Statistical Analysis Plan Part 2

Study ID: 217711

Official Study Title: A phase 4, randomized, open-label, three-arm study to evaluate implementation strategies for the delivery of CAB for HIV Preexposure Prophylaxis (PrEP) across clinical settings for adult (≥18 years) Black cis-and transgender women without HIV infection living in the United States Ending the Epidemic (EHE) territories.

Document Date: 08 Sep 2025

As the source document, the Statistical Analysis Plan, exceeds the maximum permitted file size, the SAP has been split into 4 separate documents.

4.8.003. Descriptive Analyses of Perceptions towards APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Primary care clinic/private practice					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Women's health practice/center					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Community health center					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants are allowed to select more than one response.
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether individuals with specific demographics are more appropriate for APRETUDE (n=XX).
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to APRETUDE patients receiving injections at a location other than their clinic (n=XX).
[4]This item is optional.

4.8.003. Descriptive Analyses of Perceptions towards APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Hospital outpatient					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Retail pharmacy (e.g., CVS, Walgreens)					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Other pharmacy					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants are allowed to select more than one response.
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether individuals with specific demographics are more appropriate for APRETUDE (n=XX).
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to APRETUDE patients receiving injections at a location other than their clinic (n=XX).
[4]This item is optional.

4.8.003. Descriptive Analyses of Perceptions towards APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
At home/home-based care					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Community based organization					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Infusion center					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants are allowed to select more than one response.
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether individuals with specific demographics are more appropriate for APRETUDE (n=XX).
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to APRETUDE patients receiving injections at a location other than their clinic (n=XX).
[4]This item is optional.

4.8.003. Descriptive Analyses of Perceptions towards APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
STD/STI or Sexual Health clinic					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
PrEP clinic					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Department of Health Clinic					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants are allowed to select more than one response.
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether individuals with specific demographics are more appropriate for APRETUDE (n=XX).
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to APRETUDE patients receiving injections at a location other than their clinic (n=XX).
[4]This item is optional.

4.8.003. Descriptive Analyses of Perceptions towards APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Mobile clinic					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Other (e.g., schools, mobile clinics, prisons)[4]					
Very appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all appropriate	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants are allowed to select more than one response.
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether individuals with specific demographics are more appropriate for APRETUDE (n=XX).
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to APRETUDE patients receiving injections at a location other than their clinic (n=XX).
[4]This item is optional.

4.9.001. Frequencies of Knowledge, Attitudes, and Behaviors of Study Staff Participants by Study Arm (All Participants at Month 12/13)

	All Participants (N=XX)	SI Strategy (N=XX)	EI Strategy (N=XX)	ECI Strategy (N=XX)
Provides PrEP counseling				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Confidence to provide PrEP				
Talking to a patient about their sexual history				
Not at all confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Extremely confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not applicable to my role	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Screening a patient to determine whether they are an appropriate candidate for PrEP				
Not at all confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Extremely confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not applicable to my role	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to prescribing medications as part of their role (n=XX).
[2]Participants are allowed to select more than one response.

4.9.001. Frequencies of Knowledge, Attitudes, and Behaviors of Study Staff Participants by Study Arm (All Participants at Month 12/13)

	All Participants (N=XX)	SI Strategy (N=XX)	EI Strategy (N=XX)	ECI Strategy (N=XX)
Answering a patient's questions about PrEP				
Not at all confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Extremely confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not applicable to my role	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Suggesting PrEP to a patient				
Not at all confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Extremely confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not applicable to my role	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Monitoring a patient on PrEP				
Not at all confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Extremely confident	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not applicable to my role	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to prescribing medications as part of their role (n=XX).
[2]Participants are allowed to select more than one response.

4.9.001. Frequencies of Knowledge, Attitudes, and Behaviors of Study Staff Participants by Study Arm (All Participants at Month 12/13)

	All Participants (N=XX)	SI Strategy (N=XX)	EI Strategy (N=XX)	ECI Strategy (N=XX)
Perceptions towards providing PrEP				
The use of PrEP will cause patients to engage in riskier behaviors				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Providing PrEP enforces the risk behaviors of users				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Only people who engage in risky behavior need PrEP				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to prescribing medications as part of their role (n=XX).
[2]Participants are allowed to select more than one response.

4.9.001. Frequencies of Knowledge, Attitudes, and Behaviors of Study Staff Participants by Study Arm (All Participants at Month 12/13)

	All Participants (N=XX)	SI Strategy (N=XX)	EI Strategy (N=XX)	ECI Strategy (N=XX)
Only people with many sexual partners need PrEP				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
All sexually active people can benefit from PrEP				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Providing PrEP will result in an increase in sexually transmitted diseases among patients				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to prescribing medications as part of their role (n=XX).
[2]Participants are allowed to select more than one response.

4.9.001. Frequencies of Knowledge, Attitudes, and Behaviors of Study Staff Participants by Study Arm (All Participants at Month 12/13)

	All Participants (N=XX)	SI Strategy (N=XX)	EI Strategy (N=XX)	ECI Strategy (N=XX)
People do not need PrEP if they act responsibly				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
For patients who have missed an injection, estimated percentage that[1]:				
Continued and/or restarted with APRETUDE				
Mean	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX
Missing	XX	XX	XX	XX
Stopped APRETUDE				
Mean	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to prescribing medications as part of their role (n=XX).
[2]Participants are allowed to select more than one response.

4.9.001. Frequencies of Knowledge, Attitudes, and Behaviors of Study Staff Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
For patients who have missed an injection, estimated percentage who are[1]:				
Cisgender women				
Mean	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX
Missing	XX	XX	XX	XX
Cisgender men who have sex with women				
Mean	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX
Missing	XX	XX	XX	XX
Cisgender men who have sex with men				
Mean	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to prescribing medications as part of their role (n=XX).
[2]Participants are allowed to select more than one response.

4.9.001. Frequencies of Knowledge, Attitudes, and Behaviors of Study Staff Participants by Study Arm (All Participants at Month 12/13)

	All Participants (N=XX)	SI Strategy (N=XX)	EI Strategy (N=XX)	ECI Strategy (N=XX)
Transgender men				
Mean	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX
Missing	XX	XX	XX	XX
Transgender women				
Mean	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX
Missing	XX	XX	XX	XX
Other gender				
Mean	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to prescribing medications as part of their role (n=XX).
[2]Participants are allowed to select more than one response.

4.9.001. Frequencies of Knowledge, Attitudes, and Behaviors of Study Staff Participants by Study Arm (All Participants at Month 12/13)

	All Participants (N=XX)	SI Strategy (N=XX)	EI Strategy (N=XX)	ECI Strategy (N=XX)
Type of HIV test primarily used before initiating a patient on PrEP[1]				
Oral PrEP				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
APRETUDE				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Type of HIV test ever used before initiating a patient on PrEP[1, 2]				
Oral PrEP				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to prescribing medications as part of their role (n=XX).
[2]Participants are allowed to select more than one response.

