Table S3. Doctors’ and nurses’ views on barriers to implementing alcohol screening and brief interventions at the baseline and 12-month follow-up (intervention arm).

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **BCW****Component** | **TDF****Domain** | **Construct** | **Item** | **Baseline** | **Follow-up** | **p** | **d** | **BF** |
| Capability | D1 Knowledge | Knowledge | I know the content and objectives of the guideline on alcohol screening and brief intervention | 3.7±1.4 | 5.3±0.9 | <0.001 | 1.28 | >100 |
| Procedural knowledge | I know how to screen for alcohol misuse and how to deliver a brief intervention | 3.7±1.5 | 5.4±0.9 | <0.001 | 1.36 | >100 |
| D2Skills | Skills | I have been trained on how to screen for alcohol misuse and how to deliver a brief intervention | 2.9±1.7 | 5.1±1.6 | <0.001 | 1.33 | >100 |
| I have the skills to screen for alcohol misuse and to deliver a brief intervention | 3.3±1.3 | 5.1±1.0 | <0.001 | 1.46 | >100 |
| Motivation | D3Social/ professionalrole and identity | Professional role | Screening and advising for alcohol misuse are part of my work as a doctor/nurse | 5.5±1.0 | 5.8±0.9 | 0.01 | 0.29 | 2.8 |
| It is my responsibility as a doctor/nurse to screen and advise for alcohol misuse | 5.6±1.0 | 5.8±0.9 | 0.02 | 0.26 | 1.5 |
| D4Beliefs aboutcapabilities | Self-efficacy | I am confident that I can screen and advise for alcohol misuse even when the patient is not motivated | 4.3±1.3 | 4.9±1.3 | <0.001 | 0.40 | 32.8 |
| I am confident that I can screen and advise for alcohol misuse even when there is little time | 3.7±1.5 | 4.7±1.1 | <0.001 | 0.77 | >100 |
| Perceived behaviouralcontrol | For me, screening and advising for alcohol misuse isdifficult | 4.5±1.0 | 3.6±1.2 | <0.001 | 0.66 | >100 |
| D5Optimism | Optimism | With regard to screening and advising for alcohol misuse I am always optimistic about the future | 3.8±1.1 | 4.4±0.9 | <0.001 | 0.46 | >100 |
| With regard to screening and advising for alcohol misuse overall, I expect more good things to happen than bad | 4.1±1.0 | 4.5±0.9 | 0.002 | 0.36 | 12.0 |
| D6Beliefs aboutconsequences | Outcomeexpectancies | If I screen and advise for alcohol misuse it will benefit public health | 5.8±1.2 | 6.1±1.0 | 0.009 | 0.30 | 3.5 |
| If I screen and advise for alcohol misuse it will have disadvantages for my relationship with the patient | 3.0±1.1 | 2.9±1.4 | 0.89 | 0.02 | 0.13 |
| Motivation | D7 Reinforcement | Reinforcement | Whenever I screen and advise for alcohol misuse, I feel like I am making a difference | 4.9±1.2 | 5.4±1.0 | <0.001 | 0.42 | 51.9 |
| Whenever I screen and advise for alcohol misuse, I get recognition from professionals who are important to me | 4.0±1.0 | 4.4±1.0 | 0.007 | 0.31 | 4.2 |
| D8Intention | Intention | I intend to screen and advise for alcohol misuse in the next appointment | 4.7±1.1 | 5.2±0.9 | <0.001 | 0.49 | >100 |
| I will definitely screen and advise for alcohol misuse in the next appointment | 4.4±1.0 | 4.9±1.1 | <0.001 | 0.46 | >100 |
| D9Goals | Action planning | I have a clear plan of how often I will screen and advise for alcohol misuse | 3.7±1.0 | 4.2±1.0 | <0.001 | 0.49 | >100 |
| Priority | Generally, I am more pressured to cover something else than to screen and advise for alcohol misuse | 5.0±1.4 | 5.1±1.3 | 0.50 | 0.07 | 0.16 |
| Capability | D10Memory, attentionand decision processes | Memory | Screening and advising for alcohol misuse are difficult to remember | 3.7±1.1 | 3.4±1.1 | 0.07 | 0.21 | 0.63 |
| I often need to check the guideline on alcohol screening and brief intervention before screening and advising for alcohol misuse | 4.4±1.2 | 3.6±1.1 | <0.001 | 0.68 | >100 |
| Opportunity | D11Environmentalcontext and resources | Resources/ material resources | Screening and advising for alcohol misuse have a good fit with routine practice | 4.2±1.3 | 4.4±1.1 | 0.17 | 0.16 | 0.31 |
| In the organization I work screening and advising for alcohol misuse is routine | 3.7±1.4 | 4.3±1.2 | 0.001 | 0.38 | 18.4 |
| In the organization I work there is enough time to screen and advise for alcohol misuse | 3.0±1.2 | 3.4±1.3 | 0.008 | 0.31 | 3.88 |
| In the organization I work I have the tools to screen and advise for alcohol misuse | 3.7±1.2 | 5.1±1.0 | <0.001 | 1.13 | >100 |
| In the organization I work I have a working network for referring patients with alcohol dependence | 3.7±1.4 | 4.8±1.1 | <0.001 | 0.75 | >100 |
| Opportunity | D12Social influences | Social support | I can rely on a dedicated team of professionals when things get tough when screening and advising for alcohol misuse | 3.7±1.4 | 4.7±1.3 | <0.001 | 0.67 | >100 |
| I can rely on my colleagues when things get tough when screening and advising for alcohol misuse | 4.1±1.2 | 4.8±1.1 | <0.001 | 0.51 | >100 |
| Motivation | D13Emotion | Affect | I feel nervous when screening and advising for alcoholmisuse | 3.4±1.2 | 2.7±1.1 | <0.001 | 0.50 | >100 |
| Capability | D14Behavioralregulation | Automaticity | Screening and advising for alcohol misuse is something I do automatically | 3.4±1.4 | 4.2±1.2 | <0.001 | 0.60 | >100 |
| Self-monitoring | I tend to notice my successes while working towards screening and advising for alcohol misuse | 4.5±0.9 | 5.0±1.0 | <0.001 | 0.51 | >100 |
| Action planning | I have a clear plan when I will screen and advise for alcohol misuse | 3.3±1.3 | 4.2±1.0 | <0.001 | 0.86 | >100 |
| I have a clear plan of how I will screen and advise for alcohol misuse | 3.2±1.3 | 4.5±1.0 | <0.001 | 1.11 | >100 |

BF: Bayes Factor; D: Domain