

**Form Approved**  
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**ATTACHMENT 2b:**  
**DATA COLLECTION INSTRUMENTS**  
**Prevention is Care (PIC)**

**Statement of burden for data collection instrument**

**Public reporting burden of this collection of information is estimated to average 1 hour per response including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0775)**

## **PREVENTION IS CARE (PIC)**

### **Materials Testing**

#### **In-Depth Interview Guide**

**Campaign Objective:** Encourage primary care physicians (PCPs) and Infectious Disease Specialists (IDs) who deliver care to patients living with HIV to screen their HIV patients for transmission behaviors and deliver brief messages on the importance of protecting themselves and others by reducing their risk behavior.

**Task Purpose:** Conduct materials testing to gain feedback on viability, appeal and ability to persuade providers (IDs and PCPs) who treat patients living with HIV to conduct behavioral screening and provide brief prevention messages to patients.

#### **Data Collection**

**Setting:** In-depth interviews (IDIs) will take up to 1 hour. A trained interviewer will conduct the IDIs.

**Transcription:** We will audiotape the discussions. A note taker will take notes from behind a one way mirror.

#### **I. Welcome**

Thank you for coming here today. Your participation is very important. I'm \_\_\_\_\_ and I'm from RTI, a non-profit research organization. The Centers for Disease Control and Prevention (CDC) is sponsoring this research. The purpose of this interview is hear your reactions to a communications program currently being developed by the CDC for health care providers who deliver care to people living with HIV. Your insights are very important to us and your time today is appreciated. We will have about 1 hour for our discussion.

[INTERVIEWER GIVES PARTICIPANT THE CONSENT FORM] Here is an informed consent form. Take a moment to review it and if you agree to it, please sign it.

[Interviewer gives participant 5 minutes to review and sign consent form]

- The consent form states that you have agreed to be part of a study about HIV.

Before we begin, I want to review a few ground rules for our discussion.

- Most importantly, there are **no right or wrong answers**. We want to know your opinions and what you think about the issues we will be discussing. I do not work for the people who are sponsoring this research, so don't hold back from giving me your honest opinions.
- Your participation is voluntary and you have the right to withdraw from the study at any time.
- You have probably noticed the microphones in the room. They are here because we are **audio taping**. I want to give you my full attention and not have to take a lot of notes. At the end of our discussion, I have to write a report and will refer to the tape when writing the report.
- Behind me is a **one-way mirror**. Some of the people working on this project are observing this discussion so that they can hear your opinions directly from you and take notes so that your opinions are accurately captured. However, your **identity and anything you personally say here will remain private**. Your name, address, and phone number will not be given to anyone and no one will contact you after this interview is over.
- Please turn your cell phone or beeper to vibrate or silent mode. The interview will last no more than 1 hour.
- If you need to go to the restroom during the discussion, please let me know.
- Do you have any questions before we begin?

## II. Warm up

I would like to begin our discussion by asking you to introduce yourself and tell me:

- your first name
- number of years in practice
- professional affiliations (HIVMA, AAHIVM, state, local)
- a description of your practice (size, number of patients with HIV seen per month)
- your patients' insurance coverage (Medicare, Medicaid, HMO, private insurance, self pay)
- something about the patients you see in your practice (men, women, diverse populations, age range)

### III. Questions

#### A. Goal Setting Tool

This first item we are going to look at is a tool to help you work with your patients to set goals for reducing risky behaviors and/or increasing healthy behaviors.

##### *Current Activities*

A1. Among your HIV positive patients, what kind of discussions do you currently have with your patients about risky behaviors, particularly those for HIV transmission?

A2. How often do you discuss risk behaviors with your patients?

A3. Is there any particular resource or training that you use to guide these discussions?

A4. What do you feel are some of the barriers to incorporating behavioral risk factor screening into one's practice?

PROBE:       Time  
                  Culture  
                  Number of partners

A5. What about delivering prevention messages? What are the challenges to talking to your patients about HIV prevention?

PROBE:       Time  
                  Culture  
                  Number of partners

A6. How do you try to motivate your patients to make a change in their behaviors?

A7. Are you familiar with the methods of goal setting to motivate behavior change?

A8. Do you discuss goal setting, in terms of reducing risky behaviors, with your patients? How does that usually go?

A9. Have you developed any strategies to help or improve these discussions?

A10. Have you found it better to frame your conversations with patients in terms of reducing risks or increasing health behaviors?

