# **Supplemental Material: Case Study Interview Guides**

# Early Implementation

# Awardee Staff Interview Guide – Management

To start, can you please tell me a little bit about your primary responsibilities within your organization?

- 1. I'd like to start by talking about the clinics and/or health systems that you're working with. Based on our understanding, you are working with [number] of clinics including [clinic names], that are participating in the cost study. Is this correct?
- 2. Can you describe how you decided which clinics to recruit for participation in CRCCP?
  - a. What factors were most important in deciding what clinics to recruit?
  - b. Were any data used to determine which clinics you decided to recruit about taking part on CRCCP? If yes, what data?
  - c. Had your organization previously worked with the clinics you recruited?
    - i. If yes, how important was this existing relationship in the decision to invite this/these clinics to participate?
    - ii. If no, how were the clinics you talked to identified?
  - d. What priorities or criteria were considered when you selected the clinics you approached?
- 3. Can you describe how you approached selected clinics to ask for their participation?
  - a. Who typically approached the clinic about participation (role of that person)?
  - b. Do you have a standard process for approaching and recruiting a clinic?
  - c. Were there any challenges in recruiting clinics? If yes, how were these resolved?
  - d. Do you have successful strategies for encouraging clinics to participate that might be helpful for other awardees?
- 4. In general, how is your organization providing ongoing support to your clinic sites?
- 5. In general, what are your observations about data quality in regard to measuring clinic level screening rates?
- 6. Have there been any unexpected outcomes either consequences or benefits of clinics participation in the program? If yes, please describe.
  - a. Have you had to terminate relationships with any clinics as a result of these unexpected consequences? If yes, please describe.
  - b. How did you resolve unexpected/unwanted consequences?

- 7. Do you typically provide funding to clinics participating in the program?
  - a. If yes:
    - i. Do you fund all clinics or only some? If some, how do you determine which to fund?
    - ii. How do you determine how much funding to give them?
    - iii. How do the clinics use your funds?
- 8. Based on our understanding, the clinics you are working with are implementing screening promotion EBIs/SAs including [EBIs/SAs]. Is this correct?
- 9. What is your process for selecting EBIs/SAs?
  - a. Who is involved in selecting EBIs/SAs?
  - b. What priorities do you consider when selecting EBIs/SAs for use in a specific clinic?
  - c. Which EBIs/SAs, if any, were already in place at baseline at the participating clinics?
  - d. Did the selection process vary by clinic? If so, how?
- 10. What kind of assessment process, if any, was used to inform planning for EBI/SA implementation?
  - a. Do you use process flow mapping? If yes:
    - i. Tell me more about this.
    - ii. How have you used the information?
  - b. Do you use QA/QI methods? If yes:
    - i. Tell me more about this.
    - ii. How have you used the information?
  - c. In what ways have you assessed clinic readiness for participation in EBI/SA implementation?
- 11. In what ways have you expanded implementation of the CRCCP?
  - a. Have you expanded by adding clinic sites over time?
  - b. Have you added EBIs/SAs within a clinic?
  - c. How many clinics do you feel you can effectively support at any given time based on the resources you currently have?
  - d. What challenges have you experienced with regard to expanding implementation?
    - i. How have you worked to overcome those challenges?
- 12. Now I'd like to ask about the non-health system partners you are working with to support implementation. Based on our understanding, your partners include [partner names]. Is this correct?
  - a. Are there other organizations you are partnering with?

