

Qualitative Interview Guide for People Who Are Incarcerated

Participant ID _____

Interview Date (MM/DD/YYYY) _____

Introduction Script:

My name is (INSERT INTERVIEWER NAME), a [INSERT POSITION] at [REDACTED] and part of a research team investigating the facilitators and barriers to practicing antimicrobial stewardship in jails & prisons.

Thank you on behalf of my team for agreeing to be part of this interview. We appreciate your time and willingness to participate. I will be asking you a series of questions regarding antibiotic prescribing and administration practices within (INSERT FACILITY NAME). All interviews will be used to help inform us of how we can improve carceral health and use of antibiotics through quality improvement initiatives related to antibiotic prescribing. We value all information that you can give to us.

There are no “right” or “wrong” answers to your questions. We want to hear anything that you want to talk about.

Waiver of name inclusion

We do not need to have your name linked with the information we collect during this interview. Please select one:

Yes: Please link my name to the information being collected. My name will be kept confidential and not reported in any research. But, researchers will have my name linked to an ID.

Name: _____

No: Please do not link my name to the information from the interview.

If permission to use audio recorders is granted by facility: In order to make sure that I have an accurate reporting of information from your interview, I will use an audio recorder to record our conversation. If you do not feel comfortable with me audio recording this interview, we can continue the interview without it being recorded. If so, I will be taking notes while I ask the questions. I may ask you to pause or repeat something.

Do I have your permission to audio record this interview? YES NO

If permission to use audio recorders is not granted by facility: In order to make sure that I have an accurate reporting of your responses in this interview, I will be taking notes. I may ask you to pause or repeat something. I will not include your name on anything that I write.

If you do not feel comfortable answering a question, it is okay for you to tell me that you do not want to answer. If there’s a question that you would prefer not to answer, you may simply say “pass”. You can also choose to stop this interview at any time and for any reason.

Your decision to participate or not participate will not change your health care or the time you are serving in jail.

Before we begin, do you have any questions?

Time Interview Started: _____ AM/PM

Time Interview Ended: _____ AM/PM

Signature of person performing interview: _____

Icebreaker: What is your favorite season and why?

Framing: We're going to be talking about antibiotics in this interview. I will be asking your opinions about getting antibiotics in jail. Please feel comfortable talking about how you may feel towards any of these topics as, again, everything you say will remain confidential.

Interviewer Questions	Probes
A. Healthcare and Antibiotics	
Tell me what it's like to get medical treatment in jail.	<p>What steps do you need to take to receive medical treatment?</p> <p>What kind of healthcare provider do you normally see (this might be a nurse or a doctor)? How does the provider type differ?</p> <p>Can you describe what is like to meet with the healthcare provider?</p> <p>How long is a typical appointment with a provider?</p> <p>What are some barriers to getting medical treatment in jail?</p>
On a scale of 1-10, how satisfied are you with the medical treatment in jail?	Tell me about why you chose that number.
What do you think is the most common infection in jail?	<p>How was the infection treated?</p> <p>How common do you think it is for you or someone you know to be taking antibiotics in jail?</p>
Have you ever been treated for an infection while incarcerated?	<p>If YES:</p> <ul style="list-style-type: none"> - How was it treated? <p>If ANTIBIOTICS:</p> <ul style="list-style-type: none"> - Which antibiotic? - How often and how long did you take the antibiotic? - What were the instructions for taking the antibiotics - Did you have concerns about side effects from the antibiotics? - Did you have any side-effects? - How do you feel about taking antibiotics in jail? <p>If NO history of INFECTION</p> <ul style="list-style-type: none"> - Do you know of any people in jail with infections? - How were they treated? - Do you see people get antibiotics on med line?
B. Interactions with Providers and Nurses	
Have you ever had an experience where you wanted a specific antibiotic prescribed, but your provider refused	<p>IF YES:</p> <p>Which antibiotic did you ask for?</p>

<p>to prescribe antibiotics or prescribed something else?</p>	<p>Why did you want that antibiotic?</p> <p>How did you hear about that antibiotic?</p> <p>How did the provider respond?</p> <p>How did this experience influence future medical treatment you sought out?</p>
<p>How are antibiotics given at your facility?</p>	<p>Who normally gives out medications?</p> <p>Are they given as “keep on person” or med-line?</p> <p>What are your or your fellow inmates’ opinions about KOP vs med-line medications?</p> <p>How do you think having a medication be keep on person vs med-line will change how someone takes it?</p>
<p>If someone had a question about their antibiotic, who would they ask?</p>	<p>What’s the process like to ask this kind of follow-up question?</p> <p>How long does it take to get answers?</p> <p>Have you ever witnessed or heard of someone who had a bad side effect or allergic reaction to an antibiotic? What happened?</p>
<p>Are you allergic to penicillin or any other penicillin-like antibiotics?</p>	<p>If yes: continue to section C If no: continue to section D</p>
<p>C. Penicillin Allergy</p>	
<p>Tell me about any times you had to get treated for infections.</p>	<p>Any skin or soft tissue infections? Pneumonia? Sinusitis? UTIs? Sexually transmitted infections?</p> <p>Have you ever taken any “cillins,” like “amoxicillin?”</p> <p>Do you think you have had any antibiotics similar to penicillin? Examples of these include: cephalosporins, cefalexin and ceftriaxone.</p>
<p>Have you ever heard of probiotics?</p>	<p>What do you think about them?</p>
<p>Tell me about times you discussed your penicillin allergy with your doctor</p>	<p>How do you feel when a doctor or nurse asks you if you have any allergies?</p> <p>How do you feel when you tell them you have an allergy?</p>
<p>Has your primary care clinician ever discussed penicillin allergy testing with you?</p>	<p>Tell me about the conversation.</p>
<p>How would you feel if someone told you that you no longer had a penicillin allergy?</p>	<p>Has anyone ever suggested this to you before?</p>

D. Perceptions of Antibiotic Resistance	
What comes to mind when you hear the term “antibiotic resistance?”	Where did you first hear it? When did you first hear about it? What do you think causes antibiotic resistance or makes it get worse?
Who do you think is most affected by antibiotic resistance?	Why do you think this? How do you think antibiotic resistance affects you?
Have you experienced any differences in prescription practices throughout your time while incarcerated?	Explain. Which did you prefer?
E. Perceptions of Antibiotic Stewardship	
What are your perceptions of the providers’ and nurses’ opinions on antibiotic resistance at this facility?	Do you think they’ve received enough training on antibiotic resistance? What would be the best way to start conversations about preventing antibiotic resistance in your facility? Do you think resources used outside of prisons or jails to educate people about antibiotic resistance would work in jails or prisons? Why or why not?
Do you know of any guidelines that regulate the antibiotics that providers can prescribe to people who are incarcerated?	IF YES: <ul style="list-style-type: none"> - How did you find out about these guidelines? - Do you agree with these guidelines? IF NO: <ul style="list-style-type: none"> - Do you think there should be guidelines in place that make antibiotic prescribing consistent between jail and prison facilities? - Do you think providers at your prisons and jails should get feedback on their prescribing practices?
What comes to mind when you hear the term “antimicrobial stewardship?”	IF THEY’VE HEARD OF IT: <ul style="list-style-type: none"> - Tell me about the first time you heard this phrase. - Have you heard of antimicrobial stewardship activities in carceral settings?
What changes do you think could be made to jail and prison systems across the country to reduce antibiotic resistance?	Who would need to be involved to make these changes? What barriers might come up? What might facilitate these changes?
How would you feel about an interstate database that kept track of	Do you think it would decrease antibiotic use?

Guía para Entrevista Cualitativa en Personas Encarceladas

ID del Participante _____
Fecha de la entrevista (MM/DD/YYYY) _____

Introducción del Guion:

Mi nombre es (NOMBRE DE ENTREVISTADOR), soy [POSICION DE ENTREVISTADOR] en [REDACTED] y soy parte de un grupo de investigación que busca identificar barreras en la administración de antibióticos en cárceles y prisiones.

