

*Supplementary Appendix
Questionnaire*

Vignette 1

A 30 year old man presents with sleep problems. He often can't get off to sleep and wakes early before his alarm.

On further questioning he admits to feeling down, especially in the mornings. He finds his work at a call centre increasingly stressful and has been off sick a few days in recent weeks. This has led him to worry about losing his job, making him feel quite hopeless about the future. He has also lost interest in taking his 8-year-old son to watch Hibs [a Scottish football team] and feels guilty about this.

He has lost about half a stone of weight in the last two months. He has no significant past medical or past psychiatric history.

We genuinely want to know what your normal practice would be, but assuming that any treatment option is readily available and that your patient is compliant with your management plan. There are not necessarily right or wrong answers to the questions below :

1. What is the most likely diagnosis?

2. How would you manage this case over the first two months?

3. Should there be no change in his symptoms after two months, would you change the diagnosis and/or treatment plan? YES/NO

Briefly explain :

4. Should there be no change in his symptoms after four months, would you change the diagnosis and/or treatment plan? YES/NO

Briefly explain :

Vignette 2

A 60-year-old housewife presents to her GP two days after a road traffic accident. Her car was written off yet she walked away uninjured.

She describes feeling panicky at times with tremor and palpitations. She has hardly slept and has not left her house since the accident. She is concerned that she cannot remember much about the accident, but states that when she closes her eyes she keeps experiencing the movement of her car going sideways after the impact, as if it is happening again.

She has no significant past medical or psychiatric history, and is usually confident and outgoing.

We genuinely want to know what your normal practice would be, but assuming that any treatment option is readily available and that your patient is compliant with your management plan. There are not necessarily right or wrong answers to the questions below :

1. What is the most likely diagnosis?

2. How would you manage this case over the first two months?

3. Should there be no change in her symptoms after two months, would you change the diagnosis and/or treatment plan? YES/NO

Briefly explain :

4. Should there be no change in her symptoms after four months, would you change the diagnosis and/or treatment plan? YES/NO

Briefly explain :

Vignette 3

A 45-year-old woman who rarely attends her GP presents reporting disturbed sleep. She also volunteers that she has been increasingly irritable, and can't understand why.

On further questioning she describes vivid nightmares. She also describes herself as jumpy, on edge and tending to avoid going out, even to see friends. Previously she had been highly sociable. She describes a deteriorating course over the last two months.

She owns a newsagent shop with her husband and has found work difficult since a man armed with a knife attempted to rob the cash register while she was working four months ago. She sees the intruder's face clearly in her nightmares.

We genuinely want to know what your normal practice would be, but assuming that any treatment option is readily available and that your patient is compliant with your management plan. There are not necessarily right or wrong answers to the questions below :

1. What is the most likely diagnosis?

2. How would you manage this case over the first two months?

3. Should there be no change in her symptoms after two months, would you change the diagnosis and/or treatment plan? YES/NO

Briefly explain :

4. Should there be no change in her symptoms after four months, would you change the diagnosis and/or treatment plan? YES/NO

Briefly explain :

Vignette 4

A 55 -year-old man who is well known to you has been off work with back pain for six months since tripping over a piece of equipment and falling awkwardly on a building site where he was working. No fractures or other abnormalities have been identified on x-ray.

He now presents with low mood and irritability. He is preoccupied with thoughts about the fall and a sense of injustice at the way in which he has been treated by his employer since. He describes constantly turning over in his mind the events surrounding his accident.

He has a past history of minor episodes of mixed anxiety and depression and numerous physical complaints for which often no cause has been found. He is also involved in a compensation claim against the building contractors who employed him.

We genuinely want to know what your normal practice would be, but assuming that any treatment option is readily available and that your patient is compliant with your management plan. There are not necessarily right or wrong answers to the questions below :

1. What is the most likely diagnosis?

2. How would you manage this case over the first two months?

3. Should there be no change in his symptoms after two months, would you change the diagnosis and/or treatment plan? YES/NO

Briefly explain :

4. Should there be no change in her symptoms after four months, would you change the diagnosis and/or treatment plan? YES/NO

Briefly explain :

Final questions

1. Please indicate how commonly you encounter the types of presentations described in the vignettes by marking a **X** on each line below :

Vignette 1: rarely | _____ | commonly

Vignette 2: rarely | _____ | commonly

Vignette 3: rarely | _____ | commonly

Vignette 4: rarely | _____ | commonly

2. Please indicate your experience of approximate waiting times for non-urgent mental health cases, from referral to first contact :

	<3 months	3 to 6 months	6 to 9 months	9 to 12 months	>1 year
Clinical psychology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General psychiatry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community psychiatric nurse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Please briefly describe how waiting times for mental health services effect your clinical practice :

4. When did you complete your medical degree?

Before 1974

1974 to 1984

Since 1984

5. Your gender?

Female

Male

Please tick here if you would like feedback on the results of this study:

Supplementary information

Please return the questionnaire in the reply paid envelope provided. Thank you very much for your help.