

Global Emergency Care Committee

Interview Guide

About this guide

This interview guide is for use in the in-depth interviews with purposively selected informants for the Australasian College for Emergency Medicine (ACEM) research project "Emergency care during a global pandemic: Experiences and lessons learnt from frontline clinicians in low- and middle-income countries in the Indo-Pacific region".

The purpose of the interviews is to explore the experiences of emergency care providers, policymakers and coordinators in low- and middle-income countries (LMIC) in the Indo-Pacific region during the COVID-19 pandemic.

Domains of inquiry

Interview questions are designed to explore several domains related to the research objectives:

- challenges and barriers to enabling an effective response
- strengths/enablers of an effective response
- unique aspects of the Indo-Pacific response, including localised innovation
- differences in experience by role, gender, seniority and country/region
- ethical tensions related to healthcare worker safety, resource allocation and the care of vulnerable groups.

Interview procedure

The interviewee will be asked about their personal and professional experiences, challenges and observations.

Tailoring the interview questions

As the experience of COVID-19 has varied across the countries in the Indo-Pacific region, and the pandemic is continuing, it is important to review the questions prior to interview to tailor them to the interviewee and their context. Further, questions will need to be modified if interviewing an informant who is not a frontline EC clinician.

The interview guide

Purpose and Introduction

Thank you for agreeing to participate in this research about emergency care during the COVID-19 pandemic. We appreciate your time and willingness to share your experience, which will help us understand the issues and identify lessons to share and recommendations to improve health and emergency care system readiness for future public health emergencies.

Prompts:

- Sound/volume okay?
- Have you read the Participant Information Sheet and signed the consent form?
 Any questions?
- Are you comfortable? Please feel free to take a break when you need to.

As explained in the participant information sheet, all your responses will be anonymous. If there are any questions you don't feel comfortable or able to answer, just let us know and we'll move on.

Questions

- Let's start by talking about **your role** in providing or coordinating emergency care during the COVID-19 pandemic. What was your role before the pandemic, and how has it changed over the course of the COVID-19 pandemic?
- Now thinking about the emergency care system and response in your country. Can you describe what
 emergency care was like <u>before</u> the COVID-19 pandemic? And then tell us about how it has changed, if
 it has, since COVID-19 emerged?

Probe: Thinking about the Emergency Care Health Systems Building Blocks – What kind of changes have you you seen in terms of:

- Human resources and training
- Infrastructure and equipment
- Data (information and research)
- Processes
- Leadership and governance (including financing)
- Over the course of the pandemic, have you had or have you been able to quickly q get access to the resources and supplies you needed?

Probes:

- PPE
- Infection control or cleaning supplies
- Equipment
- Staff in the required numbers, roles?

Probe: Was there any disconnect between what you have needed and what you have received? Have there there challenges because of lack of training?

Follow up question:

What about now – are there any ongoing challenges with resources and supplies that you need?

[How you and your colleagues responded to the pandemic]

 How have you managed your 'business as usual' role with the extra responsibilities in responding to COVID-19?

Probe: If you disagreed with a decision or directive, did you feel you have the ability to question or challenge it?

- How have you balanced your responsibilities with the **risk of exposure**? What factors have made you feel more protected, or more at risk?
- What about other frontline healthcare workers? How have they responded to the risk of COVID-19 transmission?

Probes:

What information was provided to healthcare workers about COVID-19 and how to protect themselves and their families?

How has safety concerns impacted staff availability?

• We are interested in **how female staff have been impacted**, and experienced the pandemic in different ways. Do you have any insights about that from your own experience, or observing colleagues?

Probe: for example – competing care responsibilities between home, family and work? Pressure from family about risks at work? Financial issues unique to women? Different risks and exposures for women?

- Have there been **other personal factors** like discipline, or family or living situation, or geographical location, that impacted on staff responses to COVID-19?
- What strategies have been or are in place to maintain healthcare workers' **safety and wellbeing** over the long period of the pandemic?

Follow up: What type of support has been provided to staff who have needed to be isolated after potential exposure, or have been required to stay away from their homes due to their role or roster?

Do you think it has been appropriate and adequate? e.g. remuneration, accommodation, support for those isolated from families for extended periods, psychosocial support?

• What about the mental health and wellbeing of healthcare workers?

Probe: As female health workers – have you felt (do you feel) that your issues, concerns or needs have been heard and recognised by your hospital / managers / MoH? Have you had a say in key decisions made about you?

 Have staff experienced stigma or discrimination in their communities because of their work in emergency care?

Probe: Do you think women have experienced this differently?

[Health system responses]

• Could you tell us now about the strengths and weaknesses of the response to COVID-19 in your country — and these can be at any level, e.g. health system, or ED, or discipline, or even individuals.

Let's start with the **strengths** – what factors contributed to good outcomes?

And have there been any barriers to the most effective response?

Probes: Systems/organisational? Supplies/resources? Staff issues?

- Thinking about how healthcare and emergency care have changed in response to COVID-19, can you give us some examples of **positive changes** things you hope will continue?
- And what about any negative changes what should go?

- How has the COVID-19 pandemic impacted on your capacity to respond to non-communicable diseases or other health issues in emergency care?
- Do you think there were **particular patient or population groups** who have not acess timely and quality care and have been more greatly impacted by COVID-19?

Probe - Patients in remote areas?

 How will your emergency care system be better prepared to respond to the next pandemic or emergency?

Probes:

Thinking again about the EC Health Systems Building Blocks:

- Human resources and training
- Infrastructure and equipment
- Data (information and research)
- o Processes
- Leadership and governance (including financing)

Potential of telehealth and digital health services?

[Ethical issues]

• In making decisions about care and allocation of resources, clinicians and managers often face **ethical challenges**. Can you tell us about any ethical tensions you or your colleagues have faced, or ethical issues considered when making decisions?

Probes: duty of care (to patients, and staff), non-maleficence (doing no harm), beneficence (for the good of the patient, and staff), justice (in allocation of medical resources)

In some countries health ministries and hospital managers have discussed the need for clinical decision-making around limitations of care if the surge reached certain levels. Has that been considered, and has any pre-planning been done, in [your country]?

Probe: What would have been the approach?

 Do you think guidance to help clinicians and policymakers with that kind of decision-making would be helpful?

[Conclusion]

• And finally – Of all the things we discussed today about emergency care and COVID-19, what was the most important issue or learning?

The formal interview has now finished. Is there anything else you'd like to say?

Thank you so much for your time and thoughtful responses.