3D Process Evaluation Interview schedules

All interviews to begin:

Thank you for agreeing to take part in this interview. The interview should take less than an hour to complete.

Introductions

Do you have any questions before we begin?

The purpose of the conversation/interview is to maximise the opportunity to implement the intervention should it prove to be effective.

Can you confirm that you are happy for the interview to be recorded?

Please can you sign to consent to us recording the interview?

1. Healthcare commissioners

Have you had a chance to read the 3D study summary that I sent you?

- If no, would you like to read it before we start?

What are your thoughts about the 3D study? Anything need clarifying? What interests you about it?

What are the priorities, interests, targets and needs for commissioners currently?

- How much of a priority are long term conditions?
- What issues are there in commissioning for long-term conditions?
- Does 3D address any of the commissioning priorities?

How does multi-morbidity (the co-existence in one patient of 2 or more long-term conditions) affect healthcare commissioning?

- Does 3D address any of this?

What difficulties/issues do you foresee with the trial?

What potential benefits do you foresee?

Which outcomes are of most interest to you as a commissioner? (impact on patients, costs, practices' responses)

Who should be informed of the results and how should that information be shared?

If the intervention is successful are there any particular barriers that might prevent the intervention being implemented?

2. Lead GP, practice manager and nurse (pre-intervention)

Thank you for agreeing to take part in this interview. The interview should take less than an hour to complete.

Do you have any questions before we begin?

Can you confirm that you are happy for the interview to be recorded?

I would like to clarify that I am separate from the implementation team. My role is to explore how it is actually received and implemented in each practice and whether there are failings in the intervention we have designed. If you have problems with or questions about implementing the intervention, please contact [researcher]. If you have opinions about it, please speak to me.

What do you think of the 3D intervention?

How is it similar to what you already do or plan to do?

How is it different from what you already do or plan to do?

What did you think of the training?

       How might it have been improved?

How do you think it might affect the practice?

       Difficulties - What will be the main challenges?

       Benefits

       Roles of doctors, nurses and reception staff

How do you think it might affect your practice?

       Difficulties – what concerns do you have?

       Benefits

How do you think it might change the patients' experience?

How might it affect different types of patient?

Is there anything else you would like to say?

Thank you!

3. Post-implementation GPs and nurse

1. Response to intervention:

Why do you think the practice decided to take part in 3D

What has it been like taking part in the intervention?

Do you think it has changed your practice in any way?

What perceived benefits, downsides, and unintended consequences both positive and negative?

How has it affected the roles of the nurse and doctor and team working in general? How has it affected the management of LTCs? *Goal setting?*

How do you think this intervention and your role in it supports patient-centred care, if at all?

How do you think patients have responded? Who do you think has benefitted most/least?

What difficulties have there been in delivering the intervention? (How easy was it to organise their care in this way?)

What helped to deliver the intervention? (whole system change or pockets?)

How adequate was the preparation by, and support from, the research team?

How you were able to integrate the template into your consultation or not i.e. did you use it? We realise it is not ideal for everyone and would like to know how it could be improved?

Are there any elements of the intervention that are particularly useful or need changing?
> *Identifying concerns*
> *Depression screening*
> *Goal negotiation*
> *Care plans*
> *Length of appointment*
> *Pharmacy review*
> *Continuity of care*

2. Have your views on the intervention changed in any way from when it was first introduced?

3. What arrangements have been made, if any, for housebound/nursing home patients?

4. Maintenance:

What would encourage you to keep this system of care for multi-morbid patients?

What will you do now? Are there any elements you might take forward? If so why and if not why not? (Distinguish between concept not being enough of a priority (if so why not?) and whether or not this is the right way to do it)

Does anything need to change? What would make it easier to implement? What would you do differently?

How have local circumstances affected what you did? Has that changed during the study?

5. Is there anything else you would like to say?

4. Post implementation - administrator

What is your opinion of the intervention?

What perceived benefits, downsides, and unintended consequences both positive and negative?

How has it affected the management of LTCs?

How do you think patients have responded? Which patients do you think have benefitted most?

How difficult has it been to arrange appointments and to manage the searches etc?

What has your process been?

What helped the process?

What would have made it easier?

What elements of 3D do you think would be worth continuing?

5. Questions for patients - post-intervention individual interviews and focus group

Including PPI suggestions

- Can you comment on the care you receive from your GP practice in general and for your long-term conditions in particular?