- 13. Can you describe these non-health system partnerships for me?
  - a. How were these partners selected?
  - b. Did you work with these partners before their involvement in CRCCP?
    - i. If not, how did you decide to approach these partners to join the project?
  - c. How did you approach these partners about CRCCP?
  - d. Do you have a formal agreement with any of your partners?
    - i. If yes, please tell me more about the agreement.
  - e. What role do the partners play?
  - f. Do you provide funding to any of your partners? Which ones and why?
- 14. In what ways are your non-health system partners supporting community-clinical linkages?
- 15. Do you have 'champions' in any of the clinic sites? (i.e., a person within the clinic who advocates on your behalf and/or helps lead efforts in the clinic)
  - a. How has the presence of a champion affected implementation at the clinic(s)?
  - b. Was this champion recruited or did they emerge naturally?
  - c. What is the role of the person serving as a champion (physician, MA)?
  - d. What kinds of things does this champion do?
- 16. Based on your evaluation plan, we understand your evaluation data collection methods to include [specify methods]. Is this still accurate?
  - a. Have you changed or added any new evaluation methods?
  - b. We know that you report clinic and survey data to CDC as part of the overall evaluation. But can you describe any other data collection tools or other resources you have developed as a part of evaluation planning and implementation?
- 17. How are you monitoring the quality of EBI/SA implementation?
- 18. In what ways are you planning to disseminate your evaluation findings?
- 19. To what extent do you anticipate that clinics will continue to implement EBIs/SAs without CRCCP resources?
  - a. How would you plan to sustain EBI/SA implementation without CRCCP resources?
  - b. Are some interventions more easily sustained than others? (e.g., patient reminders versus patient navigators)?
  - c. How do you determine which EBI/SAs are sustainable?
    - i. Are any of the EBIs/SAs your program is currently implementing associated with a long-term systems change (in other words, have or will likely become part of your standard operating procedures)? If so, please describe.
  - d. Does your program have an implementation manual / guidelines / policies?
- 20. Do you have any closing thoughts to share about your experiences selecting intervention strategies, working with clinic sites to implement strategies, or collaborating with partners?

a. Is there any other feedback you would like to share with CDC about your participation in the CRCCP?

Now I'd like to switch gears and ask for your guidance on who else we should interview to gather information about your CRCCP efforts. We would like to speak with people representing the following roles:

- A member of your organization staff who is involved with day to day implementation of CRCCP
- 1-2 clinic staff members (can be form the same or 2 different clinics)
- 1-2 staff from your *key* partner organization(s) (from the same or 2 different partner organizations)
- 1-2 evaluation staff

Can you please provide the names and contact information for the respondents you suggest? If we are unable to speak with any of the respondents you recommend we may ask you for alternate suggestions.

Role	Name	E-mail	Phone	Comments
1. Awardee				
implementation staff				
2. Clinic staff				
3. Clinic staff				
4. Partner				
5. Partner				
6. Evaluator				
7. Evaluator				

## Awardee Staff Interview Guide – Implementers

To start, can you please tell me a little bit about your primary responsibilities within CRCCP?

- 1. Based on our discussion with [Awardee Program Management Staff], our understanding is that you are working with the following clinics as part of the CRCCP cost study. Is this correct?
- 2. In what ways are you / have you been involved in deciding which clinics to recruit for participation in CRCCP?
  - a. Can you describe how your team determined which clinics to recruit?
  - b. Had your organization previously worked with the clinics you recruited?
    - i. Was that previous work on CRCCP or another project?
- 3. What priorities or criteria were considered when selecting clinics to recruit?
- 4. In what ways are you / have you been involved in approaching selected clinics to invite them to participate in CRCCP?
  - a. Who typically approaches the clinic about participation (role of that person)?
  - b. Are there benefits to the clinic to participate that you conveyed?
  - c. Were there any challenges in recruiting clinics? If yes, how were these resolved?
  - d. Do you have successful strategies for encouraging clinics to participate that might be helpful for other awardees?
- 5. Have there been any unexpected outcomes either consequences or benefits of clinic participation in the program?
  - a. How did you resolve [unexpected consequence]?
  - b. Some awardees have described challenges in securing diagnostic colonoscopies for patients with a positive FOBT/FIT test – that is, some patients don't have resources for a follow-up colonoscopy. Is this something your program has experienced?
    - i. If yes, can you tell me more about this issue? Can you describe how your program has addressed this issue?
  - c. Have you had to terminate relationships with any clinics as a result of these consequences? If yes, please describe.
- 6. What challenges have you observed related to measuring clinic screening rates using EHRs?
  - a. How have these challenges been resolved?
    - i. Who helped to resolve the issues? (e.g., partners like HCCN, IT staff from the health dept., IT people from the health system)
  - b. Have you experienced different challenges depending on which EHR the clinic sites are using? Please describe.
  - c. What guidance would you provide to other awardees who are collecting screening rate data from clinic sites?