4.9.001. Frequencies of Knowledge, Attitudes, and Behaviors of Study Staff Participants by Study Arm (All Participants at Month 12/13)

	All Participants (N=XX)	SI Strategy (N=XX)	EI Strategy (N=XX)	ECI Strategy (N=XX)
APRETUDE				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Type of HIV test primarily used for follow-up visits for patients who are on PrEP[1]				
Oral PrEP				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
APRETUDE				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to prescribing medications as part of their role (n=XX).
[2]Participants are allowed to select more than one response.

4.9.001. Frequencies of Knowledge, Attitudes, and Behaviors of Study Staff Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Type of HIV test ever used for follow-up visits for patients who are on PrEP[1, 2]				
Oral PrEP				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
APRETUDE				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Type of HIV test primarily used before PrEP initiation for patients who are new to PrEP[1, 2]				
Oral PrEP				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to prescribing medications as part of their role (n=XX).
[2]Participants are allowed to select more than one response.

4.9.001. Frequencies of Knowledge, Attitudes, and Behaviors of Study Staff Participants by Study Arm (All Participants at Month 12/13)

	All Participants (N=XX)	SI Strategy (N=XX)	EI Strategy (N=XX)	ECI Strategy (N=XX)
APRETUDE				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Type of HIV test primarily used before PrEP initiation for patients who are restarting PrEP[1, 2]				
Oral PrEP				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
APRETUDE				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to prescribing medications as part of their role (n=XX).
[2]Participants are allowed to select more than one response.

4.9.001. Frequencies of Knowledge, Attitudes, and Behaviors of Study Staff Participants by Study Arm (All Participants at Month 12/13)

	All Participants (N=XX)	SI Strategy (N=XX)	EI Strategy (N=XX)	ECI Strategy (N=XX)
Type of HIV test primarily used before PrEP initiation for patients who are taking or have recently taken PrEP[1, 2]				
Oral PrEP				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
APRETUDE				
HIV-1 RNA, qualitative test	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV-1 RNA, quantitative test (e.g., viral load)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (laboratory) 4th gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antigen/antibody test (rapid test) 4th gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (rapid test) 3rd gen rapid	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
HIV antibody test (laboratory) 3rd gen lab	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to prescribing medications as part of their role (n=XX).
[2]Participants are allowed to select more than one response.

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Completed the PrEP Education Training (PrEPare for Black Women) (ECI/EI only)				
Yes	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX
Usability of PrEP training (ECI/EI only)				
The PrEP training was easy to use[1]				
Completely disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX
Whenever I made a mistake using the PrEP training, I could recover easily and quickly[1]				
Completely disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
I like the interface of the PrEP training[1]				
Completely disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX
The information in the PrEP training was well organized, so I could easily find the information I needed[1]				
Completely disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The PrEP training adequately acknowledged and provided information to let me know the progress of my action[1]				
Completely disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX
The amount of time involved in using this PrEP training has been fitting for me[1]				
Completely disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Overall, I am satisfied with this PrEP training[1]				
Completely disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX
The PrEP training would be useful for my healthcare practice[1]				
Completely disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX
The PrEP training improved my likelihood of providing PrEP[1]				
Completely disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The PrEP training helped me address my patients' HIV prevention concerns effectively[1]				
Completely disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX
Utility of implementation strategies				
Used Frequently Asked Questions Brochure				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Helpfulness of Frequently Asked Questions Brochure[2]				
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used Readiness Considerations Checklist				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Helpfulness of Readiness Considerations Checklist[2]				
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Used Getting Started Guide				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of Getting Started Guide[2]				
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Used Injection Education Video				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Helpfulness of Injection Education Video[2]				
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used Provider Website				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Helpfulness of Provider Website[2]				
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Used Instructions for Use flashcard				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of Instructions for Use flashcard[2]				
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Used Important Safety Information document				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Helpfulness of Important Safety Information document[2]				
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used patient materials (e.g., welcome brochure)				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Helpfulness of patient materials (e.g., welcome brochure)[2]				
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Used Dosing and Administration Guide				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of Dosing and Administration Guide[2]				
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Used Implementation Guidance Video (ECI/EI only)				
Yes	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX
Helpfulness of Implementation Guidance Video (ECI/EI only)[2]				
Very helpful	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used Medication Administration Planner				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Helpfulness of Medication Administration Planner[2]				
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Used document on how to discuss sexual health (ECI/EI only)				
Yes	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of how to discuss sexual health (ECI/EI only)[2]				
Very helpful	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX
Used EBONI Spot (ECI/EI only)				
Yes	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX
Helpfulness of EBONI Spot (ECI/EI only)[2]				
Very helpful	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	N/A	XX (XX.X%)	XX (XX.X%)
Missing	XX	N/A	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used GSK Response Center				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Helpfulness of GSK Response Center[2]				
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Used ViiV Connect Video[3]				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of ViiV Connect Video[2]				
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Used Medication Acquisition Tracker (EI only)[3]				
Yes	XX (XX.X%)	N/A	XX (XX.X%)	N/A
No	XX (XX.X%)	N/A	XX (XX.X%)	N/A
I don't remember	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Missing	XX	N/A	XX	N/A
Helpfulness of Medication Acquisition Tracker (EI only)[2]				
Very helpful	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Somewhat helpful	XX (XX.X%)	N/A	XX (XX.X%)	N/A
A little helpful	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Not at all helpful	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Missing	XX	N/A	XX	N/A

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Currently using PrEP Options Communication Tool provided as part of the EBONI study (EI only)				
Yes	XX (XX.X%)	N/A	XX (XX.X%)	N/A
No	XX (XX.X%)	N/A	XX (XX.X%)	N/A
I don't know	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Missing	XX	N/A	XX	N/A
People responsible for using the PrEP Options Communication Tool with patients (EI only)[4, 5]				
Physician	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Nurse practitioner/physician assistant	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Nurse	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Medical assistant	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Social worker/case manager	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Front desk staff/scheduler	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Peer educator	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Other	XX (XX.X%)	N/A	XX (XX.X%)	N/A
I don't know	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Missing	XX	N/A	XX	N/A

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Frequency of using the PrEP Options Communication Tool with each patient (EI only)[5]				
Rarely	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Sometimes	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Often	XX (XX.X%)	N/A	XX (XX.X%)	N/A
All the time	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Missing	XX	N/A	XX	N/A
The PrEP Options Communication Tool was easy to implement in my clinic/practice (EI only)[5]				
Completely disagree	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Disagree	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Neither agree nor disagree	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Agree	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Completely agree	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Missing	XX	N/A	XX	N/A

