

Organizational Readiness for Change (ORC) refers to the extent to which targeted organizational members (especially the implementers and intended users) are psychologically and behaviorally prepared to make the changes in organizational policies and practices that are necessary to put the innovation into practice and to support innovation use [1].

	CCOP PI & Assoc. PI	CCOP Admin	CCOP Nurses/Staff	CCOP Physicians	Hospital Leaders
What prompted <u>your organization</u> to become (part of) a CCOP? What issues did you all consider in deciding to become (part of) a CCOP? What were the “pros” and “cons,” so to speak?	X			X (possibly)	X
Thinking about the <u>other organizations</u> in your CCOP, who approached whom? What issues did you all consider in deciding to partner to become a CCOP? What were the “pros” and “cons,” so to speak?	X			X (possibly)	X
How committed were your organization’s formal leaders? How committed were your organization’s [<i>physicians, nurses</i>]? Where there any important groups or individuals who seemed unsure or perhaps reluctant?	X	X	X	X	X
How committed were the other organization’s leaders? How committed were the organizations’ [<i>physicians, nurses</i>]? Where they any important groups or individuals who seemed unsure or perhaps reluctant?	X	X	X (possibly)	X (possibly)	X
How confident were you that your CCOP could enroll 50 patients on treatment trials in the first year of your grant? What prompted you to feel this confident? Who shared your level of confidence? Who did not?	X	X	X	X	X
How confident were you that your CCOP could enroll 50 people on cancer prevention and control trials in the first year of your grant? What prompted you to feel this confident? Who shared your level of confidence? Who did not?	X	X	X	X	X
How confident were you that your CCOP could meet the	X	X	X	X	X

	CCOP PI & Assoc. PI	CCOP Admin	CCOP Nurses/Staff	CCOP Physicians	Hospital Leaders
research bases' data quality standards in the first year of your grant? What prompted you to feel this confident? Who shared your level of confidence? Who did not?					

Management support refers to hospital managers' shared resolve to pursue courses of action that promote the successful implementation of the innovation. The CCOP PI or CCOP Administrators are not considered "management" in this project.

	CCOP PI & Assoc. PI	CCOP Admin	CCOP Nurses/Staff	CCOP Physicians	Hospital Leaders
When you first got started, how supportive of the CCOP were the <u>hospital leaders</u> ? Can you think of specific things hospital leaders did or said that expressed their support, or lack of support? Were some more supportive than others? How has the level of support from hospital leaders changed since you first got started? Do you have any ideas about what could account for the changes you've described?	X	X		X	X (possibly)

Implementation Policies and Practices (IPPs) refer to the plans, practices, structures, and strategies that an organization employs to put the innovation into place to support innovation use [8]

	CCOP PI & Assoc. PI	CCOP Admin	CCOP Nurses/Staff	CCOP Physicians	Hospital Leaders
What criteria do CCOP investigators and staff use to decide on whether to open a NCI trial? Who is involved in this decision?	X	X			
What steps are involved in getting IRB approval for a new protocol? What role do CCOP investigators play? How long does it take? What kinds of issues come up in IRB review?		X			
How are responsibilities for trial recruitment, implementation, and follow-up divided between CCOP physicians and research staff (i.e., nurses and CRAs)?		X			
How are CCOP research staff distributed among components? What prompted your CCOP to use this staffing arrangement? How well does it work? What problems arise?			X		
Do some research staff work solely or primarily on cancer prevention studies? Do some work solely or primarily on symptom management studies? How well does this work? What problems arise?			X		
How many study participants does each nurse/CRA have on active treatment protocols? Cancer prevention and control protocols? Off-treatment follow-up?			X		
What skills and experiences do you look for when you hire a research staff member? How important is it for research staff to have nursing degrees?		X			
What education and training does your CCOP provide to participating physicians? Who provides it? How often?		X			

What education and training does your CCOP provide to research staff? Who provides it? How often?		X			
How does the CCOP inform physicians and research staff of new protocols or changes to existing protocols?		X			
How does the CCOP project the number of cancer treatment credits and cancer control credits it will early in the next fiscal year?		X			
What approaches or incentives does the CCOP use to encourage investigators and component institutions to earn the projected number of cancer treatment credits and cancer control credits?		X			
Does your CCOP establish accrual targets for individual investigators or component institutions? If so, how is this done?				X	
How often, and by what means, do CCOP investigators and component institutions receive feedback on their accrual performance?		X		X	
How often do CCOP research staff receive feedback on their performance? What kinds of feedback do they receive? How do they get that feedback?		X	X		
How do you identify, recruit, consent, and follow participants for cancer treatment trials? Cancer prevention trials? Symptom management trials?			X		
How do <u>non-CCOP</u> nurses in component hospitals and physician offices help with the identification of potential study participants or the administration of drugs or questionnaires?			X		
To what extent are primary care physicians and other non-oncologists assisting the CCOP with trial enrollment or protocol			X		