- 7. To what extent do you validate screening rates in the clinics you are working with?
  - a. How do you conduct validation?
    - i. Is there a standardized process you use for validation or to identify EHR problems?
    - ii. How frequently do you validate screening rates? Do you regularly conduct this type of validation for all your clinics? If not, why not?
    - iii. How are chart reviews carried out?
      - 1. What challenges have you faced in conducting the chart reviews?
      - 2. Are there strategies you recommend to other awardees that they can use to conduct chart reviews successfully?
- 8. I'd like to start by confirming the EBIs/SAs your clinic sites are implementing. Based on our understanding, you are implementing the following [EBIs/SAs]. Is this correct?
- 9. Please describe the ways in which you collaborate with the clinic sites to implement EBIs/SAs.
  - a. Is support for clinic staff provided directly by your organization, by another agency, or both? Please describe.
  - b. What kinds of help are most often needed by clinics to support them to implement EBI/SA?
    - i. In what ways has the type of support changed over time?
    - ii. In what ways has the level of support changed over time?
  - c. In cases where EBIs/SAs are already in place at baseline, what kinds of support do you provide to enhance or improve those EBIs/SAs?
  - d. Can you tell me more about how you typically interact with clinic sites? (frequency, format)
    - i. How often do you meet with clinic site staff (monthly, quarterly, other?)
    - ii. What modes of communication do you/your team use to support clinic staff (e.g. e-mail, phone, in person?)
    - iii. How much time do you spend, roughly, per month providing support to clinics?
  - e. What kinds of help do you provide clinics in reporting data?
- 10. What have been some of your successes in EBI / SA implementation?
  - a. What have been some challenges?
  - b. How were these addressed?
- 11. Now I'd like to ask about the <u>non-health system</u> partners you are working with to support implementation. Based on review of data and our discussion with [PROGRAM DIRECTOR], our understanding is that your partners include [Partner names]. Is this correct?
  - a. Are there other organizations you are partnering with?

- 12. In what ways are these non-health system partners supporting CRCCP implementation?
  - a. Can you tell me more about how you typically interact with partners (frequency, format)?
  - b. What specific activities are they involved in?
  - c. Do you have plans to continue working with any of these partners beyond CRCCP?
  - d. What are the greatest benefits these partners bring to CRCCP?
  - e. What have been some challenges in working with these partners?
- 13. In what ways have clinic champions played a role in implementation of the CRCCP?
  - a. Can you provide examples of how champions support the program?
  - b. What benefits have you seen as a result of champions?
  - c. What challenges do you think your program would face if you did not have champions?
- 14. Do you have any closing thoughts to share about your experience planning or implementing strategies in clinic sites?
  - a. Is there any other feedback you would like to share with CDC about your participation in the CRCCP?

# **FQHC Staff Interview Guide**

- 1. Can you please describe your clinic's role in CRCCP?
  - a. And what is your role in relation to CRCCP?
  - b. Why did your clinic decide to participate in this program?
  - c. What benefits do you hope to achieve?
- 2. In what ways do CRCCP staff or partners provide support to your clinic?
  - a. How often do you meet with CRCCP staff (monthly, quarterly, other)?
    - i. Has this changed over time?
  - b. What modes of communication do you use to communicate with CRCCP staff?
  - c. What topics or issues do you typically cover during meetings with CRCCP staff?
  - d. What types of help/support from CRCCP staff or partners have been most helpful to your clinic?
  - e. What kinds of support, if any, have you received from non-health system partners, such as ACS or Primary Care Associations?
  - f. In what ways has the "amount" of support provided by the awardee changed over time?
- 3. Some clinics have experienced challenges in securing diagnostic colonoscopies for patients with a positive FOBT/FIT test that is, some patients don't have resources for a follow-up colonoscopy. Is this something your clinic has experienced?
  - a. If yes, can you tell me more about this issue?
  - b. Can you describe how your clinic has addressed this issue?
- 4. Based on our understanding, your clinic is implementing the following EBIs/SAs as part of CRCCP [specify]. Is this correct?
- 5. How were these EBIs/SAs selected?
  - a. How were you / clinic staff involved in selecting EBIs/SAs and/or deciding which existing EBIs/SAs to enhance?
    - i. Who else was involved (SITE program staff, partners)?
    - ii. [if relevant] can you describe EBI/SA enhancements that were implemented?
  - b. What priorities were considered when selecting EBIs/SAs? (e.g. Existing EBI/SA, Need? Resources? Complexity? IT issues? Champions?)
    - i. Are these clinic priorities? Program priorities? Both?
- 6. Can you describe how these EBIs/SAs are being implemented at your clinic?
  - a. Who are the key people responsible for implementing these strategies?
  - b. What factors have facilitated implementation of these strategies?