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants (N=XX)	SI Strategy (N=XX)	EI Strategy (N=XX)	ECI Strategy (N=XX)
The PrEP Options Communication Tool helped to facilitate conversations about PrEP with patients (EI only)[5]				
Completely disagree	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Disagree	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Neither agree nor disagree	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Agree	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Completely agree	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Missing	XX	N/A	XX	N/A
Reason the PrEP Options Communication Tool was not used by clinic/practice (EI only)[4, 6]				
Already have a similar tool	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Do not have time in a clinical visit to use the tool	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Do not understand the information in the tool	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Tool does not provide the right information	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Tool is not needed	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Other	XX (XX.X%)	N/A	XX (XX.X%)	N/A
Missing	XX	N/A	XX	N/A

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Currently using Sexual Health Assessment Tool provided as part of the EBONI study (ECI only)				
Yes	XX (XX.X%)	N/A	N/A	XX (XX.X%)
No	XX (XX.X%)	N/A	N/A	XX (XX.X%)
I don't know	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Missing	XX	N/A	N/A	XX
People responsible for distributing the Sexual Health Assessment Tool to patients (ECI only)[4, 7]				
Physician	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Nurse practitioner/physician assistant	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Nurse	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Medical assistant	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Social worker/case manager	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Front desk staff/scheduler	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Peer educator	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Other	XX (XX.X%)	N/A	N/A	XX (XX.X%)
I don't know	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Missing	XX	N/A	N/A	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
People responsible for reviewing and discussing the results of the Sexual Health Assessment Tool with patients (ECI only)[4, 7]				
Physician	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Nurse practitioner/physician assistant	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Nurse	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Medical assistant	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Social worker/case manager	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Front desk staff/scheduler	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Peer educator	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Other	XX (XX.X%)	N/A	N/A	XX (XX.X%)
The results are or will not be discussed with patients	XX (XX.X%)	N/A	N/A	XX (XX.X%)
I don't know	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Missing	XX	N/A	N/A	XX
Frequency of using the Sexual Health Assessment Tool with each patient (ECI only)[7]				
Rarely	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Sometimes	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Often	XX (XX.X%)	N/A	N/A	XX (XX.X%)
All the time	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Missing	XX	N/A	N/A	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The Sexual Health Assessment Tool was easy to implement in my clinic/practice (ECI only)[7]				
Completely disagree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Agree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Missing	XX	N/A	N/A	XX
The Sexual Health Assessment Tool is an easy way to identify individuals interested in PrEP (ECI only)[7]				
Completely disagree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Agree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Missing	XX	N/A	N/A	XX
The Sexual Health Assessment Tool helps to facilitate conversations about PrEP with patients (ECI only)[7]				
Completely disagree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Disagree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Agree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Completely agree	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Missing	XX	N/A	N/A	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.001. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Reason the Sexual Health Assessment Tool was not used by clinic/practice (ECI only)[4, 8]				
Already have a similar assessment	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Does not integrate with the EMR	XX (XX.X%)	N/A	N/A	XX (XX.X%)
The assessment is difficult to administer	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Concerns about patient privacy	XX (XX.X%)	N/A	N/A	XX (XX.X%)
The assessment does not ask the right questions	XX (XX.X%)	N/A	N/A	XX (XX.X%)
The assessment takes too much time	XX (XX.X%)	N/A	N/A	XX (XX.X%)
The assessment is not needed	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Other	XX (XX.X%)	N/A	N/A	XX (XX.X%)
Missing	XX	N/A	N/A	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Completed the PrEP Education Training (PrEPare for Black Women) (ECI/EI only)							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Usability of PrEP training (ECI/EI only)							
The PrEP training was easy to use[1]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Whenever I made a mistake using the PrEP training, I could recover easily and quickly[1]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
I like the interface of the PrEP training[1]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The information in the PrEP training was well organized, so I could easily find the information I needed[1]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
The PrEP training adequately acknowledged and provided information to let me know the progress of my action[1]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The amount of time involved in using this PrEP training has been fitting for me[1]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Overall, I am satisfied with this PrEP training[1]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The PrEP training would be useful for my healthcare practice[1]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
The PrEP training improved my likelihood of providing PrEP[1]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The PrEP training helped me address my patients' HIV prevention concerns effectively[1]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Utility of implementation strategies							
Used Frequently Asked Questions Brochure							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Helpfulness of Frequently Asked Questions Brochure[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
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[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used Readiness Considerations Checklist							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Helpfulness of Readiness Considerations Checklist[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Used Getting Started Guide							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of Getting Started Guide[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Used Injection Education Video							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Helpfulness of Injection Education Video[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used Provider Website							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Helpfulness of Provider Website[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Used Instructions for Use flashcard							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
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[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of Instructions for Use flashcard[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Used Important Safety Information document							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Helpfulness of Important Safety Information document[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used patient materials (e.g., welcome brochure)							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Helpfulness of patient materials (e.g., welcome brochure)[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Used Dosing and Administration Guide							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of Dosing and Administration Guide[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Used Implementation Guidance Video (ECI/EI only)							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Helpfulness of Implementation Guidance Video (ECI/EI only)[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used Medication Administration Planner							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Helpfulness of Medication Administration Planner[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Used document on how to discuss sexual health (ECI/EI only)							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of how to discuss sexual health (ECI/EI only)[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Used EBONI Spot (ECI/EI only)							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Helpfulness of EBONI Spot (ECI/EI only)[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used GSK Response Center							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Helpfulness of GSK Response Center[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Used ViiV Connect Video[3]							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of ViiV Connect Video[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Used Medication Acquisition Tracker (EI only)[3]							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Helpfulness of Medication Acquisition Tracker (EI only)[2]							
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Currently using PrEP Options Communication Tool provided as part of the EBONI study (EI only)							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
People responsible for using the PrEP Options Communication Tool with patients (EI only)[4, 5]							
Physician	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Nurse practitioner/physician assistant	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Nurse	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Medical assistant	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Social worker/case manager	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Front desk staff/scheduler	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Peer educator	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Frequency of using the PrEP Options Communication Tool with each patient (EI only)[5]							
Rarely	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Sometimes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Often	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
All the time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
The PrEP Options Communication Tool was easy to implement in my clinic/practice (EI only)[5]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The PrEP Options Communication Tool helped to facilitate conversations about PrEP with patients (EI only)[5]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Reason the PrEP Options Communication Tool was not used by clinic/practice (EI only)[4, 6]							
Already have a similar tool	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Do not have time in a clinical visit to use the tool	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Do not understand the information in the tool	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Tool does not provide the right information	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Tool is not needed	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Currently using Sexual Health Assessment Tool provided as part of the EBONI study (ECI only)							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
People responsible for distributing the Sexual Health Assessment Tool to patients (ECI only)[4, 7]							
Physician	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Nurse practitioner/physician assistant	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Nurse	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Medical assistant	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Social worker/case manager	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Front desk staff/scheduler	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Peer educator	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
People responsible for reviewing and discussing the results of the Sexual Health Assessment Tool with patients (ECI only)[4, 7]							
