



## Supplementary file 2.

### A. Clinician Pre-intervention interview questions

**Script:** Thank you for your time and participation in the Agents of Change Quality Improvement Collaboratives (AOC QIC) to improve Dementia Care.

Telephone interviews are being conducted to gain an understanding of your role and organisational context of implementing change

60 minute interview will be Audio Recorded and transcribed to analyse themes. All identifying information about individuals will be deleted and a code will be allocated to match the interviews with the site for research purposes. Recordings are stored on confidential, password protected computers at Flinders University and transcribing service has signed confidentiality agreements.

Only general information on themes will be reported and we will provide you a copy of the transcript and a summary of the themes.

Participation is voluntary and you may withdraw from interviews if you wish, with no impact on participation in the research trial.

1. **How did you and your organization become involved in AOC QIC?**
  - How was the decision made to participate?
  - Who participated in the decision-making process?
  - Will you lead implementation of the improvement OT/Exercise/Carer support?
  - How did you come into this role? Appointed? Volunteered? Voluntold?
  - Do you have authority to do what is necessary to implement the improvement?
2. **Who else is involved?**
  - Are there people in your organization who are likely to champion (go above and beyond what might be expected) the improvement?
  - Are they formally involved, or is it an informal support?
  - What position do these champions have in your organization?
  - How do you think they will help with implementation? ie: Getting people to use the improvement?
3. **What do you know about the Dementia Care Clinical guidelines or their implementation?**
4. **Do you think the OT/Exercise/Carer Support improvement will be effective in your setting?**
  - Do you have any feelings of anticipation? Stress? Enthusiasm? Why?
  - How complicated is the improvement? ie: duration, scope, intricacy and number of steps involved and whether the intervention reflects a clear departure from previous practices



7. **How confident are you that you will be able to successfully implement the improvement?**
  - What gives you that level of confidence (or lack of confidence)?
8. **How confident do you think your colleagues feel about implementing the improvement?**
  - What kind of supporting evidence or proof is needed about the effectiveness of OT/Exercise/Carer Support to get others on board?
9. **How well do you think the improvement will meet the needs of the individuals served by your organization?**
  - In what ways will the improvement meet their needs? E.g. improved access to services? Help with self-management?
10. **What barriers will the individuals served by your organization face to participating in the OT/Exercise/Carer Support improvement?**
  - Time, cost, cultural values/beliefs, lack of family supports, other?
11. **How would you describe the culture of your organization? Of your own setting or unit?**
  - Do you feel like the culture of your own unit is different from the overall organization? In what ways?
  - Are new ideas embraced and used to make improvements in your organisation or unit?
  - Do you think the organisation's culture will affect the outcome of the improvement?
12. **How well does OT/Exercise/Carer Support improvement fit with your values and norms and the values and norms within the organization?**
  - Values relating to wellbeing/ goals of individuals vs. services offered?
  - Values related to referring to other programs and discharge?
  - Norms of offering in home support/clinic based appointments/ongoing programs?
  - Differences between your and the organisation's values or norms?
13. **How well does the OT/Exercise/Care support improvement fit with existing work processes and practices in your setting?**
  - What are likely issues or complications that may arise?
  - What kinds of changes may be needed to accommodate the improvement? ie: Changes in scope of practice? Changes in formal policies? Changes in information systems or records? Other?



14. **What kinds of high-priority initiatives or activities are already happening in your setting?**
- What is the priority of getting the improvement implemented relative to other initiatives that are happening now?
  - Will the improvement conflict with these priorities?
  - Will the improvement help achieve (or relieve pressure related to) these priorities?
  - How will you juggle competing priorities in your own work?
15. **How do you think involvement in the AOC QIC will enable you to implement the OT/Exercise/Care Support improvement?**
16. **To what extent do you think your role in the AOC QIC will help you: develop professionally/ learn new skills/ be recognised in your (next) evaluation/lead to satisfaction or promotion?**
17. **What kinds of incentives are there to help ensure that the implementation of the OT/Exercise/Carer support is successful?**

Any other comments?

Hopes or expectations?



## B. Clinician Post-intervention interview questions

**Script:** Thank you for your time and participation in the Agents of Change Quality Improvement Collaboratives (AOC QIC) to improve Dementia Care.

Telephone interviews are being conducted to gain an understanding of your experience in the collaborative to contribute to the evaluation.

