

**APPENDIX S1** Overview of multi-level variables, their measurement and psychometric characteristics (if applicable) of the BRIGHT study

Variable	Instrument	<ul style="list-style-type: none"> <li>• Assessment method</li> <li>• Conceptual definition (if needed)</li> <li>• Number of items</li> <li>• Recall period</li> <li>• Response options</li> <li>• Scoring</li> </ul>	Psychometric evidence (based on the literature or BRIGHT study analysis)
<b>PATIENT LEVEL</b>			
<b><i>Integrative Model of Behavioral Prediction – factors</i></b>			
Barriers to taking immunosuppressants as prescribed	<i>Immunosuppressive Medication Adherence Barriers scale [69]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• Personal or environmental constraints preventing people from acting upon their intentions</li> <li>• 19 items</li> <li>• Current situation</li> <li>• 5-point Likert scale ranging from ‘1= never’ to ‘5= always’</li> <li>• Average score</li> </ul>	19 of the original 27 items retained in a unidimensional scale, with a Cronbach’s alpha of 0.89
Intention to adhere to the immunosuppressive regimen	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• Cognitive representation of a person's readiness to perform a given behavior</li> <li>• 3 items</li> <li>• Current situation</li> <li>• 5-point Likert scale ranging from ‘1= strongly disagree’ to ‘5= strongly agree’</li> <li>• Average score</li> </ul>	3 of the original 5 items retained in a unidimensional scale, with a Cronbach’s alpha of 0.81
Attitudes towards immunosuppressant intake	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• Degree to which a patient has a favorable or unfavorable evaluation or appraisal of adherence behavior</li> <li>• 21 items; 2 dimensions: Worries (12 items) and positive aspects/looking toward to the future (9 items)</li> <li>• Current situation</li> </ul>	21 of the original 22 items retained in a two-dimensional scale, with Cronbach’s alpha values of 0.77 (Worries) and 0.66

Perceived norms related to immunosuppressants	<i>Investigator developed questions based on previous transplant research [16, 70-74]</i>	<ul style="list-style-type: none"> <li>• 5-point Likert scale ranging from '1= strongly disagree' to '5= strongly agree'</li> <li>• Average score</li> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• A patient's perception of social pressure, or relevant others' beliefs whether or not he/she should adhere to the immunosuppressants</li> <li>• 11 items</li> <li>• Current situation</li> <li>• 5-point Likert scale ranging from '1= strongly disagree' to '5= strongly agree'</li> <li>• Average score</li> </ul>	(Positive aspects/looking toward the future)  Unidimensional scale, with a Cronbach's alpha of 0.94
Self-efficacy regarding taking immunosuppressants	<i>Long-Term Medication Behavior Self-Efficacy Scale (LTMBES) [75]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• A person's perception of his/her ability to perform a given behavior in a given situation</li> <li>• 23 items</li> <li>• Current situation</li> <li>• 5-point Likert scale ranging from '1= not at all confident' to '5= completely confident'</li> <li>• Average score</li> </ul>	23 of the original 24 items retained in a unidimensional scale, with a Cronbach's alpha of 0.98

**Literature derived patient level factors**

*Socio-demographic factors*

Gender	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient interview questionnaire</li> <li>• 1 item</li> <li>• Male/female</li> <li>• Dichotomous variable</li> </ul>	Not applicable
Age	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient interview questionnaire</li> <li>• 1 item</li> <li>• In years</li> <li>• Continuous variable</li> </ul>	Not applicable
Educational level	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient interview questionnaire</li> <li>• 1 item</li> </ul>	Not applicable