Physician	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Nurse practitioner/physician assistant	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Nurse	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Medical assistant	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Social worker/case manager	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Front desk staff/scheduler	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Peer educator	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The results are or will not be discussed with patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Frequency of using the Sexual Health Assessment Tool with each patient (ECI only)[7]							
Rarely	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Sometimes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Often	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
All the time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The Sexual Health Assessment Tool was easy to implement in my clinic/practice (ECI only)[7]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
The Sexual Health Assessment Tool is an easy way to identify individuals interested in PrEP (ECI only)[7]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.002. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-Level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The Sexual Health Assessment Tool helps to facilitate conversations about PrEP with patients (ECI only)[7]							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Reason the Sexual Health Assessment Tool was not used by clinic/practice (ECI only)[4, 8]							
Already have a similar assessment	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not integrate with the EMR	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The assessment is difficult to administer	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about patient privacy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The assessment does not ask the right questions	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The assessment takes too much time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The assessment is not needed	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Completed the PrEP Education Training (PrEPare for Black Women) (ECI/EI only)					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Usability of PrEP training (ECI/EI only)					
The PrEP training was easy to use[1]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Whenever I made a mistake using the PrEP training, I could recover easily and quickly[1]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
I like the interface of the PrEP training[1]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
The information in the PrEP training was well organized, so I could easily find the information I needed[1]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The PrEP training adequately acknowledged and provided information to let me know the progress of my action[1]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
The amount of time involved in using this PrEP training has been fitting for me[1]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Overall, I am satisfied with this PrEP training[1]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
The PrEP training would be useful for my healthcare practice[1]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
The PrEP training improved my likelihood of providing PrEP[1]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The PrEP training helped me address my patients' HIV prevention concerns effectively[1]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Utility of implementation strategies					
Used Frequently Asked Questions Brochure					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Helpfulness of Frequently Asked Questions Brochure[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used Readiness Considerations Checklist					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Helpfulness of Readiness Considerations Checklist[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Used Getting Started Guide					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of Getting Started Guide[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Used Injection Education Video					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Helpfulness of Injection Education Video[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used Provider Website					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Helpfulness of Provider Website[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Used Instructions for Use flashcard					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of Instructions for Use flashcard[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Used Important Safety Information document					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Helpfulness of Important Safety Information document[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used patient materials (e.g., welcome brochure)					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Helpfulness of patient materials (e.g., welcome brochure)[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Used Dosing and Administration Guide					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of Dosing and Administration Guide[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Used Implementation Guidance Video (ECI/EI only)					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Helpfulness of Implementation Guidance Video (ECI/EI only)[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used Medication Administration Planner					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Helpfulness of Medication Administration Planner[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Used document on how to discuss sexual health (ECI/EI only)					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of how to discuss sexual health (ECI/EI only)[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Used EBONI Spot (ECI/EI only)					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Helpfulness of EBONI Spot (ECI/EI only)[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Used GSK Response Center					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Helpfulness of GSK Response Center[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Used ViiV Connect Video[3]					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Helpfulness of ViiV Connect Video[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Used Medication Acquisition Tracker (EI only)[3]					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't remember	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Helpfulness of Medication Acquisition Tracker (EI only)[2]					
Very helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
A little helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Not at all helpful	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Currently using PrEP Options Communication Tool provided as part of the EBONI study (EI only)					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
People responsible for using the PrEP Options Communication Tool with patients (EI only)[4, 5]					
Physician	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Nurse practitioner/physician assistant	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Nurse	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Medical assistant	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Social worker/case manager	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Front desk staff/scheduler	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Peer educator	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Frequency of using the PrEP Options Communication Tool with each patient (EI only)[5]					
Rarely	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Sometimes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Often	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
All the time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
The PrEP Options Communication Tool was easy to implement in my clinic/practice (EI only)[5]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The PrEP Options Communication Tool helped to facilitate conversations about PrEP with patients (EI only)[5]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Reason the PrEP Options Communication Tool was not used by clinic/practice (EI only)[4, 6]					
Already have a similar tool	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Do not have time in a clinical visit to use the tool	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Do not understand the information in the tool	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Tool does not provide the right information	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Tool is not needed	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Currently using Sexual Health Assessment Tool provided as part of the EBONI study (ECI only)					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
People responsible for distributing the Sexual Health Assessment Tool to patients (ECI only)[4, 7]					
Physician	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Nurse practitioner/physician assistant	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Nurse	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Medical assistant	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Social worker/case manager	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Front desk staff/scheduler	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Peer educator	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
People responsible for reviewing and discussing the results of the Sexual Health Assessment Tool with patients (ECI only)[4, 7]					
Physician	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Nurse practitioner/physician assistant	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Nurse	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Medical assistant	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Social worker/case manager	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Front desk staff/scheduler	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Peer educator	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The results are or will not be discussed with patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Frequency of using the Sexual Health Assessment Tool with each patient (ECI only)[7]					
Rarely	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Sometimes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Often	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
All the time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
The Sexual Health Assessment Tool was easy to implement in my clinic/practice (ECI only)[7]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
The Sexual Health Assessment Tool is an easy way to identify individuals interested in PrEP (ECI only)[7]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
The Sexual Health Assessment Tool helps to facilitate conversations about PrEP with patients (ECI only)[7]					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.10.003. Frequencies and Descriptive Analyses of Perceived Feasibility and Acceptability of Standard Implementation Strategy Tools and Strategies among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Reason the Sexual Health Assessment Tool was not used by clinic/practice (ECI only)[4, 8]					
Already have a similar assessment	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not integrate with the EMR	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The assessment is difficult to administer	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about patient privacy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The assessment does not ask the right questions	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The assessment takes too much time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The assessment is not needed	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]This item follows a skip pattern. Responses are among participants who responded 'Yes' to completing the PrEP training (n=XX).
[2]This item follows a skip pattern. Responses are among participants who responded 'Yes' to the preceding question.
[3]This item follows a skip pattern. Responses are among participants who responded 'Yes' to whether they personally use or their clinic uses ViiV Connect to acquire APRETUDE (n=XX).
[4]Participants are allowed to select more than one response.
[5]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[6]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the PrEP Options Communications Tool (n=XX).
[7]This item follows a skip pattern. Responses are among participants who responded 'Yes' to their clinic currently using the Sexual Health Assessment Tool (n=XX).
[8]This item follows a skip pattern. Responses are among participants who responded 'No' to their clinic currently using the Sexual Health Assessment Tool (n=XX).