delivery? How many referrals come from them? How do you communicate and coordinate with them?					
<p>In addition to accrual data, do you track any of the following:</p> <ul style="list-style-type: none"> ▪ Number of referrals received from non-CCOP physicians ▪ Number of patient approached about study participation ▪ Consent rates? ▪ Participant retention rates? ▪ Average cost of recruiting and following a study participant? ▪ Average research staff load ▪ Staff productivity 		X			

Implementation Climate refers to organizational members' shared perceptions of implementation policies and practices in terms of their meaning and significance for innovation use [8]. (James & Jones, 1974; James & Snells, 1981)

	CCOP PI & Assoc. PI	CCOP Admin	CCOP Nurses/Staff	CCOP Physicians	Hospital Leaders
Do CCOP physicians have a clear idea of what the CCOP is trying to do? How about CCOP research staff?	X	X	X	X	
Do CCOP physicians know how the CCOP works (e.g., who's responsible for what, how decisions get made)? How about CCOP research staff?	X	X	X	X	
Do CCOP physicians know what they personally are supposed to do and how they are supposed to do it? How about CCOP research staff?	X	X	X	X	
Do CCOP physicians feel enthusiastic about the CCOP? How about CCOP research staff? How about CCOP research staff?	X	X	X	X	
Do CCOP physicians feel they have the knowledge, skills, and tools they need to play their part in their CCOP? Do CCOP physicians feel that the research staff has the knowledge, skills, and tools they need to play their part in the CCOP? [<i>Ask the questions conversely for the research staff.</i>]	X	X	X	X	
Do CCOP physicians feel that there are major barriers or disincentives to getting the work done? How about CCOP research staff?	X	X	X	X	
Do CCOP physicians here feel recognized and rewarded for doing their part? Do they know how well they are doing? How about CCOP research staff?	X	X	X	X	

Innovation-Values Fit refers to the extent to which targeted employees perceive that innovation use will foster the fulfillment of their values [8, 11, 13, 14]. Values are concepts or beliefs that (a) pertain to desirable end-states or behaviors, (b) transcend specific situations, and (c) guide the selection and evaluation of behavior and events [15].

	CCOP PI & Assoc. PI	CCOP Admin	CCOP Nurses/Staff	CCOP Physicians	Hospital Leaders
How important to CCOP physicians is <u>having a lot of discretion in how they treat individual patients</u> ? Do some groups of CCOP physicians hold this value more dearly than others? Is CCOP participation consistent with this value, or does it conflict with this value?	X			X	
How important to CCOP physicians is <u>participating in clinical research</u> ? Do some groups of CCOP physicians hold this value more dearly than others? Is CCOP participation consistent with this value, or does it conflict with this value?	X			X	
How important to CCOP physicians is <u>maximizing their productivity</u> ? Do some groups of CCOP physicians hold this value more dearly than others? Is CCOP participation consistent with this value, or does it conflict with this value?	X			X	
How important to CCOP physicians is <u>delivering care that is consistent with clinical trials results</u> ? Do some groups of CCOP physicians hold this value more dearly than others? Is CCOP participation consistent with this value, or does it conflict with this value?	X			X	
How important to CCOP physicians is <u>contributing to the benefit of the community</u> ? Do some groups of CCOP physicians hold this value more dearly than others? Is CCOP participation consistent with this value, or does it conflict with this value?	X			X	
How important to CCOP research staff is <u>having a lot of autonomy in how they perform their work</u> ? Does the CCOP		X	X		

support this value, or does it conflict with this value?					
How important to CCOP research staff is <u>having opportunities to learn and grow on the job</u> ? Does the CCOP support this value, or does it conflict with this value?		X	X		
How important to CCOP research staff is <u>working in a low-stress environment</u> ? Does the CCOP support this value, or does it conflict with this value?		X	X		
How important to CCOP research staff is <u>delivering care that is consistent with clinical trials results</u> ? Does the CCOP support this value, or does it conflict with this value?		X	X		
How important to CCOP physicians is <u>contributing to the benefit of the community</u> ? Does the CCOP support this value, or does it conflict with this value?		X	X		

Resource availability refers to the accessibility of financial, material, or human assets that can be used to support initial and ongoing innovation use.

Note: These questions will also generate data on **innovation-task fit** and **rival activities** and **NCI actions**.

