

Supplemental Appendix 1: Question prompts

1. In your view, thinking about the improvement task (handover/ discharge/ 1:1 / etc.)...
 - a) Can you describe the intended improvement for me?
 - b) To what extent is the need to change practice understood/ accepted?
 - c) To what extent is the way the improvement project is being implemented (nature/ purpose) understood?
 - d) To what extent is the new (clinical) task understood? (Clear? Concrete and measurable? Seen as feasible?)
 - e) How likely do you think it is to succeed or fail (and why: e.g. what are the risks/ downsides and benefits)?

2. Thinking about your own role in the improvement project, what skills do you think you personally bring to the task that will help achieve the improvement?

3. How would you say you have acquired those skills?
 - f) E.g. training and personal development in general/ training specific to this project/ experience
 - g) In what style/ methods (e.g. sheep dips, didactic courses, on the job, COPs, etc)?
 - h) How strongly supported? (e.g. training time sacrosanct or low priority?)

4. Do you personally feel the need for more skills to accomplish this improvement? If so which?

5. Thinking of all the people involved in undertaking this change in practice, what other skills do you think have played a part so far / will be needed/ have been lacking?

6. What would you say have been the strengths and weaknesses in terms of how all those involved have been managing it? Thinking in those terms, what does this say about the kinds of skills required?

As they answer this, we need, conversationally, to help them consider the points on the next (supplementary) sheet that the literature suggests may be important factors and to probe whether the skills deployed have been appropriate to these factors.

Try to make sure we mention all four headings (C-F, see also below here), then go deeper as appropriate using the next sheet as a prompt

- The way it's being implemented
- 'Local' organisational culture, attitudes, relationships, boundaries, leadership, etc
- Senior leadership / espoused culture
- Resourcing

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- A. The nature of the improvement (dealt with in earlier questions)
- B. The appropriateness of skills training (dealt with in earlier questions)
- C. The way it's being implemented
 - i. To what extent the improvement task has been genuinely bottom-up or 'externally' imposed
 - ii. The incentives/ motivation that are / aren't in place to make the change
 - iii. The degree of collective agreement about the change? (e.g. of individual and collective commitment to it – including who is and who isn't committed and why/ not)
 - iv. If/ how it's linked to other QI work; e.g. whether it's a one-off project or part of a continual process of improvement
 - v. Any synergy with other organisational objectives vs being one of many 'spray and pray' initiatives
 - vi. How it's aligned with external environment, e.g. policy
- D. 'Local' organisational culture, attitudes, relationships, boundaries, leadership, etc
 - i. Professional attitudes/ traditions
 - ii. Interprofessional relationships / boundaries / degree of cross disciplinary working and support
 - iii. Degree of 'sense of commitment' across all the involved parties. (e.g. whether their immediate colleagues / others in the service are committed to it)
 - iv. Clinicians' links with/ attitudes about managers and managerially driven change
 - v. Adequacy of local leadership (and followership) of project
- E. Senior leadership / espoused culture
 - i. Adequacy of senior commitment to quality (in terms of both competence and actual involvement)
 - ii. Type of QI culture (obviously these and the following questions are about degree and balance, not either/ or) e.g.
 - Hierarchy: authoritarian vs flat / dictatorial vs inclusive
 - Blame culture vs learning organisation
 - Real embedding of QI vs mere mouthing of QI mantras
 - Performance management vs empowerment
- F. Resourcing
 - i. Adequacy of numbers/ quality of staff (including calibre of local project leaders)
 - ii. Adequacy of availability of people with appropriate QI skills
 - iii. Adequacy of time and space for the QI task (e.g. minimising competing initiatives)
 - iv. Whether any other resource needs for the task/ team are adequately covered