### ***Layout/Design***

I want to now show you a tool that is being developed to help providers address setting goals with their HIV patients so to reduce risky behaviors, as well as promote healthy behaviors.

- A10. First thing, tell me your first reaction to seeing this tool?
- A11. What do you think about its cover?
- A12. Does the title make sense to you?
- A13. What do you think about the format or layout of this tool?
- A14. Any thoughts about the colors used? How about the graphics?
- A15. How do you feel about its size?
- A16. Is there anything about its look that you think could be improved?

### ***Content***

Please take a look at its content and read through some of its sections.

- A17. After reviewing the content of the tool, what are your thoughts about it?
- A18. Is there anything that you dislike about it?
- A19. Is there anything that you particularly like?
- A20. How much of this information is new to you?
- A21. Is there any other information that you feel should be added?
- A22. Is there anything that you disagree with in terms of its recommendations?

### ***Usability***

- A23. Does the organization or flow of information make sense to you? How could you improve it?
- A24. Did you find the headings on its sections to be helpful?
- A25. Does it provide enough guidance on how to use it?

### ***Similarity/Familiarity***

- A26. Have you ever seen a tool like this before, whether related to HIV or another condition? If so, how does this compare?

### ***Use***

- A27. Do you see this tool as something you could use with your HIV positive patients?
- A28. Do you think this tool would help you in setting goals to reduce risky behaviors with your patients with HIV and AIDS?
- A29. How would you use physically use this tool in your practice? Where would you put it?
- A30. Would you use this tool with your patients? Why or why not?
- A31. Are there any other providers in your practice, such as Nurse Practitioner or Physicians Assistants, that would potentially use or benefit from it?

### ***Challenges***

- A32. Do you think you would have the time to use this tool in your practice?
- A33. Is the level of information adequate? Appropriate?
- A34. How do you think your patients would respond if you tried goal setting with them?

### ***Improvement***

- A35. What could be done to improve it?
- A36. How can we make it work better for a physician with a practice like yours?
- A37. Is the tool you see here what you thought it would be when I first described it? How is it different?

## **B. Conversation Starters Tool**

This next tool is somewhat similar to the piece we just viewed, except it is to help providers initiate conversations with their patients about risk behaviors.

### ***Current Activities***

- B1. Do you ever find it hard to bring up the topic of risk behaviors with your patients?
- B2. What are some of the challenges?
- B3. How do you typically start conversations about transmission behaviors with your HIV-positive patients?
- B4. Have you developed any of your own strategies for bring up the topic of a patients risk behaviors?

### ***Layout/Design***

- B5. Before reviewing this piece, first, let me ask what think about the look of this piece?
- B6. What do you think about its cover?
- B7. Does the title make sense to you?
- B8. What do you think about the format or layout of this piece?
- B9. Any thoughts about the colors used? How about the graphics?
- B10. How do you feel about its size?
- B11. Is there anything about its look that you think could be improved?

### ***Content***

Now go ahead a look at its content.

- B12. After reviewing the content this piece, what are your thoughts about it?
- B13. Is there anything that you dislike about it?
- B14. Is there anything that you particularly like?
- B15. Are these recommendations new to you?
- B16. Is there any other information that you feel should be added?
- B17. Is there anything that you disagree with in terms of these recommendations?

### ***Usability***

- B18. Does the organization or flow of information make sense to you? How could you improve it?
- B19. How would you like to receive materials like these? (a pocket card, on a website, in a flip chart)
- B20. Did you find the headings on its sections to be helpful?
- B21. Does it provide enough guidance on how to use it?

### ***Similarity/Familiarity***

- B22. Have you ever seen a tool like this before, whether related to HIV or another condition? If so, how does this compare?

### ***Use***

- B23. Do you see these conversation starters working with your HIV positive patients? If so, which ones? If not, why not?
- B24. How helpful would this tool be in getting the conversation started?
- B25. How would you use physically use this piece in your practice? Where would you put it?
- B26. Would you use this piece with your patients? Why or why not?
- B27. Are there any other providers in your practice, such as Nurse Practitioner or Physicians Assistants that would potentially use this or benefit from it?

### ***Challenges***

- B28. How do you think your patients would respond to these conversation starters?
- B29. What might keep you from using these conversation starters with your patients?  
PROBE:       Language  
                  Time  
                  Low Priority (i.e., due to other health problems)

### ***Improvement***

- B30. What could be done to improve this piece?
- B31. What are some other ideas for conversation starters that might be helpful to other physicians?
- B32. How can we make it work better for a physician with a practice like yours?

