



Interviews with GPs as part of the CASPERPlus study Key Questions

Key Questions for GPs

Thoughts and views

GP's views on BA and Collaborative Care (CC)

- Why did your practice take part and why did you agree to be interviewed? (e.g. interest in mental health or research?)
- What do you know about the intervention, BA?
- How do you see BA fitting within CC framework?
- What is your understanding of CC for mental health? Do you see it as *different* to shared care? What sort of collaboration do you do currently, i.e. co-located, face to face? What is your role in delivering this?
- What are your views on the potential, value and effectiveness of CC?
- Do you think your patients understand what CC is? Why do you think they get involved in research?
- What do you think of the plan that people over 75 should have a named GP?
- How do they see your own role in managing depression for older people?
- What do you do as a GP for this group?
- What is your usual treatment pathway for patients with moderate to severe depression?
- If medication, how do you see the CM's involvement (if at all) in this area of patient care?
- How do you see the role of the CM? CM has been described as the glue that keeps CC together, would you agree?
- Are you aware of any contact by the CMs with patients' carers or families?
- Has your awareness of CC affected your attitude to identifying or addressing depression in older people?

Experiences:

- Since we've started recruiting from your practice, what has been your experience in general?
- What is the practice procedure for dealing with mental health? (prompt) e.g. is there a GP to whom patients automatically gravitate?
- Your experiences of delivering CC for older people with depression?

Experiences of Medication Management:

- Have any CMs contacted you about any patient medication issues?
- How do you think medication management might fit in with collaborative care delivered through primary care?

Operational Questions

Preferred method of communication.

- How, and how often would you *prefer* to be contacted?
- At what point in the process?
- Do you view letters from CMs? (sent at four stages)
 1. at consent stage
 2. with patient's GDS-15 score and management plan
 3. after four or five sessions
 4. on completion
- What is the usual process in the practice when receiving these letters?
- Do you remember seeing any of these letters? Did you respond to them?
- Have you spoken to the CMs personally?

Speculative questions

- If CC were implemented into practice, what would your thoughts be?
- Is this something you could see working?
- What barriers do you see?
- How do you think it might be possible?
- What do you see as your role in Collaborative Care?

Views on CM's role?

- What do you see as the CM's role, e.g. medication management?
- How would you like this role to work?
- What are your thoughts on CMs working within the practice?

Perceived differences between telephone and face-to-face contact

- What do you see as the differences between telephone and face-to-face contact between CMs and their patients?
- Any other thoughts on making the CC model a sustainable process?

Any other issues?

- Any other issue you would like to raise
- Thank you