### Appendix 1

Demographic questions to begin:
- What is your age?
- What is your gender? Male, female, non-binary, something I have not said, or would you prefer not to say?
- What is the postcode of your practice?
- How long have you worked as a general practitioner?
- How long have you been providing an IUD insertion service in general practice?
- Approximately what number of IUD insertions do you do in general practice month?
- Is there anything else you’d like to add?

### Semi-structured interview guide (numbered), with probing questions listed underneath (dot-points; guided by Booth et al quality framework)\(^6\)

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Core question</th>
<th>Probing questions</th>
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| General   | 1. Can you describe the process of how you started providing IUD insertions in your clinic? | • Why did you choose to begin providing an IUD service at your clinic?  
• What was involved in the set up?  
• What resources assisted you?  
• Who did you talk to about the service when you set it up? |
| Accessibility | 2. How are IUD services arranged at your practice? | • How do you set aside time to do IUD insertions (eg scattering them throughout the week or all in one day)?  
• How do patients find your service? Are your patients receptive when you consult on and offer this service? |
| Efficiency | 3. Can you describe the process for a routine IUD consultation, for a client interested in this method? | • How do you structure the process? What steps are involved?  
• What is the patient journey? Do they have several consultations before insertion?  
• Do you routinely use patient and provider resources? If so, which ones?  
• How is it that you come to discuss IUD with patients? Do you bring it up first or do you wait for them to prompt you? |
| Safety    | 4. How do you prepare for the insertion process? | • How do you approach and talk patients through consent for the insertion procedure?  
• Do you do insertion preparation yourself? Or does someone else at the clinic do this? |
| Acceptability | 5. Is anybody else at your practice involved in providing IUD services (ie any task-sharing arrangements, any other inserters or providing assistance to you) and to what extent? | • What happens to IUD provision at your practice when you are on leave?  
• Who else performs IUD insertion at your practice?  
• What task-sharing occurs in your practice with other clinicians, such as GPs/nurses?  
• In what situations do you refer a patient for IUD insertion? |
| Appropriateness | 6. What are the practice billing arrangements for IUD insertion at your clinic? | • What billing items do you use?  
• Are there any reductions for concession card holders?  
• What improvements to billing would you like to see for IUD insertions? |
| Efficiency | 7. What barriers or challenges have you found in IUD service delivery at your practice? | • What difficulties have you had?  
• How have these issues been resolved?  
• How supportive is your clinic in providing an IUD service? |
| Effectiveness | 8. How do you think IUD provision in Australian general practice could be improved? | • There are other models of IUD delivery, such as with greater nurse involvement. What is your knowledge about nurses’ scope of practice in IUD service provision in your practice and nationally?  
• What do you think are the misconceptions about IUD service delivery in Australian general practice?  
• What are the barriers to this service that you know of?  
• What advice would you give a colleague who wanted to start delivering IUD insertions in their clinic? |

GP, general practitioner; IUD, intrauterine device.