

## Appendix 3: Codebook

### Interview transcript codebook

| Domain       | Code          | Sub-Code   | Sub-Code | Brief description   |   |
|--------------|---------------|--|----------|---|---|
| Goal-setting | Aware         | No   |          | Unaware of goal-setting terminology or techniques.                      |   |
|              |               | Yes  |          | Aware or indicates awareness of goal-setting terminology or techniques. |   |
|              | Attitude      | Negative   |          |   | Negative attitude about goal-setting  |
|              |               | Positive   |          |   | Positive attitude about goal-setting.   |
|              | Understanding | Equates goal-setting with patient education or educational materials |          |   | Confusion of goal-setting with patient education materials or other collateral.       |
|              |               | Misinterpretation or no knowledge                                    |          |   | Misunderstanding or misinterpretation of goal-setting. May also include no knowledge. |
|              |               | Unclear  |          |   | Understanding of goal-setting is unclear.   |
|              |               | Yes  |          | Reasonably understands goal-setting.                                    |   |
|              | Happens       | No   |          |   | Goal-setting does not happen in routine clinical practice.                            |
|              |               | Sometimes  |          |   | Goal-setting sometimes happens in routine clinical practice.                          |
|              |               | Unclear  |          |   | Unclear whether goal-setting happens in routine clinical practice.                    |
|              |               | Yes  |          |   | Goal-setting happens in routine clinical practice.                                    |
|              |               | Informal   |          | "In the discussion"   | Goal-setting happens, but informally. May use phrase, "in the discussion."            |

|                   |  |                             |  |  |
|-------------------|--|-----------------------------|--|--|
|                   |  | Clinical not personal goals |  | Goal-setting happens, but they track biomedical targets, not personal goals. |
| Personal goals    | Yes                                      |                             |  | Sets and track personal patient goals.                                       |
|                   | No                                       |                             |  | Does not set or track personal patient goals.                                |
| Unstructured      |  |                             |  | Goal-setting conversations are unstructured or informal.                     |
| Barriers          | Patient                                  |                             |  | Barriers to goal-setting are related to patients.                            |
|                   | Time                                     |                             |  | Barriers to goal-setting are related to restraints on time.                  |
| Determination     | Assigned                                 |                             |  | Goals are assigned to patients by clinicians.                                |
|                   | Elicited or negotiated                   |                             |  | Goals are developed collaboratively.   |
| Formal tracking   | Tool                                     | No                          |  | Goals are not tracked with a formal tool.                                    |
|                   |  | Yes                         |  | Goals are tracked with a formal tool.  |
|                   |  | Yes                         |  | Goals are tracked using handouts.  |
|                   |  | Unclear                     |  | Unclear whether goals are tracked with a tool.                               |
|                   | EHR                                      | Yes                         |  | Goals are tracked formally using the EHR.                                    |
| Informal tracking | Other                                    |                             |  | Goals are tracked informally, in an unspecified way.                         |
|                   | EHR                                      |                             |  | Goals are tracked informally using the EHR.                                  |
| Leadership        | Supportive                               |                             |  | Leadership is supportive of goal-setting efforts.                            |
|                   | Wants clinicians to reach clinical goals |                             |  | Leadership wants clinicians to reach biomedical goals (not personal goals).  |

|                                  |            |   |  |   |
|----------------------------------|------------|---|--|---|
|                                  | With       | Non-PCP   |  | Goal-setting conversations happen with clinical staff like medical assistants, nurses, dieticians etc. Not with primary care physician. |
|                                  |            | PCP   |  | Goal-setting conversations happen with primary care physician.  |
| <b>Motivational interviewing</b> | Aware      | No  |  | Unaware of motivational interviewing terminology or techniques.   |
|                                  |            | Unclear   |  | Awareness of motivational interviewing unclear.   |
|                                  |            | Yes   |  | Aware or indicates awareness of motivational interviewing.  |
|                                  | Attitude   | Mixed   |  | Mixed attitudes about motivational interviewing.  |
|                                  |            | Negative  |  | Negative attitude about motivational interviewing.  |
|                                  |            | Positive  |  | Positive attitude about motivational interviewing.  |
|                                  | Understand | Equating friendliness/education /clinical questions with MI |  | Confusion of motivational interviewing with friendliness/education/clinical questions etc.  |
|                                  |            | Misunderstanding or ignorance                               |  | Misunderstanding or misinterpretation of motivational interviewing.   |
|                                  |            | Unclear   |  | Understanding of motivational interviewing is unclear.  |
|                                  |            | Yes   |  | Reasonably understands motivational interviewing.   |
| Happens                          | Informally |   | Motivational interviewing happens, or the interviewee says it happens, but it's unstructured and informal. |   |

