

Appendix Table A: Themes Present Throughout Study Period

Major Themes	Exemplar Supporting Quotations
<p>1. Building capacity in academic family medicine (re: clinical, education, quality improvement and research)</p> <p>Taking on broader responsibilities in family medicine (FM) in response to community needs during COVID crisis (includes faculty members, learners and community family physicians):</p> <ul style="list-style-type: none"> • New roles for FM during pandemic • Expanded role for FM during pandemic 	<p>Before COVID</p> <p>“Clearly what we want to do is really amp up collaborative care for the future, including digital care, education, policy and research, the co-design and implementation by sites, plus DFCM [Department of Family and Community Medicine] central, with really focus on enhancing comprehensive care physician competency [RE: new Division in Mental Health and Addictions].” (January 2020)</p> <p>Post-COVID pivot</p> <p>Taking on broader responsibilities in FM:</p> <p>New Roles for FM during pandemic</p> <p>“... We are fully running our COVID assessment centre. ...it's completely staffed by our family health team and physicians.” (April 2020)</p> <p>“... we are working with our Emergency Department colleagues to develop a strategy that will be able to allow us to go proactively into these homes, shelters and do things like swabbing, infection, protection and control (IPAC) education.” (April 2020)</p> <p>Expanded role for FM during pandemic</p> <p>“Our residents have really been stepping up. ...They were the first to volunteer to take redeployment shifts in internal medicine. ...And I think the kind of generalism of family medicine has really been felt and appreciated in the hospital.” (April 2020)</p> <p>“... what we're seeing and what I'm hearing from everybody's work is that people are all stepping up because we're so general and comfortable with uncertainty. People are going into situations where they are less certain and adapting, right. So this is the beauty of family medicine.” (April 2020)</p>

<p>COVID highlighted inequities:</p> <ul style="list-style-type: none"> • Concern and advocacy for vulnerable patient populations <ul style="list-style-type: none"> • Concern and advocacy for community family physicians (re: PPE and isolation) 	<p>“...it’s very longstanding, in looking after our people, our students, our residents with respect to our commitment to diversity and equity and inclusion, which I think is part of the DNA of much of this department.” (January 2020)</p> <p>Post-COVID pivot</p> <p>“... there’s so much amazing work being done by your faculty at all the sites around so many of the equity issues – from homelessness to our Indigenous population, to issues...advocacy around race. ... this is a great time to highlight our own department’s work in trying to address equity gaps that have become so stark as a result of COVID.” (April 2020)</p> <p>“Then we sort of tried to look for what initiatives could we have where we could have our residents playing a role. And our residents are now being engaged in outreach to our vulnerable populations. So calling at home our vulnerable patients and those that need a little bit more support, and helping us to wrap around and engage the team to wrap around support.” (April 2020)</p> <p>“I think we have an advocacy role to play as members of our department and in primary care in general, and leaders in the system to advocate for colleagues who are not well cared for in terms of adequacy of PPE in the community.” (March 2020)</p>
<p>4. Learner safety and well-being</p> <ul style="list-style-type: none"> • Concern for learner safety and well-being during COVID crisis (ie, safety, emotional 	<p>Before COVID</p> <p>“I think within the department, I really want to point out that our program directors, both #24* and #7, really take this very seriously [learner mistreatment]. And when students disclose in any of their evaluation forms, you know how #24 has dealt with concerns, and #34 you know how #7 deals with it. I think there’s a strong commitment from within the department.” (January 2020)</p> <p>Post-COVID pivot</p> <p>“My biggest concern is... making sure the residents are protected because they’re moving site to site if we’re going to have virtual interviews and phone calls [for patient care],</p>

<p>wellness, education, clinical competencies, accreditation, graduate, certification)</p>	<p>the physical examination and what they're exposed to [clinical skills] is going to be limited." (March 2020)</p> <p>"I just want to say as site directors, we're actually talking to each other as well and coming up with plans to help residents through this time. A lot of us are having weekly virtual touch-bases with our residents for wellness support." (March 2020)</p>
<p>5. Striving for and celebrating excellence</p>	<p>Before COVID</p> <p>"So we really want to celebrate our scholarship and dissemination at the different conferences. So just check out what the faculty members did. I walked around the posters... There were three poster days. One day, 30 out of 60 posters were DFCM posters... It was completely fantastic. On everything, all kinds of family medicine issues." (November 2019)</p> <p>Post-COVID pivot</p> <p>"... Let's not forget that perhaps recognizing someone or nominating someone [for an award] during this difficult time is a way of showing gratitude." (April 2020)</p> <p>"I think our responsibility is to study this and see what works and doesn't work, and where the gaps are, and what we need to innovate, what innovations we need to put in place to fill those gaps and ensure that care's comprehensive to everybody, including vulnerable populations, and populations that don't have as much access to virtual services as we hope." (May 2020)</p>
<p>6. Supportive and collegial environment</p>	<p>Before COVID</p> <p>"So please help us celebrate the people in your units. And really keep moving forward. You're doing great jobs. Thank you." (November 2019)</p> <p>"So I just want to say you can never put your foot in your mouth. You're amongst friends." (February 2020)</p> <p>Post-COVID pivot</p>

	<p>“Wow. This is quite a department and quite a contribution to primary health care. ...And obviously tremendously valuable and pivotal in this whole process [response to pandemic]. So thank you all for these... first of all for your descriptions of what's going on, and for the amazing work that you are all doing, and what your faculty members and staff are doing.” (April 2020)</p>
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Abbreviations: FM, family medicine; PPE, personal protective equipment.

* Numbers are substituted for participant names to prevent possible identification of individuals.