This protocol was developed as part of the study, “Investigating Characteristics of Tribal Public Health System Organization and Performance” conducted through a partnership of the Michigan Public Health Institute (MPHI), Sault Ste. Marie Tribe of Chippewa Indians (Sault Tribe), and the Inter-Tribal Council of Michigan (ITCM). Principal Investigator: Dr. Julia Heany

Hello, I’m [interviewer name] and I am from the [agency name]. I am a member of the study team working on a research project funded by [name of funding agency]. As you know, we are talking with you today about your experiences working with the Tribe on efforts that affect community health. During this interview we hope to learn about the mission and purpose of the agency where you work and how your agency works with other organizations in the community to protect and promote health. As part of the interview, we will be creating a diagram called an ecomap, to represent the network of individuals at other agencies with whom you interact and exchange resources. As you mention individuals or agencies during the interview, I will write them down. Then, at the end of the interview, we will draw the eco-map, which I will explain in more depth at that time. The interview and ecomap will take between 1 and 3 hours to complete depending upon your answers.

Before we get started I need to be sure that you understand all your rights as a research participant. I have given you a consent form. Please take a few minutes to read the consent statement and let me know if you have questions or if there is any information I need to explain further.

[DIRECT INDIVIDUAL TO THE CONSENT FORM]

As this consent form states:

- Your participation in this study is totally voluntary.
- If you decide you want to quit participating at any time, it will not affect you in any way.
- The chances of experiencing risks from participating in this study are very low.
- There are no direct benefits to you for taking part in this study.
- I will be audio recording the interview as well as taking notes. The recording and typed notes will be kept confidential and secure.
- To compensate you for your participation, you will receive [incentive] when we finish the interview. It is your responsibility to know your agency policy about accepting compensation to answer questions on behalf of the agency and/or during work time.

Do you have any questions? Please indicate your consent to participate (verbally/in writing) for documentation purposes. [TELEPHONE INTERVIEW: ASK CONSENT QUESTIONS AND DOCUMENT RESPONSE; IN-PERSON INTERVIEW: COLLECT CONSENT FORM]

[HAND RESPONDENT A BLANK COPY OF THE CONSENT FORM]. This copy is for you to keep. If you have any questions about your participation in the study, or about this project in general, you may contact the study coordinator, [coordinator name]. If you have questions about your rights as a research participant you can contact [IRB Chairperson name] Institutional Review Board Chairperson. Their contact information is on the bottom of the consent form.
INTERVIEWER: Numbered, bolded items are the broad, overarching questions to be asked of all respondents. Sub-questions are probes to be used in the event that the respondent a) is unable to provide a response given the original wording of the question or b) provides a specific answer that could still benefit from further probing to get more information. Not all probes will be necessary for all respondents.

Key Informant Interview Questions

I will be asking you a series of questions. Please remember that there are not right or wrong answers; I am looking for your perspectives and opinions. Please let me know if any question is unclear.

1. **Where do you work?** [Gather full name of agency]
   a. Tell me about the organizational structure of your agency.
   b. Where do you fit within that structure? [Gather information about the department/unit the position is located within].

2. **What is your title and what are your roles at this agency?**
   a. What do you do on a day to day basis?
   b. What position do you report to (who is your supervisor)?

3. **What is your agency’s mission (or purpose)?**
   a. What is the mission (or purpose) of your department/unit specifically?

4. **What are the most important goals your agency works to achieve?**
   a. How does your agency try to achieve these goals?

5. **What types of funding support your agency?**
   a. How adequate is this funding for working toward your agency’s goals?
   b. If you had additional funding, what else would you be able to do?

