Simpson D, Sullivan GM, Artino AR Jr, Deiorio NM, Yarris LM. Envisioning Graduate Medical Education in 2030. *J Grad Med Educ.* 2020;12(3):235–240.

## **Supplemental Material**

## **Brief Description of Our Methods**

PARTICIPANTS: The authors independently generated names of individuals perceived to be active in graduate medical education (GME) as trainees, teachers, program directors, DIOs, and or scholars with a future oriented perspective. These individuals held a variety of roles from executive leadership positions in organizations with active involvement/connections to GME. The list was then honed to provide diversity by roles, years in medical education, gender, and general geographic location (East, South, Midwest, West) to obtain a breadth of perspectives. All authors participated in the data collection and were interviewed by another author. Interview assignments were based on author's preference (if expressed) and availability. Access to these individuals, if not already a personal connection, was easily obtained via public records (eg, e-mails on articles, ResearchGate, LinkedIn).

Each author contacted their assigned participants via e-mail using a standard template which included an introductory statement about the Journal of Graduate Medical Education (JGME) and the author's role with the journal. We then provided the "ask" for 10-15 minutes of their time. The stated purpose was to explore what GME will look like in 2030 for and editorial as part of JGME's 10<sup>th</sup> year celebration either through an interview (face to face at an upcoming medical education meeting, phone) or e-mail. Participants were given two weeks to respond with one follow-up email. A time was scheduled with all affirmative respondents and the 3 questions were typically e-mailed in advance. Field notes with demographic variables were used to record the responses. Those respondents who preferred to answer the questions via e-mail were sent the questions and a response time frame. All responses were collated and independently reviewed by two of the authors (DS, LY) to identify cross-cutting themes. Themes were refined and then sent to all authors for review. Prior to publication the paper was sent to participants to ascertain if any statements could be uniquely linked to them and to affirm that they wanted to be included as a contributing participant.

QUESTIONS: The number of questions was determined by the anticipated time that would feasible without undue imposition on our participants. Our goal was to complete the interview questions in 10-15 minutes, with longer durations allowed at discretion of interviewer/interviewee. We determined that a maximum of three questions would be allowed. Through an iterative process of question generation, revision, piloting on colleagues, and revision again, the final questions were selected to align with our purpose.

IRB: The project was submitted to first author's Research Subject Protection Program and the activity was determined not to constitute human subject research.

RESPONSE RATE: Sixty invitations were sent to assigned participants with 40 individuals (67%) agreeing to participate and subsequently answering our three questions. Interview length varied by participant, ranging from the agreed upon 15 minutes to some lasting over 60 minutes for those participants who were especially engaged with the topic. Participants were drawn primarily from the United States with several from Canada and the United Kingdom. Fifty-four percent of respondents were female; 59% were Baby Boomers (Born between 1944-1964), 26%

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were Generation X (born between 1965-1979), and 15% were Millennials (born between 1980-1994). Participants often had numerous past/present roles including ACGME board members, Program Directors, Medical School Deans & Executive/Associate Deans, Health Care System C-Suite leaders including hospital CMOs, executive leaders in professional organizations, JGME editorial board members, and/or internationally recognized educational leaders and scholars. All participants received a near final draft of the editorial and were asked to: (1) affirm that their individual responses were de-identified and (2) provide us with their name and degree if they would like to be acknowledged as a contributor. Only those individuals who provided us with their name/degree were listed to further protect the identity of project respondents.