ECTION	QUESTION	PROBES	RATIONALE	QI INTERVENTION	CFIR	SETTING
NTRO	Text to cover:	Moderator notes:				
	Welcome					
	Purpose of group discussion	Changed order of questions to flow from broad to specific in the group				
	Group details: 60 minutes, HW exercise, incentive Anonymity & confidentiality	Used anticipatory language (i.e. "would", instead of "will")				
	Housekeeping					
	Questions?					
BOUT EACH		5 mins				
RGANISATION		5 mins				
nis section will gather the verall contexts in which he GPs are working. .g. general ommunication, elationships, culture. nis is purposefully broad,	Let's kick off by going around the room and telling everyone a bit about yourselves and the practices in which you work From one person who represents the practice If one practice only, move to next question	E.g. Number of people who work there Practice interest areas (if any, eg. Do they have an interest in women's and children's health etc) What interested them to come to the focus group		Team approach: team reflection / local communities of practice	Culture	Inner setting
nd serves as an troductory section.						
troductory section.	PROVIDE INFORMATION TO REFLECT THE FRAMEWORK - IN A	A DIFFERENT ORDER TO FLOW BETTER				
troductory section.	PROVIDE INFORMATION TO REFLECT THE FRAMEWORK - IN A	A DIFFERENT ORDER TO FLOW BETTER 0 mins				
HIS GENERAL SECTION WILL SENERAL This section will be used to	2					
troductory section. HIS GENERAL SECTION WILL ENERAL This section will be used to discuss general aspects	2	0 mins				
HIS GENERAL SECTION WILL SENERAL This section will be used to discuss general aspects which relate to each focus	TRAINING & PRACTION What kind of information exchange do you have with others outside your setting, related to the quality improvement processes or more generally about your	O mins CE SUPPORT (COMBINED) 5 mins Does your PHN provide much support/information? What professional networking do you engage in? Listservs? Local or		Learning collaboratives		
HIS GENERAL SECTION WILL ENERAL This section will be used to discuss general aspects which relate to each focus	TRAINING & PRACTION What kind of information exchange do you have with others outside your setting, related to the quality improvement processes or more generally about your profession? Do you tend to network with colleagues or people in	O mins CE SUPPORT (COMBINED) 5 mins Does your PHN provide much support/information? What professional networking do you engage in? Listservs? Local or national conferences? Trainings? Where / how? E.g. conferences? Other venues?			Networks and Communication:	

