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Expanding PrEP in Communities of Color (EPICC+)

Attachment 4d
Aim 1 Provider Post-Training Survey

Public reporting burden of this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; Attn: OMB-PRA (0920-New)

Posttraining Provider Survey

TABLE OF **CONTEN** TS **INTRODUC TION TEXT MOTIVATIO** NAL **INTERVIEWI** NG PrEP **FAMILIARIT** Y & **ATTITUDES** PrEP USE & INTENTION **EVALUATI** ON OF **TRAINING** CONCLUSI **ON TEXT**

Welcome back to EPICC+!

Thank you for your participation in this important project. *This survey will take approximately 15 minutes to complete.*

In this survey, we will ask some questions about your knowledge and comfort around prescribing and talking with patients about pre-exposure prophylaxis (PrEP). We will also ask your opinion on the provider training you recently completed. Please note that this survey includes questions around sensitive topics. Before beginning, please consider your surroundings and the privacy of your device and internet connection.

All the information you enter in this survey is encrypted and kept completely confidential. Your answers are private--the information you provide us will be kept

secure and known only to study staff. You may choose "Decline to answer" on any questions that make you feel uncomfortable, or you are unsure of the answer.

A Note about Language

We want to acknowledge that some of the language used in our study questions may include some outdated language or lack the diversity of experiences that we now understand exist. Although we do our best to use measures that reflect emerging language, at times the items available in research are not where they need to be and are drawn from items developed ten (or more) years ago. Wherever possible, we have updated the language or are working with developers to get new versions. Please remember that you can always decline to answer items that do not reflect you.

If you have any questions or comments, please contact study staff at <u>EPICC@nursing.fsu.edu</u> or (448) 488-9069.

Please click the button below to get started with the survey.

Motivational Interviewing

- 1. After completing the training, how would you describe your level of familiarity with motivational interviewing or MI?
 - 0 Very Unfamiliar
 - o Somewhat familiar
 - O Neither familiar or unfamiliar
 - o Somewhat familiar
 - o Very Familiar
 - o Decline to answer
- 2. How often do you think you'll use motivational interviewing (MI) in <u>future interactions</u> with patients?
- o Always
- o Most of the time
- o Sometimes
- o Rarely
- o Never
- o Decline to answer
- 3. How comfortable would you feel using MI techniques during future patient interactions?
 - o Completely uncomfortable
 - O Somewhat uncomfortable
 - 0 Neither comfortable nor uncomfortable
 - o Somewhat comfortable
 - O Completely comfortable
 - o Decline to answer
- 4. How helpful do you feel use of MI techniques will be in discussing PrEP with patients?
 - o Very helpful
 - o Somewhat helpful
 - O Neither helpful nor unhelpful
 - o Somewhat unhelpful
 - 0 Very unhelpful
 - o Decline to answer

5. After completing the training, how would you describe your level of familiarity with each of the following:

	Very unfamiliar	Somewhat familiar	Neither familiar nor	Somewhat familiar	Very familiar	Decline to Answer
			unfamiliar			71137761
PrEP, generally						
Daily oral PrEP with Truvada®, (emtricitabine/tenofovir disoproxil) fumarate, or Descovy® (emtricitabine/tenofovir alafenamide)						
On-demand PrEP with Truvada® emtricitabine/tenofovir disoproxil fumarate (also known as episodic or 2-1-1)						
CAB-LA PrEP (injectable)						

6. How <u>confident</u> would you feel discussing each of the following <u>in the future</u>?

	Not at all confident	Somewhat unconfident	Neither confident nor unconfident	Somewhat confident	Very confident	Decline to Answer
PrEP, generally						
Daily oral PrEP with Truvada®, or Descovy®						
On-demand PrEP with Truvada® also known as episodic or 2-1-1)						
CAB-LA PrEP (injectable)						

7. Please respond to the following statements by indicating how much you agree or disagree.

	Strongly	Somewhat	Neutral	Somewhat	Strongly	Decline
	agree	agree		disagree	disagree	to
						Answer
Prescribing PrEP will encourage patients						
to engage in risky sexual behavior.						
Patients prescribed PrEP are not likely						
to adhere to the medication.						

People should use condoms instead of PrEP.			
Prescribing PrEP will lead to increased resistance to antiretroviral therapy (ART).			
Prescribing PrEP will lead to an increase in sexually transmitted infections (STIs).			