	CCOP PI & Assoc. PI	CCOP Admin	CCOP Nurses/Staff	CCOP Physicians	Hospital Leaders
How satisfied are you with the <i>number</i> and <i>types</i> of <u>cancer treatment</u> protocols being developed by the research bases? What new kinds of cancer treatment protocols would you like to see developed?	X	X		X	
How satisfied are you with the <i>number</i> and <i>types</i> of <u>cancer prevention and control</u> protocols being developed by the research bases? What new kinds of cancer prevention and control protocols would you like to see developed?	X	X		X	
To what extent does the cooperative agreement with NCI/DCP cover the costs of your's CCOP infrastructure?					
Other than the cooperative agreement with NCI/DCP, what are this CCOP's sources of funding for conducting clinical trials? How have these funds been used?	X	X		X	
What financial or in-kind contributions do component or affiliate institutions make to this CCOP?	X	X			X
Have you experienced any difficulty hiring or retaining qualified research staff? Is the pool of qualified people adequate?		X			

Rival activities are events or actions that compete with the innovation for attention, resources, or both.

Note: Questions for **resource availability** will also generate data on **rival activities**.

	CCOP PI & Assoc. PI	CCOP Admin	CCOP Nurses/Staff	CCOP Physicians	Hospital Leaders
Have any major events occurred in your organization or your community that have taken time and attention away from the CCOP? If so, what? What impact has this event had?	X	X			X
How much competition is there among hospitals and physicians in this CCOP's service area? How has this affected your ability to recruit study participants?	X	X			
What are the advantages and disadvantages of doing both industry-sponsored and NCI-sponsored trials?	X	X			

Innovation effectiveness refers to the benefits an organization realizes from an innovation [8].

	CCOP PI & Assoc. PI	CCOP Admin	CCOP Nurses/Staff	CCOP Physicians	Hospital Leaders
How has your organization benefited from participating in the CCOP? Has there been any disadvantage to the hospital for participating?	X	X	X	X	X
Has CCOP participation had an impact on patient care? What kind of impact? Is this impact measurable?	X	X	X	X	X
Has CCOP participation had an impact on physician morale, recruitment, or retention? What kind of impact? Is this impact measurable?	X	X	X	X	X
Has CCOP participation had an impact on nurse morale, recruitment, or retention? What kind of impact? Is this impact measurable?	X	X	X	X	X
Has CCOP participation had an impact on the organization's public image (e.g. marketing value)? What kind of impact? Is this impact measurable?	X	X	X	X	X
Has CCOP participation had an impact on the organization's revenues? What kind of impact? Is this impact measurable?	X	X	X	X	X

Innovation-Task Fit refers to the extent to which the innovation is compatible with task demands, work processes, and organizational capabilities.

See questions for **resource availability**.

	CCOP PI & Assoc. PI	CCOP Admin	CCOP Nurses/Staff	CCOP Physicians	Hospital Leaders
What types of trials are <u>most</u> feasible? What makes them so? Were there any specific trials that were particularly good in terms of accrual and participation?	X	X			
What types of trials are <u>least</u> feasible? What makes them so? Were there any specific trials that were particularly bad in terms of accrual and participation?	X	X			
What problems has the CCOP encountered in doing symptom management trials? What adjustments has the CCOP made to address these challenges?		X	X		
What problems has the CCOP encountered in doing prevention trials? What adjustments has the CCOP made to address these challenges?		X	X		
What problems has the CCOP encountered in doing laboratory correlative studies? What adjustments has the CCOP made to address these challenges?		X			

Innovation champion refers to a charismatic individual who throws his/her weight behind the innovation, thus, overcoming the indifference or resistance that a new idea often provokes in an organization.

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Are there particular physician, nurses, or managers who really stand out as champions of the CCOP? By champion, I mean someone who goes above and beyond the call of duty, someone who is personally invested in making the CCOP succeed.	X	X	X	X	X

NCI/Group actions refer to the policies and practices that the NCI or cooperative groups put into place that affect CCOP implementation effectiveness.

Note: Questions for **resource availability** will also generate data on NCI actions.

	CCOP PI & Assoc. PI	CCOP Admin	CCOP Nurses/Staff	CCOP Physicians	Hospital Leaders
How much technical assistance have you received from NCI/DCP to help you get started? What technical assistance have you received? What would you like to receive?	X	X			
How much technical assistance have you received from the Research Bases to help you get started? What TA have you received? What would you like to receive?	X	X			
Have you experienced any difficulty in accessing the funding from your cooperative agreement with NCI/DCP?		X			