Appendix 4. Benefits and enablers related to face-to-face education delivery

Themes

Illustrative quotes

Social connection improves learning engagement and safety

MEs and registrars valued the social connection of FTF education, enabled by interactive sessions, refreshment breaks and dining out with MEs in remote locations.

Registrars liked the peer norming, losing the sense of isolation and value adding to education.

From MEs:

You get that relational aspect ... I get energy from ... a face-to-face environment and my energy is zapped by delivering in a Zoom environment. [FG1]

... learning from each other ... forming those bonds ... community of practice ... outside of the actual formal teaching I think is invaluable. [FG2]

Whereas when we bring face-to-face, we'll take them out for a meal and guarantee that we're going to develop that collegial support. [Male ME Rural]

From Registrars:

[General practice] is really, really isolating ... everyone comes together, which is why I like the face-to-face. [Female GPR Rural]

Catch up with people going through the same thing that you're going through ... you just don't get that same experience from online. [Female GPR Urban]

Seeing other registrars ... like we're so remote ... It's just nice to be with people, like your own peers ... and not feeling like you're the only one. [Female GPR Remote]

Learning engagement improved by free-flowing conversation

MEs and registrars agreed.

MEs found engagement and task allocation easier.

Registrars felt more committed, focused, energised, gained more feedback, and so learnt more.

From MEs:

You can walk around the room. You can engage people ... doing an interactive teaching session ... it's very much a two-way thing. [FG2]

... in the room together ... natural conversation ... a bit of humour ... feedback from the room ... you're not getting ... feedback on Zoom because you're ... scanning a crowd rather than feeling the mood of the room. [FG1]

From registrars:

In a room, we were engaged with the presenter face to face and take breaks ... quick chat ... sit back down and focus. [Female GPR Remote]

You drive there, you park your car, you get out ... you're already committed and you're a bit more engaged. [Male GPR Regional]

You can just feel that energy and you get swept in, and it's just a lot easier to engage than just sitting in front of a computer screen. [FG2]

Content delivery

MEs felt more spontaneity and ability to respond to registrars' needs

Registrars recognised the benefit of spontaneity and feedback

From MEs:

There's nothing like the registrars actually being able to practise and do hands-on stuff themselves. [Female ME Rural]

I like to play games with my registrars and the games you really have to rethink a little bit [for online]. [Female ME Regional]

... topics which are ... better face to face ... communication skills, for example, I just think that is better in a face-to-face environment. [Female ME Rural]

From registrars:

[ME] ... conversation ... much the same as lighting a fire ... would make its way around the room spontaneously with feedback. [Male GPR Rural]

Being able to ... say, here's what I dealt with today ... We ended up covering a lot more diverse topics face to face. [FG2]

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Appendix 4. Benefits and enablers related to face-to-face education delivery (Cont'd)	
Themes	Illustrative quotes
Unplanned learning	
Registrars liked to share experiences and get answers	From registrars:
	questions that were unrelated to the topic that we'd always answer I did depend on it quite a bit in terms of learning. [Female GPR Regional]
	Share their experiences adds to Knowledge with clinical cases to have some back-and-forth kind of debate and banter [FG1]
Learning safety, assessment and pastoral care are r	nore important to MEs than registrars
Learning safety, assessment and pastoral care were mostly perceived and valued by MEs. Registrars valued 'intimate' and 'collegial' small groups and sitting at tables creating an equal dynamic.	From MEs:
	assessing how registrars respond to each other to feedback to challenge to answers and getting a feel for is this person struggling either clinically in their reasoning and their personal life? that makes it safer [Female ME Regional]
	go for dinner amongst the trainees in a social setting what their story is, what their background is what issues they're dealing with, where they want to be as a doctor At the end a more cohesive team. [Male ME Remote]
	So that mentoring to talk among themselves, the breaks, the breakout rooms go out for a cup of tea, that community of practice to speak to you I'm a bit worried about this that's really important. [FG2]
	From registrars:
	I think small groups that we know, you've had a chance to meet and know people beforehand provides a safe learning environment. [Male GPR Rural]

FG, focus group; FTF, face-to-face; GPR, general practice registrar; ME, medical educator;