Supplementary Tables

Table S1. Participant job roles from qualitative focus group study. Participants were primary care professionals recruited through the UK NIHR Clinical Research Network and through local contacts (2019).

Job role	n (n female)
GP partner	9 (5)
salaried GP	4 (1)
GP registrar	1 (1)
clinical nurse advisor/locum nurse	1 (1)
prescribing nurse practitioner	1 (1)
practice nurse	3 (3)
advanced nurse practitioner	2 (2)
TOTAL	**21 (14)**

Table S2. Participant years of experience in current role. Participants were primary care professionals recruited through the UK NIHR Clinical Research Network and through local contacts (2019).

Years in current role	**n (n female)**
0-2 years	3 (2)
2.5-5 years	4 (2)
5.5-10 years	6 (4)
10.5-20 years	6 (4)
Over 20 years	2 (2)
TOTAL	**21 (14)**

Supplementary files A - Vignettes

Frank

Frank is an electrician in his 50s and lives with his wife, His doctor measured his blood pressure opportunistically at an appointment and found it was very high. This prompted a prescription of anti-hypertensive medication, and Frank started monitoring his own blood pressure at home. Frank takes his home records to the doctor at his appointments. He told us that at his last appointment his doctor was happy to accept Frank's home readings, and hadn't measured it himself in the clinic on that occasion.

> *Frank: So he took my blood pressure and he went white as a sheet [..] So he put me immediately that day onto medication for it [..] he actually never took it again after that [..] he said if you want to take it at home you can do. So I've taken it at home ever since, I've kept a record and the last time I went to see him about it he just looked at my record, he didn't even bother taking it, he said yeah I'm satisfied.*

Question for discussion:

- Would you encourage Frank to measure his blood pressure at home?

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Bob

Bob is a retired man in his 70s who lives with his wife. Bob used to be a tiler and his wife used to be a dress-maker. Bob was diagnosed with hypertension and an enlarged heart 30 years ago. Both he and his wife have been monitoring their blood pressure at home for many years, after their daughter bought them a blood pressure monitor. They regularly take their monitor to the doctors for calibration, and the doctor has advised them to keep checking their blood pressure. Both have a diagnosis of hypertension, and Bob also has asthma. Bob takes three different medications, including an ACE-inhibitor. In a bid to save medication, and prevent unwanted side effects, the couple decided to reduce their own medication and used their self-monitoring practice to negotiate acceptance of their reduction from the doctor. Bob describes talking to the doctor at an appointment some years ago:

> *Bob: So initially, I were a bit frightened to tell him, because I were accepting tablets and not taking them, and I thought, God, I shouldn't be doing that. And then, I thought I've got to go and tell him. So I made my mind up to confess, so to speak. It's like Crimewatch, isn't it. So I went and I says, listen…*
>
> *I: Did you take your records with you?*
>
> *Bob: I took all them. I said, these are what my things…and I've reduced it and reduced it, and I'm now taking ten milligrams, I've been taking them for a year or so, whatever, and these are my readings. [..] So they agreed that…they said, yeah, well, stop taking them. But if I hadn't have done my own experiment, I'd have still been taking 30 milligrams [..] I thought, well, there's only one way to do this is to start reducing them.*

- What is your reaction to what Bob says?

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Edith

Edith is a 77 year-old woman who lives alone, and used to work in administration for a charity. After a high blood pressure reading in the doctor's surgery, she was advised to buy a monitor. She didn't tell her daughter about this as she did not want to worry her. Edith takes a diuretic and an ACE-inhibitor. Here, she describes how the doctor assisted her to choose a blood pressure monitor on Amazon.

> *Edith: he said, why don't you get a blood pressure monitor. And I said, well, I had thought about it and I'd looked on Amazon, there are hundreds of them, how do I know which one to buy [..] he quickly looked on Amazon and said, buy this one. So I bought it. I came straight home, went onto Amazon, bought the blood pressure monitor. It arrived I think the next day or the day after, and that's when I started measuring it.*

Question for discussion:

- Would you have offered Edith advice on which monitor to buy?

