

FEATHER

Interview topic guide: Site Investigator/Research Staff

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 site investigators involved in 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.

*Introduction to researcher and **FEATHER** study*

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, both from researchers' and patients' perspectives. Would you be happy to learn more about the study?

Provide verbal (or written) information about the research

[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?

[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.

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 are involved in/ following up patients 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]*.

We are interested in your views because you have direct experience of working on trials that require in-person/telephone/video follow-up. Complete follow-up is very important for trials as significant bias can be introduced when patients are lost to follow-up.

FEATHER is exploring the reasons why patients chose to continue to the end of a trial, or to leave the study. 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 will ask your views on why patients continue in research studies, and record the interview so that we can listen back later. We will ask some simple questions about your experience as a researcher within the *[Enter name of host trial]*. 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 not be attributed to you.

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 10-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.

- May I ask how old you are?
- Could you tell me a little more about yourself?
 - What job do you work in?
 - What sort of hospital/university do you work in? (urban or rural)
 - Do you have experience of working with patients in the area around the hospital?
 - What is your role within the trial team?
- Have you been directly involved in trial follow-up?
 - *[If yes]* In-person follow-up, telephone follow-up, video follow-up or a combination?

Overview of follow-up pathway and perceptions of patient experiences

Overview of experience

- What is your experience of being involved in randomised trials to date?
- What were patients asked to do for follow-up in that/those trials?
 - How frequently were they seen?
 - For how long were they followed up?
 - Were they followed-up in-person, by telephone or both?
- What worked well with follow-up in that/those trials?
- What proportion of patients managed to complete follow-up in your hospital?

Investigator experience of [in-person/telephone/video]

- What difficulties have you faced in performing research follow-up?
- How did you overcome these challenges?
- What could have been done differently from your perspective to improve things for the future?

Patients' perceptions of [in-person/telephone/video]

- Based on your experiences to date, what are patients' feelings about *[in-person/telephone/video]* trial follow-up?
- Do patients express any worries about research follow-up?
- What prevents patients from staying involved in research follow-up?
- What sort of things influence this decision?
- What have you done in the past to help them overcome these challenges?
- What could encourage patients to stay involved in follow-up in 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 trials in the future? And why?

Role of the recruitment consultation

- What is explained to patients about follow-up when they are recruited to the trial?
- Do you think the recruitment consultation affects whether or not a patient complete trial follow-up?
- Do you have any experience of patients not remember about follow-up processes or getting confused during their follow-up period?

Impact on clinical teams

- Who does the follow-up in your hospital?
- Is this performed in a separate clinical area?
- Does trial follow-up put extra pressure on the clinical team or clinical areas?

The following questions focus on some of the behavioural components of patients' choice to remain within trial follow-up or leave the study.

Capability (personal attribute): Physical & psychological

- Do patients 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
 - *[If no]* Why not?
 - *[If yes]* Can you tell me more about these?
- Do patients have 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.
- What do you think makes it difficult for patients to stay involved in *[in-person/telephone/video]* research follow-up?
- What do you think would make it easier for patients to stay involved in the *[in-person/telephone/video]* research follow-up?

Opportunity (environmental factors): Physical & social

- Is there anything in patients' physical environment that supports them to remain involved in the research follow up?
- Is there anything in patients' physical environment that makes it more difficult for them to remain involved in the research follow up?
Probes: Provide examples if necessary, e.g., 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
- Are there any individuals or groups of people that make a patients more likely to stay involved in follow-up?
- Are there any individuals or groups of people that make a patient 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.

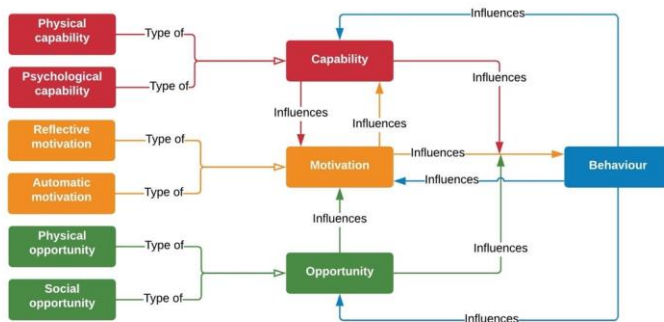
Motivation: Automatic (habitual) and reflective (conscious thought)

- What do you think motivates patients to be involved in a research study?
- What motivates patients to stay involved in a trial to the end of follow-up?
- What motivates patients' decision to not complete research follow-up?
- Does the decision to stay involved in research follow-up have any relationship with the reason why patients chose to be involved in research to begin with?
- For patients that then later drop out of research, has their motivation changed at all?
- Are there any groups of patients for whom motivation differs?

Final reflection and comments

- Reflecting on your experience, what has been the single most effective way of keeping patients involved in research to date?
- Is there anything more we could do to support patients to stay involved with research in the future?
- Is there anything else you would like to tell us about your experience?

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 •What is your perception of patient's attitudes towards sharing photos or videos for the purposes of trial follow-up?
 •What have patients shared as reasons for not wishing to sharing photos or videos?
 •How were these/could these be overcome?



<p>Capability is an attribute of a person that together with opportunity makes a behaviour possible or facilitates it.</p> <p>Opportunity is an attribute of an environmental system that together with capability makes a behaviour possible or facilitates it.</p> <p>Motivation is an aggregate of mental processes that energise and direct behaviour</p> <p>Behaviour is individual human activity that involves co-ordinated contraction of striated muscles controlled by the brain.</p> <p>Physical capability is capability that involves a person's physique, and musculoskeletal functioning (e.g. balance and dexterity).</p>	<p>Psychological capability is capability that involves a person's mental functioning (e.g. understanding and memory).</p> <p>Reflective motivation is motivation that involves conscious thought processes (e.g. plans and evaluations).</p> <p>Automatic motivation is motivation that involves habitual, instinctive, drive-related, and affective processes (e.g. desires and habits).</p> <p>Physical opportunity is opportunity that involves inanimate parts of the environmental system and time (e.g. financial and material resources).</p> <p>Social opportunity is opportunity that involves other people and organisations (e.g. culture and social norms).</p>
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COM-B model