Report Supplementary Material 16

FIT for Follow-Up end of study interview guide
Telephone interview discussion guides for each round

Round 1: Telephone interview schedule

This interview schedule is intended to be a guide for the researcher conducting the interviews. Not all of the questions listed will be asked, and the order of the questions may vary; this will depend on the participants' responses.

Key:
- **Question**
  - **Prompt**

### Interview

#### Introduction

Hello, my name is [researcher's name] and I work at the Health Behaviour Research Centre at University College London. I work for University College London and not for the NHS screening programme. This interview study is part of the FIT for Follow-up study you recently took part in.

The purpose of this interview study is to explore your experience of the faecal immunochemical test, (FIT), and your thoughts about it potentially becoming a way of monitoring people who have had bowel polyps in the past. To do this, I will ask you a series of questions regarding your completion of the FIT test/s and the results. Please go into as much detail as you can, what you have to say is very valuable information.

The interview will last approximately 30 minutes. Everything you say is strictly confidential and anonymous, and you don’t have to talk about anything that you find uncomfortable. This is not a test so there are no wrong answers. My job is to evaluate this study, so please be as honest as you can in your answers. Remember, you are free to withdraw at any time and do not need to give a reason for withdrawal. A decision not to take part or to withdraw your consent will not affect any of your future treatments within the NHS and the BCSP.

- Do you mind if I tape record our interview?
- Are you happy to continue?

#### General background

- Can you tell me a bit about yourself?
  - Employment/current job, usual job if not working or other activities
  - Educational background
  - Birthplace
  - General health/activity levels

#### Screening history and background knowledge

Before you took part in this FIT for Follow-Up study, you had participated in the NHS Bowel Cancer Screening Programme and as a result had a colonoscopy.

- Can you talk me through your experience of the Bowel Cancer Screening Programme?
  - Reaction to receiving the invitation and test kit
  - Reaction to receiving FOBt results
  - Their experience of colonoscopy
  - Reaction to colonoscopy results
  - Views of the screening programme
Can you explain to me what you understand by the term 'bowel surveillance'?

(If no, give following explanation: Follow-up recommended if large and/ or multiple polyps have been detected during colonoscopy)

How did you feel about being offered bowel surveillance, i.e. another colonoscopy in 3 years’ time?

- Their expectations of bowel surveillance before the FIT for Follow-up study, i.e. what did they expect to involve/ what did they hope to get out of surveillance, e.g. reassurance etc.
- Any concerns about having another colonoscopy/results

The FIT experience

Can you talk me through your experience of the FIT for Follow-Up study?

- Their experience of completing the FIT, e.g. ease/ acceptability etc.
- How they felt about FIT being a one-sample test? Any concerns?
- Reactions to receiving FIT normal/abnormal results
- Their experience of colonoscopy at the end of the FIT for Follow-up study
- Reaction to colonoscopy results
- Expectations of the study and were those expectations met

Views about FIT materials

- Were there any questions in the questionnaire that they didn’t understand?
- Did the questionnaire make them feel anxious?
- Would they be happy to receive all of the FIT materials again?

Future bowel surveillance

If FIT proves to be as good as colonoscopy in detecting polyps then this new test may be used as a method of follow-up in the future, either in combination with colonoscopy or on its own. How do you feel about this?

- Views of the FIT, i.e. advantages and disadvantages
- Acceptability of the FIT to others, i.e. who may have had a different pathway in the study
- Satisfaction with the FIT being used in combination with colonoscopy, i.e. annual FIT with routine colonoscopy every 3 years
- Satisfaction with FIT on its own, i.e. only having a colonoscopy if annual FIT is abnormal
- Any concerns they may have about the FIT being used as a method of follow-up
  - If they had concerns about one-sample, how do they think these could be overcome?

Closing the interview

Thank you for all of this information, it is really helpful.

Is there anything about your experience I haven’t asked that you would like to talk about?

Would you like a summary of results from this interview study?

To explain what happens next. We will transcribe this interview and once all of the interviews we are conducting are transcribed, we will begin to analyse them. Any identifiable information about you (e.g., your name) will be kept separate from the data file so that you cannot be recognised from it. The results will be presented at medical and psychological conferences and published in academic journals. You will not be identified in any publication. Unless there is anything else you would like to add, I will turn the tape recorder off now.