4.11.001. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	Total	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Patients have asked about APRETUDE				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Proactively informing patients about APRETUDE				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Methods of Informing Patients about APRETUDE[1,2]				
Provision of educational materials	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
During consultation with patient	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Through peer educators	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referring patients to PrEP providers	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Posters in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Flyers in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on the clinic/practice's website	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on social media	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.001. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	Total	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
What benefits, if any, has there been for seeing patients every two months for their injections?[1]				
No benefits for every two months injections (exclusive)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confirmation of PrEP use	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confirmation of HIV testing	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More opportunities to discuss medication concerns or manage side effect	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More opportunities to screen for other comorbidities	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Additional opportunity to screen for STIs	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Additional change to provide other health or psychological care	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Another benefit	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.001. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	Total	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Which has been most helpful to reach patients with APRETUDE for the study?[1]				
Provision of educational materials	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
During consultation with patient	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Through peer educators	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referring patients to PrEP providers	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Posters in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Flyers in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on the clinic/practice's website	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on social media	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Social media campaign – SheIsMe	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The Eboni Study Website (ebonistudyinfo.com)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Outreach events done by the clinic	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Outreach events by the study sponsor	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Radio ads about the study	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Internet ads about the study	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Walgreens store ads	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referrals from community organizations	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referrals from other providers or health centers	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The study's SHE Ambassadors	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Word of mouth	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.001. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	Total	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Has there been barriers that prevented women from enrolling in the EBONI study?				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
What barriers have influenced women's decision to enroll in the EBONI study?[1,3]				
No child care	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Inability to take time off work	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about lost pay	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No extended clinic hours (e.g., weekend or open later)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Transportation to or from clinic	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Distrust in research	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Lack of awareness of PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.001. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	Total	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Lack of awareness of APRETUDE	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Belief APRETUDE is for men	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Belief PrEP is for men	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Do not think HIV is concern for them	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Stigma with PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Lack of insurance to take PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about side effects	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Time commitment involved in study participation	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Have any participants stopped participation in the EBONI study?				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.001. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	Total	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
What has influenced women's decision to stop participation in the EBONI study?[1,4]				
No child care during injection visits	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Inability to take time off work for injection visits	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about lost pay during injection visits	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No extended clinic hours (e.g., weekend or open later)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No transportation to or from clinic	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Distrust in research	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Do not think HIV is concern for them	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Stigma with taking PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Lack of insurance to take APRETUDE	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Side effects experienced	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Did not like being on APRETUDE	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.001. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	Total	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Implementation Climate				
People at all levels openly talk about what is and isn't working				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Most people in this clinic are willing to change how they do things in response to feedback from others				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.001. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	Total	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
It is hard to get things to change in our clinic				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
People in this clinic operate as a real team				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Staff members often show signs of stress and strain				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.001. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	Total	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
We regularly take time to consider ways to improve how we do things				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Leadership strongly supports clinic change efforts				
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Plans to create new role(s)/new position(s) in clinic to coordinate the APRETUDE program				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Maybe	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.001. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	Total	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Number of new role(s)/new position(s) that are planned in clinic to coordinate the APRETUDE program[5]				
1	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
2	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
3	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
4	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
5	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
>5	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.002. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Patients have asked about APRETUDE							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Proactively informing patients about APRETUDE							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Methods of Informing Patients about APRETUDE[1,2]							
Provision of educational materials	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
During consultation with patient	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Through peer educators	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referring patients to PrEP providers	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Posters in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Flyers in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on the clinic/practice's website	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on social media	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
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[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.002. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
What benefits, if any, has there been for seeing patients every two months for their injections?[1]							
No benefits for every two months injections (exclusive)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confirmation of PrEP use	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confirmation of HIV testing	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More opportunities to discuss medication concerns or manage side effect	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More opportunities to screen for other comorbidities	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Additional opportunity to screen for STIs	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Additional change to provide other health or psychological care	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Another benefit	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
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4.11.002. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Which has been most helpful to reach patients with APRETUDE for the study?[1]							
Provision of educational materials	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
During consultation with patient	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Through peer educators	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referring patients to PrEP providers	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Posters in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Flyers in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on the clinic/practice's website	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on social media	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Social media campaign – ShelsMe	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The Eboni Study Website (ebonistudyinfo.com)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Outreach events done by the clinic	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Outreach events by the study sponsor	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Radio ads about the study	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Internet ads about the study	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Walgreens store ads	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referrals from community organizations	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referrals from other providers or health centers	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The study's SHE Ambassadors	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Word of mouth	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.002. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Has there been barriers that prevented women from enrolling in the EBONI study?							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
What barriers have influenced women's decision to enroll in the EBONI study?[1,3]							
No child care	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Inability to take time off work	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about lost pay	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No extended clinic hours (e.g., weekend or open later)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Transportation to or from clinic	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Distrust in research	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Lack of awareness of PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)

[1]Participants allowed to select more than one response.
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4.11.002. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Lack of awareness of APRETUDE	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Belief APRETUDE is for men	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Belief PrEP is for men	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Do not think HIV is concern for them	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Stigma with PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Lack of insurance to take PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about side effects	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Time commitment involved in study participation	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Have any participants stopped participation in the EBONI study?							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

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4.11.002. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
What has influenced women's decision to stop participation in the EBONI study?[1,4]							
No child care during injection visits	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Inability to take time off work for injection visits	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about lost pay during injection visits	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No extended clinic hours (e.g., weekend or open later)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No transportation to or from clinic	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Distrust in research	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Do not think HIV is concern for them	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Stigma with taking PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Lack of insurance to take APRETUDE	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Side effects experienced	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Did not like being on APRETUDE	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

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4.11.002. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Implementation Climate							
People at all levels openly talk about what is and isn't working							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Most people in this clinic are willing to change how they do things in response to feedback from others							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

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4.11.002. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
It is hard to get things to change in our clinic							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
People in this clinic operate as a real team							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Staff members often show signs of stress and strain							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.002. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
We regularly take time to consider ways to improve how we do things							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Leadership strongly supports clinic change efforts							
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Plans to create new role(s)/new position(s) in clinic to coordinate the APRETUDE program							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Maybe	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.002. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Number of new role(s)/new position(s) that are planned in clinic to coordinate the APRETUDE program[5]							
1	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
2	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
3	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
4	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
5	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
>5	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
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[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.003. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Patients have asked about APRETUDE					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Proactively informing patients about APRETUDE					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Methods of Informing Patients about APRETUDE[1,2]					
Provision of educational materials	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
During consultation with patient	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Through peer educators	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referring patients to PrEP providers	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Posters in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Flyers in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on the clinic/practice's website	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on social media	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
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[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.003. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
What benefits, if any, has there been for seeing patients every two months for their injections?[1]					
No benefits for every two months injections (exclusive)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confirmation of PrEP use	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confirmation of HIV testing	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More opportunities to discuss medication concerns or manage side effect	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More opportunities to screen for other comorbidities	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Additional opportunity to screen for STIs	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Additional change to provide other health or psychological care	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Another benefit	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