6. **Who does your agency serve?**
   a. Does your agency have any restrictions on who you can and cannot serve?
      i. Are there any boundaries to the area served by your agency?
   b. Do you serve clients who are Native American? Who are members of the Tribe? [probe to understand how they identify clients as NA and/or tribal members]
7. In what ways are the Tribe’s culture, values, or traditions honored in the work of your agency?
   [Probe regarding work with specific departments, e.g. Traditional Medicine and cultural programs]

8. When I say “public health,” what does that term mean to you? What comes to mind?
   a. What does public health do? What is the purpose of public health?
   b. What agencies in this community are responsible for preventing sickness, promoting health, and making sure tribal members live in a place where they can be healthy? [probe regarding the role of the tribal health center]
   c. In what ways are public health services and medical care services different? How do they overlap?

9. [FOR TRIBAL AGENCIES ONLY] What are the responsibilities of the Tribe to protect and promote the health of tribal members and their families?
   a. What limitations does the Tribe face as leaders working to protect and promote the health of tribal members?
   b. What can’t you do that would be in the best interest of members’ health?

The next set of questions will help me better understand what role your agency plays in community health. You may only be able to answer some, or even none, of the following questions, and that is okay. If you can’t answer a question just let me know and we will move to the next one. Also, the questions ask specifically about tribal community members. If you aren’t sure how to answer a question for tribal members, in particular, just answer for the population you serve. [HAND THE RESPONDENT THE 1-PAGE INFO SHEET ON ESSENTIAL SERVICES. In the space provided on the right of the page, write down the name of any partners or collaborators that the respondent mentions during the interview, and return to this list to ask more specific questions about these partners to complete the ecomapping portion of the interview.]

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### 10 Essential Services

<table>
<thead>
<tr>
<th>Service Number</th>
<th>Description</th>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>[ES 1: Monitor Health Status to Identify Community Health Problems]</td>
<td></td>
</tr>
<tr>
<td>I.</td>
<td>What information (or data) does your agency use to assess the health status of tribal members or the factors that affect their health?</td>
<td></td>
</tr>
<tr>
<td>i.</td>
<td>Examples: national, state, or regional surveys done by the tribe, government or other agencies; tribal health clinic records such as RPMS system or GPRA reports; maternal child health data; public health data; etc.</td>
<td></td>
</tr>
<tr>
<td>ii.</td>
<td>Does your agency play a role in collecting this information? Gathering data from other places? Providing data?</td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>Does your agency participate in or lead community health assessment processes?</td>
<td></td>
</tr>
<tr>
<td>iii.</td>
<td>What gaps are there in the data available to your agency?</td>
<td></td>
</tr>
<tr>
<td>II.</td>
<td>How is that information used by your agency?</td>
<td></td>
</tr>
<tr>
<td>i.</td>
<td>Examples: Making decisions, use of resources, prioritizing, identifying health problems, grant/funding applications, etc. (See ES5 – CHIP and other plans)</td>
<td></td>
</tr>
<tr>
<td>ii.</td>
<td>What kinds of community health problems have been identified based on information/data? (Transition to ES2 –</td>
<td></td>
</tr>
</tbody>
</table>
2. [ES2: Diagnose and investigate health problems and health hazards in the tribe]
   I. How does your agency find out about threats to the health of tribal members and their families?
      i. Examples of ways to find out about health problems: Regular assessment, review of available data (see ES1 – Monitor health status), communicating with partners (See ES 4 – Community partnerships)
      ii. Examples of health problems: potential threats to health, widespread lack of insurance coverage, flu outbreak, water contamination, spike in rates of drug use, dip in rates of breastfeeding, etc.
      iii. Think about a recent health problem – how did you find out about it?
      iv. What health problems are more challenging to identify?
   II. How does your agency respond to situations/problems that threaten the health of tribal members and their families?
      i. Examples: Emergency planning, investigation, emergency response, etc.
      ii. Who is responsible (agencies, staff, etc.) for leading the response in these situations?
      iii. How effective is your agency’s response to health problems? (See ES 9 – Performance Monitoring, CQI, Evaluation)

3. [ES3: Inform, educate, and empower people about health issues.]
   I. What does your agency do to help raise awareness about making healthy choices among tribal members?
      i. Examples: health education; community forums; tribal newsletters; media such as TV, radio, billboards; social media (Facebook, twitter, etc.); email; flyers posted in the health center
      ii. What methods seem to reach people best? Seem to be most effective?
      iii. How do you tailor your messages to tribal members?
   II. What types of health information does your agency share with tribal members and their families, and how is this done?
      i. Examples: upcoming health fairs, screenings, and events; programs and services; tips for prevention; data reports
      ii. What health topics are covered most in this communication?

