GP

**On-line Appendix 3: Intervention group: composite case study of carer experience**

HINDER? --BELIEFS – HELP?

* All intervention cases showed evidence of beliefs which initially hindered, reduced or delayed pain control

(pre- CCMM)

* Being listened to and previous experience increases confidence
* Beliefs about role and involvement are valuable to carers

Local/social context:

* 1x husband pt/wife carer; 2 x father pt/daughter carer; 1 x sister/sister; 1 x mother pt/daughter carer

SKILLS

* All intervention cases had skills which were improved and/or reinforced in various areas of medicines optimisation: routines, practice, systems, recording and planning
* Dyads had established processes for medicines management prior to CCMM

CHANGE NOW & IN FUTURE

* All intervention cases showed change now, some for future.
* Changes included, beliefs no longer hindering use of pain control medicines, higher priority of pain control, improved systems for giving and recording meds, research participation helps improve learning, improved communication, acceptance of need for opiates, future plan for dosette box.

SELF EVALUATION

* Was evident in all intervention cases, referred to improved communication, improved understanding, improved pain control, improved planning, importance of carer role
* Change between Weeks 1 and 4: self-awareness or of medicines situation and approach. 1 carer said had learnt things through participating in the study (research interview).

KNOWLEDGE (INFORMATION)

* All intervention cases had their knowledge reinforced, or increased, possibly due to CCMM (having written record/written information)
* Most intervention cases had some previous knowledge or experience of caring, medicines, or end-of-life cancer
* Two patients taking medicines differently after using toolkit