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4.11.003. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Which has been most helpful to reach patients with APRETUDE for the study?[1]					
Provision of educational materials	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
During consultation with patient	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Through peer educators	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referring patients to PrEP providers	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Posters in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Flyers in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on the clinic/practice's website	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on social media	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Social media campaign – SheIsMe	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The Eboni Study Website (ebonistudyinfo.com)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Outreach events done by the clinic	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Outreach events by the study sponsor	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Radio ads about the study	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Internet ads about the study	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Walgreens store ads	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referrals from community organizations	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referrals from other providers or health centers	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The study's SHE Ambassadors	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Word of mouth	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
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[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
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[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.003. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Has there been barriers that prevented women from enrolling in the EBONI study?					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
What barriers have influenced women's decision to enroll in the EBONI study?[1,3]					
No child care	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Inability to take time off work	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about lost pay	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No extended clinic hours (e.g., weekend or open later)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Transportation to or from clinic	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Distrust in research	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Lack of awareness of PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
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4.11.003. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Lack of awareness of APRETUDE	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Belief APRETUDE is for men	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Belief PrEP is for men	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Do not think HIV is concern for them	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Stigma with PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Lack of insurance to take PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about side effects	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Time commitment involved in study participation	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Have any participants stopped participation in the EBONI study?					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
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4.11.003. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
What has influenced women's decision to stop participation in the EBONI study?[1,4]					
No child care during injection visits	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Inability to take time off work for injection visits	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about lost pay during injection visits	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No extended clinic hours (e.g., weekend or open later)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No transportation to or from clinic	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Distrust in research	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Do not think HIV is concern for them	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Stigma with taking PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Lack of insurance to take APRETUDE	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Side effects experienced	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Did not like being on APRETUDE	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
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4.11.003. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Implementation Climate					
People at all levels openly talk about what is and isn't working					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Most people in this clinic are willing to change how they do things in response to feedback from others					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
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4.11.003. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
It is hard to get things to change in our clinic					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
People in this clinic operate as a real team					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Staff members often show signs of stress and strain					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.003. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
We regularly take time to consider ways to improve how we do things					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Leadership strongly supports clinic change efforts					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Plans to create new role(s)/new position(s) in clinic to coordinate the APRETUDE program					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Maybe	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

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4.11.003. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Number of new role(s)/new position(s) that are planned in clinic to coordinate the APRETUDE program[5]					
1	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
2	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
3	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
4	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
5	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
>5	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
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4.11.004. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Patients have asked about APRETUDE					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Proactively informing patients about APRETUDE					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Methods of Informing Patients about APRETUDE[1,2]					
Provision of educational materials	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
During consultation with patient	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Through peer educators	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referring patients to PrEP providers	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Posters in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Flyers in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on the clinic/practice's website	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on social media	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
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4.11.004. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
What benefits, if any, has there been for seeing patients every two months for their injections?[1]					
No benefits for every two months injections (exclusive)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confirmation of PrEP use	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Confirmation of HIV testing	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More opportunities to discuss medication concerns or manage side effect	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More opportunities to screen for other comorbidities	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Additional opportunity to screen for STIs	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Additional change to provide other health or psychological care	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Another benefit	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

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4.11.004. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Which has been most helpful to reach patients with APRETUDE for the study?[1]					
Provision of educational materials	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
During consultation with patient	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Through peer educators	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referring patients to PrEP providers	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Posters in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Flyers in the clinic/practice	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on the clinic/practice's website	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mentions on social media	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Social media campaign – SheIsMe	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The Eboni Study Website (ebonistudyinfo.com)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Outreach events done by the clinic	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Outreach events by the study sponsor	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Radio ads about the study	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Internet ads about the study	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Walgreens store ads	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referrals from community organizations	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Referrals from other providers or health centers	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
The study's SHE Ambassadors	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Word of mouth	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

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[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.004. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Has there been barriers that prevented women from enrolling in the EBONI study?					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
What barriers have influenced women's decision to enroll in the EBONI study?[1,3]					
No child care	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Inability to take time off work	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about lost pay	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No extended clinic hours (e.g., weekend or open later)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Transportation to or from clinic	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Distrust in research	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Lack of awareness of PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)

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4.11.004. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Lack of awareness of APRETUDE	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Belief APRETUDE is for men	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Belief PrEP is for men	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Do not think HIV is concern for them	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Stigma with PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Lack of insurance to take PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about side effects	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Time commitment involved in study participation	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Have any participants stopped participation in the EBONI study?					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

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4.11.004. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
What has influenced women's decision to stop participation in the EBONI study?[1,4]					
No child care during injection visits	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Inability to take time off work for injection visits	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Concerns about lost pay during injection visits	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No extended clinic hours (e.g., weekend or open later)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No transportation to or from clinic	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Distrust in research	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Do not think HIV is concern for them	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Stigma with taking PrEP	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Lack of insurance to take APRETUDE	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Side effects experienced	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Did not like being on APRETUDE	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

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	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Implementation Climate					
People at all levels openly talk about what is and isn't working					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Most people in this clinic are willing to change how they do things in response to feedback from others					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

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[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.004. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
It is hard to get things to change in our clinic					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
People in this clinic operate as a real team					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Staff members often show signs of stress and strain					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.004. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
We regularly take time to consider ways to improve how we do things					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Leadership strongly supports clinic change efforts					
Completely disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither agree nor disagree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Completely agree	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Plans to create new role(s)/new position(s) in clinic to coordinate the APRETUDE program					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Maybe	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.11.004. Frequencies and Descriptive Analyses of Perceived Barriers and Facilitators to APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Number of new role(s)/new position(s) that are planned in clinic to coordinate the APRETUDE program[5]					
1	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
2	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
3	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
4	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
5	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
>5	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.
[2]Responses are among the N=XX who responded Yes to proactively informing patients about APRETUDE.
[3]Responses are among the N=XX who responded Yes to there being barriers preventing women from enrolling in the EBONI study
[4]Responses are among the N=XX who responded Yes to participants stopping participation in the EBONI study
[5]Responses are among the N=XX who responded Yes or Maybe to creating new role(s)/new position(s) in clinic.