- What is most important to you about the way your care is provided?

- Is there anything that you would like to change/improve? If so how?

- What do you think of the 3D system?

- What, if anything, is different about your care?

- Has it had any effect on your health?

- Have you had any care or intervention that you don't think you would have had without 3D?

- Would you like to see the 3D system continuing?

- If it was not all continued what would be the most important parts to continue?

6. Follow-on PATIENT interview following consultation observation/recording

1. How do you feel the consultation went?

2. What went particularly well or what did you particularly like?

3. What, if anything, were you not happy about? *(template, timing, any particular questions)*

4. How well do you feel the nurse understood what you were concerned about?

5. How well do you feel the doctor understood what you were concerned about?

6. What had you planned to talk about and what did you want to agree a plan for before you went into the appointment?

7. Was anything not covered that you had wanted to talk about?

8. What do you think you will discuss with the doctor? or What plan have you come away with?

9. Was there anything that surprised you?

10. How happy were you with the amount of time you had?

11. How conscious were you of the computer? Did it interfere with the discussion with the doctor/nurse

12. Playback of any bits that were notable because of the patient's or clinician's reaction or lack of response

7. Follow-on HEALTH PROFESSIONAL interview following consultation observation/recording

1. How do you feel the consultation went?

2. What, if anything, would you have done differently and if so why?

3. What went particularly well?

4. How did the timing go?

5. How happy were you with how it was structured?

6. How easy was it to integrate use of the template?

7. How easy was it to get a complete picture of the patient's concerns?

8. How do you feel the patient responded?

9. What had you planned to talk about and/or what did you want to agree a plan for?

10. Was anything not covered that you had wanted to talk about?

11. GP
    a. How much did you use the nurse's agenda and how helpful was it?

    b. How helpful was the medication review?

    c. Were you happy with the plan? Do you think the patient was happy with the plan?

12. Was there anything that surprised you?

13. Playback of any bits that were notable because of the patient's or clinician's reaction or lack of response

8. **Focus group for patients: 60-90 mins**

Materials: Flipchart, Post-it notes, Pens, vouchers, tape recorder

Agree ground rules.
Can you comment on the care you receive from your GP practice in general and for your long-term conditions in particular?
What is most important to you about the way your care is provided?
Is there anything that you would like to change/improve? If so how?
What do you think of the 3D system?
What, if anything, is different about your care?
Has it had any effect on your health?
Have you had any care or intervention that you don't think you would have had without 3D?
Would you like to see the 3D system continuing?
If it was not all continued what would be the most important parts to continue?

Content and timing	Aim and objectives	Methods and materials
Welcome, introductions and ground rules 10 mins	Establish safe and comfortable group ambience that will facilitate discussion. Establish understanding of purpose of focus group Explain about confidentiality, use of anonymous quotes Describe trial and explain reason for focus group	Thank for participation. Introductions: Introduce self and scribe. Introduction of each person, including how long at current practice and why taking part in trial. Remind re: confidentiality

Focus on care prior to 3D 20 mins	Identify problems with managing multi-morbidity and current care for multi-morbidity and what they would like to change. Do they attend chronic disease clinics and how does this work for them?	**'Can you comment on the care you normally receive from your GP practice and how well it addresses the combination of your long-term conditions?'** Prompt them to think about their current care, and what the problems are. How many clinics attended, who they see, continuity etc **'What is most important to you in the way your care is provided and what would you like to see changed, if anything?'** If needs more stimulus, ask group to write answers on post – it notes Flipchart results and group similar together
3D study - expectations 10 mins	Understand why they decided to take part in 3D study. Elicit views about 3D and what their experience has been	**'What was it that decided you to take part in the 3D trial?'** **'What did you understand from the invitation letter? To what extent have you have experienced what you expected?** **What do you think of the 3D system?** **What do you think is important about it?**
3D study – difference from usual care 20 mins	Understand what difference 3D has made, if any.	**To what extent has it made any difference to your care? Extra time? Better continuity? Any difference in booking appointments? Your agenda? Collaboration in health plans? Greater clarity/written plan?** **Have you had any care or intervention that you don't think you would have had without 3D?** **Has it had any effect on your health?** If difficult ask each person to mention 2 differences
In the future 5 mins	Explore views on what is worth continuing	**Would you like to see the 3D system continuing?** **If it was not all continued what would be the most important parts to continue?** try to achieve consensus – write down
Ending 5 mins		Thank everyone Vouchers to give out

