Supplemental Material 1. Consolidated criteria for reporting qualitative studies (COREQ): 32-item checklist

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| **Domain 1. Research team and reflexivity** |
| **Personal characteristics** |  |
| 1. Interviewer/facilitator | JR conducted the interviews MW visited with interviewees after the interviews to confirm content |
| 2. Credentials | The study team consisted of doctoral-level investigators from the field of pediatric palliative care, cardiology, cardiac surgery, chaplaincy and masters-level investigators from the field of social work and research |
| 3. Occupation | Members of the study team included physicians, a surgeon, a social worker, chaplains, and a researcher |
| 4. Gender | The research team consisted of a balance of gender representation with a heavier proportion of male members due to paternal nature of study topic |
| 5. Experience and training of interviewer | JR has completed cognitive interview mentorship from MWMW has completed >30 hours of formal interview training from sociology/anthropology investigators, has completed qualitative software coursework with tutelage from a Atlas.ti software designer, and completed graduate-level qualitative methodology coursework prior to study design and interview implementationTo experience paternal perspective, study team members met with colleagues with each colleague assigned one transcript and shared their reflections of that one paternal perspective/experience in group format to “be the voice” of that interviewed dad prior to research analysis  |
| **Relationship with participants** |  |
| 6. Relationship established | The study was mentioned to the case family by their cardiology nurse or palliative care physician at least two days prior to interviews with an in-person introduction to interviewer occurring the day of the interview |
| 7. Participant knowledge of interviewer | The participants were made aware that the interviewer is interested in paternal role, responsibility, and support need constructs and that the study team was interested in learning about the family’s experiences to gain insight about how best to support paternal roles |
| 8. Interviewer characteristics | The interviewer utilizes positive affirmation during interviews (nodding and sharing verbal agreement) with follow-up questions (while avoiding leading) and tolerates extended silence during interviews to foster open, engaged conversations |
| **Domain 2. Study design** |
| **Theoretical framework** |
| 9. Methodological orientation and theory | Case study methodology underpinned the study; semantic content analyses was applied for data reviewStudy team members engaged in a reflective meeting prior to research meetings at which time study team member reflected on their own definitions and perceptions of fatherhood from their personal and clinical experiences |
| **Participant selection** |
| 10. Sampling | The participants were selected based on consecutive surgical cases and convenience sampling |
| 11. Method of approach | Participants were approached face-to-face  |
| 12. Sample size | n=10  |
| 13. Non-participation | All invited participants elected to participate after an engaged process of informed consent |
| **Setting** |
| 14. Setting of data collection | Data was collected in private hospital rooms |
| 15. Presence of non-participants | Participant and the researcher were present in the interview room |
| 16. Description of sample | Demographics and data are deliberately omitted from responses to protect the privacy/confidentiality of participants |
| **Data collection** |
| 17. Interview guide | The questions were reviewed by one psychologist expert from a different institution, one family-theorist from a different institution, two pediatric cardiologists, and piloted on an adult cardiac patient’s father |
| 18. Repeat interviews | Repeat interviews were not carried out |
| 19. Recording | Interviews were voice recorded |
| 20. Field notes | Field notes were not made during the interviews, but, the interviewer engaged in memoing immediately after the interviews to reflect upon interview setting/content |
| 21. Duration | The interviews lasted an average of 20 minutes |
| 22. Data saturation | Saturation was not an a priori goal; any and all raised themes were included as relevant  |
| 23. Transcripts returned | Content was reviewed by participants with MW as an opportunity for debriefing from the interview experience |
| Domain 3. Analysis and findings |
| 24. Number of data coders | Two data coders coded the data  |
| 25. Description of coding tree | Coding tree included mapping of themes and relationships between themes by the study team in in-person meetings |
| 26. Derivation of themes | Themes were identified from the data as social constructs  |
| 27. Software | Excel was used to manage the data |
| 28. Participant checking | Participants provided feedback on findings through content checking after the interviews were complete |
| **Reporting** |  |
| 29. Quotations presented | Participant quotations were presented to illustrate themes. To protect participant privacy, quotation was not identified by participant name. |
| 30. Data and findings consistent | The data presented was consistent with evidence base gathered through literature search completed prior to interview initiation in prior Good Parent qualitative manuscripts |
| 31. Clarity of major themes | Major themes were clearly presented in the form of text summary and a table |
| 32. Clarity of minor themes | Minor themes were described by text summary, list format, and a table in the manuscript |