

Supplemental table 1: Checklist for MMR Manuscript preparation and review

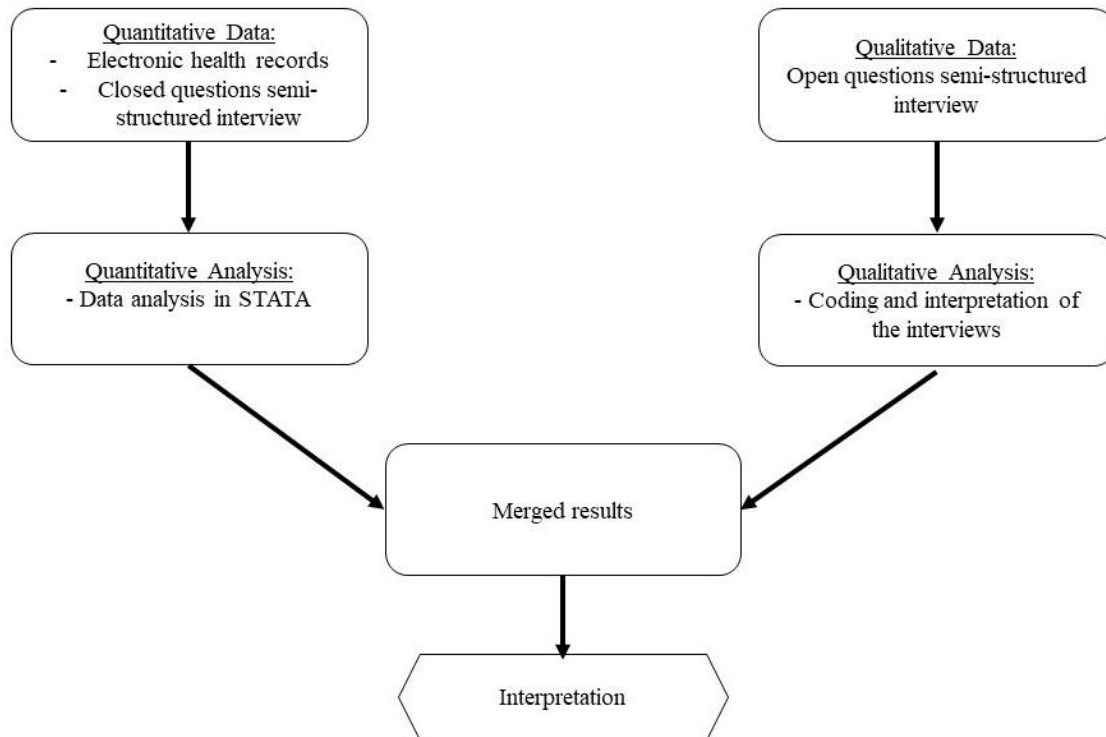
Rational and description of MMR design	<input type="checkbox"/> Provide a clear statement of the study purpose
	<input type="checkbox"/> Explicitly describe the MMR design in accordance with Creswell's (2015) typology and use a diagram to illustrate the relationship and sequence of qualitative and quantitative research components
	<input type="checkbox"/> Justify why the MMR design is appropriate for meeting the study purpose
Transparency in describing method details	<input type="checkbox"/> Describe the study population(s) and sample(s; e.g., who, what, how many)
	<input type="checkbox"/> Describe the sampling procedures (including inclusion and exclusion criteria, recruitment)
	<input type="checkbox"/> Describe qualitative data collection processes (how often data were collected, who collected the data, what kind of data collection instruments were used, how data were recorded—e.g., notes, transcripts)
	<input type="checkbox"/> Describe quantitative data collection processes (how often data were collected, who collected the data, what kind of data collection instruments were used measurements, validity/reliability)
	<input type="checkbox"/> Describe qualitative data analysis processes (coding, single or multiple coders, replication logic, credibility)
	<input type="checkbox"/> Describe quantitative data analysis procedures (missing data and how they are handled, statistical tests used)
Integration of qualitative and quantitative research components	<input type="checkbox"/> Interpret qualitative analysis results with appropriate quotes if necessary
	<input type="checkbox"/> Interpret quantitative analysis results in consideration of statistical significance, selection bias, and threats to validity
	<input type="checkbox"/> Compare qualitative and quantitative results
	<input type="checkbox"/> Address divergencies and inconsistencies between qualitative and quantitative results