Employment	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• 4 categories: less than high/ secondary school; completed high/ secondary school; completed further education/ training; completed college/ university</li> <li>• Ordinal variable</li> <li>• BRIGHT patient interview questionnaire</li> <li>• 1 item</li> <li>• 5 categories: 1 Being (self-)employed (part-time/full time paid work); 2 Looking for a job/ unemployed; 3 Unable to work (temporarily) or receiving a disability benefit /allowance; 4 Retired; 5 Other (working as a volunteer; student; housewife/househusband, ...)</li> </ul>	Not applicable
Race	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• Categorical variable</li> <li>• BRIGHT patient interview questionnaire</li> <li>• 1 item</li> <li>• Caucasian/white <u>vs</u> other ethnicities (Asian, African-American, Hispanic, North-African, Other)</li> </ul>	Not applicable
Marital status	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• Dichotomous variable</li> <li>• BRIGHT patient interview questionnaire</li> <li>• 1 item</li> <li>• Married/living together or single or divorced/separated or widowed</li> </ul>	Not applicable
Living alone	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• Categorical variable</li> <li>• BRIGHT patient interview questionnaire</li> <li>• 1 item</li> <li>• Yes/no</li> <li>• Dichotomous variable</li> </ul>	Not applicable
<i>Clinical factors</i>			
Etiology of end-stage heart disease	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• Structured form for medical record information extraction</li> <li>• 1 item: ischemic cardiomyopathy, idiopathic cardiomyopathy (dilated, restrictive, hypertrophic), valvular disease, or other</li> </ul>	Not applicable
Comorbidities post-transplant	<i>Adapted Charlson Comorbidity Index [76]</i>	<ul style="list-style-type: none"> <li>• Categorical variable</li> <li>• Structured form for medical record information extraction</li> <li>• 19 items</li> </ul>	Not applicable

Number of treated rejections experienced per year in follow up	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• Assessing 1) post-Tx comorbidities ongoing from pre-Tx or 2) new-onset comorbidities post-Tx (myocardial infarction and heart failure were only scored if newly onset post-Tx, given that all patients underwent a heart transplantation for end-stage heart disease)</li> <li>• Dichotomous score Yes/no (either ongoing or newly onset)</li> <li>• Item scores weighted from 1 to 6 points depending on the comorbidity [76]. Scores were not adjusted for age. Possible total score ranges from 0 to 37</li> <li>• Structured form for medical record information extraction</li> <li>• 1 item</li> <li>• Calculation is based on information on the number of treated rejection(s) reported in the medical record until time of study enrolment, divided by the time in post-transplant follow-up (in years)</li> <li>• Continuous: number of rejections per year in follow-up</li> </ul>	Not applicable
<i>Treatment-related factors</i>			
Number of daily doses of immunosuppressants	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient interview questionnaire</li> <li>• 1 item</li> <li>• Maximum number of daily doses of immunosuppressants taken/day</li> <li>• Continuous variable (1 to 3 times daily)</li> <li>• Structured form for medical record information extraction</li> <li>• 1 item</li> <li>• In years</li> <li>• Continuous variable</li> </ul>	Not applicable
Time since transplantation	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• Structured form for medical record information extraction</li> <li>• 1 item</li> <li>• In years</li> <li>• Continuous variable</li> </ul>	Not applicable
<i>Condition related factors</i>			
Depressive symptomatology	<i>Depression subscale of the Depression, Anxiety, Stress Scale 21-item version (DASS21) [77]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• Symptoms referring to a persistent state of low mood and/or lack of interest in activity that affect the way people feel, think or behave and can lead to a variety of emotional and physical problems, including experiencing difficulty in normal day-to-day activities</li> <li>• 7 items</li> <li>• 1 week</li> </ul>	Unidimensional scale of 7 items, with a Cronbach's alpha of 0.93

History of diabetes pre-transplant	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• 3-point Likert scale ranging from '0= did not apply to me at all' to '3= applied to me very much, or most of the time'</li> <li>• total score= sum of item scores times 2 (possible range from 0 to 42)</li> <li>• Structured form for medical record information extraction</li> <li>• 1 item</li> <li>• Yes/No</li> <li>• Dichotomous score</li> </ul>	Not applicable
Body Mass Index	<i>Quetelet Index [78]</i>	<ul style="list-style-type: none"> <li>• Structured form for medical record information extraction</li> <li>• 2 items: height (in cm or inches, depending on the country) and weight (in kg or pounds, depending on the country)</li> <li>• BMI= weight in kg / length in m<sup>2</sup></li> <li>• Continuous variable</li> </ul>	Not applicable
<i>Patient-related factors</i>			
Stages-of-change	<i>Investigator developed based on the stage-of-change model [79]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• Pre-contemplation phase: patient finds correct medication taking not important and shows no motivation to change their non-adherence behavior in the near future; contemplation phase: patient starts thinking of changing his/her nonadherent behavior, yet lacks the confidence to do so, and experiences a lot of barriers hindering him/her to act upon his/her intentions</li> <li>• 2 items (importance and confidence ruler)</li> <li>• Current situation</li> <li>• 10-point Likert scales, going from not at all important to extremely important and from not at all confident to extremely confident, respectively</li> <li>• Pre-contemplation: score below 8 on the first item; Contemplation: score 8 or higher on first item, but score below 8 on the second item; Other: score of 8 or higher on both items.</li> </ul>	No further information available
Sleep quality	<i>Item derived from the Kidney Disease and Quality of Life Short Form [80]</i>	<ul style="list-style-type: none"> <li>• Ordinal score with possible range from 1 to 3</li> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item</li> <li>• 4 weeks recall</li> </ul>	Predictive validity for mortality in dialysis patients[81]