Le doy las gracias por participar en esta entrevista. Apreciamos su tiempo y disposición en participar en este proyecto. Le voy a preguntar una serie de preguntas pertinente a la administración de antibióticos y la practica en general de los mismos en (NOMBRE DE INSTALACION).

Estas entrevistas van a ayudar a informar cómo mejorar los servicios de salud en cárceles y formular proyectos con iniciativas para mejorar la calidad del cuidado ofrecido en el futuro. Valoramos la información que nos provee con esta entrevista.

No hay una contestación incorrecta o correcta. Queremos escuchar su perspectiva y cualquier tema que usted crea relevante.

No necesitamos que su nombre esté vinculado con la información que recopilamos durante este entrevista. Por favor seleccione uno:

SÍ: Por favor, vincule mi nombre a la información que se recopila. Mi nombre se mantendrá confidencial y no se informará en ninguna investigación. Pero los investigadores tendrán mi nombre vinculado a una identificación.

Nombre: _____

No: Por favor no vincule mi nombre a la información de la entrevista.

Tengo permiso para grabar audio: Para poder estar seguro de reportar la información provista en esta entrevista con precisión, voy a utilizar una grabadora de audio. Si usted no está de acuerdo con la grabación de audio, podemos continuar la entrevista sin audio, pero voy a tomar notas escritas mientras hago preguntas. Esto significa que voy a tomar varias pausas durante la conversación para poder tomar nota.

¿Tengo permiso para grabar audio en esta entrevista? **SÍ** **NO**

NO tengo permiso para grabar audio: Voy a tomar notas escritas mientras hago preguntas. Esto significa que voy a tomar pausas durante la conversación para poder tomar notas o que tenga que pedirle que me repita algo que no haya entendido bien para clarificar. No voy a incluir nombres en nada de lo que escriba.

Si no te sientes cómodo contestando ciertas preguntas, por favor me lo dejas saber sin ningún problema. Puedes decirme “pasemos a la próxima pregunta” si prefieres no contestar. Siempre tienes la opción de parar la entrevista si no te sientes cómodo. La decisión de participar o no participar no cambiara tú cuidado médico o el tiempo que pases en la cárcel.

¿Antes de empezar, alguna pregunta?

Entrevista Empezó: _____ AM/PM

Entrevista Terminó: _____ AM/PM

Firma de persona haciendo la entrevista: _____

Rompehielos: ¿Cuál es tu estación del año favorita y por qué?

Preámbulo: Vamos a hablar de antibióticos en esta entrevista. Voy a preguntar tu opinión sobre recibir antibióticos en la cárcel. Por favor, quiero que te sientas cómodo hablando de como en realidad te sientes sobre el tema. Todo lo que digas es confidencial.

Preguntas	Sondeo
A. Cuidado Medico y Antibioticos	
Describe como es recibir cuidado médico en la cárcel	<p>¿Qué tienes que hacer para recibir cuidado médico?</p> <p>¿Qué tipo de profesionales de la salud usualmente ves (doctores y/o enfermeras)? ¿Alguna diferencia entre uno u otro?</p> <p>¿Podrías describir cómo se siente conocer a un profesional de la salud y/o tener una visita médica?</p> <p>¿Cuán larga es una visita médica?</p> <p>¿Cuáles son los obstáculos y/o dificultades en recibir cuidado médico en la cárcel?</p>
En una escala del uno al diez, ¿cuán satisfecho estas de tu cuidado médico en la cárcel?	Dime porque escogiste ese numero
¿Cuál tú crees que es la infección mas común en la cárcel?	<p>¿Como trataron la infección?</p> <p>¿Cuán común tú crees que es para ti o alguien que conoces estar tomando antibióticos?</p>
¿Alguna vez te han tratado por una infección mientras estando en la cárcel?	<p>Si la contestación es "Si":</p> <ul style="list-style-type: none"> - ¿ Como fue tratado? <p>SI SE USARON ANTIBIÓTICOS:</p> <ul style="list-style-type: none"> - ¿Cuál antibiótico fue usado? - ¿Por cuánto tiempo tomaste el antibiótico? - ¿Y cuantas veces te dieron una receta para un antibiótico? - ¿Cómo fueron las instrucciones provistas para tomar el antibiótico? - ¿Tuviste alguna preocupación sobre efectos secundarios? - ¿Tuviste algún efecto secundario por tomar el antibiótico? - ¿Cómo te sientes en general sobre tomar antibióticos mientras estando en la cárcel? <p>SI LA CONTESTACIÓN ES "No", HISTORIAL DE INFECCIÓN:</p> <ul style="list-style-type: none"> - ¿Conoces a alguien en la cárcel con infección? - ¿Sabes cómo trataron su infección? - ¿Conoces a alguien que han recibido antibióticos a través de la estación de enfermería?
B. Interacciones con médicos, enfermeras y profesionales de la salud	
¿Alguna vez has preguntado o solicitado por un antibiótico en específico, pero el profesional de la salud se rehusó en recetarlo	<p>SI LA CONTESTACIÓN ES "Si":</p> <p>¿Cuál es el nombre del antibiótico que pediste?</p> <p>¿Por qué pediste ese antibiótico en específico?</p>

<p>y/o te receto o recomendó otra cosa?</p>	<p>¿Cómo o en donde escuchaste de este antibiótico?</p> <p>¿Cómo respondió el profesional de la salud a tu pregunta o petición?</p> <p>¿Cómo esta experiencia cambio tu perspectiva en cuanto al cuidado médico en la cárcel o en general? ¿Crees que esta experiencia influencio tu perspectiva o no?</p>
<p>¿Cómo se recetan antibióticos en tus instalaciones?</p>	<p>¿Quién normalmente distribuye los medicamentos?</p> <p>¿Los dan a través de la estación de enfermería o puedes llevarlos contigo?</p> <p>¿Qué piensan las otras personas confidados sobre la mejor manera de distribución por los medicamentos? Por ejemplo, prefieres que los medicamentos son distribuidos sobre de la estación de enfermería o prefieres llévarlos con ellos?</p> <p>¿Crees que la manera de distribución por los medicamentos puede cambiar como lo toma?</p>
<p>Si alguien tiene una pregunta sobre un antibiótico, ¿a quién le preguntan?</p>	<p>¿Cómo es el proceso para hacer preguntas de seguimiento sobre un antibiótico o cuidado médico?</p> <p>¿Cuánto tiempo se tarda en proveer contestaciones a preguntas médicas?</p> <p>¿Alguna vez ha tenido o conoces de alguien que han tenido un efecto secundario grave o una reacción alérgica severa con un antibiótico? ¿Qué fue lo que paso?</p>
<p>¿Eres alérgico a la penicilina o a algún medicamento derivado de la penicilina?</p>	<p>Contestación es “si”: continúe a la sección C</p> <p>Contestación es “no”: continúe a la sección D</p>
<p>C. Alergia a Penicilina</p>	
<p>Cuéntame de algún momento en que te han tratado para alguna infección.</p>	<p>¿Alguna vez te han tratado para una infección de la piel? <i>¿Pulmonía o infección en los pulmones? ¿Sinusitis? ¿infeccion de orina? ¿Enfermedad de transmision sexual como gonorrea, clamidia, sifilis, etc?</i></p> <p>¿Haz tomado en algún momento un antibiótico que el nombre termina con –ina como amoxicilina?</p> <p>¿Crees que alguna vez has tomado un antibiótico similar a la penicilina? Ejemplos: cefalosporinas como cefalexina o ceftriaxona.</p>
<p>¿Has oído hablar de los probióticos?</p>	<p>¿Qué opinas de ellos?</p>
<p>Cuéntame de momentos en el que discutiste tu alergia a la penicilina con algún profesional de la salud (o medico)</p>	<p>¿Cómo te sientes cuando un profesional de la salud te pregunta sobre tu historial de alergias?</p> <p>¿Cómo te sientes cuando les dices que tienes alergia a ciertos medicamentos?</p>
<p>¿En algún momento tu medico primario te ha preguntado sobre</p>	<p>Cuéntame cómo fue esta conversación.</p>

