



University of
Central Lancashire
UCLan



Interviews with GPs – schedule Phase 1

Study title: Implementing effective primary care responses to mental distress (DeStress-2 study)

- Thank participants for participating.
- Go through the participant information sheet and answer any questions.
- Go through consent form and get informed consent for participation and use of audio recorder.
- Explain purpose of the discussion. Remind participants that there are no right or wrong answers.
- Remind people that they do not have to answer any questions if they do not want to and that they are free to stop the interview whenever they wish.

Discussion

- 1) Collect basic demographic data (first name, age, ethnicity, time since qualified as GP, time at practice).
- 2) How did you experience the DeStress training – what did you like; was there anything that was less good.
- 3) What were the main points you took away from the training?
- 4) How did the key messages of the training align with or differ from what you were doing in consultations.
- 5) Has the training had an impact on the way that you undertake consultations with low-income patients. If yes, how; if not, why not.
- 6) How do you feel this style of consultation has been received by your patients. Prompt discussion on how this may affect different patient groups e.g. based on age, gender, ethnicity.
- 7) What are the main barriers and enablers you face to consulting in this way/style i) at individual level; ii) at surgery level. Is there anything else particular to your local context/ culture that support this style of practice or made it hard to implement.
- 8) Do you feel that you/your colleagues in social prescribing, mental health practitioner etc have a good awareness of each other's roles? How do you feel that all staff in your practice could work more collaboratively to support these patients? What's working well/less well? *Would it be helpful to understand more about this? Where appropriate, prompt discussion on mini case study of practice working/collaboration across staff.*
- 9) Do you have any recommendations for how the training and adapted consultation can be further refined. E.g., form of delivery; content; length etc.

- 10) Are there any further materials that we could provide that would help you in your consultations? E.g., leaflets on antidepressants; Bio-Psychosocial-Social diagram.

Interviews with GPs – schedule Phase 2

Study title: Implementing effective primary care responses to mental distress (DeStress-2 study)

- Thank participants for participating.
- Go through the participant information sheet and answer any questions.
- Go through consent form and get informed consent for participation and use of audio recorder.
- Explain purpose of the discussion. Remind participants that there are no right or wrong answers.
- Remind people that they do not have to answer any questions if they do not want to and that they are free to stop the interview whenever they wish.

Discussion

- 1) Collect basic demographic data (first name, age, ethnicity, time since qualified as GP, time at practice).
- 2) Who facilitated the training? If you, how did you find this? Were the instructions helpful/could they be improved?
- 3) How many people in your practice attended the online training? What are their roles in the practice?
- 4) How did you experience the DeStress training – what did you like; was there anything that was less good?
- 5) Did you manage to complete the training?
- 6) Did the training prompt useful discussion? What in particular was helpful and why?
- 7) What was the key learning your practice took from the training?
- 8) How did the key messages of the training align with or differ from what you were doing in consultations.
- 9) Has the training had an impact on the way that you undertake consultations with low-income patients. If yes, how; if not, why not.
- 10) Has the training impacted on the way you work as a team or with people/groups beyond the practice?
- 11) What are the main barriers and enablers you face to adapting consultation practice i) at individual level; ii) at surgery level. Is there anything else particular to your local context/ culture that supported the training or made it hard to implement.
- 12) How do you feel the adapted consultation has been received by your patients. Prompt discussion on how this may affect different patient groups e.g., based on age, gender, ethnicity.
- 13) Do you have any recommendations for how the training and adapted consultation can be further refined.