4. [ES4: Mobilize community partnerships to identify and solve health problems.]
   I. How do you work with other agencies and community groups on efforts to improve community health? (Make detailed notes for Eco-Mapping)
      i. Examples: leading or participating in community health partnerships and coalitions, providing technical assistance on community engagement, communicating with governing entities or advisory boards
ii. Types of partners

iii. Types of health topics/problems

iv. What partnerships are most effective? Why?

v. Who do you work with most?

vi. What other partnerships are needed to improve community health?

5. [ESS: Develop policies and plans that support individual and community health efforts.]

I. What plans does your agency work with to protect and promote the health of tribal members and their families?

   i. Examples: Community health improvement plan, strategic plan, all-hazards emergency operations plan

   ii. What topics, settings, or activities?

   iii. Who is involved?

   iv. What is the process for developing/implementing such plans and policies?

      1. Communication
      2. Documentation
      3. Stakeholder considerations
      4. Specific tools—MAPP, CHANGE, ITCA Tribal Community Health Assessment for Public Health Accreditation; Community Toolbox
      5. Revisions and updates
      6. Monitoring progress

   v. If no, what types of plans are needed?

II. What policies does your agency work on to protect and promote the health of tribal members and their families?

   i. Examples: statutes, regulations, rules, executive orders, ordinances, case law, and codes in your agency’s jurisdiction

      1. Public health laws: Environmental public health (food sanitation, lead inspection, drinking water treatment, clean air, waste-water disposal, animal/vector control), infectious disease (outbreak investigation, required newborn screenings, immunizations, infectious disease reporting requirements, quarantine, tuberculosis enforcement, STD contact tracing), chronic disease (sales of tobacco products to youth, smoke-free ordinances, adoption of bike lanes), and injury prevention (seat belt laws, helmet laws, and speed limits), worksite breastfeeding policies.

   ii. What topics, settings, or activities?

   iii. Who is involved?

   iv. What is the process for developing/implementing such policies?

      1. Communication
      2. Documentation
      3. Stakeholder considerations
4. Specific tools  
5. Revisions and updates  
6. Monitoring progress  
v. If no, what types of policies are needed?

6. [ES6: Enforce laws and regulations that protect health and ensure safety.]
   I. What health-related laws or policies does your agency help monitor?
      i. Monitoring – review, revise, update
      ii. Examples: statutes, regulations, rules, executive orders, ordinances, case law, and codes in your agency’s jurisdiction
         1. Public health laws: Environmental public health (food sanitation, lead inspection, drinking water treatment, clean air, waste-water disposal, animal/vector control), infectious disease (outbreak investigation, required newborn screenings, immunizations, infectious disease reporting requirements, quarantine, tuberculosis enforcement, STD contact tracing), chronic disease (sales of tobacco products to youth, smoke-free ordinances, adoption of bike lanes), and injury prevention (seat belt laws, helmet laws, and speed limits), worksite breastfeeding policies.
      iii. What is your agency’s level of involvement?
      iv. What other agencies are involved? (See ES 4 – Community partnerships)
   II. What does your agency do to make sure that laws or policies that impact health are followed [enforcement and compliance]?
      i. Examples: Provide community education/media, public access to information about laws, notify relevant parties of violations
      ii. What partners does your agency work with to enforce health-related laws or policies?