tu alergia a penicilina? ¿Te han ofrecido un referido a un alergista o hacer un examen de alergia contra la penicilina?	
¿Cómo te sentirías si te dicen que no ya no tienes alergia a la penicilina?	¿Haz escuchado de esto o en algún momento un profesional de la salud te ha sugerido esto?
D. Percepciones sobre Resistencia a Antibióticos	
¿Qué te viene a la mente cuando escuchas el término “resistencia a antibióticos”?	¿Dónde lo haz escuchado antes? ¿Qué crees que causa la resistencia a los antibióticos o la empeora?
¿Quién crees que está siendo más afectado por la resistencia a antibióticos?	¿Por qué crees esto? ¿Cómo crees que la resistencia a antibióticos te afecta a ti?
¿Alguna vez haz vivido diferencias en práctica en cuanto a la administración o selección de antibióticos fuera o dentro de la cárcel?	¿Cuál experiencia fue mejor o peor?
E. Percepciones en Administración de Antibióticos	
¿Cuáles son sus percepciones de la opiniones de los proveedores y enfermas sobre la resistencia a los antibióticos en esta instalación?	¿Crees que ellos han recibido suficiente entretamiento en la resistencia a los antibióticos? ¿Cuál sería la mejor manera de iniciar conversaciones sobre la prevención de la resistencia a los antibióticos en su instalación? ¿Cree que los recursos utilizados fuera de las cárceles para educar al público sobre la resistencia a los antibióticos funcionarían en las cárceles también? ¿Por qué?
¿Conoce alguna guía que regule la administración de los antibióticos en las cárceles?	SI ES ASÍ - ¿Cómo se enteró de estas pautas? - ¿Estás de acuerdo con estas directrices? SI NO - ¿Crees que debería haber directrices que hagan que las prescripciones de antibióticos sea consistente entre las cárceles? - ¿Crees que proveedores en su cárcel debería recibir reacciones en su administración de antibióticos?
¿Qué te viene a la mente cuando escuchas el término “administración antimicrobiana”?	¿Dónde lo haz escuchado antes? ¿Has oído de una Programa de so Adecuado de Antimicrobianos?
¿Qué cambios podrían hacer en los sistemas carcelario y penitenciario de todo el país para reducir la resistencia a los antibióticos?	¿Quién tendría que estar involucrado para hacer estos cambios? ¿Qué barreras podrían surgir? ¿Qué podría facilitar estos cambios?
¿Cómo se sentiría si había una base de datos interestatal que llevara un registro de las recetas	¿Crees que disminuiría el uso de antibióticos? ¿A quién crees que le interesaría o utilizaría la información?

de antibióticos en las prisiones y cárceles de Nueva Inglaterra?

Te he hecho muchas preguntas sobre antibióticos y la resistencia a ellos. ¿Crees que me faltó por preguntar alguna otra cosa o hay algún tema que quieras discutir conmigo?

¿Cómo te identificas en cuanto a?:

Raza _____

Etnicidad _____

Genero _____

Nivel de Educación _____

Rango de Edades:

21-30

31-40

41-50

51-60

61-70

71-80

81+

Qualitative Interview Guide Carceral Pharmacist

Participant ID#: _____

Interview Date (MM/DD/YY): _____

Introduction Script:

My name is (INSERT INTERVIEWER NAME), and I am interviewing you on behalf [REDACTED] as part of a study to investigate the facilitators and barriers to practicing antimicrobial stewardship in jails & prisons.

Thank you for agreeing to be a part of this interview. I will ask you a series of questions regarding your antibiotic prescribing and administration practices and experiences. All interviews will be used to help inform us of how we can improve carceral health and use of antibiotics through quality improvement initiatives related to antibiotic prescribing. We value all information that you can give to us.

There are no “right” or “wrong” answers to your questions. We want to hear anything that you want to talk about. In order to make sure that we have accurate reporting of information from today’s session, I will use this audio recorder to record our conversation. If you do not feel comfortable with me audio recording this interview, we can continue the interview without it being recorded. I will take notes while I ask the questions and I may ask you to pause or repeat something. Both the notes and recording will remain anonymous, meaning we will not use your name, the name of the facility or facilities where you work, or any other information that could be used to identify you.

If you do not feel comfortable answering a question, it is ok for you to tell me that you do not want to answer. If there’s a question that you’d prefer not to answer, simply say “pass.” You can also choose to stop this interview at any time and for any reason.

Waiver of name inclusion

We do not need to have your name linked with the information we collect during this interview. Please select one:

Yes: Please link my name to the information being collected. My name will be kept confidential and not reported in any research. But, researchers will have my name linked to an ID.

Name: _____

No: Please do not link my name to the information from the interview.

Is it ok for us to proceed with the interview and for me to audio record our conversation?

Participant allowed for interview to be audio recorded: YES NO

Before we begin, do you have any questions?

Time Interview Started: _____ am / pm

Time Interview Ended: _____ am / pm

Signature of person performing interview: _____

Qualitative Interview Guide for Carceral Pharmacists

Icebreaker: What is your favorite season and why?

Framing: We're going to be talking about antibiotics in this interview. I will be asking your opinions about getting antibiotics in jail. Please feel comfortable talking about how you may feel towards any of these topics as, again, everything you say will remain confidential.

Interviewer Questions	Probes
Experience	
Tell me about your job	Tell me about your job as it relates to managing infections
What infections are most common at your facility?	Why do you think these infections are common?
	What groups of patients seem to require antibiotics most frequently?
What do you know about the process of diagnosing infections at your facility?	Who often diagnoses the infection?
	What types of cultures can be done?
	As a pharmacist, do you hear about culture results?
What antibiotics are used to treat infections at the facility/ies where you work?	Probes: skin and soft tissue infections, sexually transmitted infections, urinary tract infections, pneumonia
How long are infections treated for?	Probes: skin and soft tissue infections, sexually transmitted infections, urinary tract infections, pneumonia
	Tell me about the longest period of time you saw a person on antibiotics for at your facility?
What resources do prescribers at your facility use to make antibiotic treatment regimen decisions?	The internet? Epocrates? Uptodate? Colleagues?
How do you think patients who are incarcerated typically react to being prescribed antibiotics.	Have you ever heard of a patient wanting antibiotics when they were not indicated?
	What about a patient asking for a specific antibiotic?
	What would the prescriber do in these situations?
To what extent do you offer advice to patients who are incarcerated about the risks and benefits of antibiotics?	What advice do you offer?
	To what extent do you feel comfortable offering this advice?
	Tell me about how patients receive the counseling
Tell me your thoughts about probiotics.	When do you recommend them?
Tell me about how allergies are recorded in the electronic medical record	How often do you discuss allergies with patients?
	What action do you take if you think a penicillin allergy record is incorrect?
How often do you see people with penicillin allergies listed?	How comfortable do you feel talking to patients about their penicillin allergy?
What are the consequences of having an incorrect penicillin label?	To the patient? To the clinician? To the pharmacist?

The CDC outlines 4 core elements of outpatient antibiotic stewardship as commitment through infrastructure allocation; action for policy and practice; tracking and reporting; and resources for education and expertise. Next, I'm going to ask you to fill out this table about how these core elements relate to the jail facility where you work.

