

Appendix A. Family Medicine Program Director Survey

<p>In what state is your residency program located? If your residency program includes rotations in multiple states, pick the primary state in which your residency program operates.</p>	<p>Illinois</p> <p>Indiana</p> <p>Iowa</p> <p>Kansas</p> <p>Michigan</p> <p>Missouri</p> <p>Minnesota</p> <p>Nebraska</p> <p>North Dakota</p> <p>South Dakota</p> <p>Wisconsin</p> <p>Other</p>
<p>The next five questions refer to demographic details about your residency program.</p>	
<p>1. What is the name of your Family Medicine residency program?</p>	
<p>2. What is your current faculty role at the Family Medicine residency program?</p>	<p>Program Director</p> <p>Associate Program Director</p> <p>Director of Recruitment</p> <p>Other faculty role (please specify):</p>
<p>3. Please describe the type of residency program you direct.</p>	<p>University-Based</p> <p>Community-Based University-Affiliated</p> <p>Community-Based Non-Affiliated</p>

	Military Other (please specify):
4. Please select the characteristics that apply to your program. Please select all that apply.	Serves a Medically underserved area (MUA) Serves a medical underserved population (MUP) Serves a Primary Care Health Professional Shortage Areas (HPSA) Is a teaching health center program (THC-GME) Located in an urban area Located in a rural area Located in a suburban area
5. How many residency positions did you interview for in the 2023-2024 residency recruitment cycle?	
The next questions refer to your personal experiences with program signaling and geographic preferences during the 2023-2024 recruitment cycle. Applicants are able to signal up to five family medicine programs to indicate a strong interest or "preference" for the program. Geographic preferences indicate preferred regions and interest in rural, urban or suburban settings.	
6. What percent of your interview spots were allocated to applicants that sent a program (preference) signal?	0 10 20 30 40 50 60 70 80 90 100
7. Program (preference) signaling is a positive change to the current system.	Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree
8. Program (preference) signaling added value to our current recruitment process.	Strongly disagree Somewhat disagree Neither agree nor disagree

	<p>Somewhat agree</p> <p>Strongly agree</p>
9. Program (preference) signaling has a positive impact on equity, diversity, and inclusion	<p>Strongly disagree</p> <p>Somewhat disagree</p> <p>Neither agree nor disagree</p> <p>Somewhat agree</p> <p>Strongly agree</p>
10. Geographic and setting preferences are a positive change to the current system.	<p>Strongly disagree</p> <p>Somewhat disagree</p> <p>Neither agree nor disagree</p> <p>Somewhat agree</p> <p>Strongly agree</p>
11. Geographic and setting preferences added value to our current recruitment process.	<p>Strongly disagree</p> <p>Somewhat disagree</p> <p>Neither agree nor disagree</p> <p>Somewhat agree</p> <p>Strongly agree</p>
12. Geographic and setting preferences have a positive impact on equity, diversity, and inclusion.	<p>Strongly disagree</p> <p>Somewhat disagree</p> <p>Neither agree nor disagree</p> <p>Somewhat agree</p> <p>Strongly agree</p>
13. Please share your email address.	
14. Thank you for participating in this survey! If you are willing to be contacted for a brief interview please select YES below. We would greatly appreciate the chance to talk with you and learn more about your experience! Click the "Next" button to exit the survey.	<p>Yes, please contact me to schedule a brief interview.</p> <p>No, I am not interested.</p>

Appendix B. Qualitative Interview Guide

This study aims to assess your experience with program (preference) signaling and geographic and setting preferences during the 2023-2024 recruitment process. We anticipate that this study will gather best practices and common challenges that we can share to improve these programs in the future.

Your participation is voluntary and includes completing a thirty minute interview. You can stop at any time or choose not to answer any of the questions. There will be no compensation for participation. Participation has minimal risks to you.