7. [ES7: Link people to needed personal health services and assure the provision of health care when otherwise unavailable.]
   I. What does your agency do to make sure people get the health services they need?
      i. Examples: identify populations with barriers to healthcare services (such as low-income or other disadvantaged groups); identify gaps in access; provide outreach, education or transportation services; link specific communities/populations to available services; collaborate with partners to reduce barriers (See ES 4 – Community partnerships); use culturally competent initiatives to increase healthcare access
      ii. What services does your agency connect community
members to?
1. What partners provide these services? (See ES 4 – Community partnerships)

iii. Where do gaps exist in access to health care services?
   1. Populations, geographic areas, specific services
   2. How do you determine where gaps may exist?

II. What health services does your agency offer to tribal members and their families?
   i. Examples of health care services: tobacco cessation, health screenings, chronic disease treatment (heart disease, diabetes, cancer), traditional medicine, nutrition services, communicable/infectious disease treatment, behavioral health, weight/obesity assessment pharmacy, substance abuse, emergency services, prenatal care, urgent care; mental health, psychiatry, psychology, occupational medicine, ambulatory care, dental treatment, HIV/AIDS, STDs treatment

8. [ES8: Assure a competent public health and personal healthcare workforce.]
   I. How does your agency ensure that staff members have the training or education they need for their job [health-related aspects of their job]?
      i. Examples: Partnering with local colleges or training programs, actively recruiting college students and recent grads with public health expertise
   ii. What training or education do you have for your job?
      1. Did your training/education prepare you well for current job duties?
      2. Do you feel that you need any other training or education for your job?

9. [ES9: Evaluate effectiveness, accessibility, and quality of personal and population-based health services.]
   I. How does your agency know if your programs and services are working well?
      i. How does your agency determine whether it is meeting its goals?
      ii. How does your agency evaluate its programs and services?
         1. Examples: Evaluation required by program funders, evaluating community health programs, customer satisfaction surveys, focus groups or interviews with program participants
      iii. What actions do you (your agency) take in response to performance monitoring and evaluation results?
   II. How does your agency work on improving your programs and services?
      i. Examples: Performance management, quality improvement, quality improvement plan
      ii. How does your agency get better at its work?
      iii. What performance management or quality improvement
practices does your agency use?

1. **Definitions:**
   a. **Performance management** is the practice of using data to improve performance.
   b. **Performance management systems** ensure that progress is being made toward department goals by systematically collecting and analyzing data to track results to identify opportunities and targets for improvement.
   c. **Quality improvement in public health** is the use of a deliberate and defined process to improve performance (to meet your performance targets).

10. [ES10: Research for new insights and innovative solutions to health problems]

I. **How does your agency decide which approaches, interventions, or strategies to use to promote the health of tribal members and their families?**
   i. **Examples:** evidence-based strategies, best practices, curricula, other tribes’ recommendation, existing models/frameworks/interventions
   ii. **What makes you trust that an approach is effective before you start using it?**

II. **Does your agency share lessons learned to improve your work or help other programs/communities improve?**
   i. **Examples:** evaluating programs and using results to refine approach, presenting at conferences or trainings to share innovative and effective approaches with other tribes and communities, relationships/partnerships with academic institutions or research centers, communicating results of interventions to practitioners and general community, providing technical assistance to partners/other communities to implementing effective interventions or using best practices
   ii. **What new or innovative approaches do you use? Have you shared?**

11. **Thinking about all the services you’ve described, to what extent does this agency have what it needs to deliver these services well?**

I. **How do aspects of the general community environment affect your ability to deliver services?** By “environment” we mean things like the physical environment, economics, politics, and social issues.

II. **How does the community infrastructure help or hinder your ability to deliver services?** By “infrastructure” we mean things like laws, policies, finances, services systems, and partnerships.
III. How do community resources help or hinder your ability to deliver services? By “resources” we mean things like human resources, leadership, community knowledge, community groups, or funding.

12. Thinking about everything we’ve talked about so far today, what people or organizations do you think are most influential when it comes to protecting and promoting the health of tribal members and their families?