Give Matrix to Interviewee

	We have this	I would want this	I do not want this
<p><u>Commitment:</u> Demonstrate dedication and resources (personnel, money) to optimizing antibiotic prescribing</p>			
<p><u>Action for policy and Practice:</u> Take action to implement at least one policy or practice to improve antibiotic prescribing, assess whether it's working, and modify as needed</p>			
<p><u>Antibiotic tracking:</u> Monitor antibiotic prescribing practices and offer regular feedback to clinicians, or have clinicians reflect on their own prescription practices</p>			
<p><u>Expertise:</u> Access to infectious diseases physicians and pharmacists who can educate clinicians and patients about optimizing antibiotic prescribing.</p>			

External Influences	
To what extent does your facility encourage collaboration among prescribers? Among prescribers and pharmacists?	Has there ever been a time where you disagreed with how antibiotics were prescribed? What did you do? How do you think the prescribers at your facility/ies make their antibiotic treatment regimen choices?
What kind of feedback are prescribers given about their antibiotic prescribing practices at your facility/ies?	Who is responsible for giving this feedback? Do you think this feedback is helpful?
How could overall antibiotic prescribing be optimized at your facility/ies?	What have you done, or plane to do, to help improve these standards?
Perceptions of Antibiotic Stewardship	
What comes to mind when you hear the term “antimicrobial stewardship”?	How do you feel about an antimicrobial stewardship program being implemented in jails/prisons?
Why do you think formal antimicrobial stewardship programs are not common in jails/prisons?	
What are some of the reasons clinicians, prescribers, and pharmacists in a jail or prison would want a formal antimicrobial stewardship program?	
What do you think are barriers to starting an antimicrobial stewardship program in your facility/ies?	Probes: cost, public perception, stakeholder collaboration What are some of the reasons you or other employees in a jail pr prison would not want a formal antimicrobial stewardship program?
Who are the people you think need to be involved in starting this type of program?	Probe: nurses, ID doctors, pharmacists, medical directors, other?
Can you describe how an antimicrobial stewardship program could be implement into current prescribing practices?	How prepared do you feel your facility is to implement an ASP?
How would you feel using a resource to aid in antibiotic advice or educating patients about the threat of resistance?	What do you think this resource would look like? Does it differ from those you see in the community? What do you think would motivate a prescriber to use a resource more?
Referencing the four core elements outlined by the CDC, (1) Commitment, (2) Action for policy and Practice, (3) Antibiotic Tracking, and (4) Expertise, what elements of stewardship or what stewardship efforts would you add to this list?	Would you remove any? Why?

I have asked you a lot about your perceptions of antibiotic administration and usage. What are some things that I may have missed that you think are important to mention?

Self-Identified Race _____ **Self-Identified Ethnicity** _____

Self-Identified Gender _____ **Self-Reported Occupation** _____

Self-Reported Level of Education _____

Age Range:

21-30	41-50	61-70	80+
31-40	51-60	71-80	

Qualitative Interview Guide for Carceral Prescribers

Participant ID#: _____

Interview Date (MM/DD/YY): _____

Introduction Script:

My name is (INSERT INTERVIEWER NAME), and I am interviewing you on behalf of [REDACTED] as part of a study to investigate the facilitators and barriers to practicing antimicrobial stewardship in jails & prisons.

Thank you for agreeing to be a part of this interview. I will ask you a series of questions regarding antibiotic prescribing and administration practices within (INSERT FACILITY NAME). All interviews will be used to help inform us of how we can improve carceral health and use of antibiotics through quality improvement initiatives related to antibiotic prescribing. We value all information that you can give to us.

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Yes: Please link my name to the information being collected. My name will be kept confidential and not reported in any research. But, researchers will have my name linked to an ID.

Name: _____

No: Please do not link my name to the information from the interview.

Is it ok for us to proceed with the interview and for me to audio record our conversation?

Participant allowed for interview to be audio recorded: YES NO

Before we begin, do you have any questions?

Time Interview Started: _____ am / pm

Time Interview Ended: _____ am / pm

Signature of person performing interview: _____

Qualitative Interview Guide for Carceral Prescribers

Interviewer Questions	Probes
Prescribing Experience	
Tell me about your job	Tell me about your job as it relates to infections
What infections are most common at your facility?	Why do you think these infections are common? What groups of patients require antibiotics most frequently?
How do you diagnose infections at your facility?	What types of culture can you do?
What antibiotics do you use to treat infections?	Probes: skin and soft tissue infections, sexually transmitted infections, urinary tract infections, pneumonia
How long do you treat infections?	Probes: skin and soft tissue infections, sexually transmitted infections, urinary tract infections, pneumonia Tell me about the longest period of time you prescribed an antibiotic for a patient.
What resources do you use to make these treatment regimen decisions?	Do you use the internet? Epocrates? Uptodate? Colleagues?
How do patients typically react to being prescribed antibiotics?	Have you ever had a patient want antibiotics when you felt they were not indicated? Did the patient ask for a specific antibiotic? How did you explain to the patient why you were hesitant to give them an antibiotic?
To what extent do you offer advice to patients about the risks and benefits of antibiotics?	What type of advice do you offer to patients about antibiotics? To what extent do you feel comfortable offering this advice? Tell me about how patients receive the counseling. Are there any barriers that limit the advice that you would offer to your patients?
Tell me your thoughts about probiotics.	When do you prescribe them?
Tell me about how allergies are recorded in the electronic medical record.	How often do you discuss medication allergies with patients? What action do you take if you think a penicillin allergy record is incorrect?
How often do you see people with penicillin allergies listed?	How comfortable do you feel talking with patients about their penicillin allergy?
What are the consequences of having an incorrect penicillin allergy label?	To the patient? To the clinician?

What are some of the reasons clinicians/prescribers in a jail or prison would want a formal antimicrobial stewardship program?	
What do you think are some barriers to starting an antimicrobial stewardship program in your facility?	Probes: cost, public perception, stakeholder collaboration What are some of the reasons you and other prescribers in jail or prison would not want a formal antimicrobial stewardship program? Is this different for nurses?
Who are the people you think need to be involved to start this type of program?	Probe: nurses, ID doctors, pharmacists, medical directors, others?
How would you feel using a resource to aid in antibiotic advice or educating patients about the threat of resistance?	What do you think this resource would look like? Does it differ from those you see in the community? What do you think would motivate you or another prescriber to use a resource more?

The CDC outlines 4 core elements of outpatient antibiotic stewardship as commitment through infrastructure allocation; action for policy and practice; tracking and reporting; and resources for education and expertise. Next, I'm going to ask you to fill out this table about how these core elements relate to the jail facility where you work.

Give Matrix to Interviewee

	We have this	I would want this	I do not want this
<u>Commitment:</u> Demonstrate dedication and resources (personnel, money) to optimizing antibiotic prescribing			
<u>Action for policy and practice</u> <u>Practice:</u> Take tactionaction to implement at least one policy or practice to improve antibiotic prescribing, assess whether it's working, and modify as needed			
<u>Antibiotic tracking:</u> Monitor antibiotic prescribing practices and offer regular feedback to clinicians, or have clinicians reflect on their own prescription practices			
<u>Expertise:</u> Access to infectionsinfectious diseases physicians and pharmacists who can educate clinicians and patients about optimizing antibiotic prescribing.			

External Influences	
To what extent does your facility encourage collaboration among prescribers?	Has there ever been a time where you disagree with how antibiotics were prescribed by another prescriber? Can you tell me more about that situation. How do you think your colleagues make their treatment regimen choices?
What kind of feedback do you receive about your prescribing practices?	Can you tell me about what this feels like? Who is responsible for giving this feedback? How do you think that hearing feedback is or could be helpful?
How could overall antibiotic prescribing and administration be optimized at your facility?	What have you done, or do you plan to do, to help improve these standards?
Perceptions of Antibiotic Resistance	
What comes to mind when you hear the term, “antimicrobial stewardship?”	How do you feel about an antimicrobial stewardship program being implemented in jails/prisons?
Why do you think formal antimicrobial stewardship programs are not common in jails/prisons?	
What are some of the reasons clinicians/prescribers in a jail or prison would want a formal antimicrobial stewardship program?	
What do you think are some barriers to starting an antimicrobial stewardship program in your facility?	Probes: cost, public perception, stakeholder collaboration What are some of the reasons you and other prescribers in jail or prison would not want a formal antimicrobial stewardship program? Is this different for nurses?
Who are the people you think need to be involved to start this type of program?	Probe: nurses, ID doctors, pharmacists, medical directors, others?
How would you feel using a resource to aid in antibiotic advice or educating patients about the threat of resistance?	What do you think this resource would look like? Does it differ from those you see in the community? What do you think would motivate you or another prescriber to use a resource more?
WhatReferencing the four core elements outlined by the CDC, (1) Commitment, (2) Action for policy and	Would you remove any? Why?