8. Please respond to the following statements by indicating how much you agree or disagree.

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	Strongly	Somewhat	Neutral	Somewhat	Strongly	Decline			
	agree	agree		disagree	disagree	to			
						Answer			
Anyone who wants PrEP &									
doesn't have any									
contraindications should be able									
to get it									
Patients will be more likely to									
adhere to injectable PrEP than daily									
oral PrEP									
It will be harder to clinically manage									
patients who use injectable PrEP									
compared to oral PrEP									
Having more options for PrEP is									
beneficial to patients									

PrEP Use & Intentions

[for clinicians only]

9. How comfortable would you feel prescribing PrEP to the following types of people during <u>future patient interactions:</u>

	Completely uncomfortable	Somewhat uncomfortable	Neither comfortable nor uncomfortable	Somewhat comfortable	Completely comfortable	Decline to Answer	N/A
Patients in your clinic, generally							
Patients under age 18 years							
Patients who identify as gay, bisexual, or men who have sex with men							
Patients who identify as transgender male or female							
Patients who identify as heterosexual							

[For clinicians only]

10. Did the training increase or decrease your likelihood of prescribing the following in the next 12 months:

	Decreased	No impact	Increased	Decline to Answer
PrEP, generally				
Daily oral PrEP with Truvada®, or Descovy®				
On-demand PrEP with Truvada® (also known as episodic or 2-1-1)				
CAB-LA PrEP (injectable)				

[If they indicated a change for any options above - only autopopulate those modalities]

11. Why do you expect your use of [pipe in modality from above] will increase/decrease? [Ask this for all changes indicated above]

Decline to answer

[For clinicians only]

12. Moving forward, what barriers will you face when prescribing on-demand PrEP? Select all that apply

- I don't feel knowledgeable about on-demand PrEP compared to other PrEP modalities
- I don't believe that this specific PrEP modality should be used
- I am lacking the necessary clinic support/infrastructure
- I don't think patients will be able to afford it
- Other, please specify:
- I don't know what barriers
- Decline to answer

[If don't believe modality should be used is selected above]

- 13. Why do you think that on-demand PrEP should not be used? Select all that apply
 - Patients will be less adherent compared to other modalities
 - Patients won't be able to predict when they will have sex
 - The on-demand dosing schedule is not FDA approved
 - On-demand PrEP is less effective than other modalities
 - On-demand PrEP is less safe than other modalities
 - On-demand PrEP will encourage riskier sexual behavior compared to other modalities
 - It will be harder to clinically manage patients using on-demand PrEP compared to other modalities
 - Other, please specify: _____

Decline to answer

[For clinicians only]

14. Moving forward, what barriers will you face when prescribing injectable PrEP (CAB-LA)? Select all that apply

- I don't feel knowledgeable about injectable PrEP compared to other PrEP modalities
- I don't believe that this specific PrEP modality should be used
- I am lacking the necessary clinic support/infrastructure
- I don't think patients will be able to afford it
- Other, please specify: ____
- I don't know what barriers
- Decline to answer

[If don't believe modality should be used is selected above]

15. Why do you think that injectable PrEP should not be used? Select all that apply

- Patients will not be able to keep/travel to injection appointments
- Patients will not tolerate the side effects compared to other modalities
- Injectable PrEP is less effective than other modalities
- Injectable PrEP is less safe than other modalities
- It will be harder to clinically manage patients using injectable PrEP compared to other modalities
- Injectable PrEP will encourage riskier sexual behavior
- Other, please specify: _____
- Decline to answer

Evaluation of training

16. Please reflect on the MI training you just completed and indicate if you agree or disagree with the following statements:

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree	Decline to Answer
The objectives of the training were clearly defined.						
Participation and interaction were encouraged.						
The topics covered were relevant to me.						
The training experience will be useful to my work.						
The trainer(s) was knowledgeable about training topics.						

- 17. What did you like most about the training?
- 18. What could be improved?
- 19. The following statements ask about the online educational modules. Please indicate how much you agree or disagree with each statement:

	Strongly	Agree	Neutral	Disagree	Strongly	Decline to
	agree				disagree	Answer
The online educational modules provided prepared me well for this training						
The online educational modules increased my knowledge of available PrEP options						
The online modules were useful/or relevant to my work						

20. Are there any comments regarding the training or online educational modules that you would like to share?

Conclusion Text

Thank you for completing this survey for the EPICC+ study. Your responses are very important to us, and we appreciate your time.