13. What do you think are the most important things that need to be done to make the Tribe healthier?

FOR TRIBAL LEADERS/DECISION MAKERS

14. As a tribal leader, what do you think your role should be in helping the Tribe fulfill the essential public health services?

15. What impact, if any, do you believe self-determination has on health and wellbeing for the Tribe?
   I. What role does tribal self-determination play in promoting good health for tribal members?
   II. What constraints and opportunities does self-determination create for the Tribe related to health of tribal members?

16. What factors limit or support the Tribe’s ability to fully exercise self-determination for tribal member health?
   I. What policies are a factor?
   II. What systems or structures are a factor?
   III. What is the Tribe able to do?
   IV. What is the Tribe not able to do (that is desired)?

Key Informant Ecomap Protocol

1. Explain the eco-mapping process to the interviewee.
   a. Show the interviewee the legend and explain the different symbols and lines.

2. Sketch the eco-maps in collaboration with the interviewee.
   a. Begin with the partners listed during the interview. Discuss the current relationships that the interviewee has with other individuals from outside organizations/agencies.
      i. Represent each individual as a circle on the ecomap. Under the individual’s name label and list:
         a. T - title
         b. S – supervisor
         c. O – organization
      ii. Have the interviewee rate the strength of their relationship on a scale of weak to strong.
      iii. Draw a line from the individual to the interviewee; the thickness of the line and characteristics of line will depend on the strength of the relationship. Refer to the legend.
      iv. Ask if the relationship has any conflict. If so, indicate this (refer to legend).
v. Draw arrows at the ends of each line to signify the direction that communication flows.

vi. Add symbols to each relationship accordingly ($ for financial resources, % for FTE, @ for supplies/equipment). Place the symbol closest to the individual who receives that resource. If they both receive a resource, place a symbol at both ends of the arrow.

vii. Add numbers along each line to represent the 10 Essential Services that they work on with each individual.

3. Review the sketch of the eco-map with the interviewee and discuss the accuracy of the diagram.
   a. Determine if any edits are needed.
   b. Ask for thoughts and impressions about the diagram.

4. If by phone: Send them the eco-map template before the interview. After completing the eco-map, send it to them (by email or fax) so they can review it. If necessary, schedule a follow-up conversation to revise the eco-map.

Key Informant Ecomap Introductory Script

We are going to discuss the partnerships that you have with other people at agencies and organizations involved in delivering the 10 Essential Services in Public Health. The purpose of this activity is to create a picture of the network that you exist within related to delivery of the 10 Essential Services.

We are going to focus our discussion on how individuals at other agencies interact with and exchange resources with you. While we talk, I will be creating an ecomap to represent the network that you describe to me. I will draw a circle in the middle to represent you, and draw additional circles around you to represent the people in your network. The lines I draw connecting you to others represent the strength of the relationship and the flow of resources. Today, we will be using these symbols to create the ecomap (show interviewee the ecomap Legend).

The questions that I will be asking you are subjective. Please give us your honest opinion about the nature of the relationships that exist between you and the individuals at each agency. There are no right or wrong answers. Feel free to interrupt the drawing at any time to provide your input. Remember that the information you share today will be summarized and combined with the results of other ecomaps before it is shared with anyone outside of the research team, and all of the information you provide will be kept confidential. Once the ecomap has been roughly sketched, we will review it for accuracy and clarity. [If phone interview: Once the ecomap has been sketched, I will send it to you to review for accuracy and clarity. We can arrange another time to speak by phone if it needs to be revised.]

Do you have any questions before we begin?
1. We are going to start by sketching an ecomap of your current network that exists. The center circle represents you. I am going to draw circles around the inner circle to represent each individual from agencies in your network.

2. Let’s begin by reviewing the list of people and organizations that I created during the interview. Which of the following people/organizations do you PERSONALLY work with? [Probe for individuals if only given organization during interview; if they work with many people at one agency ask them for the 3 they work with the most; probe for organization if only given person during interview]. For each individual (circle), we are going to talk about the strength of your relationship with them, your communication with them, and the flow of resources as well as the contributions they make as an agency or organization toward the Ten Essential Services.