COLL	ABORATE 2 mins				
How are new ideas treated in your organisations?	E.g. To make changes within your organizations? Any recent examples anyone wants to share?		Team approach: team reflection / local communities of practice	Culture	Inner setting
REORIENT FINAN	ICE AND STRUCTURE 3 mins				
When you need to get something done or to solve a problem, who are your "go-to" people either in your practice or externally?	Can you describe a recent example?		Site coordinator: relevant to practice organisation (e.g. practice size, contractual model)	Structural Characteristics	
SCREENING & TAR	RGETING (COMBINED) 5 mins	SYSTEMS TO REMIND F	DENTIFYING AND TAI	RGETING PEOPLE	AT HIGH RISH
Acknowledging there are a million things to do each day, what are the current high-priority initiatives or activities happening at work?	Which have highest priority - for you? Others? How come? Is there pressure to accomplish things here? Where from?		Identifying and targeting people at high risk / case finding	Relative priority	Inner setting
Have goals or targets been set for any programs or initiatives at your practice? Is your practice currently doing anything to identify eligible patients who haven't participated in cancer screening programs (for bowel cancer or other cancers)?	What is working well? What has not worked, and why? How do you monitor progress? What tools / practices are being used?		Systems to remind patients about bowel cancer screening		
What barriers do you face in relation to reminding patients about screening or follow-ups?	What sort of system do you use? Do you get good response from patient recall/reminders systems? (if not used, why)		Systems to remind patients about bowel cancer screening		
How about following-up of positive screening results?					
Has your practice set goals related to bowel cancer screening participation rates?	Do you know what your current bowel cancer screening rates are? Are there any population groups that may be underscreened?		Target/set goals for practice	Goals and feedback	
Is there a need for better systems to support your efforts to improve participation and follow-up in bowel cancer in general practice?	e.g financial incentives. How strong is the need? Why or why not? Look for mentions of organisations / locations To what extent do current programs fail to meet existing needs? How would this program fill current gaps?	Demonstration of need for the intervention and/or that the current situation is untenable.	Identifying and targeting people at [high] risk / case finding	Tension for change and Relative Priority	Inner setting
AUDIT 8	FEEDBACK 3 mins				
Do you meet (formally or informally) with members of your practice team?	Who's involved? How often do you meet? Formally? Informally? Are meetings, such as staff meetings, held regularly? [who typically attends, what is the typical agenda, do you discuss performance monitoring or practice changes?]		Audit and feedback	Networks and Communication:	
To what extent are organizational goals monitored for progress within your practice?	Can you give an example of monitoring in terms of the type of information, who is informed, and how?		Audit and feedback	Networks and Communication:	
Do you get any performance/feedback reports to help monitor progress?	For example, internally, or externally (by the PHNs) generated reports? What do they look like? How helpful are they? How can they be improved? Is the data relevant? How often do you receive them?		Reminder systems (external organisations reminding practices about specific monitoring or processes of care)		
Are you currently doing any clinical audits? What are the barriers to doing clinical audits? What needs to change in order to work - firstly in your practice?	If yes, explore what topics they have audited. The successes, failures, and if any regarding cancer screening (breast/cervical or bowel)'				
	RACTICE ROLES 2 mins				
Are there people in your organization who are likely to champion (go above and beyond what might be expected) your practice efforts to improved bowel cancer screening participation rates?	Who are these leaders? How do attitudes of different leaders vary? What position do these champions have in your organization? What kinds of behaviors or actions do you think this individual/champion will exhibit?		Leadership Engagement	GPs with special interests (in bowel cancer): Local champion	

We're now going to show vo	u a new concept for a potential program. We'll go throug	n it at a high level now, and we'd like to discuss everyone's perspect	ives of it. After this, we'll go	through each part in mor	e detail and talk ab	out the specifi
	THROUGH AT TOP LEVEL ALL AT ONCE					
et's now turn our attention to	o each area of focus in the proposed program, and talk a	bout the specifics				
PROVIDE HAND-OUT OF SUM	MARISED INTERVENTION AND GO THROUGH INTERVENTION	SPECIFICS: EACH AREA OF FOCUS				
CONSIDERED REACTION TO ACH ASPECT OF THE NTERVENTION	1	0 mins to present concept				
COMMUNICATIONS REFERENCE	Firstly, what term would you use to describe this?	Look for terminology used - e.g. agreement over the word "intervention"? Objections to any terms? If not mentioned: Would we call it an intervention? [possible examples, framework, matrix]	Findings could contribute to "branding" and broader roll out - e.g. we don't want GPs to react negatively to the title			
Only to ask if more Iformation needed around nis	How do you typically find out about new information, e.g. new initiatives, accomplishments, issues, new staff, staff departures?	e.g is there one person in your practice that coordinates internal communication activities (eg sends out email notices, receive and distribute other useful ebulletins). If yes, who is it/their job role and what forms of communication do they use		Site coordinator: relevant to practice organisation (e.g. practice size, contractual model)	Networks and Communication:	Inner setting
ONSIDERED REACTION TO ACH ASPECT OF THE NTERVENTION	4	5 mins				
nis section will provide becific feedback on each spect of the intervention,	SCI	REENING 5 mins	SYSTEMS TO REMIND F	PATIENTS WHO ARE NO	OT SCREENED ABO	OUT BOWEL
	What are your initial impressions of including this element in the intervention?	What won't work? What are the barriers? What needs to change in order to work - firstly in your practice?				
	What would work well to remind patient about screening/follow-up for CRC in your practice?					
	TAF	RGETING 5 mins	IDENTIFYING AND TAR	GETING PEOPLE AT HI	GH RISK / AND F	OLLOW-UP
	What are your initial impressions of including this element? What would work well to identify and target eligible patients for CRC screening in your practice?	What won't work? What are the barriers? What needs to change in order to work - firstly in your practice?				
	What are other priorities at your practice - in CRC screening (and other cancer screening), and how does this compare? Be prioritised?	How important do you think it is to implement this program compared to the other priorities? How important is it to others, such as your coworkers or leaders?				
	Would implementation of this element align with other organizational goals at your place of work?	Which goals? In what way/s? E.g. Would it help achieve (or relieve pressure related to) these priorities? OR Would it conflict with any other priorities?		Reminder systems (external organisations reminding practices about specific monitoring or processes of care) and Identifying	Goals and feedback and Relative priority	Inner setting

