

Supplemental Digital Appendix 1

High-Value, Cost-Conscious Care During Residency Training: Guide for Interviews With Attending Physicians From 5 Institutions Throughout the Netherlands, Conducted by Researchers From Maastricht University, Maastricht, the Netherlands, September 2016–August 2017

Focus group: Specialism, Date.

Before starting the focus group → participants sign informed consent form.

Welcome:

- Brief explanation of semi-structured interview

Research goal: brief explanation of the framework and objective of the study

“Thank you for taking part in this semistructured interview. At Maastricht University, we are conducting research into HV3C and the role of education in this. I (LS) will lead this interview, I’m a family medicine resident. We’re about to start but before we do, I’d like to say that our aim is to gain further insight into your experiences and opinions regarding the theme of HV3C, I’d like to emphasize that there are no right or wrong answers. Different experiences and opinions are all useful for our study. That’s also why we’d like you to share information you feel is relevant.”

The questions	List of topics	Theoretical framework	Time (min)
Would you like to introduce yourself?	<ul style="list-style-type: none"> - <i>How are you involved in workplace based learning. Other educational tasks.</i> - <i>Years of experience as attending physician.</i> - <i>Previous workplace(s), academic / peripheral.</i> 		5
What is HV3C? 1) What do you think of HV3C?	<ul style="list-style-type: none"> - <i>What is the role of the patient in HV3C?</i> - <i>What is the doctor’s role?</i> - <i>What is the role of the organization?</i> 		10
Share definition of HV3C as used by research team. <i>High-value, cost-conscious care is a broad concept. We would like to discuss with you HV3C; HV3C refers to care that aims to assess the benefits, harms and costs of intervention and consequently to provide care that adds value. The main focus today is on delivering HV3C to patients, the kind of care in which you, the doctor, play a vital role.</i>			

<p>When do you come across HV3C in daily practice?</p> <p>2a) On a normal working day, when would you be giving HV3C?</p> <p>2b) And how?</p>	<ul style="list-style-type: none"> - Are residents involved in these examples, please elaborate? - What is the role of residents in these examples? - If not? Is that a conscious choice? Why? - Do you consider this a learning opportunity for residents? 		10
<p>How did you learn to deliver HV3C?</p> <p>3a) What do you consider when you are concerned with HV3C?</p>	<p>3b) Where or from whom did you learn to deliver HV3C? (examples)</p> <p>3c) What made you aware of things associated with HV3C?</p> <ul style="list-style-type: none"> - <i>In or outside the hospital / work-related or private. (examples)</i> 	<p>Awareness of HV3C</p>	5
	<p>3d) What information or knowledge do you need for HV3C delivery?</p> <p><i>*When protocols are mentioned, please discuss how decisions are made in absence of protocols.</i></p> <p><i>What do you consider when you make a decision in light of HV3C?</i></p> <ul style="list-style-type: none"> - Patient preferences - Knowledge of best practice / EBM - Knowledge of costs / insurance <p><i>Where did you obtain that knowledge?</i></p>	<p>Knowledge transfer</p>	5
	<p>3e) Do you ever look back on /reflect on your actions from the standpoint of HV3C? (examples)</p> <p><i>What triggered you to reflect on your actions in the light of HV3C?(examples)</i></p>	<p>Reflection on action taken in practice</p>	5

	3f) What role does HV3C play in the department and during supervision moments? (examples) 3g) Have you seen differences between different hospitals? (examples) <ul style="list-style-type: none"> - Academic - Peripheral <i>Where do you think those differences come from? (examples)</i>	Micro Stimulating environment	5
		Macro Stimulating environment	5
What do you need in your daily practice to prepare residents for HV3C delivery? What do you need to decide what kind of care would be considered HV3C in daily practice?	- When do you aim to prepare residents? (examples) - How do you aim to prepare residents? (examples) - What is the residents' role in clinical teaching of HV3C? (examples)		10
Is there anything left that we haven't dealt with sufficiently? What else do you think is important to share?			