Practice, (3) Antibiotic Tracking, and (4) Expertise, what elements of stewardship or what stewardship efforts would you add to this list?

Self-Identified Race _____ **Self-Identified Ethnicity** _____

Self-Identified Gender _____ **Self-Reported Level of Education** _____

Age Range (Circle One):

21-30

41-50

61-70

80+

31-40

51-60

71-80

Qualitative Interview Guide for Carceral Nurses

Participant ID#: _____

Interview Date (MM/DD/YY): _____

Introduction Script:

My name is (INSERT INTERVIEWER NAME), and I am interviewing you on behalf of [REDACTED] as part of a study to investigate the facilitators and barriers to practicing antimicrobial stewardship in jails & prisons.

Thank you for agreeing to be a part of this interview. I will ask you a series of questions regarding antibiotic prescribing and administration practices within (INSERT FACILITY NAME). All interviews will be used to help inform us of how we can improve carceral health and use of antibiotics through quality improvement initiatives related to antibiotic prescribing. We value all information that you can give to us.

There are no “right” or “wrong” answers to your questions. We want to hear anything that you want to talk about. In order to make sure that we have accurate reporting of information from today’s session, I will use this audio recorder to record our conversation. If you do not feel comfortable with me audio recording this interview, we can continue the interview without it being recorded. I will take notes while I ask the questions and I may ask you to pause or repeat something. Both the notes and recording will remain anonymous, meaning we will not use your name, the name of the facility or facilities where you work, or any other information that could be used to identify you.

If you do not feel comfortable answering a question, it is ok for you to tell me that you do not want to answer. If there’s a question that you’d prefer not to answer, simply say “pass.” You can also choose to stop this interview at any time and for any reason.

Waiver of name inclusion

We do not need to have your name linked with the information we collect during this interview. Please select one:

Yes: Please link my name to the information being collected. My name will be kept confidential and not reported in any research. But, researchers will have my name linked to an ID.

Name: _____

No: Please do not link my name to the information from the interview.

Is it ok for us to proceed with the interview and for me to audio record our conversation?

Participant allowed for interview to be audio recorded: YES NO

Before we begin, do you have any questions?

Time Interview Started: _____ am / pm

Time Interview Ended: _____ am / pm

Signature of person performing interview: _____

Qualitative Interview Guide for Carceral Nurses

Interviewer Questions	Probes
Administration Experience	
Tell me about your job	Tell me about your job as it relates to infections
What infections are most common at your facility?	Why do you think these infections are most common? What groups of patients do you administer antibiotics to most frequently? Probe: Paraplegic, individuals with a permanent medical device, chronic wounds
How are infections typically diagnosed at your facility?	Are you aware if cultures are obtained for these infections?
What antibiotics do you typically administer in order to treat these infections?	Probes: skin and soft tissue infections, sexually transmitted infections, urinary tract infections, pneumonia
How long are infections typically treated for?	Probes: skin and soft tissue infections, sexually transmitted infections, urinary tract infections, pneumonia Tell me about the longest period of time you administered an antibiotic to a patient.
What resources do you use to help inform your administration practices?	Do you use the internet? Colleagues? Are you aware of any resources that prescribers may use to make treatment regimen decisions?
How do patients typically react when being administered an antibiotic?	Have you ever had a patient ask for a different antibiotic than they were prescribed? Did the patient ask for a specific antibiotic? What did you do in this situation?
To what extent would you offer advice to patients about the antibiotics?	What type of advice would you offer? To what extent do you feel comfortable offering this advice? Tell me about how patients typically receive this counseling? Are there any barriers that limit the advice that you would offer?
How are you made aware of a patient's medication allergy status when administering antibiotics?	Is it in the electronic medical record? Have you ever had to discuss medication allergies with a patient? What action would you take if you think a penicillin allergy record is incorrect?
How often do you administer antibiotics to someone who has a penicillin allergy listed?	How comfortable do you feel talking to a patient about their penicillin allergy?
What are the consequences of having an incorrect penicillin allergy label?	To you? To the patient? To the prescriber?
Interactions/External Influences	
How confident are you in the antibiotic prescribing of the prescribers at your facility?	Can you explain this.

To what extent does your facility encourage collaboration among providers?	Can you recall a situation in which you did not agree with how a clinician prescribed an antibiotic? Can you tell me about that situation? Do you feel that you are in a position to question the antibiotic prescribing/management within your facility? How do you think prescribers in your facility make their treatment regimen choices?
Do you think that it would be helpful for clinicians, in general, to receive feedback on their prescribing practices?	Who would be the best person to give this feedback?
How could overall antibiotic administration be optimized at your facility?	What have you done, or do you plan to do, to help improve these standards?
Perceptions of Antibiotic Stewardship	
Could you tell me a bit about what your facility's attitude about antibiotic resistance?	Why do you think this attitude exists?
Are you aware of any specific standards associated with antibiotic prescribing at your facility?	Do you think that standardizing prescription practices is beneficial?
What comes to mind when you hear the term, "antimicrobial stewardship?"	How do you feel about an antimicrobial stewardship program being implemented in jails/prisons?
Why do you think formal antimicrobial stewardship programs are not common in jails/prisons?	
What are some of the reasons nurses in a jail or prison would want a formal antimicrobial stewardship program?	Do you think this is different for prescribers/pharmacists?
What do you think are some barriers to starting an antimicrobial stewardship program in your facility?	Probes: cost, public perception, stakeholder collaboration What are some of the reasons you and other nurses in jail or prison would not want a formal antimicrobial stewardship program? Is this different for prescribers/pharmacists?
Who are the people you think need to be involved to start this type of program?	Probe: nurses, ID doctors, pharmacists, medical directors, physicians in the community, community members, policy makers?
Do you think it would be beneficial for clinicians to use a resource to aid in antibiotic advice or education about the threat of resistance?	What do you think this resource would look like? Does it differ from those you see in the community? Would you feel comfortable offering similar advice to a patient?

I've asked you a lot of questions about antibiotic use and resistance, as well as antimicrobial stewardship programs. Is there anything you think I missed or other related topics you want to discuss?

Self-Identified Race _____ **Self-Identified Ethnicity** _____

Self-Identified Gender _____ **Self-Reported Level of Education** _____

Age (Circle One)

21-30 41-50 61-70 80+

31-40 51-60 71-80

Qualitative Interview Guide for Administrative Stakeholders in the Carceral System

Participant ID#: _____

Interview Date (MM/DD/YY): _____

Introduction Script:

My name is (INSERT INTERVIEWER NAME), and I am interviewing you on behalf of [REDACTED] as part of a study to investigate the facilitators and barriers to practicing antimicrobial stewardship in jails & prisons.

Thank you for agreeing to be a part of this interview. I will ask you a series of questions regarding antibiotic prescribing and administration practices within (INSERT FACILITY NAME). All interviews will be used to help inform us of how we can improve carceral health and use of antibiotics through quality improvement initiatives related to antibiotic prescribing. We value all information that you can give to us.

There are no “right” or “wrong” answers to your questions. We want to hear anything that you want to talk about. In order to make sure that we have accurate reporting of information from today’s session, I will use this audio recorder to record our conversation. If you do not feel comfortable with me audio recording this interview, we can continue the interview without it being recorded. I will take notes while I ask the questions and I may ask you to pause or repeat something. Both the notes and recording will remain anonymous, meaning we will not use your name, the name of the facility or facilities where you work, or any other information that could be used to identify you.

If you do not feel comfortable answering a question, it is ok for you to tell me that you do not want to answer. If there’s a question that you’d prefer not to answer, simply say “pass.” You can also choose to stop this interview at any time and for any reason.

Is it ok for us to proceed with the interview and for me to audio record our conversation?

Participant allowed for interview to be audio recorded: YES NO

Before we begin, do you have any questions?

