Supplemental file – Relationships between concepts belonging to the grounded theory, categories of the theoretical model, definitions of categories, and examples

|  |  |  |  |
| --- | --- | --- | --- |
| **Grounded theory concept** | **Category** | **Definition** | **Example** |
| Core concept | Aligning practice with the end purpose of optimizing social participation for persons with aphasia  | Extracts indicating that participants reflected on the ideal end purpose of aphasia rehabilitation and what it involved for their practice | “*I worry when I think ‘well we’re the last ones [in the care continuum], we don’t know if anyone will carry the ball, in the community’. So, I continue to care about that, it’s like I tell myself ‘start sooner [to address social participation], find ways to strengthen relationships [within the community].*”(more experienced, outpatient rehab, had SLP colleagues) |
| Conditions | Creating a sense of community through interaction | Extracts indicating that participants perceived they were part of a community of peers during their participation in the CoP | “*I felt supported, backed up and I told myself ‘worst case scenario, I have the [CoP] team that’s there, they can help me.’*”(less experienced, acute, sole SLP) |
| Collectively reflecting on practice | Extracts indicating that participants’ reflections were influenced by other members’ input during the CoP | “*What I also found interesting, what I got out of it, was our different points of view according to [rehabilitation] phases, our different points of view according to our experience.*” (less experienced, outpatient rehab, had SLP colleagues) |
| Actions | Feeling equipped to adopt new practices | Extracts indicating that participants prepared to implement changes about certain aspects of their practice | “*Well there are things that I’d like to implement, the famous notion of group [therapy], I’d like to, at some point, find a way [...] maybe I’ll have more English-speaking patients, so perhaps it’ll be easier.*”(more experienced, inpatient rehab, had SLP colleagues) |
| Adopting new practices  | Extracts indicating that participants integrated new tools or new practices | “*I have much better reflexes too: ‘can I call your wife? Or can I call your partner to discuss this or your daughter?’ And I realize that the scope of intervention is much greater. Already, even in acute care, it’s much larger.*” (less experienced, outpatient rehab, had SLP colleagues) |
| Advocating for better services for persons with aphasia  | Extracts indicating that participants acted at a higher organizational level to contribute to improving services for persons with aphasia  | “*My manager and my clinical coordinator, they’re taking a lot of notes right now [...] In fact I have an article right here. I read many papers so they can have the literature to support more therapy hours for outpatients.*”(more experienced, inpatient rehab, sole SLP) |
| Consequences | Increased self-confidence, motivation, well-being, and/or energy towards one’s practice  | Extracts indicating that participants felt either increased confidence, motivation, well-being, or energy towards their practice after their engagement in the CoP | “*It really grabbed my motivation, such that it gave me energy, it drove me. And it allowed me to enrich my clinical practice, and my clinical and scientific expertise.*”(less experienced, outpatient rehab, had SLP colleagues) |

.