- c. What have been the challenges or barriers to implementation?
  - i. How have you worked to resolve those challenges?
  - ii. What role did CRCCP staff or partners play in helping to resolve those challenges?
- 7. Are there any EBIs/SAs that you are planning to expand?
  - a. Can you tell me more about this?
  - b. What barriers are you experiencing / do you foresee with regard to expansion?
- 8. What challenges have you experienced with regard to measuring screening rates in your clinic?
  - a. How have you worked to resolve those challenges?
- 9. Is there a person or persons in your clinic that you would define as a champion for CRCCP (i.e., a person who is instrumental in supporting your strategies and helping them to move forward)?
  - a. Can you provide examples of how this person supports the program in your clinic?
  - b. Is this person a clinic staff member or an external champion?
  - c. How long has this person been serving in this role (i.e. acting as a champion)?
  - d. What benefits or actions have you seen as a result of this person's actions?
  - e. [If not already covered] What role does this person play in the clinic?
  - f. What do you think would happen in the absence of having this champion in your clinic?
- 10. Can you describe any efforts related to CRCCP to support community-clinical linkages?
- 11. Do you have any closing thoughts to share about your experiences selecting or implementing intervention strategies in your clinic?
  - a. Is there any other feedback you would like to share with CDC about your participation in the CRCCP?

## **Implementation Partner Staff Interview Guide**

To start, can you please tell me a little bit about your role within your organization?

- 1. Can you please describe your organization's role in CRCCP?
  - a. Can you tell me about specific CRCCP related activities that your organization is responsible for performing?
    - i. Who within your organization is responsible for each of these activities?
  - b. In what ways has your organization's role in CRCCP changed over time?
- 2. Has your organization had working relationship with [Awardee] prior to the CRCCP?
  - a. How long has your organization worked with [Awardee]?
  - b. What activities have you worked on with [Awardee] prior to CRCCP?
- 3. In what ways do you or other members of your staff engage with CRCCP?
  - a. How often do you meet with CRCCP staff (monthly, quarterly, other)?
    - i. Has this changed over time?
  - b. What modes of communication do you use to communicate with CRCCP staff?
  - c. What topics or issues do you typically cover during meetings with CRCCP staff?
  - d. To what extent do you interact with [CRCCP Cost Study Clinic Sites]?
  - e. What kinds of support do you provide to [CRCCP Cost Study Clinic Sites]?
- 4. How has your organization benefited from being involved with the CRCCP?
  - a. In what ways has being involved with CRCCP been helpful to your organization?
  - b. What benefits does working with your organization provide to CRCCP?
  - c. Have there been any challenges? If so, please describe.
- 5. Does [Awardee] provide your organization with funding for participation in CRCCP?
  - a. If yes:
    - i. For what program years did you receive funding?
    - ii. What specific expectations are tied to the funding?
    - iii. What agreements do you have in place to support the partnership?
- 6. In what ways will your organization be involved in expanding CRCCP?
  - a. Are you involved with expanding EBIs/SAs to additional clinic sites?
  - b. What do you see as your organization's role in CRCCP moving forward?
  - c. What barriers do you foresee your organization facing with regard to supporting CRCCP staff in scaling up?
- 7. In what ways will your organization be involved in sustaining CRCCP?

- a. How will these plans be supported?
- 8. Do you have any closing thoughts to share about your experiences collaborating with CRCCP staff or working with clinic sites to implement strategies?
  - a. Is there any other feedback you would like to share with CDC about your participation in the CRCCP?

