the prevention activity?
 - i. Note to interviewers: List of risk factors and outcomes relevant to this project include prevention of suicide, sexual assault, harassment, domestic violence, child abuse, substance use, and retaliation. You may list some of these as examples. Also assess whether the activity addressed multiple behaviors (i.e., integrative prevention), and/or addressed any topics outside of this list.
 - b. What is the evidence-base of this activity—in other words, what research evidence is there for this activity?
 - c. Who was the target audience for the activity? (e.g., rank, unit)
 - d. How did you decide on the focus of this activity? (e.g., data on risk factors, recommendation from a stakeholder or service member)
 2. I know some basic details of the activity, but could you walk me through the activity itself?
 - a. What was the format of the activity, and how did you decide what format to use?
 - b. What types of materials or resources did you use to plan and implement the activity?
 - i. Did you make any adaptations based on these materials – for example, changes you made so it would be a better fit for the military or this site?
 - c. How did you advertise the activity?
 - d. How many people participated?
 3. How was the activity received? Were people who participated actively engaged? Did they seem satisfied?
 4. Was the activity evaluated? For example, any surveys of service members? Tracking incidents of harmful behaviors?
 5. If this activity was a success, what do you think the impact will be at this site/in this command? (e.g., will change service member behavior, will raise awareness)
 - a. Is there a way to measure whether this goal has been achieved? If so, what? If no, what are the obstacles to measuring the outcomes?

Additional Questions for Sites/Commands Without Full Complement of Integrated Primary Prevention Personnel

1. What do you know about the plans to hire the remaining prevention staff? (Potential probes: Number of people to be hired, levels, timeline) (Baseline)

2. What types of things is the site/command doing to prepare for hiring those additional Integrated Primary Prevention personnel? (Baseline)
3. How do you expect your role will change after the remaining Integrated Primary Prevention personnel have been hired, if at all? (Baseline)
4. Are there things you haven't been able to accomplish because the site does not have all its prevention roles filled? What are those things? What do you expect to be able to accomplish once all the Integrated Primary Prevention personnel have been hired? (Baseline)

Conclusion

1. Is there anything that I haven't asked already that you think would be helpful for me to know about your work or about prevention at this site?

Protocol #2: Other Prevention Staff (e.g., Family Advocacy, SAPR-VA)

Background

Before we dive in, I wanted to highlight that our interviews are really focused specifically on *integrated primary prevention* activities (meaning, activities that are meant to stop two or more harmful behaviors before they start) – so please keep that framing in mind when answering these questions.

1. Can you start by telling me a bit about yourself – what is your role, and how long have you been in the role? (Baseline, Follow-up)
2. How is prevention organized at this site? (Baseline, Follow-up)
 - a. How does integrated primary prevention fit into this?
3. Are there established and/or published integrated primary prevention goals at this site?
 - a. Who developed them?
 - b. How are they communicated?
4. How many Integrated Primary Prevention personnel are there at this site – that is, preventionists whose work is focused on integrated primary prevention?
 - a. Is number of integrated primary preventionists here enough to properly accomplish the integrated prevention goals here?
 - b. How do you work together?
5. What types of other offices or positions are involved in prevention work?
6. What is your role in prevention? (Baseline, Follow-up)
7. Has your role in prevention changed since the hiring of the Integrated Primary Prevention personnel? Do you expect your role in prevention will change with the hiring of the Integrated Primary Prevention personnel? How so? (Baseline, Follow-up)
8. Did the Integrated Primary Prevention personnel replace any of the responsibilities or roles that used to be held by other prevention staff? If so, what? (Inner Setting – Readiness for Implementation – Compatibility)
9. Will you be/Have you been collaborating with the Integrated Primary Prevention personnel in any way? Can you give me some examples? (Baseline, Follow-up)
10. How have the Integrated Primary Prevention personnel and their efforts been integrated into current processes here?
 - a. Do they have an opportunity to collaborate with other prevention staff at this site, if there are any?
 - b. Are they invited to regular meetings of prevention staff, if those exist? For example, we're thinking about meetings that are used to plan events or evaluate prevention needs, not simply case management meetings.

