

Appendix Table 1: Site consistent themes PGY1 interview data

Site consistent themes	Quotes	Comment
Overall, the experience was valued	<p>“At first did not know the best treatment now feel more sure.”</p> <p>“Basics covered med school, but interactions not emphasised as much.”</p>	<p>Universally both House Officer cohorts found the experience positive and all stated that their thinking around prescribing had improved.</p> <p>Significantly, they all thought that the programme should be rolled out to all HOs and 60% thought it would be of value repeated in their second postgraduate year in subspecialty areas (eg, gastroenterology, oncology).</p>
Timing	<p>“Simulation best early in the year and at the start of the run.”</p> <p>“Useful on the first run - exposed to situations not seen yet. Was food for thought - when you saw them in clinical you knew how to think through the situation?”</p>	<p>This experience is most useful early in the intern year and at the start of the rotation.</p>
Enhanced awareness of the thinking that surrounds prescribing	<p>“Enhanced my thinking through prescribing and cases gave you a chance to think and discuss medication decision.”</p> <p>“I think better about it now - highlighted how I should be thinking about prescribing at each step.”</p>	<p>At the end all House Officers on both sites reported being more aware of what they should be thinking about when prescribing</p>
Nature of feedback	<p>“Used video but it was not as helpful as looking at the list of the choices I made on the day. We went back to that – it was more helpful than the video.”</p> <p>“Looked at video (did not like that). I asked to look at the list of what others had done and that got me thinking about other options. Talked about what I could do better.”</p>	<p>HOs were not convinced the video was needed (80%) but written feedback immediately after the simulation was valued.</p>
Simulations assisted learning	<p>“Scenarios were helpful as I had not encountered all the medications before.”</p> <p>“You are taught to do a full med history at medical school but changes when you start work you have less time. So it was good to do this early without consequences.”</p>	<p>Authentic simulation environments, real patients and their medications and conditions similar to ‘work’ support learning</p>

HO = PGY1 doctor