

### **Appendix 3. Interview guide for faculty**

The purpose of this interview is to gain a better understanding of resident and faculty experiences during the COVID-19 pandemic. We are particularly interested in learning about your experiences as they relate to teaching, learning and assessments using virtual care during this time. If you have not been able to participate in any in-person ambulatory clinical activities due to ongoing requirements for physical distancing, we ask you to please reflect on your experience with in-person ambulatory clinical encounters prior to the COVID-19 pandemic. Your identity and any identifying information will be kept confidential and you will be provided a unique study ID to ensure confidentiality is maintained. Any opinions or statements you make during this focus group/interview will not be attributed directly to you. Participation in this study is voluntary, and you can choose not to answer any question. This focus group/interview will be audio recorded and transcribed for the purpose of this study. We will be asking a series of open-ended questions, but please feel free to elaborate and reflect as you feel necessary. You may choose to stop your participation at any time for any reason without penalty. Consenting to participate in this study will not affect your legal right in any way. Before we begin, I would like to confirm that you received a letter of information and consented to participate in this study? And Do you consent to this interview being recorded? I will start the recording now. Your unique participant ID is \_\_\_\_\_ and the date and time is \_\_\_\_\_.

1. How does your day look when you have a resident in your virtual ambulatory clinic?
2. How do you structure your virtual ambulatory patient clinic when you have resident learners?
  - a. How is this structure different from your in-person ambulatory patient clinics?
  - b. Please explain.
3. How did your teaching approach during virtual ambulatory clinics evolve as the COVID-19 pandemic progressed?
  - a. Have residents been attending your virtual care ambulatory clinics?

- b. What did you do to adapt to teaching during an ambulatory virtual patient clinic?
4. How did your assessments of the residents in virtual ambulatory clinics change?  
PROBE: quality, quantity
  - a. To what extent have you been able to complete required assessments (EPAs)?
  - b. What does your feedback to the residents for virtual patient care look like right now?
  - c. How has virtual patient care impacted your ability to perform direct observations for resident assessments?
  - d. Are you concerned about residents being able to satisfy their EPA requirements for promotion for ambulatory clinics due to the COVID-19 pandemic? Please explain why or why not and how virtual care plays a role.
5. Do you feel the current version of the EPAs are compatible with assessment milestones as it pertains to competencies in running virtual ambulatory care clinics? Please explain
6. Please describe any barriers to [insert a, b, c] of residents during virtual patient care in ambulatory clinics, if any:
  - a. Teaching
  - b. Assessment strategies during virtual patient care?
7. Please describe any facilitators to [insert a, b, c] of residents during virtual patient care in ambulatory clinics, if any:
  - a. Teaching
  - b. Assessment strategies during virtual patient care?
8. If residents do not participate in virtual ambulatory clinics, how can this gap in resident education be addressed? How can we provide adequate ambulatory experience for residents?
9. What recommendations do you have for your peers to optimize their teaching of residents during virtual ambulatory patient care?
  - a. Do you have recommendations to optimize efficiency in the clinic?

- b. Any other recommendations?
10. What recommendations do you have for your peers to optimize their assessments of residents during virtual ambulatory patient care?
11. How can faculty further support and optimize resident learning during virtual patient care?
12. Are there any strategies that you are using now for [insert a, b] for virtual ambulatory clinics now that you will continue to use post COVID 19 pandemic?
  - a. Teaching
  - b. Assessment
13. How can the university and the Faculty of Health Sciences support you (the faculty) in resident teaching and assessments during virtual ambulatory patient care?
14. How has increasing the use of virtual care for ambulatory patient care impacted your ability to assess residents' CanMEDS competencies (other than medical expert)? Please explain.
15. Is there anything else you would like to add that we have not already discussed?