The University of Michigan Institutional Review Board has determined that this study does not require IRB approval because it is limited to improving the quality of administrative activities in the residency recruitment process (HUM00243040). We will protect the confidentiality of your answers by de-identifying the data and storing it in a password protected data file. Only the investigators will have access to the identification key. If you consent to participate, I will press record and begin.

If you consent to participate in the study, please indicate below to proceed.

These questions refer to your personal experiences with program signaling and geographic preferences during the 2023-2024 recruitment cycle. Applicants are able to signal up to five family medicine programs to indicate a strong interest or "preference" for the program. Geographic preferences indicate preferred regions and interest in rural, urban or suburban settings.

IMPLEMENTATION

1. Please share your general experience with program (preference) signaling this year.
2. Please share your general experience with geographic/setting preferences this year.

REACH

3. In your opinion, why were program (preference) signaling and geographic/setting preferences added to the recruitment process this year?
 - a. Probe: what problem do you think signaling was implemented to solve?
 - b. Probe: how specifically was it supposed to help residency programs?
 - c. Probe: What was the value added for your program?
 - d. Probe: In your sense did it highlight candidates that you would have looked over?
 - e. Probe: If you had fewer applications, did you feel like the signal applications were of better fit / match?

ADOPTION

4. Can you walk me through how you implemented program (preference) signaling into your recruitment process? I'll ask you about preference and geographic signaling.

- a. How, if at all, did you use program signaling in selecting which applications to review?
- b. How, if at all, did you use program signaling in reviewing the applications?

Probe: were extra points given

- c. How, if at all, did you use program signaling in reviewing the applications?

Probe: Did your program acknowledge those who gave a program signal during the interview?

Probe: Were there any differences in the interview process between those who did and did not send a program signal?

5. Can you walk me through how you implemented geographic and setting preferences into your recruitment process? Here geographic preferences refer to the regional "map" and setting preferences refer to designating urban, suburban, or rural programs.

- a. How, if at all, did you use geographic and setting preferences selecting which applications to review?
- b. How, if at all, did you use geographic and setting preferences in reviewing the applications?

Probe: did you use it in an existing cumulative points system?

- c. How, if at all, did you use geographic and setting preferences in interviews?

Probe: Did your program acknowledge these preferences during the interview?

Probe: Were there any differences in the interview process between those who did and did not have a geographic and setting preference that matches your program characteristics?

- d. Do you have any plans to use the signaling and preference information in creating your rank list? If so, how?

6. Can you tell me about any resources you used to decide how to implement signaling?

- a. Probe: articles, faculty development sessions or webinars, other PDs, listserve, applicant or resident feedback, data from other specialties.

7. There were other changes this year – particularly the Supreme Court decision on affirmative action (Dobbs, LGBT rights) – that may have changed some programs' approach to recruitment. What other changes in your program's approach to recruitment affected how you implemented program signaling and geographic and setting preferences?

8. Did you receive the same, more, or less applications this year?

EFFECTIVENESS

9. What were the most important outcomes you anticipated with signaling this year? I'll ask you about program signaling and geographic preferences.

10. What were the biggest benefits of signaling?

- a. Probe: to you as the [role – Program Director, faculty, etc]
- b. Probe: to your program
- c. Probe: to applicants

11. What were the biggest challenges?

- a. Probes: Time and effort for implementation, lack of support and technical assistance in implementation, others?

MAINTENANCE (SUSTAINABILITY)

12. How did you change the way you used signaling during the recruitment process?

- a. Probe: Did you make any adjustments as recruitment season progressed?

13. What if any plans do you have to make any changes in the way you used the signaling program next year?

14. What feedback would you want to give to the AAMC, AAFP, AFMRD and others to improve the signaling program?

15. What if any suggestions would you give medical students and their advisors about signaling based on your experience?

NEXT STEPS/OTHER

16. POST MATCH QUESTION: now that you have matched do you have any other insights you'd like to share about the value of preference signals? Did you notice the percent matching into other specialties change compared to last year?