I'd like for you to think back to the time when people first began thinking and talking about applying to become a CCOP.

01. What prompted your <u>organization</u> to become (part of) a CCOP?

[Wait for response to this first question; then ask all of the following questions.]

- How was this decision made within your organization?
- Who participated in the decision? How much agreement was there?
- What issues did you all consider in deciding to become (part of) a CCOP? What were the "pros" and "cons," so to speak?
- What were the key factors in your decision to move forward?

02. Thinking about the other organizations in your CCOP, who approached whom?

[Wait for response to this first question; then ask all of the following questions.]

- What issues did you all consider in deciding to partner to become a CCOP?
- What were the "pros" and "cons," so to speak?
- What were the key factors in your decision to move forward?

Now, I'd like for you to move forward in time to when you received notice that your CCOP would get funded. Think back to that time...before you actually started doing clinical trials as a CCOP.

03. In your view, how ready was your organization to become a CCOP?

[Wait for response to this first question; then ask all of the following questions.] [Try to get a sense whether the views they express are idiosyncratic or shared.]

- How committed what your organization's leaders?
- In what ways did they show their commitment to becoming (part of) a CCOP?
- Were there any organizational leaders who seemed unsure or perhaps reluctant?
- How committed were your organization's [physicians, nurses, employees]?
- Where they any important groups or individuals who seemed unsure or perhaps reluctant?

04. How about the other organizations in your CCOP? How ready were they to become a CCOP?

[Wait for response to this first question; then ask all of the following questions.]

- For example, how committed the other organization's leaders?
- In what ways did they show their commitment to becoming (part of) a CCOP?
- Were there any organizational leaders who seemed unsure or perhaps reluctant?
- How committed were the organizations' [physicians, nurses, employees]?
- Where they any important groups or individuals who seemed unsure or perhaps reluctant?

05. How confident were you that your CCOP could enroll __ patients on treatment trials in the first year of your grant?

[Wait for response to this first question; then ask all of the following questions.]

- What prompted you to feel this confident?
- Who else shared your level of confidence? What accounts for that?
- Who did not share your level of confidence? What accounts for that?

06. How confident were you that your CCOP could enroll __ patients on cancer prevention and control trials in the first year of your grant?

[Wait for response to this first question; then ask all of the following questions.]

- What prompted you to feel this confident?
- Who else shared your level of confidence? What accounts for that?
- Who did not share your level of confidence? What accounts for that?
- 07. How confident were you that your CCOP could meet the research bases' data quality standards in the first year of your grant?

[Wait for response to this first question; then ask all of the following questions.]

- What prompted you to feel this confident?
- Who else shared your level of confidence? What accounts for that?
- Who did not share your level of confidence? What accounts for that?
- 08. When you first got started, how supportive of the CCOP were the hospital leaders?

[Wait for response to this first question; then ask all of the following questions.]
[Probe for a complete answer. Ask questions like, "What else did they do (or not do)?]
[Possible forms of support include (a) the provision of financial, material, human resources; (b) verbal expressions of support; (b) actions taken to overcome resistance or nurture the CCOP.]

- How did hospital leaders express (or not express) their support?
- Were some more supportive than others?
- How was the level of support from hospital leaders changed since you first got started?
- What accounts for the changes you've described?

When organizations take on new activities, they often make changes in their plans, policies, procedures, and practices in order to support those new activities. I'd like to ask you about the changes your organization has made to implement the CCOP.

- 09. What have been the most important changes your organization has made in its decision-making policies or practices? For example, have you created new committees, new administrative positions, or new lines of authority?
 - What changes has your organization in terms of :
 - Training and education (e.g., clinical trials in general, new cancer research findings)
 - Rewards or incentives (e.g., recognition, praise, monetary and non-monetary reward)
 - Persuasive communication (e.g., CCOP PI exhorts colleagues in staff meetings)
 - Workflow or workload changes (e.g., symptom management checklists)
 - New reporting relationships (e.g., CRAs report to CCOP Administrator)
 - Changes in staffing levels or mix (e.g., hiring CRAs, redistributing work roles)
 - New documentation, monitoring, or enforcement procedures (e.g., tracking systems)
 - What changes in plans, policies, procedures, or practices are missing or needed?
 - Are there any plans to introduce these changes?