		<ul style="list-style-type: none"> <li>• 10-point Likert scale ranging from '0= very poor' to '10= very good'</li> <li>• Ordinal score on Likert scale</li> </ul>	<p>Concurrent validity with Pittsburgh Sleep Quality Index  <math>r_s = -0.822, P &lt; .001</math> [82]</p>
Daytime sleepiness	<p><i>Item adapted from Dialysis Outcomes and Practice Patterns Study [81] and a VAS Sleepiness Scale [83]</i></p>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item</li> <li>• 4 weeks recall</li> <li>• 10-point Likert scale ranging from '0= not at all sleepy' to '10= very sleepy'</li> <li>• Ordinal score on Likert scale</li> </ul>	<p>Concurrent validity: with Epworth Sleepiness Scale (<math>\rho = 0.531, p &lt; 0.01</math>) [82, 84]          Convergent validity: with Depression Anxiety and Stress scale (<math>\rho = 0.235, p &lt; 0.01</math>) [84]          Group difference validity: renal transplant recipients with moderate, severe, and extremely severe depressive symptom scores had a 3.4, 4.3, and 5.9 times higher odds of having daytime sleepiness [84]</p>
Non-adherence to appointment keeping	<p><i>Investigator developed</i></p>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item</li> <li>• Last 5 appointments recall period</li> <li>• 5 point Likert scale ranging from '1= never missed' to '6= all 5 appointments missed'</li> <li>• Continuous: number of appointments missed</li> </ul>	<p>No further information available</p>
Smoking	<p><i>Item from Swiss Health survey (Swiss Federal Statistical Office 2008) [85]</i></p>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item</li> <li>• Response options: yes, I stopped less than 1 year ago, I stopped more than 1 year ago, I never smoked</li> <li>• Currently smoking or stopped less than one year ago considered as post-transplant smoking</li> <li>• Dichotomous score</li> </ul>	<p>No further validity information available</p>

Health literacy	<i>Subjective Health Literacy Screener [86]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item: How confident are you filling out medical forms by yourself</li> <li>• Current situation</li> <li>• 5-point Likert scale ranging from '1= none of the time' to '5= all of the time'</li> <li>• Score between 0 and 2 considered as low health literacy</li> <li>• Dichotomous score</li> </ul>	Concurrent validity: with the Short Test of Functional Health Literacy in (AUC=.72-.74; with the Rapid Estimate of Adult Literacy in Medicine (AUC=.81-.84) [87]
Non-adherence to physical activity recommendations	<i>Brief Physical Activity Assessment tool [88]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 2 items</li> <li>• current situation</li> <li>• Nonadherent vs. Adherent (Sufficiently active: <math>\geq 3x/week</math> 20 minutes of vigorous AND/OR <math>\geq 5x/week</math> 30 minutes of moderate physical activity)</li> <li>• Dichotomous score</li> </ul>	Criterion validity of self-report against electronic monitoring gold standard measurement: $\kappa$ statistic 0.14-0.40 [88]
Level of alcohol consumption	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 2 items (whether the patient is using alcohol (yes/no); if yes, number of alcoholic drinks consumed per week)</li> <li>• 1 week recall period</li> <li>• Ordinal scoring: non-drinker; moderate drinker (1 drink/day (women), 2 drinks/day (men)), or heavy drinker (&gt;1 drink/day (women), &gt;2 drinks/day (men)[89])</li> </ul>	No further information available
Adherence to sun protection measures	<i>Swiss study on health of people with cancer, leukemia, tumor in childhood (Swiss Childhood Cancer Registry) [90] and Cambridge University Hospitals' perception of skin cancer in transplant recipients scale [91]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 4 items assessing consistency of protection against the sun</li> <li>• No recall period specified</li> <li>• 5-point Likert scales: never, seldom, sometimes, often, always</li> <li>• Average score</li> </ul>	Unidimensional scale, with a Cronbach's alpha of 0.59
Non- adherence to dietary guidelines	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> </ul>	No further information available

