

Supplementary Table 1 Presentation of qualitative findings regarding intervention acceptability

Theme	Participant	Example quote
IPOS acceptability		
Accessible		
User friendly	74 y/o man, NYHA III*	"there's very little filling in, like it's only putting a cross in the boxes"
	84 y/o woman, NYHA III	"It was easy to fill in"
Readability	73 y/o man, NYHA II*	"I would have been able to answer all that. Well ... I mean, I can read all that."
	89 y/o woman, NYHA III	"it's not a bit complicated"
Appropriate		
Relevant	Heart Failure Nurse 1	It addresses a lot of things that affect people's lives, you know factoring their financial...burden. Are they at peace ..? Then the physical component as well. So it did tap into their lives. And every part of your life.
	75 y/o man, NYHA II	"I think like the questions on the questionnaire are very good. ...Because there's a lot of things on it that would or would not apply. Now there's a lot of things that ... doesn't apply to me that I expect maybe could."
Applicable	Heart Failure Nurse 2	"See if they've graded... any of their symptoms and if it's number three or number four... it'd come to my mind immediately that this was a problem when they were first coming in, Like, if they had a pain, pain that was severe or their breathlessness that day was very severe, it was on my mind immediately."
	73 y/o man, NYHA III	"if you fill them in regularly, you'll see the changes. It would be useful to see if they're [the symptoms] getting worse"
	75 y/o man, NYHA II	"if [the HFN], discovered that I was filling part of this [IPOS] in a particular space then obviously I have a problem"
Education and training module acceptability		
Active learning	Heart Failure Nurse 2	"it's good to explain things and then discuss it afterwards, and I think we did, we had a frank enough discussion, and all our questions were answered."
Professional development	Heart Failure Nurse 4	"it was good case discussions .., just time to press the pause button and think about things...we had a lot of discussions about different cases, nice to hear other experiences, or maybe the way I look at things is different to the way my colleague looked at them"

* with self-acknowledged poor level of literacy

Supplementary Table 2 Study feasibility and acceptability a priori codes (and subthemes); demand, integration, practicalities, implementation, study design acceptability

Theme	Participant	Example quote
Demand		
Study recruitment	HFN2	"I suppose if you explain to them why you're doing it, and how it'll benefit them, then they're more likely to go at it"
	HFN4	"I'm not sure if the use of the phone calls to the patients, ..I think it's easier for them to opt out, number one...if it's face to face, and if they're in here, ... and they're sitting out there and they're waiting, it's a perfect opportunity, [to recruit them] isn't it"
Continued use	HFN3	"the IPOS questionnaire is ... certainly something I would like to bring into the clinic"
Fits within organisational culture	HFN3	"I think a lot of it [E&T, IPOS] was pertinent because I think we're doing a lot of it. That was my personal opinion. I think it's very much patient centred driven service. Patients are well informed and they can make their own informed choices on how they manage"
Integration		
Complement existing practice	HFN3	"I think the combination of this questionnaire plus the one we utilise in the clinic, I think they complement [each other], I put a little comment on my sheet to follow up on this [high scoring items on IPOS] in the future with them in clinic"
More comprehensive review	HFN3	"I wouldn't normally ask them about a sore or dry mouth. It wouldn't be one question I would ask them. Also essentially I don't personally ask them myself, do they feel anxious or worried about their health"
	HFN4	"the bit about anxiety and depression is not on our forms,..with the financial or personal, .. they would be extra on this form but wouldn't be on ours"
Practicalities		
Time	HFN1	"sometimes there's a busy clinic and you're more mindful of someone outside filling out a questionnaire ...So you'd have to give another few minutes then and come back to them because ... you want them to answer it appropriately, you don't want to be rushing their answers..It didn't impede my practice.....once it was completed that was it. I was able to take over and do my bit then"
Other demands	HFN4	"there was just too many other things going on. [it helped to have] a time frame, ... the audit was going on. So you can't focus on everything"
Integration	HFN3	"Perfect opportunity for the patients prior to coming into clinic [to complete IPOS while they waited to be reviewed]"

Abbreviations: HFN: Heart Failure Nurse; IPOS: Integrated Palliative care Outcome Scale

(continued)

Supplementary Table 2 Study feasibility and acceptability a priori codes (and subthemes); demand, integration, practicalities, implementation, study design acceptability

Implementation		
Translation into practice	HFN1	"Training was fine, it was, you know, I remember understanding it at the time but it wasn't until, you know, it's actually there in front of you and people are using it that you really get to grips with it"
Reminders	HFN2	"when you're trying to embed anything, I think you need that [visual reminders] at the beginning, because you know, you're so used to just the way your day goes, that it's easy to miss something that isn't there, nearly routine, But then if you, if, once that's done, then usually if that's done at the beginning then it, that's a great foundation, so you can just, you can go with it then"
Targets	HFN4	"I don't think it was a case that I didn't know what was going to happen, I just didn't focus on it, .. like the foot wasn't on the pedal ...and then I kind of had to focus...[given patient target] I think I knew, okay, we need 20 patients, between now and then"
Patient reminders	HFN2	"it doesn't take that long to fill out, they mightn't have filled out the back sometimes, you might have to remind them, but that was no big deal"
Acceptability of pre-post design		
Patient identification	HFN2	"It's just, getting into the habit of something is just having it in front of you. [list of patients to complete IPOS] Being reminded, someone to remind you. Like you know, just at the beginning"
	HFN4	"you're kind of, "Okay, well, what are we doing, where are going?" and .. it was right, pick a day, we're just going to book all these patients in, get them seen, and it's done."
Preparation	HFN4	"A little bit of an introduction.. this is what you would be doing.. I suppose I'm very much A, B, C, D, this is what you have to do"

Abbreviations: HFN: Heart Failure Nurse; IPOS: Integrated Palliative care Outcome Scale

Supplementary Table 3 Presentation of qualitative findings regarding perceived barriers to patient participation and acceptability of telephone quantitative interviews

Theme	Participant	Example quote
Challenges		
Barriers to participation	Heart Failure Nurse 1	"a lot of our patients ... their vision might not be great"
	Heart Failure Nurse 1	"with the elderly population, they're just a little bit reluctant to be filling out forms, and oh can someone else not do it for me, but the majority of people had no problem."
	Heart Failure Nurse 4	"they're [elderly patients] just not used to filling in forms."
Telephone quantitative interviews		
Acceptable	80 y/o woman, NYHA III, (TF)	"Not too frequent"
	72 y/o woman, NYHA III, (TF)	"Good time interval in between"
	74 y/o man, NYHA III, (TF)	"Not tiring. Wouldn't like them [telephone quantitative interviews] too long"
	75 y/o man, NYHA II, (TF)	"On the 'phone you can give a more relaxed answer, more in tune with who you are. You are in your own surroundings. 'Phone gets more out of me' Postal questionnaires coming and going, I just wouldn't get it"

Abbreviations: IPOS: Integrated Palliative care Outcome Scale; y/o: years old; TF: Telephone Feedback; NYHA: New York Heart Association.