Supplementary material 1: Interview schedule

Interview guide

Thank you for taking part in this interview about motivations, barriers and enablers for sexual assault medical workforce in NSW, Australia.

We would like to hear your thoughts on what is working and what doesn't work for you. We hope to improve the ability to deliver services to victims of sexual violence by understanding how the workplace can support your participation in this workforce.

The interview will take about 45-60 minutes and will be recorded. The questions will be about your work, or anticipated work, in sexual assault services, including the employment arrangements, motivations and any challenges in your work.

The questions will not be regarding specific clients or care provided, although you may choose to reflect in general on experiences of working with victims of sexual violence.

You are free to skip any of the questions or to stop the interview if you wish.

Can I confirm that you have signed the Participant Consent Form and consent to this interview and to it being recorded?

Do you have any questions before I start the recording?

Section 1

Background

First can you tell me your professional background – Nurse or Doctor

What involvement have you had as a Forensic Medical Examiner?

i) Currently working - duration, locations (metro/regional/rural)
ii) Have worked but no longer working - duration, locations (metro/regional/rural)
iii) have undertaken ECAV training to work in sexual assault within the last 3 years who are not in the current workforce - -possible location (metro/regional/rural)

If you have worked or are working what are/were your employment arrangements?

Contract versus employed casually?

Rostered daytime hours or on- call hours or both? How many hours/week for each

Employment Level, eg Nurses -RN Level, CNS Level, CNC Level, Nurse practitioner, Doctors - GP VMO, Specialist VMO, Staff Specialist, Registrar

Do/did you get paid an on-call allowance?

Can you describe your work week with respect to other employment as well as Forensic Medical Examiner work? What employment arrangements do you have for your other work? eg private practice, salaried, permanent/casual.

How did you come to be involved in sexual assault training/work?

What training and professional development have you undertaken in order to be involved in this work?

Probes – formal, informal

Section 2

All participants

i) General – currently working

Tell me about how it is for you working in this role.

Probes – motivation, rewards/enjoyment of the role, challenges of the role.

Who do you work with and how do you work together (work team)?

What support do you have for your role?

Probe – do you feel supported? Who supports? - peer support? Gaps in support?

Do you support others?

What training or professional development opportunities have you undertaken or What do you do to manage stressors of your work?

Do you have a formal supervision arrangement? By supervision we mean an opportunity to critically and confidentially reflect on work experiences with a counsellor, peer or colleague.

Is this regularly scheduled or ad hoc/on request?

What challenges do you find in this role?

Probes – on call, pay, award conditions, employment arrangements, career progression, skill maintenance, support, work-like balance, trauma

How would expansion of the scope of your role affect you?

Probes – expanded age range, domestic violence, child abuse and neglect, working alongside other health professionals eg paediatricians

Are you thinking of leaving the role? What factors might influence this decision?

What could the service do to make you, or others like you, want to stay in the role?

ii) General – have worked but not currently working

What were your experiences of working?

Probes – rewards/enjoyment of the role, challenges of the role.

Who did you work with and how did you work together (work team)?

What support did you have for your role?

Probe – did you feel supported? Who supports? - peer support? Gaps in support?

Did you support others?

What do you do to manage stressors of your work?

Did you have a formal supervision arrangement? By supervision we mean an opportunity to critically and confidentially reflect on work experiences with a counsellor, peer or colleague.

Was this regular scheduled or ad hoc/on request?

What factors contributed to you leaving the role?

Probes – on call, pay, career progression, skill maintenance, support, work-like balance, trauma

What could services have done to make you, or other people like you, able to continue in the role?

iii) General – have undertaken ECAV training to work in sexual assault within the last 3 years who are not in the current workforce

How did you find the training that you may have done in anticipation of working?

What factors contributed to you choosing not to work in sexual assault

Probes – on call, pay, career progression, skill maintenance, support, work-life balance, trauma

What could the service have done to make you, or others like you, more likely to commence work as an examiner?

Section 3

Regional participants only

Can you tell me about how working in a regional/ rural location impacted your work, if at all?

Probes – fewer co-workers, more frequent on-call, personal connection with clients, training opportunity limitations

Do you think this work would be easier or harder in a city environment?

Probes - What makes it this way? How could it be made easier in regional areas.

Section 4

Nurse participants only

How is your work affected by your position as a nurse?

Probes – differences from doctors, unique skills able to contribute, limitations

Is there a medical lead for your work? How does your role interact with the medical lead role?

Do you or have you worked without medical lead support?

What would you say to other nurses interested in this work?

Do you have any comments regarding how the sexual assault nurse examiner role could be more attractive and rewarding for nurses?

How would expansion of the scope of sexual assault nurse examiner roles affect nurses?

Probes – expanded age range, domestic violence, child abuse and neglect, working alongside other health professionals eg paediatricians