- 5 items, measuring adherence to low salt, respectively low calorie, low saturated fat, low sugar or other kind of diet reported as applicable
- No recall period specified
- 5-point Likert scales: never, seldom, sometimes, often, always
- Scoring: adherent = yes if scored “often” or „always“ to any of the 5 listed diets
- Dichotomous score

MICRO LEVEL

Social support	<i>Social Support Questionnaire [48]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 11 items, 2 dimensions, i.e. practical support (6 items) &amp; emotional support (5 items)</li> <li>• 4 weeks recall period</li> <li>• 5-point Likert scale ranging from ‘1= never’ to ‘5= always’</li> <li>• Average score per dimension</li> </ul>	Two-dimensional scale, with a Cronbach’s $\alpha$ values of 0.87 (Practical) and 0.88 (Emotional)
Being a member of a patient organization	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item</li> <li>• Current status</li> <li>• Answering options: ‘Yes/no’</li> <li>• Dichotomous score</li> </ul>	No further information available
Who is responsible for preparing the immunosuppressants	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item</li> <li>• Current status</li> <li>• 4 Answering options: myself, together with my partner/family member; my partner/family member, a nurse</li> <li>• Categorical variable</li> </ul>	No further information available
Frequency of having someone helping them to read health-related materials*	<i>Subjective Health Literacy Screener [86]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item: how often do you have someone help you read health related materials?</li> <li>• Current situation</li> <li>• 5-point Likert scale ranging from ‘1= none of the time’ to ‘5= all of the time’</li> </ul>	No further information available



Fluency with language spoken at the transplant center	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• Ordinal score</li> <li>• BRIGHT patient interview questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• 10-point Likert scale ranging from 0= not at all fluent to 10= very fluent</li> </ul>	No further information available
Does the Tx team communicate in the mother tongue of the patient or a language the patient masters fluently	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• Ordinal score</li> <li>• BRIGHT patient interview questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• answering option: No/yes (either via interpreter or directly)</li> <li>• Dichotomous variable</li> </ul>	No further information available
Trust in the Tx team	<i>Adapted form of the Wake Forest University Trust scale [92]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• Measures interpersonal trust, and refers to fidelity (caring and advocating for the patient's welfare); competence; honesty, confidentiality, as well as global trust (93)</li> <li>• 10 items</li> <li>• Current situation</li> <li>• 5-point Likert scale ranging from '1= strongly disagree' (low trust) to '5= strongly agree' (high trust)</li> </ul>	Unidimensional scale, with a Cronbach's alpha of 0.80
Patient satisfaction with the interpersonal dimension of care	<i>Westaway Patient Satisfaction scale [93]</i>	<ul style="list-style-type: none"> <li>• Average score</li> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• Refers to the degree of support, consideration, friendliness, and encouragement received from the team</li> <li>• 12 items</li> <li>• Current situation</li> <li>• 5-point Likert scale ranging from '1= very dissatisfied' to '5= very satisfied'</li> <li>• Average score</li> </ul>	Unidimensional scale, with a Cronbach's alpha of 0.98

## MESO LEVEL

*Structural characteristics*

Type of HTx center	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT transplant director questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• 2 response options: 1) University or 2) regional, community or other hospital</li> <li>• Dichotomous variable</li> </ul>	No further information available
Location of the transplant program	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT transplant director questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• 2 Options: 1) urban, or 2) suburban or rural</li> <li>• Dichotomous variable</li> </ul>	No further information available
Years since the start of the transplant program	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT transplant director questionnaire</li> <li>• 1 item: in what year did your program start</li> <li>• Time in years between start date of the transplant program and the date of the start of the BRIGHT data collection in a given center</li> <li>• Continuous variable</li> </ul>	No further information available
Number of patients who are at least 1 year post-tx that are followed up regularly at the HTx center	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT transplant director questionnaire</li> <li>• 1 item: How many adult HTx recipients who are at least 1 year post-Tx are followed up on a regular basis by your HTx program (total number currently followed)?</li> <li>• Current situation</li> <li>• Number of patients regularly being followed up</li> <li>• Continuous variable</li> </ul>	No further information available
Center size	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT transplant director questionnaire</li> <li>• 1 item: how many adult heart transplants did your center perform in 2007, 2008, 2009, 2010, and 2011</li> <li>• Past 5 years</li> <li>• Total number over the last 5 years</li> <li>• Categories based on total number: Small (&lt; 75), Medium (75-100), or Large (&gt; 100) center</li> </ul>	No further information available