9. 3D polypharmacy reviews: Topic guide – interviews with GPs

1. *Introduction and background*

- Thanks, introduce self, re-state purpose of the interview (particularly interested in medication reviews for patients with polypharmacy), structure (consent, background info about them, usual practice, 3D approach case patients, anything missed)

- If verbal consent being taken – check information sheet has been read & if not go over key points then:

  You confirm that you have read and understood the Clinician Information Sheet (dated [date of final version], version [x]) for the study. You have had the opportunity to consider the information, ask questions and have had these answered satisfactorily

  You understand that your participation is voluntary and that you are free to withdraw at any time, without giving any reason and without my employment or legal rights being affected

  You understand that responsible individuals may look at sections of the study data about me to carry out monitoring for the research sponsor or ethics committee

  You agree to take part in this study, to audio recording of the interview and publishing of anonymised quotes

- Background information on participant (e.g. job role, number of years working in this role, clinical interests/responsibilities outside this role)

2. *Usual practice*

- Before we get into the specifics, I'm interested in understanding how repeat medications are reviewed in your practice?' [how often, within/outside of consultations, patient involvement, purpose, barriers/facilitators]
- Can you tell me about your experience of reviewing medications for patients with polypharmacy ? [different to other medication reviews?]
- Do pharmacists play a role in medication reviews in your practice? [CCG pharmacist or practice pharmacist]
- Are any other non-GP staff involved in medication reviews in your practice?

3. Usual practice case patients
- Can you think of any non-3D patients who are prescribed lots of medications who you could look up on Emis?
- Could you talk through how you might review their medications? [Is that typical?]

4. 3D Study
- I'd like to ask you to focus more on the 3D Study now. How have you found reviewing patient's medications during the 3D consultations? [purpose of the reviews; pharmacist recommendations, patient involvement, types of changes made, examples]

5. 3D Study case patients (2-3 for each interview)
- Can you have a read over the record for this patient and talk me through how you might have come to the decisions about their medications? [changes made; pharmacist recommendations – looked at, useful, acted on, concerns; patient involvement; typical of other reviews; same/different to usual practice]

6. Any other issues
- Any other issues you would like to raise?

10. 3D polypharmacy reviews: Topic guide – interviews with pharmacists

7. *Introduction and background*

- Thanks, introduce self, re-state purpose of the interview (particularly interested in medication reviews for patients with polypharmacy), structure (consent, background info about them, usual practice, 3D approach case patients, anything missed). Might write a couple of notes during the interview if that's ok?

- If verbal consent being taken – check information sheet has been read & if not go over key points then:

  You confirm that you have read and understood the Clinician Information Sheet (dated [date of final version], version [x]) for the study. You have had the opportunity to consider the information, ask questions and have had these answered satisfactorily

  You understand that your participation is voluntary and that you are free to withdraw at any time, without giving any reason and without my employment or legal rights being affected

  You understand that responsible individuals may look at sections of the study data about me to carry out monitoring for the research sponsor or ethics committee

  You agree to take part in this study, to audio recording of the interview and publishing of anonymised quotes

- Background information on participant (e.g. job role, number of years working in this role, clinical interests/responsibilities outside this role)

8. *Usual practice*

- Before we get into the specifics, I want to find out a bit more about your role as a pharmacist outside of the 3D study. In particular, whether you are involved in medication reviews for patients? [driven by cost or CCG targets or led by the practice?, face to face or computer led? Useful or not? Barriers, facilitators]
- Can you tell me about the last time you were involved in medication reviews for a practice? [typical?]
- How have you found working with practices?
- Have you been involved in medication reviews for patients with polypharmacy? [driven by cost or CCG targets or led by the practice?, face to face or computer led? Useful or not? Barriers, facilitators]

9. 3D Study case patients (2-3 for each interview)

- Before we go on to talk about the case study patients, can you tell me any thoughts you have about the medication reviews for the 3D study? (working with practices, doing the reviews, purpose, useful)
- Can you have a read over the record for this patient and talk me through the process you might have gone through when you reviewed this patient's medications?
- Recommendations (types of meds stopped/started, purpose of stopping/starting them e.g. safety, pill burden, guidelines)
- Typical of other 3D reviews?
- Same/different to usual practice
- Reflect on whether the GP acted on the recommendations (typical?)

10. Any other issues

- Any other issues you would like to raise?