OR Would it conflict with any other priorities?

If yes, explore what topics they have audited. The successes,

failures, and if any regarding cancer screening (breast/cervical or

AUDIT & FEEDBACK 5 mins

bowel)'

How would you go about doing an audit on bowel

cancer screening and follow-up in your practice?

and targeting people at hiah risk / case findina

REALIGN PI	RACTICE ROLES 5 mins	GAIN ADMINISTRATIVE BUY-IN AND LOCAL GP CHAMPION
Are there any key individuals in your practice that would need to get on board with a practice approach to improving bowel cancer screening rates?	Who and why? What would be their roles? What would they do? Would any approvals be needed? [Prompts: e.g. administrative staff, practice manger]	Practice facilitation and External Change A Process
Would there be any in-house incentives to implement practice changes that succesfully increase bowel cancer screening rates?	What is your motivation for wanting to make practice change to help improve bowel cancer screening rates?	Administrative buy-in Organizational Inc Inner setting
Would there be any special recognitions or rewards/incentives to practice staff to support their role in implementing practice changes that successfully increase bowel cancer screening rates?	Will these be targeted to groups/teams/units or individuals in your practice?	Administrative buy-in Organizational Incentives & Rewards
Would there be a communication or education strategy for getting the word out [to others in the practice] about what changes are being made? (not including training)		Point of care prompts (ph Key stakeholders Process
TRA	AINING 5 mins	IN SPECIFIC TOOLS AND CONDITIONS, CLINICAL TOPICS, E.G. SCREENING C
What kind of training would you or your colleagues need to implement elements of this program?	Do you think that training will be needed to carry out the roles and responsibilities expected of each element? Can you explain? What sort of ongoing training would you need?	Training in specific tools a Access to Knowledge and Informatic
Would you, or your staff, need any specific training to complete some elements?	For example, what steps would you take to encourage individuals to commit to using the 'point of care prompts'? Would you, or your staff, need training in improving data entry, using data extraction tools, clinical guideline updates (other)?	
CLINICA	AL SOFTWARE 5 mins	CLINIC SOFTWARE (E.G. BEST PRACTICE / MEDICAL DIRECTOR), REGISTRIES, E
Would any changes in IT infrastructure need to happen to accommodate this approach?	E.g. Changes in information systems or electronic records systems? Changes in scope of practice? Changes in formal policies? Other? Process here?	IT systems for sharing infor Structural characteristics
Would you have sufficient resources to implement and administer this?	What resources would you need or would like to receive? Are the PHNs a point of resource support? Have you accessed their Practice Support team in the past?	IT systems for sharing information within and across organisation
Are there any IT training requirements (e.g. data entry) that your practice may need?	What IT training would you need or would like to receive? Are the PHNs a point of training support? Have you accessed their Practice Support team in the past?	IT systems for sharing information within and across organisation

