# FEATHER

**Interview topic guide: Patients**

This topic guide is designed to be used by a qualitative researcher in the FEATHER study. It should be used as a guide for semi-structured interviews for patients that underwent follow-up in the FALCON, ChEETAh or PENGUIN trials. Verbal or written consent for the study should be taken at the start of the interview.

<table>
<thead>
<tr>
<th><strong>Introduction to researcher and FEATHER study</strong></th>
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<tbody>
<tr>
<td>My name is [Enter name of researcher] and I am a researcher working with the [Enter name of host trial] trial team at [Enter name of local hospital]. We are hoping to learn more about why patients stay involved in a trial after providing consent, and what could encourage patients to continue involvement in a trial for research in the future. Would you be happy to learn more about the study?</td>
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<tr>
<th><strong>Provide verbal (or written) information about the research</strong></th>
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<tbody>
<tr>
<td>If in-person: I have some more information about the research study. Did you get chance to read the information about the study before meeting today? If no: Could you please read through this, and I would be very happy to answer any questions?</td>
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<tr>
<td>If telephone/video: I have some more information about the research study. Did you get chance to read the information about the study before meeting today? If no: I will take a minute to run through some more information about the study.</td>
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Infections after surgery are an important research topic which affect many patients around the world. We are talking to you about this study, FEATHER, as you were involved in the [Enter name of host trial] trial. The study is being led by the University of Birmingham in the UK in partnership with [Enter name of National Hub University].

FEATHER is exploring the challenges of staying involved in research for patients, and some of reasons why patients chose to continue to the end of a trial, or to leave the trial. We will also discuss which methods could be used to encourage patients to continue being involved a trial right to the end of their follow-up.

If you are happy to be involved, we you about your experience of follow-up, and record the interview so that we can listen back later. Everything we talk about will be kept securely and confidentially. We may use quotes from our conversation in a research report for other scientists, but these will be anonymised.

The interview usually lasts less than one hour, but it can be a little shorter or a little longer depending on how much there is to talk about. Once this interview is completed, your participation will be over, and nothing further will need to be done. If you wish, we will feedback the results of the study to you once its complete, so you can see the findings overall.

You don’t have to answer a question if you don’t want to, and you can stop the interview and recording at any time. All the information we collect will stored for a maximum of 5 years, then deleted.
Does that all make sense to you? Do you have any questions?

**Verbal (or written) confirmation of consent**

*If yes* If its ok, I will now start recording our conversation, so I am able to keep a record to listen back later. **[Start recording]**

Would you be happy to take part in an interview today?

**Opportunity for participant to ask question(s) before starting the interview**

Do you have any other questions before we begin?

### Background and context of participant

Many thanks for taking part in this interview.
- Could you tell me a little more about yourself?
  - May I ask how old you are?
  - What sort of job do you do?
  - Tell me a little about your family
  - Which area do you live in?
  - How far away is that from the hospital you were followed-up in?
- Could you tell me a little more about the surgery that you underwent?
  - What was the condition that was being treated?
  - Was it an emergency or elective operation?
  - How was your recovery after surgery?
  - Did you develop an infection in the wound after surgery?

### Overview of trial experience

- How was your experience of being involved in the [host trial]?
- How often were you followed-up after you left the hospital?
- Was follow-up done in-person, by telephone or by video call?
- Were you able to attend the follow-up appointment, or complete the telephone/video call?
- Did you make an extra visit/have an extra telephone call for the research follow-up?
- How did you feel about attending/completing the research follow-up?
- What things influenced your ability to stay involved in follow-up or to leave the study?

**Patients’ experience of [in-person/telephone/video]**

- *If in-person* What does your journey look like in coming from home to a face-to-face appointment?
- *If telephone* How did you go about completing a telephone research follow-up?
- What difficulties did you face in completing follow-up?
- Did you have any worries about completing follow-up?
- How did you overcome these challenges?
- *If yes* How did you feel about overcoming these challenges?
- What could have been done differently to improve things for the future?

