

Supplementary Data

Supplementary Appendix SA1

Interview Guide [Version 2016-07-01]

An Assessment of Tobacco-Free Policies and Tobacco Cessation Systems at Lesbian, Gay, Bisexual, and Transgender Health Centers

[Do not read things in brackets. These are informational for the interviewer.]

[Greet, thank for willingness to participate in this study, and make sure now is still a good time.]

Again, my name is _____, and I am a student researcher for Dr. Joseph Lee with the Department of Health Education and Promotion at East Carolina University. We're working with the Los Angeles LGBT Center on a project assessing tobacco-free policies and tobacco cessation systems at LGBT health centers. We are interested about your experience with how tobacco dependence is being addressed. As I mentioned in our earlier communication, we really appreciate your time. We hope the information from this study will be useful to you and other LGBT health centers.

Your participation in this interview is voluntary and you can stop at any time. The interview will remain confidential; therefore neither your name nor your affiliation will be shared. The interview will take approximately 15 minutes to complete. In addition, we will distribute our final paper to the participating clinics. Would you be willing to participate in the interview?

[If the response is no, thank the person for their time and offer contact information if they change their mind.]

Would you mind if I record the interview so we can more easily capture your responses?

[If the response is no: That's fine. Do you mind if I take notes?]

[Restate if recording okay:] Thank you. This line will be recorded and I just want to confirm that your participation in this interview is voluntary and we will not share your name, identity, or connect your responses with your organization's identity.

Questions:

[PHS Guidelines Strategy 1:] Let me start by asking about strategies for identifying patients who are tobacco users.

1. Talk to me about any strategies the clinic uses for identifying patients who use tobacco products?

[Check off if you covered the following. Otherwise probe.]

[1.1: Vital signs include tobacco use?]

[1.2: Designated person who takes tobacco use vital sign?]

[1.2a: Nonsmoking role models who are aware of importance of question?]

[If necessary, probe:]

- a. Walk us through how a new patient would come to be flagged as using tobacco.
- b. Some clinics record tobacco use as a "vital sign." Tell me about any similar process used at your clinic.
- c. Could you tell me more about the standard question asked to assess tobacco use? Is it more about smoking or any tobacco products?
 - i. How about vaping or electronic cigarette use?
- d. Which staff member or members are responsible for asking patients about their tobacco use as part of the vital signs?
 - i. Tell me about how you think they view the importance of this question?
 - ii. What proportion of these [staff members] are nonsmokers?
- e. About how often a patient is asked about their tobacco use?

[PHS Guidelines Strategy 2:] I'm now going to ask some questions about training opportunities.

1. Tell me about the training opportunities for clinic staff regarding tobacco cessation offered in the last year.
 - a. Were there any incentives for participation such as continuing education [CE] credits? [If necessary, probe:] Tell me more about these incentives.
 - b. [If there were training opportunities, probe:] Tell me more about who was conducting these trainings and who was trained.
 - c. [If there were training opportunities, probe:] What types of training seemed to be most appreciated or work best?
2. What can you tell me about any procedures that are in place for training newly hired staff about tobacco dependence.
3. Talk to me about what resources for tobacco cessation are available in the clinic.
 - a. [If necessary, probe:]
 - b. How often do you feel healthcare providers in the clinic refer patients interested in quitting to the Quitline?

- c. Does the clinic use a fax-to-Quitline referral service?
 - d. What types of pamphlets or information sources about quitting, if any, are available in exam rooms or waiting rooms?
4. What, if any, are some ways feedback is provided to healthcare providers in the clinic about their work identifying, documenting, and treating tobacco dependence.

[PHS Guidelines Strategy 3:] I'm now going to ask some questions about coordination.

1. Is there someone in charge of coordinating resources, training, and feedback relating to tobacco dependence?
 - a. [If yes:] What is their job title?
 - b. [If yes:] Tell me about their duties relating to coordinating tobacco dependence treatments.

[Other Questions: Barriers, Facilitators, and Tobacco-Related Policies:] We've reached the final section of questions. I'm now going to ask you about policies.

1. What is your tobacco use policy for your building and grounds?
 - a. How does the policy address electronic cigarettes or vaping?
2. Do you have a policy against accepting funding from the tobacco industry?
3. Tell me about any of signage or displays about tobacco or vaping policies in waiting areas and entrances?
4. Talk to me about some of the resources available in your clinic to people who smoke that may wish to quit. [If needed, probe:] Do your providers prescribe pharmacotherapy, is there a support group, or what other resources are available?
5. Does your clinic have any LGBT-specific tobacco cessation resources? That is, do you have any resources that have been tailored to LGBT communities?
 - a. [If yes, probe:] If so, how have they been received?
6. We're trying to gauge where clinics are thinking about tobacco dependence treatment. Can you give me a general idea of how you and the clinic are thinking about tobacco dependence treatments?
7. This is my last question. Is there anything else we should know?

[Thank for their time and help. Make your goodbyes.]

[Terminate call. Make any notes about things that need follow-up.]