|                   |          |                    |  |
|-------------------|----------|--------------------|--|
|                   | No       |                    | Motivational interviewing does not happen in routine clinical practice.                              |
|                   | No       | Missed opportunity | Missed opportunity for motivational interviewing. May include references to "noncompliant" patients. |
|                   | Rarely   |                    | Motivational interviewing happens, but rarely.   |
|                   | Unclear  |                    | Unclear whether motivational interviewing happens in routine clinical practice.                      |
|                   | Yes      |                    | Motivational interviewing happens in routine clinical practice.                                      |
|                   | Informal |                    | Motivational interviewing happens, but informally.   |
| Matters most      | Informal |                    | Assessing what matters most happens, but informally.   |
|                   | No       |                    | Assessing what matters most does not happen in routine clinical practice.                            |
|                   | Unclear  |                    | Unclear whether motivational interviewing happens in routine clinical practice.                      |
|                   | With     | Care managers      | Assessing what matters most happens with care managers.  |
|                   | Yes      |                    | Assessing what matters most happens in routine clinical practice.                                    |
| Assess motivation | Unclear  |                    | Unclear whether motivation is assessed in routine clinical practice.                                 |
|                   | Yes      |                    | Motivation is assessed in routine clinical practice, according to interviewee.                       |

|                    |              |                     |                 |   |
|--------------------|--------------|---------------------|-----------------|---|
|                    | Barrier      | Physician attitudes |                 | Barriers to motivational interviewing are related to physician attitudes.   |
|                    | Tools        | No                  |                 | Tools are not used to facilitate motivational interviewing.   |
|                    | Champions    | Yes                 |                 | Clinic has champions for motivational interviewing.   |
|                    | Leadership   | Not supportive      |                 | Leadership is not supportive of motivational interviewing.  |
|                    |              | Supportive          |                 | Leadership is supportive of motivational interviewing.  |
|                    | Training     | No                  |                 | Training for motivational interviewing is not available.  |
|                    |              | Not helpful         |                 | Training for motivational interviewing is available, but not helpful.   |
|                    |              | Unclear             |                 | Unclear whether motivational interviewing is available.   |
|                    |              | Yes                 |                 | Motivational interviewing training is available.  |
|                    |              | Yes                 | "Long time ago" | Motivational interviewing was available but is no longer.   |
|                    |              | Yes                 | Coaches         | Physician health coaches teach motivational interviewing.   |
|                    | With         | Non PCP             |                 | Motivational interviewing conversations happen with clinical staff like medical assistants, nurses, dieticians etc. Not with primary care physicians. |
|                    |              | PCP                 |                 | Motivational interviewing happens with primary care physicians.   |
| <b>Other Tools</b> | Action plans | Yes                 |                 | Action plans are used in routine clinical care.   |

