# SURVEY OF RESPONSIVE CLINICAL PRACTICE: FAMILY PLANNING VISITS DURING THE COVID-19 PANDEMIC – In-depth Interview Guide

#### Electronic survey text

#### Introduction and purpose

Thank you for agreeing to take part in the *Family planning visits during the COVID-19 pandemic* study. The purpose of this study is to document changes in service delivery and uptake of clinical innovations at participant sites in the Abortion Clinical Research Network (the Network).

## **Study components**

Each site will answer three online surveys and complete one in depth interview. If you would prefer to complete your survey over the phone, please contact Elizabeth Ly (<u>ELv@SocietyFP.org</u>), Study Coordinator.

## Study compensation

You will be compensated for your time taking the survey and completing the in depth interview. The first survey (T1) will be compensated at \$300, the second survey at \$250, and the third survey at \$250. The in-depth interview will be compensated at \$350.

## Study data

This survey will not collect any personally identifiable health information (PHI) about the patients at your site. All data will be stored in a secure online repository. Access to the de-identified dataset will be open to interested investigators who have been screened by Society of Family Planning (the Society) staff. Your clinic name will not be shared with anyone outside of Society staff. If you have any concerns, please contact Elizabeth Ly (<u>ELy@SocietyFP.org</u>), Study Coordinator.

## **Potential risks**

This study is being conducted for the purposes of studying health care delivery. There is no risk to patients related to this study. Care will not be modified or impacted by the study. To protect privacy, data collected will be de-identified before being reported or made available to investigators. Participation in this study is voluntary. You may stop participating at any time without any consequences to your site's future participation in the Society or the Network activities

# In-depth Interview Guide

## Preamble (1 minute text, up to 2-3 mins if questions)

Thank you for agreeing to take part in the *Family planning visits during the COVID-19 pandemic* study. Your site has already provided a wealth of information via survey; the purpose of this interview is to give a narrative perspective to your survey answers.

Before we start, I want to make clear that this interview is completely voluntary. You may stop at any time without any consequences to your site's future participation in the Society or the Network. There is a risk that some issues raised may be uncomfortable or difficult to talk about. That said, the benefit of participating is that you will help inform the family planning research community about the care you provided during the pandemic.

Please note the interview will be recorded. You can ask to stop the recording at any time. Audio only files will be transcribed and identifying information will be redacted. No information will be shared publicly in a way that is attributable to you or your specific site. Do you have any questions before we begin?

• Action: Pause to answer question if any.

I am going to turn on the recorder now.

• Action: Turn on recording

## **General Site Information**

Let's get started. The first set of questions will help us get a general sense of your site and the patients that you serve.

1. First, tell me about your role at your site.

Next, I'd like you to share a little bit about the setting of your site.

- 2. Is your site a freestanding building, or part of a larger structure such as a hospital or building that hosts multiple businesses?
- 3. Do you have protestors regularly?

Thank you for describing your site. Next, I'd like you to share a little bit about the patients you serve.

- 4. How would you describe the insurance and payor mix of the patients at your site?
  - Probe: Do most of your patients have private insurance or Medicaid?
  - Probe: Are most uninsured or cover costs through cash pay?
- 5. How would you describe the age range of your patient population?
- 6. How would you describe the racial and ethnic makeup of your patient population?

7. Approximately what proportion of your patients come from out of state each month?

# **Changes in Clinical Practice**

In this next section, I would like to hear about your experience providing care in the context of the COVID-19 pandemic.

- 1. Around what month did the COVID-19 pandemic start to impact clinical operations at your site?
- 2. In the first month or so of the pandemic, were there public health or other government directives or actions that influenced or dictated your response to the pandemic?
  - Probe: Such as government directives from the CDC or WHO.
- 3. Were there resources from professional organizations that helped guide your decisions about clinical care in the early months of the pandemic?
  - Probe: Professional organizations such as ACOG or NAF?
- 4. Did patients express any confusion about availability of services?

