**Supplemental Material: Illustrative Quotes from Qualitative Interviews**

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| **Theme** | **Quote** |
| **Early Implementation** | |
| **Structural Characteristics / Readiness for Implementation** | |
| **Using clinic readiness assessment results to tailor implementation activities.** | * “We did ask specific questions regarding what current protocols they have in place for colorectal cancer screening, and we asked them to detail that, so we could get a picture of how they approach colorectal cancer screening. We also asked them to indicate how they had partnered with any kind of organization to do quality improvement practice efforts and asked them to explain what those partnerships were like and how they were able to work with folks. We also asked them to identify staff that they would have available [to support CRC screening].” *Awardee Staff, Site 1* * “We take a look at their readiness assessment data, their organizational assessment data, site visit information that’s been gathered. Are they already doing [priority EBIs such as] provider reminders? Are they already doing client reminders or provider assessment and feedback? If not for colorectal cancer, for another preventive screening or preventive action? So learning about what they’re currently doing can give us some ideas about how to best offer to them.” *Awardee Staff, Site 2* |
| **Providing moderate funding to clinics** | * **“**We were typically finding that [$8,000 per clinic] was about an appropriate level in terms of them being able to do the work, but then not being so reliant on the funding to be able to continue to do the work. It’s…supporting sustainability. We don’t want to give them so much money that they don’t have any other resources allocated towards this work.” *Awardee Staff, Site 1* * The clinics are not specifically reliant on the continuation of funds to maintain momentum…what I see them do on the day to day basis is that they're really trying to provide this clinic with the tools and the training that they're going to need to continue their EBI efforts and we've seen this actually with some of our earlier clinics that we worked with in year one where they had implementation money and then once they transition into more sustainability, that they've been able to either maintain or continue to increase their colorectal cancer screening rates. I think that perspective of planning from the beginning with sustainability in mind is really important.” *Implementation Partner, Site 4* |
| **Networks and Communication / Culture** | |
| **Identifying clinic CRC screening champions** | * “Yeah, so the reason I say that is because our champions really are just that, they're in that clinic to advocate for our screenings and to make sure that they remain the top priority for the administration and the physician. So, I think if any of our champions were to fall off or leave, we would see a fall in priority over time of our CRC. They're out there daily to remind [inaudible] it needs to be done.” *Awardee Staff, Site 4* |
| **Implementation Climate** | |
| **Coordinating EBIs and SAs with existing clinic practices** | * “This is a way of trying to pilot something at these sites that are in our program but who are also using [Mammography] services to really look at, to see, for these women who are coming to get their mammogram, if they’re age eligible and they need colorectal cancer screening… the clinic can then take that opportunity to talk with them about screening, offer them a FIT test and see if they can, basically the patient comes in for one screening and hopefully they can go out the door with two.” *Awardee Staff, Site 1* * “… one of the things we wanted to do was make it complicated on our end, so that the clinic didn't have to worry about reporting to the four different programs… there’s no way we would’ve been able to do what we’re doing and engage as many clinics as we have, if we didn’t have the entire package of chronic disease on the plate. I think that has been a huge selling point for us, to try to get clinics interested in what we’re doing.” *Awardee Staff, Site 3* |
| **Sustainability** | |
| **Providing ongoing support for optimal use of EHRs** | * “Having people in place who understand the EHR system in a way that they can run reports [so] that people are confident in, that staff are confident in, that providers are confident in, is a key role as well to sustaining.” *Awardee Staff, Site 1* * “…we've done when one system is switching to a new EHR and if we have another system that is currently using that EHR we always put them in contact, with the other site so that they can communicate and talk. And maybe come to some solutions with dealing with getting the data.” *Awardee Staff, Site 2* |
| **Emphasizing clinic leadership support** | * “But in the places that are successful, I know that [CRCCP] ladies talk about the leadership of those clinics is involved. They're just there, they don't even have to do anything terribly special to put a lot of effort or anything into it. But they're there and they support the work of those underneath of them that are figuring out how to do it the best way. It reminds me of an old adage my mom used to tell me, "The best thing for a garden is the gardener shadow." If you're there and you're involved and you're paying attention to it, then it grows and flourishes. That seems to be the case in the EBI clinics, the places that have that attention and that engagement from leadership tend to do better.” *Implementation Partner, Site 1* * “To me, the clinics that are most successful literally do have the CMO who has embraced colorectal cancer screening. We have, I'm going to say, half of the groups that we work with have over a period of time, though they have been our biggest champions, especially around the navigation area, where we work most ... if you see a system that's really excited about cancer prevention and control, you'll see a robust navigation system in play, that's mostly predicated the champion ... if you don't have the medical provider and CMO's buy-in, I don't see it really fly as high as it would otherwise.” *Implementation Partner, Site 3* |
| **Adopting a team-based approach and cross-training clinic staff** | * “And one of the things we’ve stressed over this last year is cross-training more than one champion or more than one employee on what CRC is and how that process works…because there is a lot of turnover at the clinics.” *Awardee Staff, Site 4* * “…having a champion or even two champions…is not enough for sustainability. Because turnover happens…instead of cultivating champions, cultivating a team-based approach works better for sustainability…This is a culture that they have created, these are their successes. Once you’ve got that team-based approach, it helps make the implementation of system change easier.” *Implementation Partner, Site 1* |
| **Integrating EBIs/SAs into existing clinic workflows, policies, and standard operating procedures** | * “And if we can also help them get to a point where they can truly get a handle on the actual process so that it is manageable and maintainable and then if they have a staff change, it's documented and the new person can step in and say, ‘Oh, this is our standard operating procedure around colorectal cancer. This is what has been determined as our standard practice.’ So I think has really forced our partners at the clinic and the system level to truly document and look at and analyze and embrace it, publish it, put it on their shared drive so that the entire organization can follow it and maintain what the practice is for colorectal cancer screening. And then hopefully, our hope is that it becomes the standard operating procedure with all cancer screenings and HPV vaccinations, for example, so that we do have overflow and that it does become a practice standard.” *Implementation Partner, Site 2* * “Workflows, defining workflows and algorithms are huge in ensuring that CRC screening is implemented, whether it be from when the person first checks in to speaking to their provider to those people that they're meeting. Is it in the workflow? Has it been asked? Has it been checked? Is the provider reminder system pulling it up? Is it being checked to make sure that's in that workflow? So those different initiatives, ensure that they're in those workflows is very important in sustainability.” *Awardee Staff, Site 4* |