## **Evaluation Staff Interview Guide**

- 1. Can you please describe your role in CRCCP?
- 2. Can you describe how the CRCCP evaluation staffing is structured?
  - a. Is there an evaluation team or a single evaluator?
- 3. In what ways do you or other members of the evaluation team engage with CRCCP?
  - a. How often do you meet with CRCCP staff (monthly, quarterly, other)?
  - b. [for evaluators internal to CRCCP] Do you regularly meet with the rest of the CRCCP team?" "If so, how often?
- 4. We'd like to understand how your evaluation approach has changed since the original evaluation plan was developed (in PY1). Based on the initial evaluation plan, your program is focusing on the following evaluation questions [specify].
  - a. Is this still accurate?
  - b. In what ways have these questions changed over time?
  - c. What are the primary evaluation questions you are focused on at this time?
- 5. Based on your initial evaluation plan, your program is conducting the following data collection activities [specify].
  - a. Is this still accurate?
  - b. What data collection activities have been added, eliminated, or changed?
- 6. Based on your evaluation plan, your program shares findings with stakeholders in the following ways [specify].
  - a. Is this still accurate?
- 7. What dissemination strategies have been added, eliminated, or changed?
- 8. Are there any additional changes to your evaluation approach that you haven't yet described? If so, please describe.
- 9. What has worked well so far in terms of your evaluation efforts?
- 10. Are there certain types of expertise that you feel have been important to your evaluation work?
- 11. What types of evaluation activities are you conducting independent of clinic data collection and reporting for CDC?
- 12. Are you using the clinic data that you report to CDC for your own analysis?
  - a. Do you collect additional information beyond the data that CDC requires you to report?
  - b. What questions are you addressing with this clinic data?
- 13. Can you describe any tools or resources you have developed as part of evaluation planning and implementation?
- 14. Are there evaluation results at this point that you can share?
- 15. What challenges have you faced in getting accurate screening rate data from your partner clinics?
  - a. What you have you done to address those challenges?

- b. What have you done to try and improve data quality?
- 16. What other challenges have you faced in evaluation?
  - a. How have you worked to resolve those challenges?
  - b. What advice would you give to other awardees evaluating similar strategies?
- 17. Do you have any closing thoughts to share about your experiences selecting intervention strategies to evaluate, working with CRCCP staff to evaluate the strategies, or conducting the evaluation?
  - a. Is there any other feedback you would like to share with CDC about your participation in the CRCCP?

# Late Implementation

## Awardee Staff Interview Guide - Management

To start, can you please tell me a little bit about your primary responsibilities within your organization?

- 1. Before we dive into our sustainability discussion, can you confirm the primary provider of TA to your partner health systems and clinic sites? (i.e., is it the health department or one of your partner organizations?)
- 2. In what ways is your organization supporting sustainability of CRC EBIs/SAs in partner health systems or clinic sites?
  - a. What kinds of efforts have you conducted that support clinics in sustaining CRC EBIs/SAs?
- 3. What staffing skills and capacity are needed in health systems and/or clinics to support sustainability of CRC EBIs/SAs?
  - a. How have you seen clinics sustain EBIs/SAs despite staffing/capacity challenges?
- 4. What have you observed that compromises sustainability of the CRC EBIs/SAs in the clinics?
  - a. How have you seen clinics overcome these challenges and get back on track?
  - b. How have these challenges affected the clinics' ability to sustain EBIs/SAs?
- 5. How are your partner health systems or clinic sites integrating CRC EBIs/SAs with other cancer and/or chronic disease screening activities within their health systems/clinics (e.g., breast, cervical, heart disease, diabetes, and/or other screening promotion)?
  - a. What aspects of work are integrated?
- 6. In what ways do you think integration of CRC EBIs/SAs with other activities could support sustainability of CRC screening at your partner health systems or clinic sites?
  - a. In what ways do you think integration of CRC EBIs/SAs with other activities will hinder sustainability of CRC screening within clinics?
- 7. What role, if any, do champions play in supporting sustainability of CRC EBIs/SAs in health systems or clinics?
- 8. What would happen to sustainability of CRC EBIs/SAs if an existing champion left the health system or clinic?
  - a. What safeguards, if any, do clinics have in place to address challenges that may arise from losing a champion?
- Do participating health systems or clinics receive CRCCP funding through your organization? IF YES:

9a. From your perspective, how important is CRCCP funding to your partner health systems or clinic sites for sustainability of CRC EBIs/SAs at the clinic level?

9b. Has your program identified specific program components that are important to fund (e.g., funding for EHR modifications, a patient navigator, other staff)?

