

## Resident survey instrument.

Question	Input Options
Please select your residency level.	Choices: PGY1, PGY2, PGY3, PGY4
Please select your residency program.	Choices: Internal Medicine, Non-internal Medicine
In your clinical experience, were you aware of the TGH-GIM-Oncology Overnight Hospitalist?	Choices: Yes, No
How many 4-week blocks of internal medicine have you done at Toronto General Hospital?	Numerical Input
Are you satisfied with the overall quality of care delivered at TGH?	Choices: Very Unsatisfied, Somewhat Unsatisfied, Neither Satisfied nor Unsatisfied, Somewhat Satisfied, Very Satisfied
Since development of the Overnight Hospitalist program, the quality of care delivered at TGH GIM has:	Choices: Increased, Stayed the Same, Decreased
The Overnight Hospitalist program has decreased medical errors.	Choices: Strongly Disagree, Somewhat Disagree, Neutral, Somewhat Agree, Strongly Agree
The Overnight Hospitalist program leads to faster overnight evaluation of patients who are already admitted on the wards.	Choices: Strongly Disagree, Somewhat Disagree, Neutral, Somewhat Agree, Strongly Agree
The Overnight Hospitalist program leads to faster evaluation of new patients in the emergency department.	Choices: Strongly Disagree, Somewhat Disagree, Neutral, Somewhat Agree, Strongly Agree
The educational experience on the internal medicine CTU has improved as a result of the Overnight Hospitalist / "nocturnist" program.	Choices: Strongly Disagree, Somewhat Disagree, Neutral, Somewhat Agree, Strongly Agree
What do you think are the benefits of the Overnight Hospitalist / "nocturnist" program? Please select all that apply from the reasons below. <i>No need to obtain handover from a team at 5pm while still managing my own patients from the day</i> <i>No need to "double cover" or cross-cover teams overnight</i> <i>No need to handover in the morning to separate teams when cross-covering</i> <i>No need to admit to more than one team overnight.</i> <i>Fewer patients to evaluate/admit from the ED overnight</i> <i>Fewer transfers from other hospitals to the ward to evaluate/admit overnight</i> <i>More time to spend in the emergency department with fewer distractions</i> <i>There is a dedicated physician in-house to cover the GIM-Oncology patients (Team 10)</i> <i>There is a dedicated physician in-house to admit the GIM-Oncology Patients (Team 10)</i> <i>There is a more experienced physician in-house to manage GIM-Oncology (Team 10) patients and to admit new GIM-Oncology (Team 10 patients)</i> <i>Greater likelihood of being able to rest/sleep overnight</i> <i>Less need for communication with attending physician overnight</i> <i>Nurses have improved access to physicians overnight regarding patient issues</i> <i>None of the above</i>	
Do you think the overnight hospitalist program makes the hospital more attractive to residents?	Choices: Yes, No
The overnight hospitalist program reduces resident burnout on the CTU.	Choices: Strongly Disagree, Somewhat Disagree, Neutral, Somewhat Agree, Strongly Agree
Has the overnight hospitalist program improved the quality of the educational experience for residents and students?	Choices: Yes, No, Unsure

Has the overnight hospitalist program improved the attractiveness of the hospital to patients? Choices, Yes, No, Unsure

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Please enter any comments about the program below. No identifying information will be shared. Free-text response

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**Supplementary Table S1** – Selected combined survey responses from faculty and residents from June 2019 to December 2019. Survey invitations were sent to 102 residents who rotated through internal medicine between June and December 2019, and 24 faculty members in June 2019. 30 responses were received from residents (response rate = 29%), and 15 responses were received from faculty (response rate = 63%). Likert-type responses ranged from “strongly disagree” (1) to “strongly agree” (5).

Question	Response	
	Faculty	Resident
In your clinical experience, were you aware of the TGH-GIM-Oncology Overnight Hospitalist?	Yes (100%), No (0%)	Yes (100%), No (0%)
Are you satisfied with the overall quality of care delivered at TGH? <i>Mean Likert ± Standard Deviation</i>	3.6±1.7	4.4±0.9
Since development of the Overnight Hospitalist program, the quality of care delivered at TGH GIM has:	Improved (73%) Stayed the same (13%) Decreased (13%)	Improved (93%) Stayed the same (7%) Decreased (0%)
The Overnight Hospitalist program has decreased medical errors. <i>Mean Likert ± Standard Deviation</i>	3.6±1.2	4.4±0.9
The Overnight Hospitalist program leads to faster overnight evaluation of patients who are already admitted on the wards. <i>Mean Likert ± Standard Deviation</i>	4.6±0.9	4.6±0.9
The Overnight Hospitalist program leads to faster evaluation of new patients in the emergency department. <i>Mean Likert ± Standard Deviation</i>	4.5±0.9	4.9±0.7
The educational experience on the internal medicine CTU has improved as a result of the Overnight Hospitalist / “nocturnist” program. <i>Mean Likert ± Standard Deviation</i>	4.1±1.3	4.8±0.4
The Overnight Hospitalist/“Nocturnist” Program has had which of the following effect on your medical billings ( <i>Faculty Only</i> ):	Increase (0%) No change (47%) Decrease (13%) Not Sure (40%)	--
What do you think are the benefits of the Overnight Hospitalist / “nocturnist” program? Please select all that apply from the reasons below.		
<i>No need to obtain handover from a team while still managing my own patients from the day (R)</i>	--	77%
<i>No need to “double cover” or cross-cover teams overnight</i>	80%	90%
<i>No need to handover in the morning to separate teams when cross-covering</i>	73%	87%
<i>No need to admit to more than one team overnight.</i>	60%	83%
<i>Fewer patients to evaluate/admit from the ED overnight</i>	80%	87%
<i>Fewer transfers from other hospitals to the ward to evaluate/admit overnight</i>	40%	50%
<i>More time to spend in the emergency department with fewer distractions</i>	73%	80%
<i>There is a dedicated physician in-house to cover the GIM-Oncology patients (Team 10)</i>	87%	87%
<i>There is a dedicated physician in-house to admit the GIM-Oncology Patients (Team 10)</i>	93%	77%
<i>There is a more experienced physician in-house to manage GIM-Oncology (Team 10) patients and to admit new GIM-Oncology (Team 10) patients)</i>	80%	90%
<i>Greater likelihood of being able to rest/sleep overnight</i>	27%	17%
<i>There is a greater likelihood that the attending will be able to rest overnight (F)</i>	40%	--
<i>Less need for communication with attending physician overnight</i>	40%	33%
<i>Nurses have improved access to physicians overnight regarding patient issues</i>	53%	47%
Do you think the overnight hospitalist program makes the hospital more attractive to residents? <i>Mean Likert ± Standard Deviation (Faculty only)</i>	4.0±1.7	Yes (97%), No (3%)
The overnight hospitalist program reduces resident burnout on the CTU. <i>Mean Likert ± Standard Deviation</i>	4.1±1.0	4.8±0.6
The Overnight Hospitalist / “Nocturnist” Program has reduced faculty/attending physician burnout. ( <i>Faculty Only</i> )	3.5±1.0	--

<i>Mean Likert ± Standard Deviation</i>		
The Overnight Hospitalist / “Nocturnist” Program improves my satisfaction while attending at Toronto General Hospital. ( <i>Faculty Only</i> ) <i>Mean Likert ± Standard Deviation</i>	4.1±1.1	--
Has the overnight hospitalist program improved the attractiveness of the hospital to patients? ( <i>Resident Only</i> )		Yes (80%) No (7%) Unsure (13%)