Recruitment and Follow-up Scripts for Clinic Staff

Pre-Appointment Contact - Patient Answers Phone

Hi, may I please speak with [PATIENT NAME] [Patient confirms identity or comes to phone]

Hi, my name is [COORDINATOR NAME] and I am the coordinator for a study looking at the health of people living with HIV at [CLINIC NAME]. This study is being conducted by RTI International, a not-for profit research organization, with funding from the Centers for Disease Control and Prevention.

If you are interested, you will be enrolled in a year-long study. We will collect information from your health records during that time. We will not be able to link your information back to your name. You will be randomly assigned to one of two groups. Depending on your group, you may be asked to complete an online video tool that provides information about living with HIV at your next three primary care appointments at the clinic. As a token of appreciation for your participation, you will receive a \$50 gift card at your next primary care visit and another \$50 gift card after a year of participating in the study. We will go over this information again at your next appointment on [XX/XX] if you are interested in participating. You do not have to decide if you want to participate right now.

Do you have any questions about the study?

[Answer Questions]

Great! I will meet you after you check in for your appointment on [DATE] to go over some more details about the study.

Pre-Appointment Contact - Voice Message Script

Hello this message is for [PATIENT NAME].

My name is [COORDINATOR NAME] and I am the coordinator for a study at [CLINIC NAME]. This study is being conducted by RTI International, a not-for profit research organization, with funding from the Centers for Disease Control and Prevention and you are eligible to participate.

Please call me at [XXX-XXX-XXXX] if you would like to talk more about the study and what will happen if you decide to participate. Again, that number is [XXX-XXX-XXXX]. Thank you.

[If patient calls back, use patient answers phone script above]

Recruitment

Hi, my name is [COORDINATOR NAME]. I spoke to you on the phone on [DATE] to talk about a study that you are eligible to participate in. Are you interested in talking more about this study? You do not need to decide right now if you want to participate.

[If NO: TERMINATE]: Thank you so much for your time.

[IF YES:] Great. I have some information that I would like to share with you and I will be happy to answer any questions that you may have. Let's move into a more private area to talk about the study.

[Move to office/another room]

[Hand participant consent form to read over while verbally giving information below]

You are eligible to participate because you are 18 years of age or older, you are HIV positive, and your last lab results show that you had an unsuppressed viral load. An unsuppressed viral load means that your viral load count was 200 copies/mL or more. If you decide to participate, you will be randomly assigned to one of two groups. Depending on your group, you may be asked to complete an online tool that provides information about living with HIV today and at your next two primary care appointments at the clinic. I will give you a study ID so that all information collected is kept confidential. As a token of appreciation for your participation, you will receive a \$50 gift card today and another \$50 gift card after a year of participating in the study.

As part of this study, we will also collect data from your electronic health record. We will collect information from everyone in the study, even if they do not complete the tool. Your clinic will give the information to the researchers at RTI without your name or any other information that could identify you. This means that the researchers cannot link your health information back to your name. All of the information that will be given to RTI is listed on your copy of this form. You can call this number if you have any questions or concerns about your participation at any time.

Do you have any questions?

[Answer patient questions]

[If did not agree:] Thank you for your interest in our study. Your decision not to participate will not affect your care at the clinic in any way.

[[If agree:] Great! Thanks so much for agreeing to participate. Please sign and date the conesnt form I handed you. Then I am going to create a study ID that we will use instead of your name to identify you during the study. You will be assigned to one of two groups: one group will complete the tool, the other group will not.

[COLLECT SIGNED CONSENT. GENERATE STUDY ID. RANDOMIZE]

[If control:] You will not complete the tool, but we will still collect your information. Here is the first \$50 gift card as a token of our appreciation for your participation in this study.
[If intervention:] [GO TO ONBOARDING SCRIPT BELOW]

Patient Telephone Script: 12.5 Month Follow-Up

PATIENT ANSWERS OR IS AVAILABLE

Hi, may I speak with **[patient's name].**

[Patient comes to phone/Patient identifies him/herself]

My name is __[provide name and job title] and I'm calling from your doctor's office at [name of clinic]. Hi, [patient's name]. Could I please verify your date of date of birth? (Verify the patient's DOB)

Thank you. Again, I am calling from <u>[Patient's Provider's Name]</u> office. We have you on a list of patients that we have not seen in the clinic for a while. Are you still an <u>[name of clinic]</u> clinic patient?

No

May I ask why you stopped receiving care from the [name of clinic]?

[Enter PHC Outreach Questions answer in access database]

Are you receiving care currently from another clinic?
[Enter PHC Outreach Questions answer in access database]

Yes

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[Enter PHC Outreach Questions answer in access]

No

Would you like to make an appointment to come back to this clinic? [Enter PHC Outreach Questions answer in access database]

END

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No

I know everyone has a lot going on, but may I ask why you don't want an appointment?

[Enter PHC Outreach Questions answer in access database]

If you change your mind about scheduling an appointment, those patients who complete their follow-up visit for the Positive Health Check study will receive their second \$50 gift card. If you change your mind, please feel free to contact the clinic any time.

[Provide the clinic's telephone number]

Yes

We like to see our patients in the clinic every 3 to 4 months to ensure they are doing well . I know everybody has a lot going on but May I ask why you have not seen us lately?

[Enter PHC Outreach Questions answer in access database]

Can I help you schedule an appointment?

Yes

[Notify the scheduler if needed. If appointment is scheduled by outreach coordinator, enter information in access database]

No [Please see secondary flow diagram on the next page]

Please arrive 30 min early to complete any paperwork. In addition, since this will be your follow-up visit for the Positive Health Check study, you will be receiving the second \$50 gift card.

[Repeat back appointment date and times. Remind Patient of RYAN WHITE RENEWAL if necessary]

Is there anything else I can do for you today?

If you have any questions before your appointment please call the front desk and they will direct you to the right person to answer your question.

[Provide the clinic's telephone number]

[If appointment made by clinic scheduler, enter appointment information in the access database]

We like to see our patients in the clinic every 3 t months to ensure they are doing well . I know ever Ahove has a lot going on but May I ask why you have not us lately?

Above. Continue as directed below.

[Enter PHC Outreach Questions answer in acce database]

Can I help you schedule an appointment?

No

Is there another, more convenient time I could call back to schedule an appointment for you? Or, I could give you my office number and you could call back at a time that works better for you. Would either of those options work?

Yes

END

[If patient states they would like the number for the outreach coordinator provide the patient with the coordinator's private line.]

This line is private and secure so please feel free to leave a message if I am not available.

Thank you. I look forward to speaking with you at a later date. [Enter attempt in access database]

Yes

[If patient states they would like the outreach coordinator to call back at another time, repeat back the number where the patient can be reached as well as the requested time of contact.]

> Thank you. I will plan to speak with you then. [Enter attempt in access database]

> > **END**

No

Ok; may I ask why you don't want an appointment? [Enter PHC Outreach Questions answer in access database]

If you change your mind about scheduling an appointment, those patients who complete their follow-up visit for the Positive Health Check study will receive their second \$50 gift card. If you change your mind, please feel free to contact the clinic any time. [Provide the clinic's telephone number]