1.45
6.51

2.1.3

Readiness for Preventionists and Site Climate

- 1.8.2
11. How prepared is/was [site] to integrate Integrated Primary Prevention personnel into this site? (Baseline) (Inner Setting – Readiness for Implementation – Access to Knowledge and Information)
12. Is there a comprehensive integrated prevention plan in place?
13. Does the site have all the resources it needs to integrate the Integrated Primary Prevention personnel and host high quality prevention activities? These can include having the budget, staff, materials, space, or time with service members needed for prevention.
- a. Potential probe: What about integrated prevention? Are there any additional resource needs specific to that type of prevention?
14. What types of communication have there been about the Integrated Primary Prevention personnel and their role to other prevention and intervention staff at the site? (Baseline, Follow-up) (Key Stakeholders)
15. What types of communication have there been about the Integrated Primary Prevention personnel and their role to service members at this site? (Baseline, Follow-up) (Intervention Participants)
- 1.9.3
16. How supportive has the leadership of your site been of prevention activities? (Baseline, Follow-up) (Inner Setting – Readiness for Implementation – Leadership Engagement)
- a. What leaders?
- b. What kind of support, if any, have they given you? Can you provide specific examples?
- c. Have they put up any barriers? If yes, what are examples?
- d. Has leadership provided any more or less support for prevention since the hiring of the Integrated Primary Prevention personnel?
- e. Does leadership provide different types of support for integrated primary prevention compared to other prevention activities?
- 1.8.3
17. What types of integrated prevention activities have been taking place at this site over the last 6 months? How receptive are service members at this site to prevention activities? (Baseline, Follow-up) (Inner Setting – Implementation Climate – Compatibility; Tension for Change)
- a. Are there certain types of activities that seem to be better received? What are they?
- b. Have you noticed any change in the service members' receptiveness of prevention since the hiring of the Integrated Primary Prevention personnel?

18. Is there a strong need for dedicated prevention personnel at this site – that is, prevention staff whose roles are fully focused on prevention? (Baseline, Follow-up) (Tension for Change)

1.84

- a. Why or why not?
- b. Do others see a need for it?

Perceptions of Preventionists and Prevention Activities

19. How effective do you think the Integrated Primary Prevention personnel have been? (Baseline, Follow-up)

1.31

- a. How do you know if they've been an effective addition to this location? What sources of data?
- b. What has been the most effective impact of the Integrated Primary Prevention personnel at this site? (Baseline, Follow-up)
- c. The least effective?

2.61

20. Are there still gaps related to prevention that are not being addressed? What are those? Are there barriers that are getting in the way? IF yes, what are they? (Baseline, Follow-up)

21. What are the most significant challenges to providing high-quality prevention activities at this site? (Baseline, Follow-up)

22. What are the strengths of this site's prevention efforts? (Baseline, Follow-up)

Protocol #3 : Installation Command/Unit Commanders

With this interview, we're interested in asking some questions about prevention efforts at this site, as well as some questions about the Integrated Primary Prevention personnel who have been hired/are being hired. Before we dive in, if I ask any questions that you don't know the answer to because they're too "in the weeds," let me know and we can skip those. I also I wanted to highlight that when we refer to "prevention," we are focused specifically on primary prevention activities, meaning activities intended to stop harmful behaviors before they start. And when we talk about "integrated primary prevention," we're specifically referring to activities that are meant to stop two or more harmful behaviors before they start.

1. Can you start by telling me what your role is/will be in overseeing the work of the Integrated Primary Prevention personnel at this site?
 - a. For example, are you responsible for setting prevention priorities, working with Integrated Primary Prevention personnel to ensure their activities are meeting the needs of service members, evaluating the effectiveness of their activities?
 - b. Do you have any role in their hiring?
2. How do you see primary prevention at this site? What goals does this site have when it comes to primary prevention?

