

Additional file 3, Table 1. Questionnaire respondents' responses to statements related to qualitatively identified themes.

| <i>Advantages over regular CT-methods</i> | | | | |
|--|--------------------------|----------------------------|----------|-------|
| <i>Statement</i> | <i>Response category</i> | <i>Response (% , n=70)</i> | | |
| | | SCABIES | SHIGELLA | MUMPS |
| 'In this scenario, I think that with online-RDD I can provide low-key communication options to warn and inform patients and their contacts, compared to regular contact tracing methods.' | Very much agree | 25.7 | 18.6 | 11.4 |
| | Agree | 68.6 | 60 | 41.4 |
| | Neutral | 5.7 | 12.9 | 17.1 |
| | Disagree | 0 | 7.1 | 30 |
| | Very much disagree | 0 | 1.4 | 0 |
| 'In this scenario, I think that with online-RDD I can involve patients and their contacts in contact tracing in a way more pleasant to them way, compared to regular contact tracing methods.' | Very much agree | 4.3 | 7.1 | 5.7 |
| | Agree | 41.3 | 47.1 | 27.1 |
| | Neutral | 40 | 28.6 | 30 |
| | Disagree | 12.9 | 15.7 | 32.9 |
| | Very much disagree | 1.4 | 1.4 | 4.3 |
| 'In this scenario, I think that I can save time with online-RDD, compared to regular contact tracing methods.' | Very much agree | 17.1 | 15.7 | 14.3 |
| | Agree | 65.7 | 54.3 | 35.7 |
| | Neutral | 12.9 | 18.6 | 22.9 |
| | Disagree | 2.9 | 11.4 | 21.4 |
| | Very much disagree | 1.4 | 0 | 5.7 |
| 'In this scenario, I think that with online-RDD I can reach more contacts of patients, compared to regular contact tracing methods.' | Very much agree | 14.3 | 14.3 | 12.9 |
| | Agree | 47.1 | 41.4 | 30 |
| | Neutral | 28.6 | 28.6 | 15.7 |
| | Disagree | 10 | 15.7 | 41.3 |
| | Very much disagree | 0 | 0 | 0 |
| 'In this scenario, I think that online-RDD can reduce the workload for public health professionals (PHPs), compared to regular contact tracing methods.' | Very much agree | 7.1 | 10 | 2.9 |
| | Agree | 60 | 45.7 | 34.3 |
| | Neutral | 27.1 | 27.1 | 34.3 |
| | Disagree | 4.3 | 15.7 | 25.7 |
| | Very much disagree | 1.4 | 1.4 | 2.9 |
| <i>Challenges for CT with online-RDD</i> | | | | |
| 'In this scenario, I think that using online-RDD can go at the expense of my contact with patients and their contacts, compared to regular contact tracing methods.' | Very much agree | 2.9 | 1.4 | 7.1 |
| | Agree | 55.7 | 41.4 | 57.1 |
| | Neutral | 30 | 35.7 | 30 |
| | Disagree | 10 | 20 | 4.3 |
| | Very much disagree | 1.4 | 1.4 | 1.4 |
| 'In this scenario, I think that with online-RDD I cannot offer adequate support to patients and their contacts, compared to regular contact tracing methods.' | Very much agree | 2.9 | 2.9 | 4.3 |
| | Agree | 24.3 | 17.1 | 45.7 |
| | Neutral | 40 | 40 | 25.7 |
| | Disagree | 32.9 | 38.6 | 21.4 |
| | Very much disagree | 0 | 1.4 | 2.9 |
| 'In this scenario, I think that with online-RDD I can miss important contacts, compared to regular contact tracing methods.' | Very much agree | 1.4 | 14.3 | 2.9 |
| | Agree | 35.7 | 38.6 | 30 |
| | Neutral | 37.1 | 42.9 | 30 |
| | Disagree | 25.7 | 4.3 | 34.3 |
| | Very much disagree | 0 | 0 | 2.9 |
| 'In this scenario, I think that with online-RDD I can convey measures to patients and their contacts less adequately, compared to regular contact tracing methods.' | Very much agree | 10 | 4.3 | 7.1 |
| | Agree | 40 | 34.3 | 44.3 |
| | Neutral | 28.6 | 32.9 | 25.7 |
| | Disagree | 21.4 | 27.1 | 21.4 |
| | Very much disagree | 0 | 1.43 | 1.4 |
| 'In this scenario, I think that online-RDD can lead to unnecessary unrest with patients and their contacts, compared to regular contact tracing methods.' | Very much agree | 0 | 1.4 | 11.4 |
| | Agree | 34.3 | 24.3 | 51.4 |
| | Neutral | 40 | 41.4 | 24.3 |
| | Disagree | 24.3 | 28.6 | 11.4 |
| | Very much disagree | 1.4 | 4.3 | 1.4 |
| <i>Intention</i> | | | | |
| 'In this scenario, I would like to make use of online-RDD for CT if it were available at my PHS' | Very much agree | 10 | 12.9 | 15.7 |
| | Agree | 67.1 | 48.6 | 21.4 |
| | Neutral | 18.6 | 30 | 27.1 |
| | Disagree | 2.9 | 7.1 | 32.9 |
| | Very much disagree | 1.4 | 1.4 | 2.9 |

Additional file 3, Table 2. Bivariate associations between questionnaire respondents' characteristics and intention to use online-RDD for CT.

| | Positive intention (n=50) | Neutral/Negative intention (n=20) | Test statistic | Df | P-value |
|-----------------------------------|---------------------------|-----------------------------------|----------------------|----|---------|
| Age group (%) | | | Exact= 7.32 | - | 0.059 |
| - 25-34 years | 12 (24) | 1 (5) | | | |
| - 35-44 years | 13 (26) | 2 (10) | | | |
| - 45-54 years | 10 (20) | 6 (30) | | | |
| - ≥ 55 years | 15 (30) | 11(55) | | | |
| Sex (%) | | | X ² =0.54 | 1 | 0.46 |
| - Male | 17 (34) | 5 (25) | | | |
| - Female | 33 (66) | 15 (75) | | | |
| Province of employment (%) | | | Exact= 16.45 | - | 0.09 |
| - Brabant | 6 (12) | . | | | |
| - Caribbean Netherlands* | 1 (2) | . | | | |
| - Drenthe | . | 1 (5) | | | |
| - Flevoland | 1 (2) | . | | | |
| - Friesland | 1 (2) | 1 (5) | | | |
| - Gelderland | 10 (20) | 4 (20) | | | |
| - Groningen | 1 (2) | 4 (20) | | | |
| - Limburg | 5 (10) | 2 (10) | | | |
| - North-Holland | 9 (18) | 4 (20) | | | |
| - Overijssel | 6 (12) | . | | | |
| - Utrecht | 3 (6) | 1 (5) | | | |
| - Zeeland | . | 1 (5) | | | |
| - South-Holland | 7 (14) | 2 (10) | | | |
| Role (%) | | | X ² =1.1 | 1 | 0.3 |
| - Nurse | 23 (51.1) | 7 (36.8) | | | |
| - Doctor | 22 (48.9) | 12 (63.2) | | | |
| Experience with CT (%) | | | Exact= 6.97 | - | 0.13 |
| - 0-5 years | 13 (26) | 3 (15) | | | |
| - 6-10 years | 14 (28) | 4 (20) | | | |
| - 11-15 years | 12 (24) | 2 (10) | | | |
| - 16-20 years | 5 (10) | 5 (25) | | | |
| - ≥ 21 years | 6 (12) | 6 (30) | | | |