

Appendix 1 Survey questions

- 1) Hospital name.
- 2) Does your unit perform Barrett's oesophagus surveillance?
 - ❖ Yes/no (if no you can stop).
- 3) Do you have a dedicated Barrett's endoscopy service (in the form of separate lists/performed by specific staff/listed on certain allocated lists):
 - ❖ Yes/no.
- 4) If yes, who performs this? (tick all that apply).
 - ❖ Upper gastrointestinal (UGI) specialist gastro consultant/consultant gastroenterologist/consultant UGI surgeon/nurse endoscopist with a special interest in Barrett's/nurse endoscopist/clinical fellow/N/A.
- 5) Does your unit have local access to the following?
 - ❖ High resolution white light endoscopy/narrow band imaging/Fujinon Intelligent Chromo-Endoscopy (FICE)/other imaging enhancing mode/ascetic acid dye spray/other chromoendoscopy/radiofrequency ablation/endoscopic ultrasound/endoscopic mucosal resection for oesophagus (EMR)/endoscopic submucosal dissection for oesophagus (ESD).
- 6) Do you have a named doctor or nurse who is the lead for Barrett's oesophagus regardless of the presence of a dedicated service?
 - ❖ Yes—cons gastroenterologist/Yes—cons surgeon/Yes clinical fellow/Yes nurse endoscopist/Yes nurse other/No;
 - ❖ Other details.
- 7) Does your unit/hospital run a dedicated clinic service for Barrett's oesophagus patients?
 - ❖ Yes—patients are seen in a designated clinic designed for Barrett's patients.
 - ❖ Yes—patients are seen by specific doctors or nurses in their clinics but not in specific sessions;
 - ❖ No.
- 8) Is histology for Barrett's oesophagus surveillance biopsies performed locally or sent to another unit?
 - ❖ Performed locally/sent to another trust/site/not applicable/don't know;
 - ❖ Comments.
- 9) Any other comments.

Table S1 Imaging techniques and procedures provided by the departments, stratified by the department size

Service provided	Size of the department		P value
	Acute/large (n=143)	Non-acute/small (n=8)	
High resolution white light	120 (83.9)	6 (75.0)	0.62
Ascetic acid	98 (68.5)	5 (62.5)	0.71
Chromoendoscopy	75 (52.4)	5 (62.5)	0.72
NBI	135 (94.4)	7 (87.5)	0.39
RFA	48 (33.6)	2 (25.0)	1.00
EUS	71 (49.7)	3 (37.5)	0.72
EMR	72 (50.3)	4 (50.0)	1.00
ESD	31 (21.7)	1 (12.5)	1.00

Values are number (proportion). NBI, narrow-band imaging; RFA, radiofrequency ablation; EUS, endoscopic ultrasound; EMR, endoscopic mucosal resection; ESD, endoscopic submucosal dissection.

Table S2 Imaging techniques and procedures provided by the departments with and without a named lead

Service provided	No named lead (n=57)	Named lead (n=94)	P value
High resolution white light	40 (70.2)	86 (91.5)	0.001
Ascetic acid	27 (47.4)	76 (80.9)	<0.001
Chromoendoscopy	27 (47.4)	53 (56.4)	0.36
NBI	50 (87.7)	92 (97.9)	0.03
RFA	9 (15.8)	41 (43.6)	0.001
EUS	17 (29.8)	57 (60.6)	<0.001
EMR	19 (33.3)	57 (60.6)	0.002
ESD	6 (10.5)	26 (27.7)	0.02

Values are number (proportion). NBI, narrow-band imaging; RFA, radiofrequency ablation; EUS, endoscopic ultrasound; EMR, endoscopic mucosal resection; ESD, endoscopic submucosal dissection.

Table S3 Imaging techniques and procedures provided by the departments with a named lead, stratified by the lead type

Service provided	Named lead in the department				P value
	Consultant gastroenterologist (n=78)	Surgeon (n=4)	Nurse endoscopist (n=9)	Nurse (n=3)	
High resolution white light	72 (92.3)	4 (100.0)	8 (88.9)	2 (66.7)	0.243
Ascetic acid	68 (87.2)	0 (0.0)	7 (77.8)	1 (33.3)	<0.001
Chromoendoscopy	47 (60.3)	4 (100.0)	2 (22.2)	0 (0.0)	0.004
NBI	76 (97.4)	4 (100.0)	9 (100.0)	3 (100.0)	1.000
RFA	38 (48.7)	1 (25.0)	0 (0.0)	1 (33.3)	0.013
EUS	50 (64.1)	2 (50.0)	3 (33.3)	1 (33.3)	0.221
EMR	50 (64.1)	4 (100.0)	2 (22.2)	0 (0.0)	0.002
ESD	22 (28.2)	2 (50.0)	1 (11.1)	0 (0.0)	0.377

Values are number (proportion). NBI, narrow-band imaging; RFA, radiofrequency ablation; EUS, endoscopic ultrasound; EMR, endoscopic mucosal resection; ESD, endoscopic submucosal dissection.