9c. In what ways do you expect that the <u>level</u> of CRCCP funding will affect the potential for sustainability of EBIs/SAs within health systems or clinic partner sites?

a. Has your program identified an optimal level of funding to maximize sustainability potential for your partner health systems or clinics? If so, please describe how you determined this.

IF NO:

9d. To what extent do you think provision of CRCCCP funding health systems and clinics would affect sustainability?

- 10. What are the most important things that you can "pay for" to keep CRC EBIs/SAs in place?
- 11. Which EBIs/SAs can be more easily sustained without funding?
- 12. How important is infrastructure, such as effective EHRs, policies, standard operating procedures, and defined workflows, to sustaining EBIs?
  - a. How do these types of infrastructure support sustainability?
  - b. To what extent do the clinics you work with have these types of infrastructure in place?
  - c. To what extent are these types of infrastructure sustainable without CRCCP funding?
- 13. To what extent have you seen CRC EBIs integrated into health system or clinic operations?
  - a. To what extent have you seen CRC EBIs embedded in EHR systems?
  - b. How could this kind of integration support sustainability?
- 14. In what ways does your <u>team</u> support sustainability of CRC EBIs/SAs at the <u>clinic level</u> (e.g., through TA provided to the clinic, through suggested processes, support to adapt workflows)?
- 15. What do you see as the main lessons learned regarding sustaining CRC EBIs/SAs in your partner health systems or clinic sites?
- 16. What recommendations do you have for other programs that want to support sustainability of CRC EBIs/SAs in health systems or clinics?
- 17. Is there any other feedback you would like to share with CDC regarding sustainability of EBIs/SAs in clinics?

Additional Respondent Information

Can you please provide the names and contact information for the respondents you suggest?

Role	Name	E-mail	Phone	Comments
1. Program Staff (health department)				
2. Non-Health System Partner				

. Non-Health	System		
Partner	-		

#### **Implementation Partner Interview Guide**

To start, can you please tell me a little bit about your primary responsibilities within your organization?

- 1. In what ways is your organization supporting sustainability of CRC EBIs/SAs in partner health systems or clinic sites?
  - a. What kinds of efforts have you conducted that support clinics in sustaining CRC EBIs/SAs?
- 2. From your perspective, what factors are necessary to sustain CRC EBIs/SAs in health systems or clinic sites in the absence of CDC CRCCP funds provided by the health department?
  - a. Can you provide an example from any of the clinics you've worked with?
- 3. What factors might make maintaining EBIs/SAs in health systems or clinic sites challenging in the absence of CDC CRCCP funds provided by the health department?
  - a. How have you seen clinics maintain EBIs/SAs despite limited funding/resources?
  - b. How might health systems or clinics maintain EBIs/SAs in the absence of CDC CRCCP or other external funding?
  - c. To what extent will your organization continue working with these health systems/clinics after CDC CRCCP funding [to the health system / clinic] has ended?
- 4. In what ways have you observed health systems or clinic sites incorporating CRC EBIs/SAs into standard operating procedures/clinic processes or workflows?
  - a. In what other ways, if any, have you seen incorporation of EBIs/SAs supported within clinics over time (e.g. through leadership priorities, designated funding, through implementation at the health system level, etc.)?
- 5. From your perspective, what types of champions or champion actions best support sustainability of CRC EBIs/SAs?
  - a. How can clinics without champions facilitate sustainability of CRC EBIs/SAs?
- 6. To what extent do you anticipate that health systems or clinic sites will continue to implement CRC EBIs/SAs without CDC CRCCP funding provided by the health department?
  - a. Aside from what we've discussed, are there certain clinic characteristics, such as EHRs, staffing structure, that are more important for sustaining EBIs/SAs than others?
  - b. Are there certain EBIs/SAs that are more conducive to sustainability than others?
- 7. From your perspective, to what extent do health system or clinic site leadership demonstrate support for sustaining CRC EBIs/SAs?
  - a. Can you provide an example (e.g., commitment to program goals, allocation of staff and resources, etc.?)
- 8. Is there anything else that is important for us to know about sustaining EBIs/SAs in health systems or clinic sites?

9. Is there any other feedback you would like to share with CDC regarding sustainability of EBIs/SAs in health systems or clinic sites?