

Table 1

Consolidated criteria for reporting qualitative studies (COREQ): 32-item checklist

| No | Item | Guide questions/description |
|--|-------------------------|---|
| Domain 1: Research team and reflexivity | | |
| Personal Characteristics | | |
| 1. | Interviewer/facilitator | Which author/s conducted the interview or focus group? Dr Daniella Holland-Hart Dr Grace McCutchan Dr Harriet Quinn-Scoggins Dr Lucy Hill |
| 2. | Credentials | What were the researcher's credentials? <i>E.g. PhD, MD</i> PhD |
| 3. | Occupation | What was their occupation at the time of the study? (DHH, GM, HQS) Research Associate, Cardiff University (LH) Research Assistant, Hywel Dda University Health Board |
| 4. | Gender | Was the researcher male or female? Female |
| 5. | Experience and training | What experience or training did the researcher have? All researchers have extensive expertise in doing interviews and facilitating focus groups. They all hold an updated GCP certificate and hold PhD's. |
| Relationship with participants | | |

| No | Item | Guide questions/description |
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| 6. | Relationship established | Was a relationship established prior to study commencement? No relationship but the researchers used their research experience and training to introduce the research study and mitigate the asymmetry of information between the different parties. |
| 7. | Participant knowledge of the interviewer | What did the participants know about the researcher? <i>e.g. personal goals, reasons for doing the research</i> Reasons for doing the research |
| 8. | Interviewer characteristics | What characteristics were reported about the interviewer/facilitator? <i>e.g. Bias, assumptions, reasons and interests in the research topic</i> None reported |
| Domain 2: study design | | |
| Theoretical framework | | |
| 9. | Methodological orientation and Theory | What methodological orientation was stated to underpin the study? <i>e.g. grounded theory, discourse analysis, ethnography, phenomenology, content analysis</i> Thematic analysis was used. The conceptual thematic framework used in the study is described in the methodology section. |
| Participant selection | | |
| 10. | Sampling | How were participants selected? <i>e.g. purposive, convenience, consecutive, snowball</i> The sample were self-selecting for focus groups but fulfilled set criteria. Patients interviewed were self-selected and clinicians were self-selecting after initial |

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| | | invites were sent out from the research team. |
| 11. | Method of approach | How were participants approached? <i>e.g. face-to-face, telephone, mail, email</i> Face to face and via telephone. |
| 12. | Sample size | How many participants were in the study? 30 |
| 13. | Non-participation | How many people refused to participate or dropped out? Reasons? Ten patients initially consented to the qualitative element; of these, three patients subsequently declined to participate, two were not contactable and four were interviewed. Two patients stated a lack of time for declining interview participation and another stated that as a non-smoker they had been incorrectly referred. |
| Setting | | |
| 14. | Setting of data collection | Where was the data collected? <i>e.g. home, clinic, workplace</i> At home or over the telephone. |
| 15. | Presence of non-participants | Was anyone else present besides the participants and researchers? A partner was present in some interviews |
| 16. | Description of sample | What are the important characteristics of the sample? <i>e.g. demographic data, date</i> Geographical area related to socio-economic background. Gender |
| Data collection | | |
| 17. | Interview guide | Were questions, prompts, guides provided by the authors? Was it pilot tested? Interview schedules included prompts and were tested by the qualitative research team (HQS, DHH, GM, KB). |

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| | | Patient representatives also tested the topic guides' questions. |
| 18. | Repeat interviews | Were repeat interviews carried out? If yes, how many? No repeat interviews |
| 19. | Audio/visual recording | Did the research use audio or visual recording to collect the data? All interviews were audio recorded |
| 20. | Field notes | Were field notes made during and/or after the interview or focus group? Field notes were made during the focus groups |
| 21. | Duration | What was the duration of the interviews or focus group? 51-62 minutes focus groups 23-45 minutes interviews |
| 22. | Data saturation | Was data saturation discussed? Yes, this was discussed within the team to ensure that there were no further main themes to be explored. |
| 23. | Transcripts returned | Were transcripts returned to participants for comment and/or correction? No, this was not done |
| Domain 3: analysis and findings | | |
| Data analysis | | |
| 24. | Number of data coders | How many data coders coded the data? 3 data coders (DHH), (GM) and (KB) |
| 25. | Description of the coding tree | Did authors provide a description of the coding tree? Coding tree is available |
| 26. | Derivation of themes | Were themes identified in advance or derived from the data? |

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| | | Derived from the data itself |
| 27. | Software | What software, if applicable, was used to manage the data? NVivo 11 |
| 28. | Participant checking | Did participants provide feedback on the findings? All participants were sent the main findings but no feedback was provided. |
| Reporting | | |
| 29. | Quotations presented | Were participant quotations presented to illustrate the themes / findings? Was each quotation identified? <i>e.g. participant number</i> All main themes were illustrated by quotes. Each quotation was followed by a code denoting whether it was a patient or healthcare professional interview or focus group. This code is explained in the text. |
| 30. | Data and findings consistent | Was there consistency between the data presented and the findings? All main themes were illustrated by quotes, supplementary materials provide further evidence of these points and consistency. |
| 31. | Clarity of major themes | Were major themes clearly presented in the findings? Major themes formed the basis of the presentation of the qualitative analysis, reflecting the purpose of the overall study (acceptability and feasibility of the cancer pathway, campaign promotion) and derived from the data itself on responses. |
| 32. | Clarity of minor themes | Is there a description of diverse cases or discussion of minor themes? Sub themes and diverse cases are also discussed throughout the text. |