*Practice patterns*

Length of hospital stay after HTx surgery in the transplant program	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT transplant director questionnaire</li> <li>• 1 item: average length of stay after HTx</li> <li>• In days</li> <li>• Continuous variable</li> </ul>	No further information available
Total number of yearly visits scheduled for patients who are at least 1 year post-tx	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT transplant director questionnaire</li> <li>• 3 items (number of visits between 1 and 2 years; between 2 and 3 years and beyond 3 years post-transplant)</li> <li>• Current situation</li> <li>• Sum of normally scheduled outpatient visits after 1 year post-transplant</li> <li>• Continuous variable</li> </ul>	No further information available
Time spent with the transplant team during a follow-up visit	<i>Investigator developed</i>	<p><u><i>Patient's perspective</i></u></p> <ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• 5-point scale ranging from '1= &lt; 5 minutes' to '5= &gt; 30 minutes'</li> <li>• Ordinal variable</li> </ul> <p><u><i>Clinician's perspective</i></u></p> <ul style="list-style-type: none"> <li>• BRIGHT clinician questionnaire</li> <li>• 1 item:</li> <li>• Current situation</li> <li>• average time per patient in minutes</li> <li>• Continuous variable</li> </ul>	No further information available
Formal mental health or psychological evaluation performed before Tx	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT transplant director questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• Response options: Yes/No</li> <li>• Dichotomous score</li> </ul>	No further information available
Formal financial-social evaluation performed before Tx	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT transplant director questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> </ul>	No further information available

Adherence to immunosuppressants is routinely being assessed as part of post-transplant follow-up care	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• Response option: Yes/No</li> <li>• Dichotomous score</li> <li>• BRIGHT clinician questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• Response option: Yes/no</li> <li>• Dichotomous score</li> </ul>	No further information available
Does the Tx team discuss immuno-suppressive medication intake in daily life	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item</li> <li>• current</li> <li>• response option: Yes/No</li> <li>• Dichotomous score</li> </ul>	No further information available
Clinicians reporting that non-adherent patients are targeted with adherence interventions	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT clinician questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• 4-point Likert scale ranging from '1= never' to '4= always'</li> <li>• Ordinal item</li> </ul>	No further information available
Are patients followed up by the same healthcare worker when they visit the outpatient clinic	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT transplant director questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• 3-point Likert scale ranging from '1= always or nearly always' to '3 rarely or never'</li> <li>• Ordinal variable</li> </ul>	No further information available
Who is the initial contact in case of after hour questions or emergencies	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT transplant director questionnaire</li> <li>• 2 items: 1 item registered nurse &amp; 1 item advanced practice nurse</li> <li>• Current situation</li> <li>• Response options: Yes/no for both items</li> <li>• Dichotomous score per item</li> </ul>	No further information available
<b>Team composition</b>			
Multidisciplinarity of the team	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT transplant director questionnaire</li> </ul>	No further information available

Transplant clinic has a care coordinator	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• Interdisciplinary= at least one physician, one nurse and one other discipline [94]</li> <li>• 1 item: describe the members of your team (routinely involved or consult only)</li> <li>• Various disciplines listed; check box to be ticked if discipline is part of the team</li> <li>• Dichotomous score (multidisciplinarity yes/no)</li> <li>• BRIGHT clinician questionnaire</li> <li>• Care coordinator can be an advanced practice nurse, a transplant coordinator or a social worker</li> <li>• 1 item</li> <li>• Current situation</li> <li>• Response option: yes/no</li> <li>• Dichotomous score</li> </ul>	No further information available
Having an Advanced Practice Nurse with a certificate or other advanced specialization in transplantation	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT clinician questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• Response option: Yes/No</li> <li>• Dichotomous score</li> </ul>	No further information available
<b>Level of chronic illness management</b>			
Patient's perspective of chronic illness management implemented in their HTx program	<i>Short version of the Patient Assessment of Chronic Illness Care (PACIC) instrument [95]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• measures specific actions or qualities of care, congruent with the chronic care model, that patients report they have experienced in the delivery system</li> <li>• 11 items</li> <li>• 6 months recall period</li> <li>• 5-point Likert scale ranging from '1= almost never' to '5= almost always'</li> <li>• Total score ranging from 11 to 55</li> </ul>	Unidimensional scale, with a Cronbach's alpha of 0.88
Healthcare worker's perspective of chronic illness management	<i>CIMI-BRIGHT [96]</i>	<ul style="list-style-type: none"> <li>• BRIGHT clinician questionnaire</li> <li>• 52 items covering the 5 building blocks of the Innovative Care for Chronic Conditions framework (unidimensional)</li> </ul>	52 of originally 55 items retained in a unidimensional