(If the participant is concerned about any aspect of their surveillance, suggest they call the NHS Bowel Cancer Screening Programme free phone number to get advice: 0800 707 60 60)
Round 2: Telephone interview schedule

This interview schedule is intended to be a guide for the researcher conducting the interviews. Not all of the questions listed will be asked, and the order of the questions may vary; this will depend on the participants’ responses.

Key:
- **Question**
  - **Prompt**

**Interview**

**Introduction**

Hello, my name is [researcher’s name] and I work at the Health Behaviour Research Centre at University College London. I work for University College London and not for the NHS screening programme. This interview study is part of the FIT for Follow-up study you recently took part in.

The purpose of this interview study is to explore your experience of the faecal immunochemical test, (FIT), and your thoughts about it potentially becoming a way of monitoring people who have had bowel polyps in the past. To do this, I will ask you a series of questions regarding your completion of the FIT test/s and the results. Please go into as much detail as you can, what you have to say is very valuable information.

The interview will last approximately 30 minutes. Everything you say is strictly confidential and anonymous, and you don’t have to talk about anything that you find uncomfortable. This is not a test so there are no wrong answers. My job is to evaluate this study, so please be as honest as you can in your answers. Remember, you are free to withdraw at any time and do not need to give a reason for withdrawal. A decision not to take part or to withdraw your consent will not affect any of your future treatments within the NHS and the BCSP

- Do you mind if I tape record our interview?
- Are you happy to continue?

**General background**

- **So to begin with, why don’t you tell me a bit about yourself?**
  - Age
  - Employment/current job, usual job if not working or other activities
  - Educational background
  - Birthplace
  - General health/activity levels
  - Family? Grandkids?
  - Living arrangements

**The FIT experience**

- **Talk me through your experience of the FIT for Follow-Up study.**
  - What are your views of the FIT itself, i.e. advantages and disadvantages
  - How did you find completing your most recent FIT test? e.g. ease/acceptability, compared to FOBt
  - How did completing the second FIT compare to your first experience of the FIT?
  - How did you feel about FIT being a one-sample test? Any concerns?
  - What did you expect the results of the second test to be?
  - How did you feel when you received an abnormal FIT result, after 1st round was normal
    - How did this make you feel about FIT?
  - Tell me about your most recent colonoscopy. How was that?
  - How did you feel when you got the results of your recent colonoscopy, after 1st round was normal
    - How did this make you feel about FIT?
  - Did you have any expectations of the FIT study and were those expectations met?
Future bowel surveillance

- If FIT proves to be as good as colonoscopy at detecting polyps then this new test may be used as a method of follow-up in the future for individuals like yourself, who have had polyps removed after having an abnormal FOB test. The FIT may either be offered in combination with colonoscopy (i.e. you would receive an annual FIT and a colonoscopy every three years) or on its own (i.e. you would receive an annual FIT and only have a colonoscopy if you receive an abnormal FIT result). How do you feel about this? What are your views on this?
- Do you have any concerns?
  - How satisfied would you be if the FIT was offered in combination with colonoscopy, i.e. annual FIT with routine colonoscopy every 3 years or earlier if an abnormal FIT result is found
  - How satisfied would you be with FIT on its own, i.e. only having a colonoscopy if and when an annual FIT is abnormal
  - Do you have any concerns about the FIT being used as a method of follow-up
    - [If they had concerns about one-sample] How do you think these could be overcome?

Closing the interview

Thank you for all of this information, it is really helpful.

- Is there anything about your experience I haven’t asked that you would like to talk about?
- Would you like a summary of results from this interview study?

To explain what happens next. We will transcribe this interview and once all of the interviews we are conducting are transcribed, we will begin to analyse them. Any identifiable information about you (e.g., your name) will be kept separate from the data file so that you cannot be recognised from it. Any names that you have mentioned during the interview will also be changed in order to ensure anonymity and confidentiality. The results will be presented at medical and psychological conferences and published in academic journals. You will not be identified in any publication. Unless there is anything else you would like to add, I will turn the tape recorder off now.

