

**Table: Qualitative analysis**

Key component of feasibility	Main themes associated with the key component identified	+/-	Source and number of quotes			Example of quote
			Post-workshop discussion session	Facilitator evaluation	Public participant evaluation	
<b>Acceptability</b>	General public as the target	+	1			<i>“It’s great to have an activity like this for the general public in a relaxed atmosphere”</i>
	Shared decision making and antibiotics as the subject	+			5	<i>“I learned about shared decision making”</i> <i>“The activity fits with the priorities of funding agencies and governmental organisations on controlling antibiotics use”</i>
	Role of speakers	+			4	<i>“The speakers spoke in a simple way, this was a good point”</i>
	Discussion between speakers	+	1	5	11	<i>“Interesting dialogue between the speakers”</i>
	Simplified terms	+			12	<i>“It was good that the language could be understood by ordinary people”</i>

	Clarity of the information	+			15	<i>“The information presented was very clear and easy to understand”</i>
	Involvement of experts	+		5	5	<i>“Presence of a physician”</i> <i>“Presence of a specialist in scientific communication”</i>
	Location	+			1	<i>“Libraries are a good location, good way to use libraries”</i>
<b>Demand</b>	Advertising	-	4	4	3	<i>“Important to have a good plan for publicity and do more advertising”</i>
<b>Implement- ation</b>	Collaboration of partners	+	1			<i>“The activity needs the collaboration of all the actors; the public library, the trainers and the scientific communicator”</i>
	Availability of trainers	+	1			<i>“Need to have backup if a trainer cannot attend”</i>
<b>Practicability</b>	Balance of time between speakers	-			1	<i>“More time for the physician”</i>
	Time for questions	+		1	5	<i>“Good to have time for questions”</i>
		-		1	4	<i>“Allowing questions after the first part of the workshop to promote interactivity”</i> <i>“More time for questions”</i>
	Evidence-based content	+			2	<i>“The content is based on evidence”</i>

	Interactivity	+		1	6	<i>“Good interactivity with the speakers”</i>
		-	1			<i>“The format must not be too interactive if we do not want to lose control”</i>
	Length of the workshop	-		1	1	<i>“Make the workshop longer”</i>
	Documentation	+			9	<i>“The documents given out were helpful”</i>
<b>Adaptation</b>	Payment for speakers	-	1			<i>“Trainers will need to be paid if you want to expand this because of the time it requires”</i>
	Distance for speakers	-	2			<i>“Trainers would prefer to train in a library in their own community, where they live”</i>
	Format	+	4			<i>“Do not need to be adapted as a web tutorial”</i>
		-	3		1	<i>“The activity could be transferred to a digital format or video to be presented on screens in the waiting rooms of medical clinics and more widely distributed”</i>
	Patient involvement	-	6	1		<i>“Include a patient in the activity who could share his/her experience of engaging in shared decision making in his encounters with a health professional”</i>
	Context	-	1		1	<i>“The activity could be adapted to different contexts, such as emergency medicine”</i>

<b>Integration</b>	Integration in the location of implementation	+	1			<i>“This activity fits well with the mission of public libraries”</i>
<b>Expansion</b>	Participants	-	4	1	2	<i>“To expand the activity to include other type of participants maybe more typical to those encountered in regular family practice”</i>  <i>“Present to other groups such as schools (high schools), policemen, fire fighters, social groups, community groups”</i>
Limited- efficacy testing	Knowledge	+	1			<i>“The program has led to a significant increase in the perception of knowledge gain”</i>
	Measurement	+	2			<i>“The retrospective pre-post test allows participants to have a better understanding of what they are being asked to assess”</i>

+ : Most appreciated

- : To be improved or to be modified