implemented in their HTx program		<ul style="list-style-type: none"> <li>• Current status</li> <li>• 4-point Likert scale ranging from '1= strongly disagree' to '4= strongly agree' (5=don't know; set to missing)</li> <li>• Average score, with higher scores corresponding with higher level of chronic illness management implemented</li> </ul>	scale, with a Cronbach's alpha of 0.94
Competencies of the Tx team in view of chronic illness management	<i>Investigator developed [97]</i>	<ul style="list-style-type: none"> <li>• BRIGHT clinician questionnaire</li> <li>• 24 items to assess core competencies</li> <li>• Current situation</li> <li>• 4-point Likert scale ranging from '1= strongly disagree' to '4= strongly agree' (5=don't know; set to missing)</li> <li>• Average score, with higher scores reflecting a higher degree of core competencies</li> </ul>	Unidimensional scale, with a Cronbach's alpha of 0.96
Preparedness of the Tx team in view of chronic illness management	<i>Investigator developed [97]</i>	<ul style="list-style-type: none"> <li>• BRIGHT clinician questionnaire</li> <li>• Refers to the skills and availability of equipment or tools to facilitate chronic care</li> <li>• 5 items</li> <li>• Current situation</li> <li>• 4-point Likert scale ranging from '1= strongly disagree' to '4= strongly agree' (5=don't know; set to missing)</li> <li>• Average score, with higher scores reflecting higher level of preparedness</li> </ul>	5 of the original 10 items retained in a unidimensional scale, with a Cronbach's alpha of 0.82
Opportunities for patients pre-Tx to meet or interact with post-Tx patients	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT clinician questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• Respondent options: Yes/no</li> <li>• Dichotomous score</li> </ul>	No further information available
Provision of self-management support interventions in view of medication taking during long-term follow up	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT clinician questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• Response option: Yes/no</li> <li>• Dichotomous score</li> </ul>	No further information available

Immunosuppressants refill mechanism	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 6 items (local pharmacy, hospital pharmacy, physician office, ordered online, telephone ordered, other)</li> <li>• Current situation</li> <li>• Response option: Yes/no per item</li> <li>• Dichotomous score per item</li> </ul>	No further information available
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**MACRO LEVEL**

Coverage of immunosuppressants by health insurance	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item</li> <li>• Current status</li> <li>• 3-point Likert scale ranging from '1 = Yes, fully' to '3 = No'</li> <li>• Ordinal score</li> </ul>	No further information available
Monthly out-of-pocket expenses for immunosuppressants	<i>Investigator developed</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item</li> <li>• Current status</li> <li>• 4-point Likert scale ranging from '1= 0 USD' to '4= &gt; 110 USD' (adapted to national currency)</li> <li>• Ordinal score</li> </ul>	No further information available
Finding it hard to take their immunosuppressive medication because patient cannot afford them	<i>Item from the Medication Adherence Barriers scale [69]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• 5-point Likert scale ranging from '1= never' to '5= always'</li> <li>• Ordinal score</li> </ul>	No further information available
Having enough money to pay for their immunosuppressants	<i>Item from the Supporting Medication Adherence in Renal Transplantation (SMART) study[98]</i>	<ul style="list-style-type: none"> <li>• BRIGHT patient self-report (written) questionnaire</li> <li>• 1 item</li> <li>• Current situation</li> <li>• 4-point Likert scale ranging from '1= not enough' to '4= more than enough'</li> <li>• Ordinal score</li> </ul>	No further information available

AUC=area under the receiver operating curve; Side effects of immunosuppressives and their possible impact on adherence were assessed by adding side-effects-related items to the barriers, attitudes and self-efficacy questionnaires

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