4.12.001. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Number of APRETUDE patients that the clinic can manage per week				
0-10 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
11-25 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
26-50 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
51-100 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
101-200 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
> 200 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Number of people in your clinic are trained and prepared to give APRETUDE injections				
Mean	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.001. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Number of staff in total needed per week to incorporate APRETUDE into your clinic				
Mean	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
The amount of staff time/full-time equivalent hours (FTE) needed per week to incorporate APRETUDE into your clinic				
1-20% FTE or 0.4-8hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-40% FTE or 8.4-16hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
41-60% FTE or 16.4-24hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
61-80% FTE or 24.4-32hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
81%-100% FTE or 32.4-40hrs of staff	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.001. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
How is your clinic/practice tracking patients on APRETUDE[1]				
Use a spreadsheet such as MS Excel	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Assign specific staff to track patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Have providers track their own patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Create alerts in electronic medical records (EMRs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Clinic/practice protocol if a patient does not show for a regularly scheduled appointment[1]				
Phone the patient to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Text the patient to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Email the patient to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Send message through patient portal to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Send the patient a postal letter to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Wait until the patient contacts the clinic/practice to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Charge the patient a fee for not showing up	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know/not applicable to role	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Specific person in charge of following up on no-shows				
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)

[1]Participants allowed to select more than one response.

4.12.001. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Sufficient staff to manage the current or anticipated number of APRETUDE patients on an ongoing basis				
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Yes, the clinic has sufficient staff to manage only the current number of APRETUDE patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Yes, the clinic has sufficient staff to manage the current and anticipated number of APRETUDE patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Unsure	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Ease or difficulty to schedule appointments for APRETUDE injections				
Very easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither easy nor difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Very difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
Ease or difficulty to reschedule appointments for APRETUDE injections				
Very easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither easy nor difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Very difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Have not rescheduled any injections thus far	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.001. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Clinic systems in place to remind patients of an upcoming appointment[1]				
Phone call from Staff	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Automated phone call	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Text message	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Email	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Postal Mail	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Phone app notification	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.001. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Clinic plan to offer appointments for APRETUDE injections[1]				
Appointments each day of the week	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appointments only on certain days of the week	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appointments spread out over the month	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Injection-only appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Allow patients to drop-in for injections on any day without an appointment	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Allow patients to drop-in with little advance notice (e.g., 24 hr notice)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Allow patients to drop-in on a specific injection day without an appointment	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
After hours appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Before hours appointment	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Weekend appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Home nursing appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mobile clinic option	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Alternate site appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Depends on the schedule of the injection nurse	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Depends on the schedule of the APRETUDE provider	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Unsure	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.001. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
On average, how long does an APRETUDE patient spend in the waiting room prior to an injection visit?				
Up to 20 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-40 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
41-60 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
61- 90 minutes (1hr-1.5hrs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More than 90 minutes (more than 1.5hrs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX
On average, how long does an APRETUDE patient spend in the exam room during an injection visit?				
Up to 20 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-40 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
41-60 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
61- 90 minutes (1hr-1.5hrs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More than 90 minutes (more than 1.5hrs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.001. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Study Arm (All Participants at Month 12/13)

	All Participants	SI Strategy	EI Strategy	ECI Strategy
	(N=XX)	(N=XX)	(N=XX)	(N=XX)
What is the observation period for a patient after an APRETUDE injection?				
No observation period	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Up to 10 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
11 to 20 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-30 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More than 30 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.002. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Number of APRETUDE patients that the clinic can manage per week							
0-10 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
11-25 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
26-50 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
51-100 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
101-200 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
> 200 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Number of people in your clinic are trained and prepared to give APRETUDE injections							
Mean	XX.X	XX.X	XX.X	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX	XX - XX	XX - XX	XX - XX
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.002. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Number of staff in total needed per week to incorporate APRETUDE into your clinic							
Mean	XX.X	XX.X	XX.X	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX	XX - XX	XX - XX	XX - XX
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
The amount of staff time/full-time equivalent hours (FTE) needed per week to incorporate APRETUDE into your clinic							
1-20% FTE or 0.4-8hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-40% FTE or 8.4-16hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
41-60% FTE or 16.4-24hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
61-80% FTE or 24.4-32hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
81%-100% FTE or 32.4-40hrs of staff	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.002. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
How is your clinic/practice tracking patients on APRETUDE[1]							
Use a spreadsheet such as MS Excel	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Assign specific staff to track patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Have providers track their own patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Create alerts in electronic medical records (EMRs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Clinic/practice protocol if a patient does not show for a regularly scheduled appointment[1]							
Phone the patient to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Text the patient to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Email the patient to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Send message through patient portal to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Send the patient a postal letter to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Wait until the patient contacts the clinic/practice to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Charge the patient a fee for not showing up	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know/not applicable to role	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Specific person in charge of following up on no-shows							
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)

[1]Participants allowed to select more than one response.

4.12.002. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Sufficient staff to manage the current or anticipated number of APRETUDE patients on an ongoing basis							
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Yes, the clinic has sufficient staff to manage only the current number of APRETUDE patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Yes, the clinic has sufficient staff to manage the current and anticipated number of APRETUDE patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Unsure	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Ease or difficulty to schedule appointments for APRETUDE injections							
Very easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither easy nor difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Very difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
Ease or difficulty to reschedule appointments for APRETUDE injections							
Very easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither easy nor difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Very difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Have not rescheduled any injections thus far	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.002. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Clinic systems in place to remind patients of an upcoming appointment[1]							
Phone call from Staff	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Automated phone call	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Text message	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Email	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Postal Mail	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Phone app notification	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.002. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Clinic plan to offer appointments for APRETUDE injections[1]							
Appointments each day of the week	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appointments only on certain days of the week	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appointments spread out over the month	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Injection-only appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Allow patients to drop-in for injections on any day without an appointment	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Allow patients to drop-in with little advance notice (e.g., 24 hr notice)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Allow patients to drop-in on a specific injection day without an appointment	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
After hours appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Before hours appointment	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Weekend appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Home nursing appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mobile clinic option	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Alternate site appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Depends on the schedule of the injection nurse	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Depends on the schedule of the APRETUDE provider	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Unsure	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.002. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
On average, how long does an APRETUDE patient spend in the waiting room prior to an injection visit?							
Up to 20 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-40 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
41-60 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
61- 90 minutes (1hr-1.5hrs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More than 90 minutes (more than 1.5hrs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX
On average, how long does an APRETUDE patient spend in the exam room during an injection visit?							
Up to 20 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-40 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
41-60 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
61- 90 minutes (1hr-1.5hrs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More than 90 minutes (more than 1.5hrs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.002. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Provider Type (All Participants at Month 12/13)