## **Case Study Series: *My Standard of Care***

Next we are going to be looking at piece being developed for providers that highlights some case studies on providing care and counseling to HIV positive patients.

### ***Current Activities***

- C1. Let me ask, how do you typically learn about best practices of other physicians?
- C2. Is there a way that you like to receive information regarding best practices?

I want to now show you the case study guide that is being developed.

### ***Layout/Design***

- C3. What is your first reaction to seeing this tool?
- C4. What do you think about its cover?
- C5. Does the title make sense to you?
- C6. What do you think about the format or layout of this tool?
- C7. Any thoughts about the colors used? How about the graphics?
- C8. How do you feel about its size?

Please take a look through the case studies piece

### ***Content***

- C9. Now that you have looked at its content, what are your thoughts?
- C10. Are these case studies similar to other you have seen?
- C11. Are these case study scenarios realistic to you? If not, what would make these a better scenario?
- C12. Do the issues outlined in these case studies mirror issues with your patients?
- C13. Do the people described in these case studies seem like patients you might have?
- C14. Are there myths and misconceptions about HIV do you think would be most helpful to include?
- C15. Was there anything that you disliked about them?
- C16. Was there anything that you particularly liked about them?

### ***Usability***

- C17. Does the organization of the case studies make sense to you? How can their organization be improved?
- C18. Did you find the headings/section used in this piece to be helpful?

### ***Similarity/Familiarity***

- C19. Have you ever seen a tool like this before, whether related to HIV or another disease? If so, how does this compare?

### ***Use***

- C20. How likely would you be to read through this entire piece?
- C21. Do you find information presented this way to be useful?
- C22. Do you think this tool would help you to better screen and counsel your own patients?
- C23. How helpful do you find this approach of sharing how other physicians screen patients and provide them with HIV prevention messages?

### ***Challenges***

- C24. Is the level of information adequate? Appropriate?

### ***Improvement***

- C25. What could be done to improve it?
- C26. How can we make it work better for a physician with a practice like yours?
- C27. Is the tool you see here what you thought it would be when I first described it? How is it different?
- C28. Is there anything that can be done to make the case studies easier to understand?

## **IDSA Session Extension**

The following is a summary of key learnings from an IDSA Symposium. We want to talk about the best way to present this information to physicians like you.

### **[SHOW PARTICIPANT PAPER]**

- D1. What do you think about the format or layout of this tool?
- D2. Any thoughts about the colors used? How about the graphics?
- D3. How do you feel about the size of this piece?
- D4. Are there any of these key points that you found particularly helpful?  

PROBE: Did any of the key points surprise you?
- D5. How useful did you find it to have research findings summarized as they are here?
- D6. Do you feel like this tool would help you incorporate behavioral screening and counseling into your practice? If so, how? If no, why?
- D7. How important is having the IDSA name on these recommendations?
- D8. Do you find information presented this way to be useful?
- D9. What would do with this piece in after you had read it?
- D10. How would you use this tool in your practice?
- D11. What could be done to improve this?

## **Prevention with Positives**

This next piece, unlike the others we have talked about today, is written for patients. I would like you to also take a look at it and tells us what you think.

- E1. What are your initial thoughts on this?
- E2. What do you think about the design and layout of this piece?
  - How is the length of the piece?
  - What do you think about the size?
  - Do you think it is visually appealing? Will your patients?

*Now let's talk about the content of the brochure.*

- E3. How appropriate are the topics in the brochure? Is anything missing?
- E4. In general, is the brochure written at the right reading comprehension level for your patients?

- E5. How would you use this brochure as part of your patient education efforts?
- E6. Would you personally give it to patients or delegate that responsibility to someone else? If so, who?
- E7. How comfortable would you be with giving this to your patients?
- o Would you be more comfortable giving this to some patients versus others?
  - o How do you think your patients would react if you gave them this brochure?
- E8. Where in your office do you see this being used most effectively? That is, would you place it in the waiting room, exam rooms or other locations?
- E9. What other types of educational materials would be helpful for your HIV-positive patients?
- Probes
- Topics
  - Formats

#### **IV Closing**

Okay, we are pretty much out of time. Do you have any last thoughts?

[MODERATOR WILL CHECK WITH OBSERVERS FOR ADDITIONAL QUESTIONS OR COMMENTS.]

I would like to thank you for coming here today and working hard on this. This has been very useful in helping us to evaluate the materials.

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