(If the participant is concerned about any aspect of their surveillance, suggest they call the NHS Bowel Cancer Screening Programme free phone number to get advice: 0800 707 60 60)
**Round 3: Telephone interview schedule**

This interview schedule is intended to be a guide for the researcher conducting the interviews. Not all of the questions listed will be asked, and the order of the questions may vary; this will depend on the participants’ responses.

Key:
- **Question**
- **Prompt**

**Interview**

**Introduction**

Hello, my name is [researcher’s name] and I work at the Health Behaviour Research Centre at University College London. I work for University College London and not for the NHS Bowel Cancer Screening Programme. This interview study is part of the FIT for Follow-up study you recently took part in.

The purpose of this interview study is to explore your experience of the faecal immunochemical test (FIT), and your thoughts about it potentially becoming a way of monitoring people who have had bowel polyps in the past. To do this, I will ask you a series of questions regarding your completion of the FIT tests and the results. Please go into as much detail as you can, what you have to say is very valuable information.

The interview will last approximately 30 minutes. Everything you say is strictly confidential and anonymous, and you don’t have to talk about anything that you find uncomfortable. This is not a test so there are no wrong answers. My job is to evaluate this study, so please be as honest as you can in your answers. Remember, you are free to withdraw at any time and do not need to give a reason for withdrawal. A decision not to take part or to withdraw your consent will not affect any of your future treatments within the NHS and the NHS Bowel Cancer Screening Programme.

- Do you mind if I tape record our interview?
- Are you happy to continue?

**General background**

- So to begin with, why don’t you tell me a bit about yourself?
  - Age
  - Employment/current job, usual job if not working or other activities
  - Educational background
  - Birthplace
  - General health/activity levels
  - Family? Grandkids?
  - Living arrangements

**The FIT experience**

- Talk me through your experience of the FIT for Follow-Up study.
  - What are your views of the FIT itself, i.e. advantages and disadvantages
  - How did you find completing your most recent FIT test? e.g. ease/acceptability, compared to FOBT
  - How did completing the third FIT compare to your first two experiences of the FIT?
  - How did you feel about FIT being a one-sample test? Any concerns?
  - What did you expect the results of the third test to be?
  - How did you feel when you received an abnormal FIT result, after the 1st and 2nd rounds were normal?
    - How did this make you feel about FIT?
  - Tell me about your most recent colonoscopy. How was that?
  - How did you feel when you got the results of your recent colonoscopy, after 1st, 2nd and 3rd rounds were normal/1st and 2nd rounds were normal and 3rd round was abnormal
Future bowel surveillance

- If FIT proves to be as good as colonoscopy at detecting polyps then this new test may be used as a method of follow-up in the future for individuals like yourself, who have had polyps removed after having an abnormal FOB test. The FIT may either be offered in combination with colonoscopy (i.e. you would receive an annual FIT and a colonoscopy every three years) or on its own (i.e. you would receive an annual FIT and only have a colonoscopy if you receive an abnormal FIT result). How do you feel about this? What are your views on this?
- Do you have any concerns?
  - How satisfied would you be if the FIT was offered in combination with colonoscopy, i.e. annual FIT with routine colonoscopy every 3 years or earlier if an abnormal FIT result is found
  - How satisfied would you be with FIT on its own, i.e. only having a colonoscopy if and when an annual FIT is abnormal
  - Do you have any concerns about the FIT being used as a method of follow-up
    - [If they had concerns about one-sample] How do you think these could be overcome?

Closing the interview

Thank you for all of this information, it is really helpful.

- Is there anything about your experience I haven’t asked that you would like to talk about?
- Would you like a summary of results from this interview study?

To explain what happens next. We will transcribe this interview and once all of the interviews we are conducting are transcribed, we will begin to analyse them. Any identifiable information about you (e.g., your name) will be kept separate from the data file so that you cannot be recognised from it. Any names that you have mentioned during the interview will also be changed in order to ensure anonymity and confidentiality. The results will be presented at medical and psychological conferences and published in academic journals. You will not be identified in any publication. Unless there is anything else you would like to add, I will turn the tape recorder off now.

(If the participant is concerned about any aspect of their surveillance, suggest they call the NHS Bowel Cancer Screening Programme freephone number to get advice: 0800 707 60 60)