Time Interview Started: _____ am / pm

Time Interview Ended: _____ am / pm

Signature of person performing interview: _____

Qualitative Interview Guide for Administrative Stakeholders in the Carceral System

Interviewer Questions	Probes
Antibiotic Experience	
Tell me about your job	<p>What does a typical day at your job look like?</p> <p>Do you work at any other jobs?</p> <p>When you are not at work, is there another person covering your responsibilities?</p>
What does the process look like for an inmate who needs to see a doctor?	<p>When are different kinds of clinicians available?</p> <p>What role do you have in this process?</p> <p>Are you aware of any barriers that would prevent an individual from receiving care?</p>
Tell me about infections in the criminal justice setting.	<p>What infections have been most prevalent?</p> <p>Do you know of any antibiotics that are usually prescribed for these infections?</p> <p>Who typically prescribes and administers antibiotics at your facility?</p>
How would you describe the current antibiotic administration in your facility?	<p>Are you ever briefed on the health status of an individual/or the overall facility?</p> <p>Do you ever wish you were more incorporated into the medical sector of your facilities? Why?</p>
What does the process look like for someone who needs to receive daily antibiotics?	<p>How do they receive them? Where do they go?</p> <p>What happens if an individual misses the equivalent of med-call?</p>
Do you receive training regarding health procedures and antibiotic prescribing in your facility?	<p>If YES: Do you think that training can be improved in any way? How?</p> <p>If NO: What benefits do you think this training could have?</p>
Feedback	
To what extent do you have confidence in the overall antibiotic prescribing and administration in your facility?	<p>Do you know of any pros and cons to antibiotic usage?</p> <p>What do you know about antibiotic resistance? What do you think some of the consequences are?</p> <p>Do you think that it is important to minimize the development of antibiotic resistance?</p> <p>Do you think antibiotic prescribing has the potential to put incarcerated people at risk? If so, how?</p>

<p>What type of feedback do you hear from inmates regarding their experiences with clinicians treating their infections?</p>	<p>How might you explain this? Does a specific instance come to mind?</p> <p>Do you ever hear positive feedback from inmates? Does a specific instance come to mind?</p> <p>What about complaints? Explain. Does a specific instance come to mind?</p>
<p>Perceptions of Antibiotic Stewardship</p>	
<p>Please tell me a bit about what your facility's attitude toward antibiotic resistance?</p>	<p>Why do you think this attitude exists?</p> <p>What do you believe medical administrators think about antimicrobial resistance?</p>
<p>What resources do you think would be most beneficial to facilitate better education among carceral administrators and the importance of antibiotic management?</p>	<p>Would you feel comfortable discussing antibiotic resistance?</p> <p>Do you think that an educational resource would also benefit inmates?</p>
<p>Are you aware of any specific standards associated with antibiotic prescribing at your facility?</p>	<p>Do you think that standardizing prescription practices is beneficial?</p>
<p>What comes to mind when you hear the term "antimicrobial stewardship"?</p>	<p>ONLY PROBE IF INDIVIDUAL KNOWS WHAT IT IS?</p> <p>Tell me about the first time you heard this phrase.</p> <p>Have you ever worked in a place where they had a formal antibiotic stewardship program?</p> <p>Tell me about how it felt to work in a place with a formal antibiotic stewardship program</p>
<p>What do you think about an antimicrobial stewardship program being implemented in jails/prisons?</p>	<p>Would you, personally, support their implementation?</p> <p>What do you think are barriers to starting an antimicrobial stewardship program in your facility?</p> <ul style="list-style-type: none"> • What do you think about the costs of an antimicrobial stewardship program? • Do you have any concerns that you would want to prescribe medications, and you would not be able to? • Do you think clinicians/prescribers in jail have enough time to worry about antibiotic prescribing? <p>Who are the people you think need to be involved to start this type of program?</p>
<p>Are you aware of any local or national antimicrobial stewardship initiatives in correctional settings?</p>	<p>IF NO: why do you think formal antimicrobial stewardship programs are not common in jails/prisons?</p> <p>What are some of the reasons clinicians/prescribers in a jail or prison would not want a formal antimicrobial stewardship program?</p> <p>IF YES: tell me about these programs. Is this something you think could or should be implemented in your setting?</p>

	What are some of the reasons clinicians/prescribers in a jail or prison would want a formal antimicrobial stewardship program?
How would you feel about an interstate database that benchmarked antibiotic use in the prisons and jails across New England?	How would you use this information? Tell me about how it would inform your work. Who else do you think we would use the information gathered from this database? Do you think having a regional network in any form across New England prisons and jails would be beneficial for improving carceral care?
How might you feel about a regional network in any form across New England prisons and jails for improving carceral care?	How would you like to engage in a regional network? Annual meetings, trainings/workshops, symposia, etc....?
I've asked you a lot of questions about antibiotic use and resistance, as well as antimicrobial stewardship programs. Is there anything you think I missed or other related topics you want to discuss?	

Self-Identified Race _____ **Self-Identified Ethnicity** _____

Self-Identified Gender _____ **Self-Reported Level of Education** _____

Self-Identified Sexual Orientation _____

Age (Circle One)

21-30

41-50

61-70

81+

31-40

51-60

71-80

Qualitative Interview Guide Community Pharmacist

Participant ID#: _____

Interview Date (MM/DD/YY): _____

Introduction Script:

My name is (INSERT INTERVIEWER NAME), and I am interviewing you on behalf [REDACTED] as part of a study to investigate the facilitators and barriers to practicing antimicrobial stewardship in jails & prisons.

Thank you for agreeing to be a part of this interview. I will ask you a series of questions regarding your antibiotic prescribing and administration practices and experiences. All interviews will be used to help inform us of how we can improve carceral health and use of antibiotics through quality improvement initiatives related to antibiotic prescribing. We value all information that you can give to us.

There are no “right” or “wrong” answers to your questions. We want to hear anything that you want to talk about. In order to make sure that we have accurate reporting of information from today’s session, I will use this audio recorder to record our conversation. If you do not feel comfortable with me audio recording this interview, we can continue the interview without it being recorded. I will take notes while I ask the questions and I may ask you to pause or repeat something. Both the notes and recording will remain anonymous, meaning we will not use your name, the name of the facility or facilities where you work, or any other information that could be used to identify you.

If you do not feel comfortable answering a question, it is ok for you to tell me that you do not want to answer. If there’s a question that you’d prefer not to answer, simply say “pass.” You can also choose to stop this interview at any time and for any reason.

Waiver of name inclusion

We do not need to have your name linked with the information we collect during this interview. Please select one:

Yes: Please link my name to the information being collected. My name will be kept confidential and not reported in any research. But, researchers will have my name linked to an ID.

Name: _____

No: Please do not link my name to the information from the interview.

Is it ok for us to proceed with the interview and for me to audio record our conversation?

Participant allowed for interview to be audio recorded: YES NO

Before we begin, do you have any questions?

Time Interview Started: _____ am / pm

Time Interview Ended: _____ am / pm

Signature of person performing interview: _____

Qualitative Interview Guide for Carceral Pharmacists

Icebreaker: What is your favorite season and why?

Framing: We're going to be talking about antibiotics in this interview. I will be asking your opinions about getting antibiotics in jail. Please feel comfortable talking about how you may feel towards any of these topics as, again, everything you say will remain confidential.

Interviewer Questions	Probes
Experience	
Tell me about your job	Tell me about your job as it relates to managing infections
What infections do you see most commonly?	<p>Why do you think these infections are common?</p> <p>What infections do you think are most common in jails and prisons? Why?</p> <p>What groups of patients seem to require antibiotics most frequently?</p> <p>Do you think this is different in jails/prisons than in the community?</p>
In your experience, how are infections typically diagnosed?	<p>Who often diagnoses the infection?</p> <p>What types of cultures can be done in facilities where you've worked?</p> <p>As a pharmacist, do you hear about culture results?</p> <p>How do you think the process of diagnosing infections may be different in jails or prisons?</p>
What antibiotics do you most commonly see being prescribed?	<p>Probes: skin and soft tissue infections, sexually transmitted infections, urinary tract infections, pneumonia</p> <p>Do you think the most commonly used antibiotics are different in jails/prisons?</p>
How long are infections treated for?	<p>Probes: skin and soft tissue infections, sexually transmitted infections, urinary tract infections, pneumonia</p> <p>Tell me about the longest period of time you saw a person on antibiotics for.</p> <p>How do you think prescription lengths may differ between the community and jails/prisons?</p>
What resources do prescribers typically use to make antibiotic treatment regimen decisions?	<p>The internet? Epocrates? Uptodate? Colleagues?</p> <p>How do you think the decision on what antibiotic to give is made in jails/prisons?</p>
Tell me your thoughts on probiotics.	When do you recommend them?
How do patients typically react to being prescribed antibiotics?	<p>To what extent do you, as a pharmacist, offer advice to patients about the risks and benefits of antibiotics?</p> <p>How comfortable do you feel offering this advice?</p> <p>How do you think these reactions or conversations may be different in jails or prisons?</p> <p>Have you heard of patients asking for a specific antibiotic before? What happens in this situation?</p>
How often do you discuss allergies with patients?	Do you think this frequency is different in jails/prisons?

