

Additional file 2: COREQ¹ checklist

Table 1

Consolidated criteria for reporting qualitative studies (COREQ): 32-items checklist

No	Item	Remarks	Page no
Domain 1: Research team and reflexivity			
(Where blank, details are not mentioned in the article)			
Personal Characteristics			
1.	Interviewer/focus group facilitator	DT or NT, (Co-PI) conducted individual interviews with participants; DT was the moderator and LL co-facilitated focus groups; a student observer took notes	
2.	Credentials	NT, DT, LL are PhDs, the student is MA	
3.	Occupation	DT and NT are professors and academic researchers; LL is research coordinator	
4.	Gender	All members of the research team are women	
5.	Experience and training	DT has long-standing facilitator skills. She has conducted more than 20 focus groups with cancer and primary care teams or people living with and beyond cancer since 2006. She has training in qualitative methods. NT has long-standing experience in health services and qualitative interviews The student works on cancer patient reported experience. All research team members and co-authors have previous experience and academic knowledge on patient participation and governance.	
Relationship with participants			
6.	Relationship established	No relationship established prior the study	
7.	Participant knowledge of interviewer/facilitator	DT was known by reputation to some participants as a researcher very involved as a researcher in the cancer network since 2002. The objectives and reasons for doing the study were described in the introduction section of the interview or the focus group; LL had recruited participants following expression of interest to local collaborator.	
8.	Interviewer characteristics	DT is a senior career research fellow from the national research funder (Fonds de recherche en santé-Québec). She has a specific training in cancer services research, advanced nursing background, and expertise in cancer network-based practices.	
Domain 2: Study design			
Theoretical framework			

9.	Methodological orientation and theory	The case study employs systematic (based on collaborative governance and governance functions) and thematic analysis (based on induction)	
Participant selection			
10	Sampling	Purposeful sampling based on participation in governance committees at national and local level	
11.	Method of approach	Committee participants at national and local level were invited to participate in interviews or the focus groups. For recruitment at local level, collaborators in each site were contacted by researchers and played a role in participant recruitment by informing local actors (clinicians, clinician-managers, cancer program directors, PLC representatives) of the study and describing reasons they might wish to participate. Information meeting about the study was organised and local collaborators used a formal recruitment script. They provided the research team with the names and contact information of actors interested in participating. LL then contacted potential participants directly.	
12.	Sample size	A total of 31 participants were recruited; of the 19 PLC, 3 (members of national committee) participated in individual interviews and 16 participated in local focus groups regrouping 5 to 6 participants. Smaller group were preferred considering that participants were highly knowledgeable of the topic and we were looking for detailed perspective.	
13.	Non-participation	-	-
Setting			
14.	Setting of data collection	Focus groups were held in meeting rooms within the cancer clinic of each participating site. Individual interviews were conducted in private offices reserved within the cancer clinic or in the offices of interview participants.	
15	Presence of non-participants	No one was present besides the researchers and participants	
16.	Description of sample	Individual interviews were conducted with policymakers (17), managers (15), clinician managers (19), clinicians (19) and PLC (3, on national level committees) all concerned about cancer network governance and PLC participation; Focus groups involved another 16 PLC.	
Data collection			
17.	Interview guide	The pilot tested interview guide built around collaborative governance framework concepts (see Additional file 1)	
18.	Repeat interviews	-	-
19.	Audio/visual recording	The research used audio recording to collect data	p. 9

20.	Field notes	In focus groups, a student kept notes using a systematic note-taker form and seating chart adapted from Guest et al. (2013, p. 200) ¹ .	
21.	Duration	Interviews averaged 1 hour each; Focus groups 1.5 hours	
22.	Data saturation	Not discussed	
23.	Transcripts returned	No return to participants required considering audio recording	
Domain 3: Analysis and findings			
24.	Number of data coders	2 (LL, SU)	
25.	Description of the coding tree	The initial semi-open coding tree was based on the collaborative governance framework that informed our interview guide, and offered the opportunity to add themes that emerged; Coding on an initial sample was undertaken by 4 authors (DT, NT, LL, SU) and differences examined and resolved by consensus: two authors (SU and LL) then completed coding.	p.10
26.	Identification of themes	With systematic coding based on theory of collaborative governance as a base, thematic coding focused on how PLC participation in governance was enabled. The progression from systematic coding to thematic coding was discussed by 3 co-authors (DT, NT, SU), with resolution of differences in interpretation to improve internal validity.	p.10
27.	Software	QDA Miner™ software was used to manage data	p. 10
28.	Participants feedback	Next step to come during knowledge exchanges activities	
Reporting			
29.	Quotations presented	Quotations are presented, identified by the participant's role (clinician, clinician manager...)	
30.	Data and findings consistent	Findings are consistent with the data presented. All data were analysed in light of our conceptual framework. Quotations most illustrative of the major themes revealed in the data were selected by consensus from the team members for inclusion in the article.	p. 10-21
31.	Clarity of major themes	Findings are presented according to the three major themes identified in the data.	p. 10-21
32.	Clarity of minor themes	Only major themes were discussed considering the original information that emerge and the links with existing literature	-

¹ Allison Tong, Peter Sainsbury, Jonathan Craig, Consolidated criteria for reporting qualitative research (COREQ): a 32-item checklist for interviews and focus groups, *International Journal for Quality in Health Care*, Volume 19, Issue 6, December 2007, Pages 349–357

² Guest G, Namey EE, Mitchell M. Focus groups. *Collecting Qualitative Data: A Field Manual for Applied Research*. 2013;55:172-222.