   [For each person]:
   
   a. What is this person’s title? Who is his/her supervisor? [if they do not know the supervisor, ask for the supervisor’s position; ask for each person as you go through the list]
   b. Would you describe the relationship that you have with [person] as weak, average, or strong? Is there any conflict in this relationship?
   c. What direction does communication travel? Do both of you communicate with each other, or does only one person communicate with the other?
   d. What direction do resources (staff time, money, supplies/equipment) flow? Do you share resources with each other equally, or do you primarily give or receive the resources?
   e. Looking at the list of Ten Essential Services in Public Health provided to you, which of these services do you work on with this person?

3. Who else is part of your network? What organization or agency in your community (tribal or otherwise) are they a part of? [repeat 2a-e for each person]

[IN PERSON INTERVIEW ONLY]

4. Let’s look at the diagram and see if there is anything that we need to revise or anything else that we need to add.

   a. Looking at the ecomap of your network, are there any additional partnerships with individuals that need to be added to your personal network?
   b. Are the relationships accurately represented?
   c. Is there any additional (anecdotal) information that I need to note?

5. Thinking about the ecomap that we have created, what are your impressions of the network that you exist within?

6. Are there any additional thoughts or ideas that you would like to share?

[TELEPHONE INTERVIEW]

3. Are there any additional thoughts or ideas that you would like to share?

4. I will send you a copy of the ecomap to review. When you look at the ecomap, think about whether there are any additional partnerships with individuals that need to be added to your personal
network. Also think about whether the relationships are accurately represented and if there is any additional information that should be included.

### Ecomap Legend

<table>
<thead>
<tr>
<th>Strength of relationship</th>
<th>Lines connecting the center circle and outer circles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weak</td>
<td>____ ____ ____ ____ ____ ____ ____ ____ ____ ____</td>
</tr>
<tr>
<td>Average</td>
<td>______________________________________</td>
</tr>
<tr>
<td>Strong</td>
<td>______________________________________</td>
</tr>
<tr>
<td>Conflicting relationship</td>
<td>______________________________________</td>
</tr>
</tbody>
</table>

#### Communication

<table>
<thead>
<tr>
<th>Arrows at the end of connecting lines that show direction of communication</th>
</tr>
</thead>
<tbody>
<tr>
<td>One way</td>
</tr>
</tbody>
</table>

#### Resources

<table>
<thead>
<tr>
<th>Symbols that accompany arrows that show what resources are exchanged</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff/volunteer time</td>
</tr>
<tr>
<td>Supplies and equipment</td>
</tr>
<tr>
<td>Financial support</td>
</tr>
</tbody>
</table>

### Essential Services Provided (What essential services do you work on together?)

<table>
<thead>
<tr>
<th>Essential Services Provided (What essential services do you work on together?)</th>
<th>Numbers correspond to each Essential Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monitor health status to identify community health problems.</td>
<td>1</td>
</tr>
<tr>
<td>Diagnose and investigate health problems and health hazards in the community.</td>
<td>2</td>
</tr>
<tr>
<td>Inform, educate, and empower people about health issues.</td>
<td>3</td>
</tr>
<tr>
<td>Mobilize community partnerships to identify and solve health problems.</td>
<td>4</td>
</tr>
<tr>
<td>Develop policies and plans that support individual and community health efforts.</td>
<td>5</td>
</tr>
<tr>
<td>Enforce laws and regulations that protect health and ensure safety.</td>
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<td>Link people to needed personal health services and assure the provision of health care when otherwise unavailable.</td>
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<td>Assure a competent public health and personal healthcare workforce.</td>
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<tr>
<td>Evaluate effectiveness, accessibility, and quality of personal and population-based health services.</td>
<td>9</td>
</tr>
<tr>
<td>Research for new insights and innovative solutions to health problems.</td>
<td>10</td>
</tr>
</tbody>
</table>