How often do you see people with penicillin allergies listed?	Do you think the number of people with penicillin allergies is different within carceral facilities versus in the community? Why or why not? How comfortable do you feel talking to patients about their penicillin allergy? What action do you take if you think a penicillin allergy record is incorrect?
What do you think are the consequences of having an incorrect penicillin label?	To the patient? To the clinician? To the pharmacist? Are these consequences different in jail/prison versus the community?

External Influences	
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To what extent do you collaborate with prescribers and other pharmacists?	Has there ever been a time where you disagreed with a colleague on how antibiotics were prescribed? What did you do? How do you think collaboration among prescribers and pharmacists looks in jails and/or prisons?
What kind of feedback are prescribers given about their antibiotic prescribing practices?	Who is responsible for giving this feedback? Do you think this feedback is helpful?
How do you think overall antibiotic prescribing be optimized in jails/prisons?	

Perceptions of Antibiotic Stewardship	
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What do you think about antibiotic resistance?	Do you think there is a similar opinion in jails and prisons?
How would you feel using a resource to aid in antibiotic advice or educating patients about the threat of resistance?	What do you think this resource would look like? Do you think this resource could be similarly implemented in jails/prisons? Why or why not? What do you think would motivate a pharmacist or prescriber to use a resource more?
What comes to mind when you hear the term “antimicrobial stewardship”?	How do you feel about an antimicrobial stewardship program being implemented in jails/prisons?
Why do you think formal antimicrobial stewardship programs are not common in jails/prisons?	
What are some of the reasons clinicians, prescribers, and pharmacists in a jail or prison would want a formal antimicrobial stewardship program?	
What do you think the barriers to starting an antimicrobial stewardship program in jails or prisons are?	Probes: cost, public perception, stakeholder collaboration What do you think are some of the reasons employees in a jail pr prison would not want a formal antimicrobial stewardship program?
Who are the people you think need to be involved in starting this type of program?	Probe: nurses, ID doctors, pharmacists, medical directors, community members, policy makers, other?

I have asked you a lot about your perceptions of antibiotic administration and usage. What are some things that I may have missed that you think are important to mention?

Self-Identified Race _____

Self-Identified Ethnicity _____

Self-Identified Gender _____ **Self-Reported Occupation** _____

Self-Reported Level of Education _____

Age Range:

21-30

41-50

61-70

80+

31-40

51-60

71-80

Qualitative Interview Guide Community Prescribers

Participant ID#: _____

Interview Date (MM/DD/YY): _____

Introduction Script:

My name is (INSERT INTERVIEWER NAME), and I am interviewing you on behalf of [REDACTED] of a study to investigate the facilitators and barriers to practicing antimicrobial stewardship in jails & prisons.

Thank you for agreeing to be a part of this interview. I will ask you a series of questions regarding your antibiotic prescribing and administration practices and experiences. All interviews will be used to help inform us of how we can improve carceral health and use of antibiotics through quality improvement initiatives related to antibiotic prescribing. We value all information that you can give to us.

There are no “right” or “wrong” answers to your questions. We want to hear anything that you want to talk about. In order to make sure that we have accurate reporting of information from today’s session, I will use this audio recorder to record our conversation. If you do not feel comfortable with me audio recording this interview, we can continue the interview without it being recorded. I will take notes while I ask the questions and I may ask you to pause or repeat something. Both the notes and recording will remain anonymous, meaning we will not use your name, the name of the facility or facilities where you work, or any other information that could be used to identify you.

If you do not feel comfortable answering a question, it is ok for you to tell me that you do not want to answer. If there’s a question that you’d prefer not to answer, simply say “pass.” You can also choose to stop this interview at any time and for any reason.

Waiver of name inclusion

We do not need to have your name linked with the information we collect during this interview. Please select one:

Yes: Please link my name to the information being collected. My name will be kept confidential and not reported in any research. But, researchers will have my name linked to an ID.

Name: _____

No: Please do not link my name to the information from the interview.

Is it ok for us to proceed with the interview and for me to audio record our conversation?

Participant allowed for interview to be audio recorded: YES NO

Before we begin, do you have any questions?

Time Interview Started: _____ am / pm

Time Interview Ended: _____ am / pm

Signature of person performing interview: _____

Qualitative Interview Guide for Community Prescribers

Interviewer Questions	Probes
Prescribing Experience	
Tell me about your job	Tell me about your job as it relates to infections
In your career, what infections have been most common?	Why do you think these infections are common?

	<p>What infections do you think are the most common in jails and prisons? Why?</p> <p>What groups of patients require antibiotic most frequently in the community? Do you think this is different than the community requiring the most in jail/prison?</p>
How do you diagnose infections at your facility?	What types of culture can you do?
What antibiotics do you use to treat infections?	<p>Probes: skin and soft tissue infections, sexually transmitted infections, urinary tract infections, pneumonia</p> <p>Tell me how you think prescribing an antibiotic in jail or prison may be a different process than it is in the community.</p> <p>Tell me about the longest period of time you prescribed an antibiotic for a patient.</p> <p>How do you think antibiotic prescription lengths compare between the community and jail/prison facilities?</p>
What resources do you use to make these treatment regimen decisions?	Do you use the internet? Epocrates? Uptodate? Colleagues?
How do your patients typically react to being prescribed antibiotics?	<p>Have you ever had a patient want antibiotics when you felt they were not indicated?</p> <p>Did the patient ask for a specific antibiotic?</p> <p>How did you explain to the patient why you were hesitant to give them an antibiotic?</p> <p>How do you think the reaction of a patient to receiving antibiotics may be different if they are incarcerated?</p>
To what extent do you offer advice to patients about the risks and benefits of antibiotics?	<p>What type of advice do you offer to patients about antibiotics?</p> <p>To what extent do you feel comfortable offering this advice?</p> <p>Tell me about how patients receive the counseling?</p> <p>How do you think offering counseling on antibiotics may differ in jails in prisons?</p>
Tell me your thoughts on probiotics.	When do you prescribe them?
Tell me about how allergies are recorded in the electronic medical record	<p>How often do you discuss medication allergies with patients?</p> <p>What action do you take if you think a penicillin allergy record is incorrect?</p>
How often do you see people with penicillin allergies listed?	<p>Do you think the rate of recorded penicillin allergies per capita is different between people in the community versus people in jail or prison?</p> <p>How comfortable do you feel talking with patients about their penicillin allergy?</p>