10. Has your CCOP decided to focus on certain kinds of trials?

[Wait for response to this first question; then ask all of the following questions.]

- Which kinds of trials?
- Why these kinds of trials?
- What led your CCOP to make this decision?
- What have been the benefits and costs of this decision?

10. Do people here know what they are expected to do? Are tasks clearly defined?

[Wait for response to this first question; then ask all of the following questions.]
[Try to get a sense whether groups differ—for example, physicians versus nurses]
[Try to get a sense of the link between IPPs and Implementation Climate.]

- Do people here know who's responsible for what?
- Do people here know how they are supposed to get the work done?
- Do people here have the knowledge and skills they need to get the work done?
- Do people here feel that there are major barriers or disincentives to getting the work done?
- Do people here feel recognized and rewarded for getting the work done?

Now, I'd like for you to think about the physicians in your CCOP as a group. I'm going to mention several values—that is, things that CCOP physicians (as a group) might care about. For each value, please tell me whether or not this value is important to CCOP physicians, <u>and</u> whether participation in the CCOP is consistent with or supports this value.

- 11. How important to CCOP physicians is:
 - Having a lot of discretion or latitude in how they treat individual patients?
 - Participating in the advancement of science?
 - Maximizing their incomes?
 - Delivering care that is consistent with clinical trials results?
 - Contributing to the benefit of the community?

[Ask each question for each value.] [Focus on groups, not on individuals.]

- 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?

Now, I'd like you to consider the CCOP research nurses as a whole.

- 12. How important to the research nurses is:
 - Maximizing patients' welfare?
 - Participating in the advancement of science?
 - Delivering care that is consistent with clinical trials results?
 - Contributing to the benefit of the community?

[Ask each question for each value.] [Focus on groups, not on individuals.]

Is CCOP participation consistent with this value, or does it conflict with this value?

Now, I'd like you to consider the hospital leaders in your CCOP, again, as a whole.

- 13. How important to the hospital leaders is:
 - Participating in the advancement of science?
 - Maximizing hospital revenues?
 - Delivering care that is consistent with clinical trials results?
 - Contributing to the benefit of the community?

[Ask each question for each value.] [Focus on groups, not on individuals.]

- 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?

14. How satisfied are you with the *number* and *types* of <u>cancer treatment</u> protocols being developed by the research bases?

[Wait for response to this first question; then ask all of the following questions.]

- How "doable" are these cancer treatment protocols?
- Are some types of protocols more "doable" than others?
- What makes them so?
- Have you had to make adjustments to do these protocols?
- [Ask about specific protocols with high accrual and ones with low accrual.]
- What new kinds of cancer treatment protocols would you like to see developed?

15. How satisfied are you with the *number* and *types* of <u>cancer prevention and control</u> protocols being developed by the research bases?

[Wait for response to this first question; then ask all of the following questions.]

- How "doable" are these cancer treatment protocols?
- Are some types of protocols more "doable" than others?
- What makes them so?
- Have you had to make adjustment to do these protocols?
- [Ask about specific protocols with high accrual and ones with low accrual.]
- What new kinds of cancer prevention and control protocols would you like to see developed?

16. 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?
- What are the upsides to doing industry-sponsored trials?
- What are the downsides to doing industry-sponsored trials?

15. How has your organization benefited from participating in the CCOP?

[Wait for response to this first question; then ask all of the following questions.]

Has CCOP participation had an impact on:

- Patient care?
- Physician morale, recruitment, or retention?
- Nurse moral, recruitment, or retention?

- Organization's public image?
- Organization's Revenues?
- 16. 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.