

Semi structured Interview Instrument

Factual Information

About the Assessor:

Practitioner's role (e.g. nurse, social worker):

Years of service in CRHTT:

About the Referral:

Source of referral (e.g. GP, locality team):

Reason for referral (according to referrer):

Before the Assessment:

Feel for the referral: from the information received/ gathered did you have any thoughts on the referral's appropriateness for CRHTT?

Can you please elaborate?

Notes for the interviewer

Capture potential reasons for theory / category generation:

(Suicide risk, Self harm, Medication compliance, Risk to others, Support, Major life events/ crisis, carers availability, Others)–

During the assessment:

Will you please tell us about the assessment?

Notes for the interviewer:

- *Ensure all aspects of SBAR are covered (Situation, Background, Assessment and Recommendation).*
- *Cover predisposing, precipitating, perpetuating and protective factors.*
- *Gain an understanding of the bio – psycho – social formulation of the assessor.*
- *Gain an understanding of the different factors that influenced the clinician's decision.*

Specific questions to be covered:

- What was your understanding of the patient's needs/ crisis?
- Could anything be done to meet those needs? Please tell us more (for both yes and no answers try and get to why)

- Did the patient have any expectations from CRHTT/the assessment? Please tell us more (for both yes and no answers try and get to why)
- Did the patient have any thoughts about how their needs could be met? Please tell us more (for both yes and no answers try and get to why, If yes also establish how?)
- Please share your thoughts about your understanding relating to patient needs pre and post assessment. Was there any change? (If yes also establish how was it different and why did it change)
- Please share your thoughts about patient's understanding of their needs pre and post assessment. Was there any change? (If yes also establish how was it different and why did it change)
- Were carer's involved in the assessment or their views taken into account? For both yes and no establish why. If yes also establish how they influenced the decision?
- Was there anything that influenced your final decision? If yes what was it, how did it influence your decision. Explore diagnosis. Explore comorbidity. Explore severity of illness. Explore acuity of illness. Explore level of risk short term and long term. Explore imminence. Explore predisposing, precipitating, perpetuating and protective factors. Explore willingness to engage and safety plan. Explore biological, psychological and social factor.(e.g. housing, job, relationship, bereavement)
- Were there any other factors that influenced your decision? Explore factors that are more to do with service provision rather than patient presentation (e.g. relating to referral – who is the referrer, quality of referral, perception of referral, Current CRHTT workload, day of the week - Friday/weekend, staffing, bed availability)

On balance of probability (risk versus safety) what was the decision made?