What are the consequences of having an incorrect penicillin allergy label?	To the patient? To the clinician? Tell me how these consequences may be different if a person is incarcerated.
Interactions/External Influences	
Has there ever been a time where you disagreed with how antibiotics were prescribed by another prescriber?	How do you think other prescribers make their treatment regimen choices? How do you think collaboration among prescribers looks in jails and/or prisons?
What kind of feedback do you receive about your prescribing practices?	Can you tell me about what this feels like? Who is responsible for giving this feedback? To what extent do you think that hearing feedback is or could be helpful?
How could overall antibiotic prescribing be optimized in jails and/or prisons?	
Perceptions of Antibiotic Stewardship	
What do you think about antibiotic resistance?	Do you think there is a similar opinion in jails and prisons?
Are you aware of any specific standards associated with antibiotic prescribing within your profession?	Do you think that standardizing prescription practices is beneficial? Do you think standardizing prescription practices could be beneficial for jails and prisons?
What comes to mind when you hear the term, "antimicrobial stewardship?"	How do you feel about an antimicrobial stewardship program being implemented in jails/prisons?
Why do you think formal antimicrobial stewardship programs are not common in jails/prisons?	
What are some of the reasons clinicians/prescribers in a jail or prison would want a formal antimicrobial stewardship program?	What are some of the reasons why prescribers in the community would want a formal antimicrobial stewardship program in jails/prisons?
What do you think are barriers to starting an antimicrobial stewardship program in jails/prisons?	Probe: cost, public perception, stakeholder collaboration What are some of the reasons prescribers in jails or prisons would want a formal antimicrobial stewardship program?
Who do you think we need to be involved in starting this type of program?	Probe: nurses, ID doctors, pharmacists, medical directors, physicians in the community, community members, policy makers?
Do you think a resource used in the community to educate about antibiotic resistance could be used in jails or prisons? Why or why not?	
I've asked you a lot of questions about antibiotic use and resistance, as well as antimicrobial stewardship programs. Is there anything you think I missed or other related topics you want to discuss?	

Self-Identified Race _____

Self-Identified Ethnicity _____

Self-Identified Gender _____

Self-Reported Level of Education _____

Age (Circle One)

21-30

41-50

61-70

80+

31-40

51-60

71-80

Qualitative Interview Guide Community Nurses

Participant ID#: _____

Interview Date (MM/DD/YY): _____

Introduction Script:

My name is (INSERT INTERVIEWER NAME), and I am interviewing you on behalf of [REDACTED] as part of a study to investigate the facilitators and barriers to practicing antimicrobial stewardship in jails & prisons.

Thank you for agreeing to be a part of this interview. I will ask you a series of questions regarding your antibiotic prescribing and administration practices and experiences. All interviews will be used to help inform us of how we can improve carceral health and use of antibiotics through quality improvement initiatives related to antibiotic prescribing. We value all information that you can give to us.

There are no “right” or “wrong” answers to your questions. We want to hear anything that you want to talk about. In order to make sure that we have accurate reporting of information from today’s session, I will use this audio recorder to record our conversation. If you do not feel comfortable with me audio recording this interview, we can continue the interview without it being recorded. I will take notes while I ask the questions and I may ask you to pause or repeat something. Both the notes and recording will remain anonymous, meaning we will not use your name, the name of the facility or facilities where you work, or any other information that could be used to identify you.

If you do not feel comfortable answering a question, it is ok for you to tell me that you do not want to answer. If there’s a question that you’d prefer not to answer, simply say “pass.” You can also choose to stop this interview at any time and for any reason.

Waiver of name inclusion

We do not need to have your name linked with the information we collect during this interview. Please select one:

Yes: Please link my name to the information being collected. My name will be kept confidential and not reported in any research. But, researchers will have my name linked to an ID.

Name: _____

No: Please do not link my name to the information from the interview.

Is it ok for us to proceed with the interview and for me to audio record our conversation?

Participant allowed for interview to be audio recorded: YES NO

Before we begin, do you have any questions?

Time Interview Started: _____ am / pm

Time Interview Ended: _____ am / pm

Signature of person performing interview: _____

Qualitative Interview Guide for Community Nurses

Interviewer Questions	Probes
Administration Experience	
Tell me about your job	Tell me about your job as it relates to infections
In your career, what infections have you seen the most?	<p>Why do you think these infections are most common?</p> <p>How does this compare to jails and prisons? Why do you think that?</p> <p>What groups of patients are prescribed antibiotics the most? Do you think this group is different in the community compared to in jail/prison? <i>Probe: Paraplegic, individuals with a permanent medical device, chronic wounds</i></p>
What is the process for diagnosing an infection?	<p>Are you aware if cultures are typically obtained? Can you walk me through this process.</p> <p>What parts of the diagnosis process are you most involved in?</p> <p>How do you think this process is different in jails?</p>
How are infections typically treated?	<p><i>Probes: skin and soft tissue infections, sexually transmitted infections, urinary tract infections, pneumonia</i></p> <p>What is your role in this process? How often do you administer an antibiotic?</p> <p>How do you think this process may be different in carceral settings?</p> <p>Can you recall the longest prescription that you have ever seen?</p> <p>How do you think antibiotic prescription lengths compare between the community and jails/prison?</p>
What resources do prescribers use to make treatment regimen decisions?	As a nurse, what is your role in treatment regimen decision-making?
As a nurse, has a patient ever asked you for a specific antibiotic?	<p>What did you do in this situation?</p> <p>What kind of education did you offer, if any?</p> <p>How do you think this situation may be different if you were working in a jail/prison?</p>
To what extent would you offer advice to patients about antibiotics?	<p>What type of advice would you offer?</p> <p>Do you feel comfortable offering this advice?</p> <p>Tell me about how patients typically receive this counseling?</p> <p>Are there any barriers that limit the advice that you would offer?</p> <p>How do you think offering counseling on antibiotics may differ in jails and prisons?</p>
As a nurse, what is your role in assessing patient allergies?	<p>How comfortable do you feel talking to a patient about their penicillin allergy?</p> <p>How are you made aware of an allergy? Electronic Medical Record?</p>

	What action would you take if you think a penicillin allergy record is incorrect?
How often do you administer antibiotics to someone who has a penicillin allergy listed?	Do you there are more people with penicillin allergies in the community or in jails/prisons?
What are the consequences of having an incorrect penicillin allergy label?	To you? To patient? To prescriber? To the community? Tell me how these consequences may be different if a person is incarcerated?
Interactions/External Influences	
Reflecting on your profession, how confident are you in the antibiotic prescribing of the prescribers who you may interact with?	Can you explain this. How does this compare to your confidence in the state of prescribing in jails and prisons?
To what extent do you feel your profession encourages collaboration among all clinicians/providers?	Do you feel that you are in a position to offer input to the antibiotic prescribing/management of your colleagues?
Do you think that it would be helpful for clinicians, in general, to receive feedback on their prescribing practices?	Who would be the best person to give this feedback?
How could overall antibiotic administration be optimized in jails and/or prisons?	
Perceptions of Antibiotic Stewardship	
Are you aware of any specific standards associated with antibiotic administration within your profession?	Do you think that standardizing antibiotic administration and prescribing is beneficial? Do you think standardizing antibiotic administration and prescribing would be beneficial for jails and prisons?
What do you think about antibiotic resistance?	Do you think there is a similar opinion in jails and prisons?
What comes to mind when you hear the term, “antimicrobial stewardship?”	How do you feel about an antimicrobial stewardship program being implemented in jails/prisons?
Why do you think formal antimicrobial stewardship programs are not common in jails/prisons?	
What are some of the reasons nurses in a jail or prison would want a formal antimicrobial stewardship program?	What are some of the reasons why nurses in the community would want a formal antimicrobial stewardship program in jails/prisons? Do you think this reasoning is different for prescribers/pharmacists?
What do you think are barriers to starting an antimicrobial stewardship program in jails/prisons?	Probe: cost, public perception, stakeholder collaboration What are some of the reasons nurses in jails or prisons would want a formal antimicrobial stewardship program?
Who are the people you think need to be involved to start this type of program?	Probe: nurses, ID doctors, pharmacists, medical directors, physicians in the community, community members, policy makers?
Do you think a resource used in the community to educate about antibiotic resistance could be used in jails or prisons? Why or why not?	What do you think this resource would look like? Does it differ from those you see in the community? Would you feel comfortable offering this advice to a patient? Do you think carceral nurses would feel the same?
I've asked you a lot of questions about antibiotic use and resistance, as well as antimicrobial stewardship programs. Is there anything you think I missed or other related topics you want to discuss?	

Self-Identified Race _____

Self-Identified Ethnicity _____

Self-Identified Gender _____

Self-Reported Level of Education _____

Age (Circle One)

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