### Supplementary file 2. Summary of Measures for Analysis

| Measure                                                                 | Data Source and Dates                                      | Calculation                                                                                                                                                                                                 | Range                                                                                                                                                                                                 |
|------------------------------------------------------------------------|------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Facility organizational readiness to implement change (ORIC)           | Pilot study of 54 providers in 9 facilities, Feb-May 2019  | 1. Provider score is an average of responses (1 = strongly disagree, 5 = strongly agree) to 6 statements on change commitment and change efficacy  
2. Facility score is average of responding providers                   | 1 (lowest organizational readiness, all providers strongly disagree with all items) to 5 (highest organizational readiness, all providers strongly agree with all items) |
| Perceived value of CCMDD to patients                                  | Pilot study of 54 providers in 9 facilities, Feb-May 2019  | 1. Provider score is an average of responses (1 = strongly disagree, 5 = strongly agree) to 3 statements on value of CCMDD to patients  
2. Facility score is average of responding providers                   | 1 (lowest value, all providers strongly disagree with all items) to 5 (highest value, all providers strongly agree with all items) |
| Inputs to care                                                         | Facility audit, clinic quality assessment Jun – Aug 2018    | 1. Proportion of items present calculated per domain for infrastructure, equipment, medication, and supplies  
2. Average calculated across 4 domains per clinic                      | 0 (no items present in any domain) to 1 (all items present in all domains)                                                                                                                                  |
| CCMDD uptake                                                           | Clinic Link routine data, Jan 1 – Sep 2018                 | Numerator: non-pregnant individuals receiving antiretroviral therapy at that facility and in stable condition with a note or 100% (all eligible patients enrolled in CCMDD) | 0% (no eligible patients enrolled in CCMDD) to 100% (all eligible patients enrolled in CCMDD)                                                                                                           |
| **Wait time for chronic care** | Time motion observations of chronic care patients, clinic quality assessment Jun – Aug 2018 | Median time waited (minutes) for patients receiving any chronic care service within each facility | Not restricted; individual patients waited 4 minutes to 273 minutes (median 80.5) |
| **Patient satisfaction with wait time** | Exit interviews with chronic care patients, clinic quality assessment Jun – Aug 2018 | 1. Patient response to item “I waited too long before being seen” reverse coded so 1 = strongly agree, 4 = strongly disagree <br>2. Responses averaged within facility | 1 (lowest rating of wait time, all patients strongly agree wait time too long) to 4 (highest rating of wait time, all patients strongly disagree wait time too long) |
| **Higher quality care: provider rating of HIV treatment quality** | Pilot study of 54 providers in 9 facilities, Feb-May 2019 | Numerator: providers rating the quality of HIV treatment services at the facility as excellent<br>Denominator: all interviewed providers at the facility | 0% (no providers rate care quality as excellent) to 100% (all providers rate care quality as excellent) |
| **Higher quality care: adherence to national guidelines for HIV care – linkage to care** | Clinic Link routine data, Jan 1 – Sep 2018 | Numerator: patients testing positive for HIV at the facility who initiated HIV care within 30 days<br>Denominator: patients testing positive for HIV at the facility | 0% (no patients with positive HIV tests linked to care within 30 days) to 100% (all patients with positive HIV tests linked to care within 30 days) |
| **Higher quality care: adherence to national guidelines for** | Clinic Link routine data, Jan 1 2017 – Sep 2018 | Numerator: patients starting ART between Jan 1 and Dec 31 2017 at the facility with viral load test approximately 6 months after initiation | 0% (no patients initiating ART administered viral load test approximately 6 months after initiation) to |
| HIV treatment – viral load testing | tested between 5 and 8 months after initiation | 100% (all patients initiating ART administered viral load test approximately 6 months after initiation) |
|-----------------------------------|---------------------------------------------|---------------------------------------------------------------------------------|
| Denominator: patients starting ART between Jan 1 and Dec 31 2017 at the facility |                                            |                                                                                  |

Abbreviations: ART, antiretroviral therapy; CCMDD, Central Chronic Medicine Dispensing and Distribution.