### Differences between in-person and telephone follow-up

- What are the advantages of [in-person/telephone/video] trial follow-up?
- What are the disadvantages of [in-person/telephone/video] trial follow-up?
- Which do you think you would prefer for research studies in the future? And why?

**Role of the recruitment consultation**

- What was explained to you about follow-up when you gave consent for the trial?
• Was there anything that was confusing or that you couldn’t remember about the follow-up?
• Does what is explained to you about follow-up at the start of the trial affect whether you complete the 30-day follow-up?

The following questions explore some of the reasons why patients sometimes find it difficult to complete follow-up. We would love to hear about your experience.

**Capability (personal attribute): Physical & psychological**

• Did you have any physical barriers to remaining involved in [in-person/telephone/video] trial follow-up?
  **Probes:** Provide examples if necessary, e.g., disability preventing in person transport, deafness preventing telephone follow-up, ability to hold up phone to do video call
  o [If no] Why not?
  o [If yes] Can you tell me more about these?

• Did you have any psychological barriers to staying involved in the trial?
  **Probes:** Provide examples if necessary, e.g., how did patients feel about taking time out of work, travelling back to the hospital, speaking to a researcher on the phone about their symptoms.

• Is there anything we could do to make it easier for patients to stay involved in the [in-person/telephone/video] research follow-up in the future?

**Opportunity (environmental factors): Physical & social**

• Is there anything in your physical environment that made it more difficult to complete follow-up?
• Was there anything in your physical environment that helped you to complete follow-up?
  **Probes:** Provide examples, if necessary, e.g., transport to hospital, availability of a mobile phone, money to travel to hospital, physical support or barriers from local healthcare providers, family and/or community members
  • [If in-person] How did you travel back for follow-up?
  • [If in-person] Did anyone attend follow-up with you?

Is there anything we could do to make it easier for patients to stay involved in the [in-person/telephone/video] research follow-up in the future?

• Did you talk to anyone about being involved in the research?
• Are there any individuals or groups of people that made you more likely to stay involved in follow-up?
• Are there any individuals or groups of people that made you less likely to stay involved in follow-up?
  **Probes:** Provide examples if necessary, e.g., attitudes or social behaviours of community groups, leaders, family members, employers, health workers.

**Motivation: Automatic (habitual) and reflective (conscious thought)**

• What motivated you to be involved in [host trial] study?
• What motivated you to stay in the trial follow-up? [if not lost to follow-up]
• What motivated you not to complete research follow-up? [if lost to follow-up]
• Did your motivation change at all between giving the beginning and the end of your involvement in the study?

**Final reflection and comments**

• Reflecting on your experience, what is the single most important thing we could do to support patients to attend/complete their 30-day follow-up?
  o Which of these would be most important to you? [if >1 example given]
• Is there anything else you would like to tell us about your experience?
Capability is an attribute of a person that together with opportunity makes a behaviour possible or facilitates it.

Opportunity is an attribute of an environmental system that together with capability makes a behaviour possible or facilitates it.

Motivation is an aggregate of mental processes that energise and direct behaviour.

Behaviour is individual human activity that involves co-ordinated contraction of striated muscles controlled by the brain.

Physical capability is capability that involves a person's physique, and musculoskeletal functioning (e.g. balance and dexterity).

Psychological capability is capability that involves a person's mental functioning (e.g. understanding and memory).

Reflective motivation is motivation that involves conscious thought processes (e.g. plans and evaluations).

Automatic motivation is motivation that involves habitual, instinctive, drive-related, and affective processes (e.g. desires and habits).

Physical opportunity is opportunity that involves inanimate parts of the environmental system and time (e.g. financial and infrastructural resources).

Social opportunity is opportunity that involves other people and organisations (e.g. culture and social norms).

COM-B model