Supplemental table 2: Interview guide

Introduction	<p>Introduction (Name, doctoral Student, Interpreter) Phoneinterview to quality improvement at NZKJ Double check right person?</p> <p>Confidentiality/ Anonymisation Informed consent</p>	<p>Hello Ms/Mr XX, my name is YY and Mrs/Mr ZZ will translate. Phoneinterview for quality improvement at the NZKJ, duration approx. 10-15 minutes</p> <p>Who was at the emergency department with your child on the XX(date)? If present, can your partner speak better G/E/F?</p> <p>Your information will be treated confidentially and anonymized. Do you mind if I ask you a few questions?</p>
Communication without interpreter	<p>Security in D/E/F language? Scale 1-6 Spoken language at emergency department? Difficulties of comprehension?</p> <p>Someone translated? Age of non-professional interpreter? Wished for interpreter? Entitlement to interpreter</p>	<p>How confident do you feel in G/E/F language on a scale of 1-6? (1 = very uncertain, 6 = very certain)? What language did you use talking to the doctor/nurse? In your view, were there any linguistic difficulties in comprehension?</p> <p>Did anyone else (child, relative, co-worker,...) translate during your visit? How old was he/she who translated? Would you have liked an interpreter? Do you know that you may always ask for an interpreter in the hospital?</p>
Communication with interpreter	<p>Native language? Confident in D/E/F language? Scale 1-6</p> <p>Interpreter: Interpreter on site or phone? Who wished for an interpreter? Entitlement to interpreter When was interpreter used? Communication before? How often? Sensible and helpful?</p>	<p>What is your native language? How confident do you feel in G/E/F language on a scale of 1-6? (1 = very uncertain, 6 = very certain)?</p> <p>During your visit, an interpreter was translating: Was the interpreter on site or was translation done via telephone? Did you ask for an interpreter? Or was the interpreter organized by the hospital staff? Do you know that you may always ask for an interpreter in the hospital? At what point was the interpreter brought in? How was communicated before? How often was the interpreter needed? Did you also request an interpreter at any other time during your consultation? Do you think that involving the interpreter was sensible and helpful?</p>
Satisfaction	<p>Satisfaction from 1-6? Why?</p> <p>Diagnose? Informations? Therapy? Dosage?</p> <p>What was missing? Improvement proposal? Particularly good? Come back to NZKJ?</p>	<p>On a scale of 1-6, how satisfied were you with your visit to the emergency department? (1 = very dissatisfied, 6 = very satisfied). Why?</p> <p>What was the diagnosis of your child? Was the information provided during your visit clear and understandable? → If no: why not? What did your child receive as therapy? What was the dosage?</p> <p>What would you have wished differently? Any suggestions for improvement? What did you particularly like? If you had another emergency with one of your children, would you feel comfortable coming back to the NZKJ?</p>
Personal facts	<p>Arrival in CH? Age? Education? Current profession? Asylum status?</p>	<p>How long have you been in Switzerland? How old are you? What is your highest graduation? What is your current profession? What is your current residency/ asylum status?</p>

<p>Wrap up</p>	<p>Answered all the questions Additions? Questions?</p>	<p>From my point of view, you answered all my questions. Thank you for your valuable time and answers. Do you have any additions or questions?</p>
<p>Thanks and farewell</p>	<p>Thanks Farewell</p>	<p>Thank you very much for answering my questions. I wish you all the best</p>

Supplemental figure 1: concurrent mixed-method approach (modified from Banyard & Williams, 2007)(75).



Supplemental figure 2: Flow chart - Study population