Table 5. Mixed-methods analysis aligned with the New World Kirkpatrick Evaluation Framework.

Level (1-4)[†]	Sub-Component	Measure	N (%)
(1) Reaction	Reach	Channel for receipt of the resource[a]	
		A course learning resource	11 (61.1)
		Recommended by peer / colleague	8 (44.4)
		Type of User[a]	
		Healthcare professional	18 (100)
		'I think everybody, all healthcare professionals, regardless of their hierarchy or their background, would benefit' [ID104, Female, Doctor] *'I feel like most health professionals should know about it so they can pass it on to patients, their relatives, staff'. [ID103, Female, CSW manager]*	
	Use	Helpful or very helpful rating	18 (100)
		Problems with use (% yes)	
		No problems	16 (88.9)
		Technical issues	2 (11.1)
		Level of difficulty	0 (0.0)
		Language difficulty	0 (0.0)
		Contextual or cultural differences	0 (0.0)
		Other issues (e.g., personal device issue, lack of time to complete)	0 (0.0)
		'this training was very structured and it's standardised' [ID104, Female, Doctor] *'succinct enough that they kept my attention.... the fact they had transcripts there, that was great.'* [ID102, Male, ACP] *'it was really good with the voiceovers as well...I sometimes struggle with my reading, so actually having it to listen to was really helpful'* [ID113, Female, Nurse]	
	Satisfaction	Would recommend to others	18 (100)
		'I think it's invaluable.' [ID105, Male, Doctor] *'I really enjoyed doing it'* [ID112, Female, Nurse] *'it's really been educative, and you know, it stimulates the way one learns quickly … it's something that everyone would be happy to do any time'* [ID115, Male, Doctor]	
	Engagement	View towards interactive elements:	-
		'it's been quite informative and quite interactive' [ID108, Female, Nurse] *'the use of video, the use of quizzes.''* [ID105, Male, Doctor] *'I think you remember it more when you're actively doing something'* [ID112, Female, Nurse]	
	Relevance	Relevance to self or others:	-
		'very relevant, I think in A&E … we get so many alcohol related injuries in the whole population ... from the students right through to the elderly.' [ID108, Female, Nurse] *it is something we deal with every day, like multiple of our patients in our teams will be alcohol related or drug related'*	

		[ID110, Female, Nurse]	
(2) Learning	Knowledge	Learned something new: *'I like the kind of the tools that were involved. Yeah, it gave me some food for thought,' [ID102, Male, ACP]* *'the reference to the AUDIT-C umm tool for screening for alcohol. Pretty simple questions, really nice stratification of risk '[ID105, Male, Doctor]* *'I know how to easily … keep on track, engage with them, keep on track with the conversation because it's all straight in my head' [ID115, Male, Doctor]*	-
	Skill	Feeling equipped with useful knowledge: *'when I'm talking to patients or colleagues … about their alcohol, about their relationship and its potential impact, I think it will help … give me a bit more structure, which I'm not doing now … how I approach the subject and allow them to talk so we can move through it together'. [ID102, Male, ACP]* *'I'm learning to even incorporate all of those social determinants of health just to find out and yes, it does give us a lot of information to me, as a doctor to decide and help personalise care for this patient based on their individual circumstances' [ID104, Female, Doctor]* *'it was a good resource to learn about how to initiate that conversation with people who aren't necessarily being admitted to ED for alcohol use. So I thought that that aspect of it was quite handy cause it is a bit of an awkward conversation to have, isn't it?' [ID110, Female, Nurse]* *'it's given me more of an insight into what exactly to ask to cut out all the 'gobbledygook' and just get to the point. But at the same time have that patient relationship but know exactly what the important questions are to ask as opposed to going through a whole quiz about drinking.' [ID109, Female, Urgent care practitioner]*	-
	Attitude	Views towards alcohol prevention and/or SBIRT: *'we have to start talking about health improvement' [ID110, Female, Nurse]* *'I hope it empowers people to that, you know, actually, we're all responsible for having these conversations, and we all can have an impact on a patient's health and well-being. So we should be having these conversations' [ID106, Female, ACP]* *'I think it should be less of a taboo and I think the more we have these conversations with patients, the easier it comes for us just to make it into our, like our normal' [ID107, Female, ACP]* *'I think A&E is a great place to kind of capture people and make…meaningful kind of adjustments or impacts' [ID102, Male, ACP]* *'if we've got people with better health kind of knowledge it could lead to better outcomes. So ultimately it leads to a reduced stress on the system. Potentially' [ID102, Male, ACP]*	-
	Confidence	Increased confidence to deliver SBIRT *'I think once you've had that extra training, you've got the knowledge base and you know where to signpost people,' [ID108, Female, Nurse]*	-

		'it just helps them [staff] become better communicators with our patients, you know, like the videos making sure that we're not, we're not kind of coming across as judgmental.' [ID106, Female, ACP] *'..had I received that, that teaching, that training, looked at that resource, six, seven, eight years ago when I was a more junior member of staff, absolutely it would have given me the confidence'* [ID106, Female , ACP] *'it has reinforced me in, in having this confidence that whatever I am doing and the approach that I have had so far'* [ID104, Female, Doctor] *'it's giving me more confidence and understanding'* [ID107, Female, ACP] *'I feel, I feel a lot more comfortable talking about it'* [ID111, Female, Nurse]	
	Commitment	Estimated future use and resource sharing: *'that's really good. I'll implement that, that's a really simple thing I can do'* [ID112, Female, Nurse] *'I think I would want to be able to share it to perhaps other people. If they were like learning how to give out advice, absolutely I think it would probably benefit a lot of people'.* [ID106, Female, ACP]	-
(3) Transfer/ Behaviour	Behavioural intention and/or behavioural changes	User application of knowledge and reported behavioural intentions and/or changes *'I'll be referring, referring them to alcohol specialists or the teams that we have on site'* [ID101, Female, EDA]	-
	Required drivers	Target audiences and mechanisms for dissemination (i.e., who should use SBIRT, approaches for transfer of learning into practice, and when should it happen) *'It should be everyone… who has a contact to the patient and depending on who, who is able to see the patient first'* [ID115, Male, Doctor] *'just everybody because I think everybody has got the opportunity to, to give that advice even if it's just 5 minutes'* [ID106, Female, ACP] *'it's the approachability of that person. So if, like the doctor says, well I've tried to have this conversation with this patient, would you mind just going in and seeing if you can get them to open up a little bit more, if we support each other within the wider team'* [ID110, Female, Nurse] *'sometimes the quiet 10 minute chat you get is when you've taken a patient round to X-ray. So that could be a nurse, an EDA, CSW.'* [ID113, Female, Nurse] *'Like we work together as a unit, I feel like that would be quite a good way to get rid of those kind of barriers'.*[ID110, Female, Nurse]	-

[†] Level descriptors - Level 1: *Reaction*; Level 2: *Learning*; Level 3: *Transfer / Behaviour*
[a] Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option).
ACP: Advanced Clinical Practitioner; EDA: Emergency Department Assistant; CSW: Clinical Support Worker; A&E: Accident and Emergency.