|                               |                       |          |          |   |
|-------------------------------|-----------------------|----------|----------|---|
|                               |                       | No       |          | Action plans are not used in routine clinical care.                                   |
|                               | Contracts             |          |          | Patient contracts are used in routine clinical care.                                  |
|                               | Other                 | Yes      |          | Other tools are used in routine clinical care.  |
|                               |                       | No       |          | Other tools are not used in routine clinical care.                                    |
|                               | Self-management plans |          |          | Self-management plans are used in routine clinical care.                              |
|                               | Handouts              |          |          | Patient informational handouts are used in routine clinical care.                     |
| <b>Shared Decision-Making</b> | Awareness             | No       |          | Unaware of SDM terminology or techniques.   |
|                               |                       | Unclear  |          | Aware or indicates awareness of SDM terminology or techniques.                        |
|                               |                       | Yes      |          | Aware or indicates awareness of SDM terminology or techniques.                        |
|                               | Attitude              | Mixed    |          | Mixed attitude about SDM.   |
|                               |                       | Negative |          | Negative attitude about SDM.  |
|                               |                       | Positive |          | Positive attitude about SDM.  |
|                               | Understanding         | No       |          | SDM does not happen in routine clinical practice.                                     |
|                               |                       | No       | Equating | Equates all educational materials or patient communication with decision aids or SDM. |
|                               |                       | Unclear  |          | Understanding of SDM is unclear.  |
|                               |                       | Yes      |          | Reasonably understands SDM.   |
|                               | Happens               | No       |          | SDM does not happen in routine clinical practice.                                     |

|         |                     |                |  |
|---------|---------------------|----------------|--|
|         | No                  | Understand     | SDM does not occur because clinicians understand what patients need.                       |
|         | Rarely              |                | SDM sometimes happens in routine clinical practice.  |
|         | Unclear             |                | Unclear whether SDM happens in routine clinical practice.                                  |
|         | Yes                 |                | SDM happens in routine clinical practice.  |
|         | Informal            | "Just discuss" | SDM happens, but informally. Or in an unstructured manner. May use phrase, "just discuss." |
|         | Clinician dependent |                | SDM may happen; it depends on individual clinician preferences.                            |
| Barrier | Patient attitudes   |                | Barriers to SDM are related to patients.   |
|         | Physician attitudes |                | Barriers to SDM are related to physician attitudes.  |
|         | Physician attitudes | Time           | Barriers to SDM are related to restraints on time.   |
| EOL     | AD                  |                | Advance directives are used in routine clinical care.                                      |
|         | Attitude            | Mixed          | Mixed attitude about EOL SDM.  |
|         | Other resources     |                | Uses unspecified SDM EOL resource in routine care.   |
|         | Tool                |                | Uses tool for EOL SDM.   |
|         | Training            | No             | Training for EOL SDM is not available.   |
|         | Training            | Yes            | Training for EOL SDM is available.   |
|         | Unclear             |                | Unclear whether EOL SDM occurs in routine clinical care.                                   |

|                       |  |                |     |   |
|-----------------------|--|----------------|-----|---|
|                       |  | Unstructured   |     | EOL SDM occurs but in an unstructured fashion.  |
| Leadership            |  | Not supportive | No  | Leadership is not supportive of SDM.  |
|                       |  | Supportive     | Yes | Leadership is supportive of SDM.  |
| Recording Preferences |  | Informal       |     | Preferences are recorded in routine clinical care, but informally.  |
|                       |  | Yes            |     | Preferences are recorded in routine clinical care.  |
|                       |  | No             |     | Preferences are not recorded in routine clinical care.  |
| Team Talk             |  | Happens        | Yes | Team talk occurs. Or appears to occur.  |
|                       |  |                | No  | Team talk does not occur.   |
| Decision Aids         |  | No             |     | Decision aids are not used in routine clinical care.  |
|                       |  | Unclear        |     | Unclear whether decision aids are used in routine clinical care.  |
|                       |  | Used to        |     | Decision aids used to be used in routine clinical care.   |
|                       |  | Yes            |     | Decision aids are used in routine clinical care.  |
| Training              |  | No             |     | SDM training is not available.  |
|                       |  | Unclear        |     | Unclear whether SDM training is available.  |
|                       |  | Yes            |     | SDM training is available.  |
| With                  |  | Non PCP        |     | SDM conversations happen with clinical staff like medical assistants, nurses, dieticians etc. Not with primary care physicians. |



|                 |                              |     |  |  |
|-----------------|------------------------------|-----|--|--|
|                 |                              | PCP |  | SDM happens with primary care physicians.                            |
|                 | Understanding what they need |     |  | SDM does not occur because clinicians understand what patients need. |
| <b>Training</b> | Conflating                   |     |  | Conflating all clinical training with PAE.                           |