

QUESTIONNAIRE FOR WITHDRAWN PRACTICES

To help us understand the reasons why practices were unable to continue participation in ESTEEM please complete the form below:

Practice Name: _____ Randomised to: _____

Completed by: _____ Date: _____

What were the main reasons for withdrawing from ESTEEM? (tick all that apply):

1. Dissatisfaction with the Trial arm randomised to.

2. The practice was under-resourced to cope with the demands of ESTEEM (*tick all that apply*):
 - Difficulty recruiting additional staff
 - Difficulty extending staff hours as needed
 - Other, **please provide details**

3. Your practice experienced unexpected extenuating circumstances (*tick all that apply*):
 - Long-term sickness of key staff member(s)
 - Retirement/resignation of key staff member(s)
 - Other, **please provide details**

4. Insufficient 'buy-in' from all members of practice staff

5. Lack of support from the research team

6. Change of practice IT system

7. Change of practice premises

8. Triage system implemented between being recruited and starting the trial

9. Other, please state:
Please add any further comments overleaf