Thank you for sharing about general clinical practice adaptations you have made. The next set of questions will touch on staffing changes during the pandemic.

- 5. How did your staffing change in response to the pandemic?
- 6. How, if at all, did staffing issues influence clinical practice?
- 7. How, if at all, did clinical practice changes impact staffing?
- 8. How have you supported staff throughout the pandemic? Have some staffing policies or practices changed?
  - Probe: sick leave, flexible hours, overtime, or supporting staff's caregiving responsibilities.

Thank you for sharing about your clinic's staffing changes. The last question in this section is about finance.

9. How has the pandemic affected the financial sustainability of your site?

#### **Contraceptive Services**

In this next section, I would like to focus on changes you made to contraceptive services in response to the pandemic. In our surveys, we learned that many sites have modified contraceptive care during this time.

- 1. Of all the changes to contraceptive care that your clinic has made, which ones feel most significant in terms of the staff experience?
- 2. Similarly, of these changes, which ones feel most significant in terms of the patient experience?
- 3. Thinking about all changes you have made, not just those that you consider most significant, do you envision some of the changes will last beyond the pandemic? If so, which ones?
- 4. For any of the significant changes you described above, what do you think it would take to sustain these changes? For example, would you need assistance managing financial implications or legal concerns?
  - Probe: Do any other factors influence how sustainable these changes are?

#### I have one more question about contraceptive services.

5. Were there any changes to contraceptive care that you wanted to make but couldn't? If so, what held you back from making the changes you wanted?

# **Abortion Services**

Thank you for sharing about the changes to contraceptive services at your site. In this next section, I would like to focus on changes you made to abortion services. In our surveys, we learned that many sites had to modify some abortion care services during the pandemic.

- 1. Of all the changes to abortion care that your clinic has made, which ones feel most significant in terms of the staff experience?
- 2. Similarly, of these changes, which ones feel most significant in terms of the patient experience?
- 3. Thinking about all changes you have made, not just those that you consider most significant, do you envision some of the changes will last beyond the pandemic? If so, which ones.
- 4. For any of the significant changes you described above, what do you think it would take to sustain these changes? For example, would you need assistance managing financial implications or legal concerns?
  - Probe: Do any other factors influence how sustainable these changes are?

#### I have one more question about abortion services.

5. Were there any changes to abortion care that you wanted to make but couldn't? If so, what held you back from making the changes you wanted?

## **Closing Questions**

Thank you for sharing such thoughtful reflections. Before we wrap up, I have two big picture questions for you to reflect on.

- 1. First, what was the biggest challenge you faced that you feel has been underrecognized?
- 2. Lastly, reflecting on your site as a whole, did this crisis bring anything positive to your clinic? Please share whatever comes to mind.
  - Probe: Such as positive community interactions or improved patient care.

## **Ending Interview**

Thank you very much for being so generous with your time and expertise. I am happy to answer any questions you may have.

• Action: Pause to answer question if any.

Thank you once again for your participation in our study. I am going to turn off the recorder now. Compensation for the interview will be processed soon. If you have any other questions, please feel free to reach out to our study team at SFP. Thank you again, and goodbye!

## Additional Scripting for Recording

If requested to not record at the top of the interview:

• We will not record this interview. Instead, I will be taking notes throughout our interview. No information will be shared publicly in a way that is attributable to you or your specific site.

If requested to stop recording in the middle of the interview:

- I have stopped the recording. Instead, I will take notes for the non-recorded portion. Is that all right?
  - If yes: Thank you. Please let me know when you feel comfortable with the recording being turned back on.
  - If no: I understand. Considering the request to stop recording and note taking, do you want to end this interview? There are no consequences to your site's future participation in the Society or the Network if you choose to.
    - If yes: All right, I will end the interview here. Thank you very much for being so generous with your time and expertise. If you have any other questions, please feel free to reach out to our study team at SFP. Thank you again.
    - If no: I have stopped the recording and will not take notes. Please let me know when you feel comfortable with the recording being turned back on.