Implementation Climate

3. How much of a need is there for full-time prevention personnel at this site? (Tension for Change)

- 1.8.4

 - a. Why or why not?
 - b. Do others see a need for it?
 - c. Are any prevention activities required? Or strictly voluntary?
 - d. Have there been any changes in the need for prevention staff over time over the last couple of years? (Follow-up)
 - e. Have the Integrated Primary Prevention personnel filled a gap on this site when it comes to the prevention strategy? Why or why not?

4. How essential are the Integrated Primary Prevention personnel and their prevention activities, in terms of meeting the needs of service members at this site and helping to

- 1.8.4

 - l maintain their readiness? (Tension for Change)
 - a. Are the Integrated Primary Prevention personnel filling a role/will they fill a role that wasn't previously filled at this site? Who was previously responsible for the activities that that the Integrated Primary Prevention personnel are now filling?

5. How have the prevention activities been received?

- 1.8.3

 - a. How do you think service members will respond/are responding to the Integrated Primary Prevention personnel and prevention activities? (Patients Needs and Resources)
 - b. Are the Integrated Primary Prevention personnel and their activities addressing needs that weren't previously being met at this site?

Readiness for Implementation

- 1.93
6. Do you feel you have enough resources to support the Integrated Primary Prevention personnel?
7. Do you feel you have enough information to support the Integrated Primary Prevention personnel? (**Access to Knowledge and Information**)
- a. Has there been any briefing or training to prepare you?
- b. [If yes] What training?
8. How are you supporting the Integrated Primary Prevention personnel and their efforts to becoming integrated into existing prevention processes and workflows at this site – for example, planning of events or evaluating the site's prevention needs? (**Compatibility**)
- 1.82
- a. How has it interacted or conflicted with current programs or processes?
- b. What kinds of changes or alterations do you think you will need to make/have you needed to make to the Integrated Primary Prevention personnel role so it works effectively at your site? (**Intervention Characteristics - Adaptability**)
9. What kinds of information and materials about the Integrated Primary Prevention personnel have been made available to you/were made available to you? (**Access to Knowledge and Information**)
- 1.92
- a. Has it been timely? Relevant? Sufficient?
10. How are you supporting the strategy for getting the word out about the hiring of the Integrated Primary Prevention personnel and their activities?
- 1.85
- a. How will you communicate about their role to other prevention staff at this site? (**Key Stakeholders**)
- b. How will you communicate about their role with service members and families at this site? (**Intervention Participants**)
- c. What materials/modes/venues do you plan to use?
- d. What process do you plan to use to communicate? For example, going to staff meetings, talking to people informally?

Feedback and Evaluation

11. How effective do you think that the Integrated Primary Prevention personnel have been?
- 1.31
- a. How do you know if they've been an effective addition to this site? Has there been any evaluation of the prevention activities? What sources of data?
- b. What has been most effective?
- c. What has been least effective?

12. Are there still gaps related to prevention that are not being addressed? What are those? Are there barriers getting in the way? If yes, what barriers?

2.61

13. What are the most significant challenges to providing high-quality prevention activities at this site? (Baseline, Follow-up)

Protocol #4: Site-Level Supervisors/Managers, non-Command

With this interview, we're interested in understanding the roles of the Integrated Primary Prevention personnel at this site, and how their role fits with other prevention activities at the site.

1. Can you start by telling me a bit about yourself – what is your role, and how long have you been in the role?

2. How many Integrated Primary Prevention personnel do you have here now and how long have they been here?

- a. Do you think there are enough Integrated Primary Prevention personnel here to accomplish the prevention goals here?
- b. Are you planning to hire more? If yes, how many and by when?
- c. What factors have influenced your site's hiring efforts? (Probes: DoD policy, availability of qualified candidates)

3. What type of role do you have in overseeing the work of the Integrated Primary Prevention personnel and/or collaborating with them?

- a. For example, are you responsible for setting prevention priorities, working with Integrated Primary Prevention personnel to ensure their activities are meeting the needs of service members, evaluating the effectiveness of their activities?
- b. Do you make budgeting or resource allocation decisions for Integrated Primary Prevention personnel or their activities (e.g., facilities, supplies, licenses, money)? If yes, what is the budget for them?

