



The PRIMER (**P**Ractitioner **M**anaging Suicid**E** Risk) Study

GP FOCUS GROUP TOPIC GUIDE

Sign-In Form:

Demographic questions (age, gender, time in post, practice size).

Introductions:

My name is [insert name], and this is my colleague, [insert name]
Thank you for agreeing to participate.

Purpose:

- Who we are, and what we are trying to do
- What we will do with the information
- Why you were asked to participate

We know that suicide is among the top three causes of death in young people, and that GPs will encounter indicators of possible suicide risk, including depression, or suicide in their clinical work with this group. However, even experienced GPs sometimes may find suicide assessment/intervention with young people challenging.

What we are trying to do is find out what challenges do some GPs encounter in terms of knowledge and skills in identifying and managing suicide risk in young people aged 14-25. Our aim is to work in consultation with GPs to develop an educational intervention for youth suicide prevention for GPs.

We are meeting today to talk about your clinical expertise in identifying, communicating with, and managing young people aged 14-25 years at risk of suicide. The purpose is to hear your valuable views about the topics we need to include to create an effective suicide intervention workshop for GPs.

Procedure:

[Insert name] will be taking notes and also tape recording the discussion so that we do not miss anything that is said and to ensure accuracy. As explained in the Information Sheet, whatever is said will be kept confidential. We will not identify who said what in any of our write-up documents. Feel free to respond to me or your colleagues without waiting to be asked to comment. There are no right or wrong answers. You can agree and disagree with each other, and feel free to change your mind. We have many topics to cover, so at times I will move us along.

Logistics:

This discussion will last approximately one hour.
Feel free to move around.
Help yourself to refreshments.

Ground Rules:

I would appreciate it if only one person speaks at a time.

Participant Introduction:

Any questions before we start?

Let us start with everyone sharing their name, where they practice, and how long they've been practising in primary care.

Questions:

Let's start the discussion by talking about how you work with young people who are at risk of suicide and how to improve the treatment and prevention of suicidal behaviour in young people in primary care.

Knowledge and confidence in identifying suicide risk factors/early warning signs

1. Have you recently or in the past had to manage any young people at risk of suicide?
2. What would you like to know about suicide risk factors/early warning signs of suicide intention in young people to enable you to carry out effective suicide risk assessments?

Probe: What other areas of knowledge do you think it would be necessary for you to have?

3. How would you distinguish between young people seriously considering suicide and those mildly depressed and not suicidal?

Target of the intervention

1. What kind of training have you attended to manage young people at risk of suicide?
Probe: What was your experience of this training? What could be improved?
2. To respond to signs of potential suicide in young people, what areas of risk assessment and management do you feel you need more training in?
Probe: How do you think a workshop could address those issues?
3. Was anything missing from the training that you expected to cover?
Probe: If so, what?
4. Based on the results of a training needs analysis we conducted with GPs from practices in Nottingham city, we found that some GPs hold negative views towards young suicidal people. Do you think that changing GPs negative views could be a potential area for education and, if so, how?
5. Do you believe GP knowledge, skills, and views are equally important areas for improvement to intervene effectively with young people at risk of suicide?
Probe: Why? Why not?
6. Do you think that an educational package on youth suicide prevention should cover communication skills specific around young people and their families?
Probe: If so, why?
7. What concerns do you have about balancing confidentiality and disclosure of risk when working with young people at risk of suicide? For example, what are some of your concerns about encouraging under 16 year olds to involve their parents in the issues they are facing?
8. To more effectively support young people at risk of suicide, do you think it would be helpful to know more about how to involve other people (e.g. family members and friends)

Structure & setting for delivery of intervention

1. What type of setting would be best for delivering the suicide prevention intervention specifically for GPs to increase their participation?
Probe: What, if any, incentives would influence GPs to attend?

2. How long do you think an education intervention on youth suicide prevention should be?
3. How frequently would you like the sessions to be?
4. How do you feel about providing booster sessions after the main educational intervention?

Training method

1. What are the most appropriate methods to use to improve GPs knowledge of youth suicidal risk within this intervention?
Probe: What resources would you need and why?
2. What are the most appropriate methods to use to improve GPs skills in managing youth suicidal risk within this intervention?
Probe: What about communication skills specifically?
3. What are the most appropriate methods to use to improve GPs views of young suicidal people within this intervention and why?
4. Who do you think would be the most appropriate professional to deliver the training and why?
Probe: Do you think, for example, another GP would be appropriate to deliver this training?

Closure:

Is there any other information regarding the clinical assessment and establishing risk of suicide in young people that you think would be useful for us to know?

Thank you very much for coming today and participating in our focus group. Your time is very much appreciated and your comments and views have been very helpful to us.