

Appendix A: Interview Guide

Value for money: Identifying the perceived value of novel alternative funding mechanisms for midwifery services

Ethical considerations

A description of the study will have been presented during the recruitment phase. Signed consent will be obtained prior to engaging in the questions. Any ethical issues arising will be addressed prior to the first question and will be documented by the interviewer.

Process

Interviews will be recorded on a digital audio device, transcribed, and uploaded into a qualitative software program. Handwritten notes will also be made by the interviewer into their field notebook.

✓ Denotes probes

Date: _____

Time: _____

Place: _____

Interviewer: _____

Interviewee: _____

Position/role
of
interviewee: _____

Questions for Healthcare Providers

- 1) Do you have any questions for me before proceeding to the interview?
- 2) Could you describe, in general, your experience related to expanded midwifery care models (or midwifery services funded through alternate funding).

Often in healthcare we're interested in the health system 'quadruple aim', which refers to improving population health and, patient and provider experiences, while keeping per capita costs manageable.

- 3) Based on your experience, what has been the impact of these new models of care (or newly funded service)?

Health system 'quadruple aim' prompts

Health system 'quadruple aim'	Prompts
Improving population health/clinical outcomes (e.g., wider range of sexual and reproductive healthcare outside the perinatal period)	✓ Can you tell me about any ways in which expanded midwifery care models or alternate funding is impacting clinical outcomes?
Enhancing patient experience (e.g., enhanced system navigation and services available in a broader range of healthcare settings)	✓ How has this expanded midwifery care model or alternate funding impacted patient experience?
Keeping per capita costs manageable	✓ What has been the financial impact of expanded midwifery care models or alternate funding? ✓ How has your service impacted the direct costs that clients experience?
Improving the work life healthcare providers (e.g., support inter-professional collaboration and coordination)	✓ How has this new funding impacted the way that professionals in different groups are working together? Has it facilitated interprofessional collaboration and coordination? If so, how? ✓ Has this new funding has changed the work options available for midwives? If so, what are the implications for that? [question is specifically for midwives]

- 4) How have these new models of care (or newly funded service) impacted access to healthcare services?

Levesque's conceptual framework of access to healthcare

Dimensions of accessibility of services	Prompts
Approachability (e.g., transparency, outreach, information and screening)	✓ How are the intended patient populations made aware of the new services? ✓ Are these services approachable?
Acceptability (e.g., professional values, norms, culture and gender)	✓ Are expanded midwifery care models acceptable to different cultural, socioeconomically disadvantaged and vulnerable populations that are being served? How is this done?
Availability and accommodation (e.g., location and hours of service)	✓ How are expanded midwifery care models serving the intended patient population? ✓ Are expanded midwifery care services located in places that are geographically accessible and are appointments available in a timely manner? ✓ How have expanded midwifery care services impacted access to midwifery care?
Affordability (e.g., direct costs, indirect costs and opportunity costs)	✓ How is reducing the financial burden for patients taken into account in expanded midwifery care models?
Appropriateness (e.g., technical and interpersonal quality, adequacy and continuity of care)	✓ Have the new models of care facilitated providing care that's more appropriate to the patient population that is being served? ✓ If so, how are new services better meeting the needs of the patient population?

- 5) What do you think are some of the strengths of the expanded midwifery care models (or midwifery services funded through alternate funding)?
- 6) What are the areas for improvement and where you feel like you would still like to do better?
- 7) Do you have anything else you would like to add?