	All Participants	Physician	Mid-level Provider	Nurse	Other Medical Provider	Administrator	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
What is the observation period for a patient after an APRETUDE injection?							
No observation period	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Up to 10 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
11 to 20 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-30 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More than 30 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.003. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Number of APRETUDE patients that the clinic can manage per week					
0-10 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
11-25 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
26-50 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
51-100 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
101-200 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
> 200 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Number of people in your clinic are trained and prepared to give APRETUDE injections					
Mean	XX.X	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX	XX - XX
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.003. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Number of staff in total needed per week to incorporate APRETUDE into your clinic					
Mean	XX.X	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX	XX - XX
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
The amount of staff time/full-time equivalent hours (FTE) needed per week to incorporate APRETUDE into your clinic					
1-20% FTE or 0.4-8hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-40% FTE or 8.4-16hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
41-60% FTE or 16.4-24hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
61-80% FTE or 24.4-32hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
81%-100% FTE or 32.4-40hrs of staff	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.003. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
How is your clinic/practice tracking patients on APRETUDE[1]					
Use a spreadsheet such as MS Excel	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Assign specific staff to track patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Have providers track their own patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Create alerts in electronic medical records (EMRs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Clinic/practice protocol if a patient does not show for a regularly scheduled appointment[1]					
Phone the patient to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Text the patient to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Email the patient to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Send message through patient portal to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Send the patient a postal letter to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Wait until the patient contacts the clinic/practice to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Charge the patient a fee for not showing up	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know/not applicable to role	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Specific person in charge of following up on no-shows					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)

[1]Participants allowed to select more than one response.

4.12.003. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Sufficient staff to manage the current or anticipated number of APRETUDE patients on an ongoing basis					
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Yes, the clinic has sufficient staff to manage only the current number of APRETUDE patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Yes, the clinic has sufficient staff to manage the current and anticipated number of APRETUDE patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Unsure	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Ease or difficulty to schedule appointments for APRETUDE injections					
Very easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither easy nor difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Very difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Ease or difficulty to reschedule appointments for APRETUDE injections					
Very easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither easy nor difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Very difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Have not rescheduled any injections thus far	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.003. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Clinic systems in place to remind patients of an upcoming appointment[1]					
Phone call from Staff	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Automated phone call	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Text message	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Email	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Postal Mail	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Phone app notification	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.003. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Clinic plan to offer appointments for APRETUDE injections[1]					
Appointments each day of the week	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appointments only on certain days of the week	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Appointments spread out over the month	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Injection-only appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Allow patients to drop-in for injections on any day without an appointment	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Allow patients to drop-in with little advance notice (e.g., 24 hr notice)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Allow patients to drop-in on a specific injection day without an appointment	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
After hours appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Before hours appointment	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Weekend appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Home nursing appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Mobile clinic option	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Alternate site appointments	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Depends on the schedule of the injection nurse	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Depends on the schedule of the APRETUDE provider	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Unsure	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.003. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
On average, how long does an APRETUDE patient spend in the waiting room prior to an injection visit?					
Up to 20 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-40 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
41-60 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
61- 90 minutes (1hr-1.5hrs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More than 90 minutes (more than 1.5hrs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
On average, how long does an APRETUDE patient spend in the exam room during an injection visit?					
Up to 20 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-40 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
41-60 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
61- 90 minutes (1hr-1.5hrs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More than 90 minutes (more than 1.5hrs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.003. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Type (All Participants at Month 12/13)

	All Participants	Women's Health	Primary Care	HIV Specialist	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
What is the observation period for a patient after an APRETUDE injection?					
No observation period	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Up to 10 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
11 to 20 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-30 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
More than 30 minutes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
I don't know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.004. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Number of APRETUDE patients that the clinic can manage per week					
0-10 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
11-25 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
26-50 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
51-100 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
101-200 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
> 200 patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Number of people in your clinic are trained and prepared to give APRETUDE injections					
Mean	XX.X	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX	XX - XX
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.004. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Number of staff in total needed per week to incorporate APRETUDE into your clinic					
Mean	XX.X	XX.X	XX.X	XX.X	XX.X
SD	XX.XX	XX.XX	XX.XX	XX.XX	XX.XX
Median (Q1, Q3)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)	XX.X (XX.X, XX.X)
Min-Max	XX - XX	XX - XX	XX - XX	XX - XX	XX - XX
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
The amount of staff time/full-time equivalent hours (FTE) needed per week to incorporate APRETUDE into your clinic					
1-20% FTE or 0.4-8hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
21-40% FTE or 8.4-16hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
41-60% FTE or 16.4-24hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
61-80% FTE or 24.4-32hrs of staff time	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
81%-100% FTE or 32.4-40hrs of staff	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.004. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
How is your clinic/practice tracking patients on APRETUDE[1]					
Use a spreadsheet such as MS Excel	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Assign specific staff to track patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Have providers track their own patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Create alerts in electronic medical records (EMRs)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Clinic/practice protocol if a patient does not show for a regularly scheduled appointment[1]					
Phone the patient to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Text the patient to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Email the patient to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Send message through patient portal to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Send the patient a postal letter to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Wait until the patient contacts the clinic/practice to reschedule	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Charge the patient a fee for not showing up	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know/not applicable to role	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Specific person in charge of following up on no-shows					
Yes	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)

[1]Participants allowed to select more than one response.

4.12.004. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Sufficient staff to manage the current or anticipated number of APRETUDE patients on an ongoing basis					
No	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Yes, the clinic has sufficient staff to manage only the current number of APRETUDE patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Yes, the clinic has sufficient staff to manage the current and anticipated number of APRETUDE patients	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Unsure	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Ease or difficulty to schedule appointments for APRETUDE injections					
Very easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither easy nor difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Very difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX
Ease or difficulty to reschedule appointments for APRETUDE injections					
Very easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat easy	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Neither easy nor difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Somewhat difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Very difficult	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Have not rescheduled any injections thus far	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.

4.12.004. Frequencies and Descriptive Analyses of Feasibility and Acceptability of Implementing APRETUDE among Staff Study Participants by Clinic Affiliation (All Participants at Month 12/13)

	All Participants	University/ Academia/ Research	Non Profit/Community Health/ FQHC/ Department of Health	Private Practice/ Hospital	Other
	(N=XX)	(N=XX)	(N=XX)	(N=XX)	(N=XX)
Clinic systems in place to remind patients of an upcoming appointment[1]					
Phone call from Staff	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Automated phone call	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Text message	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Email	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Postal Mail	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Phone app notification	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Other	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Does not know	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)	XX (XX.X%)
Missing	XX	XX	XX	XX	XX

[1]Participants allowed to select more than one response.