4. Has your role in prevention changed since the hiring of the Integrated Primary Prevention personnel /do you expect your role in prevention will change with their hiring? How so?

5. Did the Integrated Primary Prevention personnel replace any of the responsibilities or roles that used to be held by other prevention staff? If so, what? (Inner Setting – Readiness for Implementation – Compatibility)

Readiness for Implementation

6. Given [INFO FROM #2—i.e., based on their experience with their Integrated Primary Prevention personnel], do you think there is a need for dedicated prevention personnel at this site? (Tension for Change)

- a. Why or why not?
- b. Do others see a need for it?

7. How ready was/is your site to hire Integrated Primary Prevention personnel?

1.8.2

8. What have you done (or what do you plan to do) to get a plan in place to prepare for their hiring? (Process - Planning)

1.8.5

9. What role, if any, have you had in orienting or onboarding Integrated Primary Prevention personnel?

1.8.5

Are there any standard orientation/onboarding processes or materials for Integrated Primary Prevention personnel? If so, what was the approach in designing them, and are there materials we may review?

10. Do you have enough resources to support the Integrated Primary Prevention personnel?

2.1.2

11. Do you feel you have enough information about the purpose of the Integrated Primary Prevention personnel or the scope of their role to support them? (Access to Knowledge and Information)

1.9.3

12. What kinds of information and materials about the Integrated Primary Prevention personnel have been made available to you/were made available to you? (Access to Knowledge and Information)

Has it been timely? Relevant? Sufficient?

13. How have the Integrated Primary Prevention personnel and their efforts been integrated into current processes? (Compatibility)

1.8.2

Do they have an opportunity to collaborate with other prevention staff at this site, if there are any?
Are they invited to regular meetings?
Do they brief you on progress of their prevention efforts?
What kinds of changes or alterations do you think you will need to make to the prevention workforce initiative so it will work effectively at this site? (Intervention Characteristics - Adaptability)

14. Have you encountered any differing perspectives between the site and HQ level management and oversight on integrating the Integrated Primary Prevention personnel and their activities?

1.1.2

If so, what were they? Were they complementary or at odds? How have those differences been addressed (if they have)?

15. What was/is your communication strategy (for getting the word out about the hiring of the Integrated Primary Prevention personnel and their activities)?

1.85

- How have you/will you communicate about their role to other prevention staff at this site? (Key Stakeholders)
- How have you/will you communicate about their role with service members and families at this site? (Intervention Participants)
- What materials/modes/venues have you used/do you plan to use?
- What process have you used/do you plan to use to communicate? For example, going to staff meetings, talking to people informally?

16. How do service members on this installation feel about current prevention activities? (Tension for Change)

1.84

- To what extent did previous prevention activities fail to meet existing needs? Are the Integrated Primary Prevention personnel and their efforts meeting these needs? If so, how?

Feedback and Evaluation

17. How often do you receive briefings or other types of information about the Integrated Primary Prevention personnel or their activities?

2.42

- What do you receive and how is it provided? (e.g., evaluation reports, data on impacts on harmful behavior)
- What do you do with that information?
- May we have any samples or blank templates as examples?

18. What role do/will you have in assessing the Integrated Primary Prevention personnel's work? How are you/will you be assessing their work? (Reflecting and Evaluating)

19. Is feedback being elicited from service members who participate in a prevention activity or activities? (Reflecting and Evaluating)

- [If yes] What kind of feedback? How is it being collected (for example, formal versus informal methods of collecting feedback)?

20. Have you heard stories about the experiences of participants with activity? Can you give me some examples? (Patients Needs and Resources)

Impact

1.31

21. What do you anticipate the impact of the Integrated Primary Prevention personnel will be?

22. What impact have you seen thus far? How were you able to identify that impact?

- a. Probe for types of impacts: Was any kind of evaluation conducted? Was any data collected on frequency and quality of prevention efforts, reach, ability to integrate violence prevention efforts, improved data collection and monitoring, impact on risk and protective factors, impact on harmful behaviors