

Supplementary File 2: Responses and questions used to calculate knowledge, QI-CRC practice and general QI practice scores.

	Score assigned <sup>1</sup>		
	3	2	1
<i>Knowledge score<sup>2</sup> a measure of the respondent's perceived knowledge of current Australian bowel cancer screening guidelines</i>			
What is the recommended starting age for FOBT bowel cancer screening of asymptomatic, average-risk patients in Australia?	Correct (50 years)	Incorrect	Invalid <sup>3</sup>
What is the recommended frequency (in years) for FOBT bowel cancer screening of asymptomatic, average-risk patients in Australia?	Correct (every 2 years)	Incorrect	Invalid <sup>3</sup>
What is the recommended stopping age for FOBT bowel cancer screening of asymptomatic, average-risk patients in Australia?	Correct (74 or 75 years)	Incorrect	Invalid <sup>3</sup>
<i>QI-CRC practice score<sup>3</sup>: a measure of existing quality improvement (QI) practices that are directed to bowel cancer screening participation.</i>			
We have recall and reminder systems in place to ensure eligible patients are identified and reminded to undertake bowel cancer screening	Strongly agree/ agree	Neither agree/disagree	Disagree/ strongly disagree
We use our practice data to understand our current bowel cancer screening participation rates	Strongly agree/ agree	Neither agree/disagree	Disagree/ strongly disagree
We involve all our staff (GPs, nurses, administrative team) to use recall/reminder systems and follow-up of patients participating in bowel cancer screening	Strongly agree/ agree	Neither agree/disagree	Disagree/ strongly disagree
<i>QI practice score: to estimate the existing level of QI activities implemented to improve patient outcomes</i>			
Measure practice performance data to drive improvements in the quality of care provided	Strongly agree/ agree	Neither agree/disagree	Disagree/ strongly disagree
Discuss practice performance data to drive improvements in the quality of care provided	Strongly agree/ agree	Neither agree/disagree	Disagree/ strongly disagree
Use data extraction tools to extract data from your clinical software systems to support your quality improvement activities	Strongly agree/ agree	Neither agree/disagree	Disagree/ strongly disagree

<sup>1</sup> Missing data not assigned a score

<sup>2</sup> Total knowledge and QI-CRC practice scores ranged from a minimum of three to a maximum of nine.

<sup>3</sup> Respondent did not stipulate a specific date (don't know, death, 50-70 years) or the answer appeared to be a typographical error (i.e. starting age = 555, frequency = 50 or finishing age = 0 or 7 etc.)