*Virtual PI Pilot Project*

**PARTICIPANT SELF-REPORT QUESTIONNAIRE**

**(With PROVISIONAL CODING SCHEMA)**

*(12/2020)*

1. **Please list and describe ‘pearls’ collected during virtual PI: (e.g., information of value to you for giving medical care, caregiving in general, accessing internal/external resources, improving practice office-wide, relationship with colleagues, thoughts about PI small group process)**

***Codes for Pearls***

***Regarding:***

***Clinical Care (related to):*** *Diagnosis, Management, Prognosis, Ethics, Clinician-Pt relationship, PCP role, Disease/sx specific, Other*

***Non-Clinical (related to):*** *Patient socio/cultural/economic factors, Patient beliefs/values, Health-related habits, Family context, Health care-related behavior, Other*

***PCP-focused as related to external environment:*** *Office context, One Medical context, Larger health system context; Collaboration with colleagues, Collaboration with specialists/allied health professionals, Visit logistics, Concerning Virtual visits, Other*

***PCP-focused as related to personal factors:*** *Knowledge/skill base, Past experience, Cognitive/affective biases, Metacognition/ reflective Practice PCP role, Other*

***Practice-Focused (Case/meeting reveals):*** *Educational need for practice, Admin systems issues, Colleague communication issue, Other*

***Practice inquiry Colleague Group -Focused:*** *PI process positive, PI process needs improvement, Other*

1. **Please rate your willingness to present a case-based uncertainty at a future virtual PI Colleague group:**

**1 2 3 4 5**

(*1 being not willing at all, 5 being very willing)*

Comments about you presenting cases at virtual PI Colleague Groups:

***Codes for Comments about You Presenting Cases at virtual PI Colleague Groups***

***Positive:***

* + *Yes, I would definitely (or most likely, or probably) present if I had a case*
	+ *Yes, I did present and it went very well (or well, or okay)*
	+ *Yes, Other*

***Not Positive****:*

* + *No, I probably wouldn’t present*
	+ *I presented and it didn’t go well*
	+ *Other*

***Neutral:***

* *Not sure whether I would present; it’s possible but I don’t know; it all depends*
* *I presented once and it was okay; so-so;*
* *Other*
1. **Please rate how useful virtual PI Colleague Groups are to you in your practice life:**

1 2 3 4 5

(1 being not at all useful, 5 being very useful)

Comments about virtual PI usefulness in your practice life:

***Codes for Comments about virtual PI Usefulness in Your Practice Life***

***Regarding:***

***Clinical Care (related to):*** *Diagnosis, Management, Prognosis, Ethics, Clinician-Pt relationship, PCP role, Disease/sx specific, Other*

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***Practice-Focused (Case/meeting reveals):*** *Educational need for practice, Admin systems issues, Colleague communication issue, Other*

***Practice inquiry Colleague Group -Focused:*** *PI process positive, PI process needs improvement, Other*

1. **Please comment on the pro’s and con’s of virtual PI Colleague groups**

***Codes for Comments about Pro’s and Con’s of Virtual PI Colleague Groups***

***Regarding:***

***Clinical Care (related to):*** *Diagnosis, Management, Prognosis, Ethics, Clinician-Pt relationship, PCP role, Disease/sx specific, Other*

***Non-Clinical (related to):*** *Patient socio/cultural/economic factors, Patient beliefs/values, Health-related habits, Family context, Health care-related behavior, Other*

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***PCP-focused as related to personal factors:*** *Knowledge/skill base, Past experience, Cognitive/affective biases, Metacognition/ reflective Practice, PCP role, Other*

***Practice-Focused (Case/meeting reveals):*** *Educational need for practice, Admin systems issues, Colleague communication issue, Other*

***Practice inquiry Colleague Group -Focused:*** *PI process positive, PI process needs improvement, Other*

1. **Please comment on how virtual PI Colleague Groups can be improved**

***Codes for Comments about How Virtual PI Colleague Groups Can Be Improved***

***Regarding:***

***Clinical Care (related to):*** *Diagnosis, Management, Prognosis, Ethics, Clinician-Pt relationship, PCP role, Disease/sx specific, Other*

***Non-Clinical (related to):*** *Patient socio/cultural/economic factors, Patient beliefs/values, Health-related habits, Family context, Health care-related behavior, Other*

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***Practice inquiry Colleague Group -Focused:*** *PI process positive, PI process needs improvement, Other*

**THANK YOU!**