

Expanding PrEP in Communities of Color (EPICC+)

**Attachment 4q
Aim 2b Provider Focus Group Guide**

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Provider Focus Group Guide

Introduction

Read: My name is ---. Thank you again for agreeing to participate in this focus group today. The purpose of our discussion is to get your view on the barriers and facilitators to evidence-based provider and client education and support tools (EBT) implementation at your site. Just to remind you:

- Any direct quotes used for illustrative purposes will not be associated with your name or your organization or practice.
 - All focus groups will be audio recorded and transcribed, but names and other identifying information will be redacted from the transcriptions.
 - Please keep confidential the names and information shared during this focus group discussion. Please do not share any personal identifying information about others (e.g. clients or clients at your site) during this discussion.
 - We'll start with introductions and then I will begin the recording and start asking questions.
 - Do you have any questions before we begin?
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Background

Before we begin, I'll provide a brief overview of what the EPICC study entailed. We began with the provider training, which included educational modules and training in tailored motivational interviewing. Next, we executed a study that enrolled a cohort of clients on PrEP recruited from participating clinic sites. We also required clinics to complete clinic assessments every 6 months. The goal of the focus group today is to get your thoughts on how all these aspects of the study were implemented in your clinics and their potential impact.

Let's begin by introducing yourself with your first name only and a brief description of your role in your clinic. [The facilitator and note taker should begin. The facilitator can call on participants using the name entered in Zoom].

- 1) Before we discuss specific aspects of this study, what were your overall impressions of the EPICC study?
 - a. What elements of the study did you most appreciate?
 - b. What aspects of the study were challenging to implement?

Tailored Motivational Interviews

- 2) EPICC used an approach called "Tailored Motivational Interviewing (TMI) to support PrEP uptake, adherence, and discussion of PrEP options.

ACTIVITY: Using the white board, jot down any words you think of when you hear 'tailored motivational interviewing' and what it means.

- a. How familiar were you with this approach prior to this study?

- b. *For those who were familiar with this approach...* How, if at all, did this study's TMI approach differ from the PrEP counseling strategies used in your clinic prior to the study? (*Probe for similar and divergent experiences*)
 - c. *For those who were not familiar ...* What were your initial impressions of this approach?
 - i. How easy or challenging was this approach to implement?
- 3) How well did the training we provided equip you to implement TMI?
- a. What could we have done differently to better prepare clinic staff to implement TMI?
 - b. What changes did your clinic need to make to implement TMI?
 - c. How likely is your clinic to continue implementing this approach to PrEP support?
- 4) Think for a moment about how TMI was implemented at your clinic to support PrEP use. We'd like to understand what worked and what challenges you faced – for PrEP users, for the clinic, and more generally.

ACTIVITY: On a white board surface, show a visual that has the individual PrEP user at the center, a provider(s) and/or clinic counseling room, the clinic within the context of a community – could include the labels “individual”, “clinic” and “organization”. (INSERT A GRAPHIC) Mark WHAT WORKED (on left) and CHALLENGES (on right)

Evidence-Based Tools

- 5) EPICC made available some evidence-based provider and client education and support tools that had been adapted for this study.

ACTIVITY: Using the white board, list any of the tools that you used during the study. By tool, we mean anything that helped you in your discussions with clients to give them education and support with their PrEP decision-making. (*Participants can continue to add text boxes in the proximity of some EBTs to indicate most/least used, types of clients etc*)

- a. What types of materials did you use most frequently?
 - b. Which, if any, were not used often?
 - c. (*Moderator to identify several frequently used EBTs – ask about one at a time*) Let's talk about (EBT #1) – Can you describe a scenario in which you used this material?
 - i. Who did you use it with? What made you decide when to use it?
 - ii. How did it impact the client's PrEP-related understanding or decision-making?
 - iii. How did its use affect the provider's job/role/task?
 - 1. Time spent with clients, outstanding questions
- 6) How well did the training we provided prepare you to incorporate these tools into your clinical practice?
- a. What could we have done differently to better assist clinic staff to incorporate tools into their practice?
 - b. What changes did your clinic need to make to incorporate use of tools?
 - c. How likely is your clinic to continue implementing this approach to PrEP support?

Client Cohort Implementation

- 7) Overall, how easy or difficult was it to implement the study client cohort study in your clinic?
- What challenges did you face in terms of recruiting and following study clients?
 - What challenges did providers face in meeting study procedures in the context of their routine services?
 - How did the study affect the clinic's interactions with the broader healthcare system (e.g., hospital network, county health department)?
 - How did they handle client factors that changed over time?
 - Different PrEP formulations, differing levels of adherence, self-perception of PrEP need

ACTIVITY: Share the image of a "journey map" with segments related to key activities from study implementation. In the space above each segment, note any challenges confronted at client, provider, clinic, or larger context. In the space below, note any changes to address these challenges.

- 8) What was one effective change your clinic made to facilitate the following (not already discussed):
- Study startup and staff orientation
 - Recruitment
 - Assessing eligibility
 - Medical record abstractions
 - Clinic assessments
- 9) As we wrap up, what would you say is the biggest lesson or insight you got from participating in the EPICC study? Biggest benefit?
- 10) As a provider, what if any changes have you made in delivering PrEP services to sexual minority populations? What (if anything) has made you a more competent provider to care for these patients?
- 11) What if any changes have been incorporated into the clinic routine more broadly, as a result of this study?
- 12) Any final comments or recommendations?