60minute interview will be Audio Recorded and transcribed to analyse themes. All identifying information about individuals will be deleted and a code will be allocated to match the interviews with the subgroup for research purposes. Recordings are stored on confidential, password protected computers at Flinders University and transcribing service has signed confidentiality agreements.

Only general information on themes will be reported and we will provide you a copy of the transcript and a summary of the themes.

Participation is voluntary and you may withdraw from interviews if you wish, with no impact on participation in the research trial.

Consent to record interview requested

### 1. Describe the outcomes you were able to achieve; for yourself, the organisation, the clients

Explore acceptability and feasibility of QIC for clinicians and organisation

### 2. Explore the program theory to reconstruct experience and explore their meaning

- Clinicians volunteer to be involved because they want to be agents of change/ identify as dementia advocates and are motivated to work together
- Send in checklists to track changes, be accountable feedback on progress and adherence over time
- CPD points offered retains accreditation and incentive motivation to stay engaged
- Start up meetings help clinicians to connect meet likeminded others sense of identity as agents of change and commitment to program and networking
- Learning with others on-line reduces travel, increased flexibility, but not alone in it so can feel like being involved with others learning together
- Collaboration in teleconferences and on-line allows for shared learning, ideas and confidence in trying changes, role modelling



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- Experts, clinical and by experience of dementia provide inspiration and credibility increasing aspiration to improve knowledge and practice
- Once learnt new skills you can influence others to improve quality, develop leadership and authority/ confidence
- The program is low cost and light touch to make it easy to be involved, can adapt to own setting and needs, so develops ownership and commitment to change by encouraging presentation at forums you can disseminate research outcomes, your achievements and be recognised by employer and others to improve quality
- Improving clinical practice will improve quality of life and services for people with dementia and care partners, keeping your service accountable, improving reputation and accreditation

### 3. Explore context culture and values

- How were you able to involve others in the improvement?
- How well did the Agents of Change program fit with the values and norms of the organisation and you?
- How well did it fit with needs of clients?
- Any barriers along the way and why did these arise? How did you deal with it?
- How did you feel during the process/ at start? During the learning modules, implementation plan, implementing?
- Why did you keep involved? What helped and why?
- How will being involved with the Agents of Change affect your role, knowledge, and skills?
- Would your manager be interested in being interviewed for the evaluation? if not why?
- Contact details?

### 4. Valuing the Agents of Change collaborative

Willingness to pay questionnaire for clinicians involved in Agents of Change research trial: establishing quality improvement collaboratives to improve adherence to clinical guidelines for dementia care

Post intervention questionnaire:

Think about the experience you have had in the Agents of change trial over the last 18 months:

- The motivation you had to participate originally
- The contact with researchers in dementia care
- The face to face start-up meetings and networking with other dementia care clinicians
- The 8 modules of the MOOC on-line to learn and share information
- Little time away from home and work, no time lost in travel for training



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- Flexibility in learning and working on a project to suit your needs and other priorities
- Learning about the guidelines and about quality improvement processes in the modules with examples and resources all in one place
- Ability to adapt the implementation to your own setting and client needs
- The opportunity for collaboration with other clinicians, with clinical experts, with experts by experience of dementia and researchers to focus your project
- Coaching and advice from researchers and experts; both clinical and people with experience of dementia
- Feedback and advice on implementation plans from experts
- Monitoring of practice over the duration of the trial through checklists and feedback
- Regular updates and reminders of the next steps
- Incentives to keep you involved:  
agents of change cups, pens and bags, reference book, CPD points, stipend to attend a conference, newsletters, and emails, collaborative teleconferences, individual coaching and advice, involvement in publication of articles, certificate of completion
- Professional development, recognition, satisfaction, achievement of change

Considering all these benefits:

Do you think that the impact of this collaborative process was less, the same or better than other clinical learning and development programs you have been involved with in previous years?

How much would you be willing to pay realistically in Dollars each week / each month to participate in a quality improvement collaborative to improve adherence to clinical guidelines in dementia care?

Answer to be recorded \$x per week or per month

This would mean that you have precisely this amount less to spend on other things each week/ each month

Do you still think that this represents the amount you would realistically pay for participation in Agents of change on- line quality improvement collaborative each week/ each month?

If you would like to change your estimate, on further reflection what would you be willing to pay for the benefits brought about by the Agents of Change program?