This survey is a tool that can be used to update a Project Connect Provider Referral Guide. It was developed by the Project Connect Los Angeles site and does not meet CDC's Office of Management and Budget (OMB) or Institutional Review Board (IRB) standards. This survey is provided as an example to aid communities in adapting Project Connect. CDC's Project Connect team recommends that this tool be adapted to meet the needs of the local area.

Throughout this document, text in *italics* represents script for the person conducting the interview.

Date: _____

Provider:

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Name			
Person Interviewed:	Till		
Interviewer:	Title		
Name			
Contact Person:			
Name		Title	
Alternate Contact:		Title	
Introduction			
Introduction			
Hello, my name is [NAME] and I'm calling from Project Conn	nect Last year w	ue asked your permission to include	
information you gave us in a provider referral guide for scho		· ·	ime to
ask you some questions to update our guide? If not, could w		-	
would you prefer for us to come in person to do the interview		a time that is more convenient for you	. 01
would you prejer jor us to come in person to do the interview			
If they ask about how long the interview would take, say:			
The interview should take approximately 10-15 minutes.			
	•		
General Clinic Information			
Please verify the following general clinic information:			
" , 33			
Q1. Clinic Address and Cross Street			
Q2. Appointment Phone Number(s)			
Q3. Does your clinic offer			
 After-school appointments (before 5pm)? 	☐ Yes	∐ No	
2. Evening appointments (after 5 pm)?	☐ Yes	□ No	
3. Weekend appointments (Sat/Sun)?	☐ Yes	□ No	
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Q4. Does your clinic offer services to both male and Males only Females only Both males and females	females?		
Q5. Does your clinic offer any of the following feature (Check all that apply) A special staff member to coordinate or over the coordina	rsee adolescent serv od for adolescents r-school hours adolescents back on clinic service		
Q6. Does your clinic or organization routinely offer o		to all sexually active adolesce	ent patients?
If yes, ask: Which type of chlamydia screening is ☐ Culture ☐ Urine-Based Test	s offered?		
Q7. Which of the following family planning methods (Check all that apply) Male condom Female condom Hormonal contraception Emergency contraception (ECP)	s do you usually prov	vide to adolescents at your clin	nic?
If yes to ECP, ask: <i>Is emergency contraception p</i> ☐ ECP as needed ☐ ECP in advance	provided in advance	or as needed?	
Q8. Do you provide mental health services for adole	escents? Yes	□ No	
If yes, ask: What services do you provide?			
Q9. Is your clinic a VFC (Vaccines for Children) provi	ider? □ Yes	□ No	
Q10. Does your clinic routinely test adolescents for	HIV? ☐ Yes	□ No	

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Q11. Is your clinic a Family PACT provider?	☐ Yes	□ No	
Q12. Is your clinic a Medi-Cal provider?	☐ Yes	□ No	
Q13. Are there any fees for the services you provide?	□ Yes	□ No	☐ Sliding Scale
Q14. Are you still taking new adolescent patients?	☐ Yes	□ No	
Q15. Do you provide services to adolescents at your site or \Box On-site only \Box Some on-site, some referred o		ferred out only	
Q16. Can we continue to list your clinic on our referral gui	de? □ Yes	s □ No	
Referrals Now I have a few questions about school nurses making referr			
Q17. In the past year, have you noticed any change in the	number of high s	chool students se	eeking services?
If increase, ask: Was this an increase in new high schools visiting more frequently? What do you think caused		vere they returnii	ng high school patients
Probe: Are you aware of any other programs o	at the schools the	at would bring stu	udents in?
If decrease, ask: What do you think caused the decre	ease?		
a. How do you keep track of new referrals?			
Probe: On a "new patient" form? Other	form?		

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b. What is done with the referral information once it has been collected?
Probe: What is it used for? How is it tracked?
Q18. In the past year, how many student patients, if any, have said that they were referred by their school nurse?
Probe: Do you remember which school they were from?
Relationship Building Q19. How much interaction does your clinic have with local public schools and their personnel?
Probe: Is there anyone at a local public school that your clinic has an ongoing relationship with or is in contact with on a regular basis? What schools? What personnel? What is the nature of the relationship?
Q20. How interested would you, your clinic doctors or other staff members be in meeting again with the school nurses who are referring patients to your clinic, at the Link Over Lunch meeting this fall?
Q21. Are you interested in making outreach or promotional materials from your facility available at the schools for the students?
If not interested, ask: Why?
If interested, ask: Do you already have materials that you would like to use?
If they have material ready: If you're interviewing in person, ask: Would you like me to take some materials today to drop off at the school?
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If they don't have material, ask: Would you like assistance in developing new materials that show the services you offer to adolescents?

Community Services

Q22. Do you provide any other community outreach services?

Probe: If there was a venue where teens hang out, are there any outreach services you would provide to them? (e.g. health education, testing, condom distribution, promotional materials, referrals)

Now I have a few questions for you about collaborating with high school nurses in our intervention schools. We are planning to hold another Link Over Lunch meeting this fall for health care providers and local high school nurses to discuss more ways you can work together to improve access to reproductive health care for teenagers in these high schools. We would like to get your thoughts and input to help us develop the agenda for this meeting.

Q23. What types of things would you want high school nurses to know about the services you provide?

Q24. What types of things would you want to know from high school nurses?

Q25. What other things would be useful to talk to high school nurses about in this meeting?

Those are all the questions I have for you. Do you have any questions for me? Thanks very much for your help.

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