Emily

Emily is in her 30s and works in recruitment. She lives with her husband. Although previous doctors over the last decade had noted raised blood pressure, her current doctor had been more concerned. Emily was asked to undertake 24h ambulatory monitoring, and as a result of this, she bought a monitor on her doctor's recommendation. She uses this infrequently. She has a diagnosis of hypertension, and now takes two anti-hypertensives, including an ARB. She notes her measurements in her diaries or on scraps of paper. She does not think the data she brings to the surgery are recorded or kept after she leaves.

> *I: Did you write it down in that, or a diary like that?*
>
> *Emily: No. The more recent ones I've written down in this one. The previous ones, I don't know where they are now.*
>
> *I: But was it systematically either a piece of paper or just like in a diary that you had at the time, or…*
>
> *Emily: Probably would have been in a diary and on scraps of paper, but I would try and collate them somewhere, like in a diary, so I could take it to the doctor. [..]*
>
> *I: Do you remember if the doctor actually looked at the readings?*
>
> *Emily: Yes, he would have looked at them. [..] He'd never note them down anywhere though.*
>
> *I: Yes. Do you remember him saying anything about them?*
>
> *Emily: He probably would have gone, umm, and made a very concerned face, because he seems to be that type of person [..] He just looked at them to see if they were kind of where he wanted them to be or not.*

- How would you use Emily's data?

Gary

Gary is a man in his 50s who works as a career advisor. His partner Clive lives with him part time, and both partners use blood pressure monitors. Both have some anxiety around health issues. Gary started monitoring his blood pressure after a high reading at the dental hospital. He doesn't take any prescribed tablets. He describes himself as a hypochondriac, and has been recommended not to continually monitor his blood pressure, despite a history of hypertension in his family.

> *Gary: I suppose technically I am a hypochondriac [...] but not particularly focused on heart or heart disease or stroke or anything like that but my GP actually told me, actually recommended that I didn't constantly monitor things and test things because she said that you've got health anxiety, you're kind of hyper aware of small changes in the body anyway, that's what makes you a hypochondriac so she said it's better just to focus away from that.*

Question for discussion:

- Would you recommend Gary to monitor less often?

Supplementary files B – Focus Group Guide

Frank– Collaborating with the clinic (BP)
Questions on vignette:

- Would you encourage Frank to measure his own blood pressure?

Follow up questions:

- Would you be interested in Frank's readings?
- Would you want or expect to know if your patients are self-monitoring?
- Would you accept Frank's own measurements? (Why/not?)
- Would you make decisions on medications/care based on Frank's measurements alone?
- If you are trying to determine if someone has hypertension, would you value home readings the same as readings taken in the clinic?

Bob – Negotiating, reducing medication (BP)
Question on vignette:

- What's your reaction what Bob says?

Follow-up questions:

- Have you encountered a Bob?
- Would you encourage Bob to measure his BP and change his medication accordingly? Why/not? What are the risks, and for whom?
- Would you suggest the reduction of medication based on someone's self-monitoring record?

Edith – Role of the clinic in recommending and supporting (BP)
Question on vignette:

- Would you have offered Edith advice on which monitor to buy?

Follow-up questions:

- Once you've suggested that someone should self-monitor, do you offer help checking the accuracy of devices?
- Do you offer any other kind of support for patients who are or want to self-monitor blood pressure?
- If you suggest to someone they should buy a monitor, do you do anything to encourage them to continue monitoring at subsequent appointments?

Emily – Ambivalence about what happens to the data (BP)
Question on vignette:

- How would you use Emily's data?

Follow-up questions:

- Would you add it to her electronic record? If so, how?

- If presented with a long list of readings, what would you choose to put onto the patient record?
- Would you be open to Emily sending in her own results electronically (e.g. by phone, text or email)? Why/not?

Gary – Clinic requests reduced tracking to ease anxiety (BP)
Question on vignette:

- Would you recommend Gary to monitor less often?

Follow-up questions:

- Are there other situations in which you would recommend that someone does not monitor their blood pressure?
- How do you decide who should and shouldn't self-monitor?