Preliminary information:

- 1. Thank you for agreeing to be interviewed
- 2. The interview will be audio-recorded and will be transcribed without any personal identifiers.
- 3. Please be reminded that:
 - a. Anything discussed during the interview will be anonymized
 - b. You have right to withdraw comments from study
 - c. You have the right to terminate the interview at any time prior to the closure of the study, without any explanation and without penalty and have your transcript removed from the study record. Once the study is closed and results have been disseminated, you will no longer be able to withdraw from the study.
 - d. Data (including direct quotes) from the interview may be included in publications and in scholarly presentations, but no personal identifying data will be included.

The general aim of the interview is to understand how health systems operate when it comes to Living Donor Kidney Transplantation, in provinces with higher and lower rates of LDKT. We want to understand the perspectives of the different people involved in the system. We hope that by comparing how systems function we can help to increase rates of LDKT in provinces with comparatively lower rates.

Interview guide for healthcare professional

1. Background and role

- Could you tell me a little bit about your background and role? How long have you been in this role?
 - Do you have training that is specific to LDKT?
- Could you describe your role in facilitating LDKT for patients?
 - What are your major responsibilities?
 - Do you work with both donors and recipients?
 - Is working with LDKT donors and recipients your primary role?
 - If not, what other responsibilities must you balance?
 - What is your experience of managing these responsibilities? (prompt: how easy or hard do you find balancing your various responsibilities?)

2. Work in organization

- Could you describe the team that you work with?
- Could you describe how you and your colleagues work together to facilitate LDKT? (prompt: how is the team organized; how are activities coordinated?)
- What are the challenges you face as a team? (prompt: within the team? From outside of the team? Leave open-ended but ask specifically about any not mentioned) Can you give me an example?
- How do you try to address these challenges? (prompt: informal mechanisms?)
- What do you think would help to address them?
- In your opinion, what is the attitude of leadership in your organization towards LDKT?

- How does this compare to attitudes towards deceased donation?
- What is your opinion on deceased versus living donation?

3. Relationship with patients

- At what stage of a patients' trajectory do you usually first come into contact with them? (prompt: Before or after the decision to pursue LDKT has been made?)
 - Are you involved in helping to find a donor? Could you tell me about this process?
 - How often, and under what circumstances, do you usually see patients?
 - Could you tell me a little bit about what these interactions look like? Interactions with donors? With recipients?
 - Do you see patients from all over BC?
- What resources are available to LDKT donors? And recipients? [financial?]
 - What (if any) other resources would you want to provide for patients? Why?
 - Do you consider that there are any disparities in how men versus women benefit from these benefits?
- In your experience, what are the biggest challenges that patients face when navigating the process of LDKT? (prompt: what challenges do they face from the healthcare system? Leave open-ended, but ask specifically if not mentioned)
- What suggestions (if any) do you have for improving patient care through the process of LDKT?

4. Sex and Gender

- What do you know about sex and gender disparity in living kidney donation?
- Are there any differences in how you will approach the subject of the LDKT with male versus female patients?
 - Could you tell me about the differences in these conversations?
 - Why do you approach this subject differently with men versus women? (prompt: what is your goal when you change your approach?)
- In your experience, are there differences in how male and female patients respond to the process of finding a living donor? Could you describe these?
- Are there any differences in how you will approach the subject of the LDKT with male versus female donors?
 - Could you tell me about the differences in these conversations?
- From your experiences of facilitating LDKT, are there any other sex or gender disparities that you have noticed? (prompt: on the level of patients? Professionals? Decision-makers?)
 - In your opinion, what implications does this have for equity in LDKT? For service delivery?

5. Continuity of care

- How are patients referred to you?
 - Are there any challenges that exist in this process? Could you give me an example?
 - Are there any measures that exist to address these challenges? Or, how do you address these challenges? (prompt: informal mechanisms?)
 - What do you think would help to address them?

Appendix 1, as supplied by the authors. Appendix to: Horton A, Nugus P, Fortin M-C, et al. Health system barriers and facilitators to living donor kidney transplantation: a qualitative case study in British Columbia. *CMAJ Open* 2022. doi: 10.1503/cmaj.20210049. Copyright © 2022 The Author(s) or their employer(s). To receive this resource in an accessible format, please contact us at cmajgroup@cmaj.ca.

- Generally, what is your experience of continuity of care and communication between the different clinics and centres involved in LDKT? (prompt: how easy or hard is it to facilitate continuity of care? How effective do you think efforts to do so are?)
 - How does your organization try to facilitate continuity of care?
 - What are the strengths of your connections with other units?
 - Who do you communicate with at other clinics?
 - Are there any challenges that exist in ensuring continuity of care? Could you give me an example?
 - Are there any measures that exist to address these challenges? Or, how do you address these challenges? (prompt: informal mechanisms?)
 - What do you think would help to address them?
- Does your work involve relationships with other organizations/units that we haven't yet discussed? (prompt: eg. CKD clinics; dialysis centres; nephrology clinics; regional transplant clinics)

6. Barriers and facilitators

- What would you describe as the main facilitators to LDKT?
- What would you describe as the main barriers?
- Were you involved in/what do you know about the 'Transplant First' initiative? Could you tell me about your involvement?
 - How effective do you think this work has been?
 - What challenges remain?
- What are the main challenges that you experience in your role? Can you give me an example?
 - How do you address these challenges?
 - What do you think would help to facilitate the work that you do?
- What do you think could help to increase rates of LDKT in your province? (prompt: In policy? On the level of service providers? On the level of patients?

Is there anything else you would like to add? Anything I may have missed?