Appendix A: Topic guides

A. Clinician Interview Semi-structured topic guide (all clinician participants)

- 1. In your role, how would you describe the purpose of a discharge summary?
- 2. How would you describe your role in the discharge communication process?
- 3. What do you need to be able to do conduct your role appropriately?
- 4. Could you tell me about an example where there has been a problem with discharge communication or information?
- 5. Are there any recurring problems with discharge communication to GPs?
- 6. How might this affect patients?
- 7. How does medical complexity affect the difficulty of discharge communication?
- 8. Could you tell me about an example where discharge communication has been done well, in the face of a difficult situation to communicate?
- 9. Could you tell me about an example where discharge communication has required more than a 'routine' discharge letter?
- 10. Do you feel that discharge communication is appropriately valued?
- 11. How well do you think the system works?
- 12. What would good look like?

Additional Questions to Hospital Clinicians only:

- a) How have you learnt to write discharge summaries as a doctor?
- b) How does your team support its junior members in writing discharge summaries?
- c) Do you feel that you are confident in knowing what the GP and patient need from a discharge letter?
- d) Have you ever been made aware that a discharge letter hasn't met the needs of a GP?

Additional Questions for GPs and GP Registrars only:

- a) Do you feel that the authors of summaries understand your needs as a GP?
- b) How does the quality of communication received affect how well you can play your role as the GP?
- c) If you need more information about a patient's hospital stay that isn't available in the summary, how easy is it to get it?
- d) What advice would you give hospital doctors about writing discharge communication?

B. Administrative and Infrastructural Staff Semi-Structured Topic Guide

- 1. What is your/your department's role in the discharge communication process?
- 2. Could you describe a typical example of your/your department's activity in the pathway of discharge communication?
- 3. Are there any recurrent problems that you/your department face?

C. Clinician Focus Group Topic Guide

The clinician focus group took place after all the clinician interviews and administrative/infrastructural staff interviews had taken place. Data from the interviews was used to make the probes, as outlined below.

- 1. Participants were shown Figure 2 as a framework for the system
- 2. Participants were shown a model showing purposes of communication (an early iteration of Figure 3),
- 3. Participants were asked how well does the system perform to serve the purposes identified
- 4. Barriers to system performance found during the clinician interviews were briefly shown to the participants as an early iteration of figure 4.
- 5. Participants were asked to write down ways that could make these purposes served better or more consistently, based on the barriers shown, and the participants own clinical practice.
- 6. "Post it notes" were filled out individually, without any further discussion, and placed on the phase of the system (i.e. *Creation, Reception, Interpretation & Action* or *Resolution*)
- 7. Several ideas were picked out for group discussion by the facilitator
- 8. Questions were asked to the group:
 - a. Can the information needs be met every time, first time?
 - b. How could the system change to take better account of this?
 - c. Who should be involved, to make any changes?