REORIENT FINANCE AND STRUCTURE 5 mins		INCENTIVES / PAY FOI	r performance systi	EMS / SITE COOF	RDINATORS
organization attect valir ability to implement same at	Probe on: Organisational culture, infrastructure, individuals - barriers vs cues		Site coordinator: relevant to practice organisation (e.g. practice size, contractual model)	Structural characteristics	
To what extent can this approach targeting bowel cancer screening rates be integrated within your existing system?		Integration • Perceived fit with infrastructure • Perceived sustainability			
How would challenges such as workforce arrangements like staffing, data entry, IT experience if the system crashes etc), be managed?				Structural charact	reristics
	How would the introduction of this program affect payment or revenue for your organization?	Reference to the revised Federal Governments Practice Incentive Program and potential to receive payments for focusing on bowel cancer screening rates		External policies and incentives	
COLL	ABORATE 5 mins	TEAM APPROACH			
Implementation of practice change aimed at	E.g. general beliefs, culture, values, assumptions that people embrace. Examples of how currently work together		Team approach: team re	e Culture	Inner setting
PRACTICE SUPPORT 5 mins		LEARNING COLLABOR	RATIVES / PEER REVIEW	VISITS / PRACTIC	CE FACILITATION
Would you need someone (or a team) outside your organization to help you with implementing the program?	What kind of activities could they help with? Who would you ask if you have questions about the program or its implementation? {prompt e.g. PHN Practice Support team]		Practice facilitation	External change of	agents
What challenges do you think you may encounter?	Where would you go to get support for these challenges? Would your PHN practice support team be able to assist?		Practice facilitation	Available resource	es

INFORMED RESPONSE TO INTERVENTION CONCEPT	10	mins				
Section gathers specific reactions to intervention, in a more thorough and	Now that you know a bit more about the program, what do you think of it overall?	How do you feel about the program being used in your setting? Do you think you could realistically implement all elements? Do you think the program would work in your practice?			Knowledge and b Cha	aracteristics of
considered way now that they've seen it more	Do you think that by using all these elements together, you would see a difference to bowel cancer screening rates? How complicated is this program?	now amerem is in from what you're doing already? E.g. Duration, scope, intricacy, number of steps, alignment with /			Complexity	
	Logistically, how would this fit with the existing processes and practices at your work?	Would it affect any other initiatives? How? Would the program replace or complement a current program or process aimed at increasing bowel cancer screening participation rates? Can you foresee any issues / complications?		Identifying and targeting		er setting
	How likely would you be to use this approach to improve bowel cancer screening rate? How confident are you that it could be successfully implemented? How does this program compare to other alternatives that may have been considered or that you know	How come? Are there any advantages this program has compared to other	Self-efficacy		Self-efficacy Relative	
Statements that demonstrate the intervention is better (or worse) than existing programs.	Are there other processes/systems that people would find easier to implement?	programs? What are they? Why would these be preferred?	Statements regarding specific needs of individuals that demonstrate a need for the intervention, but do not necessarily represent a strong need or an untenable status quo.		Needs & resources	
THE POSITIVES	2	mins				
	Would this program provide any competitive advantage for your practice?	E.g. Would it bring more individuals into your practice, instead of another one in your area? E.g. a unique benefit to better engage patients compared to other practices in your area?			Peer pressure	
THE NEGATIVES	3	mins				
	What challenges can you foresee in terms of implementing the program? What costs would be incurred to implement the program?	Compared to other programs? E.g. time, resources, financial, emotional/mental			Cost	
	p. 2 g. 3		1	1	1	

NEEDS / CHANGES / LEVERS MOVING FORWARD	5	mins			
	What kinds of changes or alterations in your practice do you think you will need to make to help you implement these elements into your existing processes so it will work effectively in your setting?	Do you think you will be able to make these changes? Why or why not?			Adaptability
	work in your practice?	What changes would you make? Who would decide if changes are needed so that it works well in your setting? Process for this?			Adaptability
	What kind of local, state, or national performance measures, policies, regulations, or guidelines would likely influence the decision to implement the program at your practice?		In a healthcare setting, external policies and incentives may include clinical performance measures and pay for performance, where as in an education setting, this may include standardized testing performance measures and funding allocation.		External policies and incentives
	What needs do you / your organisation have in terms of implementing this?	EXAMPLES: Operating and capital funding dedicated personnel time (e.g. have new staff been hired, or is implementation a collateral duty) training - who? space equipment and/or information technology	Resources may include operating and capital funding, dedicated personnel time (e.g. have new staff been hired, or is implementation a collateral duty), space, equipment, and/or information technology. Step through each to ensure all necessary resources are explored and fully described.	IT systems for sharing information within and across organisations and Training in specific tools	Available resources and Access to knowledge and information
THANK AND CLOSE	sign incentive forms				

total time 105 mins