

Primary Health Care Provider Questionnaire

Practice details and date

Provider ID (pre-printed)	_____
Date (Day/Month/Year)	___ / ___ / ___
Assessment	(3) Follow-up 2

prov.id
date.day/
date.month/
date.year
assessment

Primary Health Care Provider Questionnaire

Part I.

In this section you will be asked about your opinions regarding alcohol, work and working with alcohol issues.

Asking patients about alcohol consumption

Indicate how much you agree or disagree with each of the following statements about asking patients about their alcohol consumption.

There are no right or wrong answers. Please indicate the extent to which you agree or disagree with the following statements		Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree	
When I ask my patients about their alcohol consumption...:							
1	a. it improves my relationship with my patients	5	4	3	2	1	ask1
2	b. it makes my patients uneasy	5	4	3	2	1	ask2
3	c. I provide better care to my patients	5	4	3	2	1	ask3
4	d. it makes the consultation too long	5	4	3	2	1	ask4
5	e. it helps my patients drink less	5	4	3	2	1	ask5
6	My colleagues believe that I should ask my patients how much alcohol they drink	5	4	3	2	1	ask6
7	My managers believe that I should ask my patients how much alcohol they drink	5	4	3	2	1	ask7
8	My patients believe that I should ask my patients how much alcohol they drink	5	4	3	2	1	ask8
9	I intend to ask my patients how much alcohol they drink	5	4	3	2	1	ask9

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The Short Alcohol and Alcohol Problems Perception Questionnaire

Indicate how much you agree or disagree with each of the following statements about working with “drinkers”. For this part of the question, “drinkers” refers to people with **heavy or harmful alcohol use**.

There are no right or wrong answers. Please indicate the extent to which you agree or disagree with the following statements	Strongly agree	Quite strongly agree	Agree	Neither agree or disagree	Disagree	Quite strongly disagree	Strongly disagree	
1. I feel I know enough about causes of drinking problems to carry out my role when working with drinkers	7	6	5	4	3	2	1	saapp1
2. I feel I can appropriately advise my patients about drinking and its effects	7	6	5	4	3	2	1	saapp2
3. I feel I do not have much to be proud of when working with drinkers	7	6	5	4	3	2	1	saapp3
4. All in all, I am inclined to feel I am a failure with drinkers	7	6	5	4	3	2	1	saapp4
5. I want to work with drinkers	7	6	5	4	3	2	1	saapp5
6. Pessimism is the most realistic attitude to take towards drinkers	7	6	5	4	3	2	1	saapp6
7. I feel I have the right to ask patients questions about their drinking when necessary	7	6	5	4	3	2	1	saapp7
8. I feel that my patients believe I have the right to ask them questions about drinking when necessary	7	6	5	4	3	2	1	saapp8
9. In general, it is rewarding to work with drinkers	7	6	5	4	3	2	1	saapp9
10. In general, I like drinkers	7	6	5	4	3	2	1	saapp10

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Work engagement

The following statements are about how you feel at work. Please read each statement carefully and decide if you ever feel this way about your job. If you have never had this feeling, cross the '0' (zero) in the space after the statement. If you have had this feeling, indicate how often you feel it by crossing the number (from 1 to 6) that best describes how frequently you feel that way.

	Every day	A few times a week	Once a week	A few times a month	Once a month or less	A few times a year or less	Never	
1. At my work, I feel bursting with energy	6	5	4	3	2	1	0	work1
2. I am enthusiastic about my job	6	5	4	3	2	1	0	work2
3. I am immersed in my work	6	5	4	3	2	1	0	work3
4. I feel emotionally drained by my work	6	5	4	3	2	1	0	work4
5. I feel fatigued when I have to get up in the morning to face another day on the job	6	5	4	3	2	1	0	work5
6. Working with patients all day is really a strain for me	6	5	4	3	2	1	0	work6
7. I have become more callous toward people since I took this job	6	5	4	3	2	1	0	work7
8. I don't really care what happens to some patients	6	5	4	3	2	1	0	work8
9. I feel exhilarated after working with my patients	6	5	4	3	2	1	0	work9
10. I feel I treat some patients as if they were impersonal "objects"	6	5	4	3	2	1	0	work10
11. I deal very effectively with the problems of my patients	6	5	4	3	2	1	0	work11
12. I feel I'm a positive influence on other people's lives through my work	6	5	4	3	2	1	0	work12

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Part II.

The questions in this section are about your experience of implementation of SCALA protocol in practice.

Time spent on delivering intervention

Please mark how much time you have spent on the activities listed in the table below in the past month.

For the questions 1-5, mark the average time you spent on those activities in a single consultation (in minutes).

	Assessment	Enter required time in minutes	
1. Routine screening - Every patient to be screened with AUDIT-C	<i>On average per consultation, how long did it take you to complete the routine screening with a patient in the past month?</i>		<i>time1</i>
2. Further assessment - Patients scoring 8 or above on AUDIT-C to be assessed with full AUDIT and PHQ-2	<i>On average per consultation, how long did it take you to complete the further assessment with a patient in the past month?</i>		<i>time2</i>
3. Alcohol brief advice Patients scoring 19 or below on AUDIT and 15 or less on PHQ-9 are to be given brief advice	<i>On average per consultation, how long did it take you to give alcohol brief advice to a patient in the past month?</i>		<i>time3</i>
4. Patient information leaflet - Patients scoring 7 or below on AUDIT-C to be given leaflets	<i>On average per consultation, how long did it take you to give the patient information leaflet to a patient in the past month?</i>		<i>time4</i>
5. Referral of patients to specialised services - Patients scoring 20 or above on AUDIT, scoring 15 or above on PHQ-9, or reporting suicidal risk (PHQ-9 item 9) to be referred to specialist services for AUD, depression, and/or suicide	<i>On average per consultation, how long did it take you to refer patients to specialised services in the past month?</i>		<i>time5</i>

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Experiences in delivering the interventions

In the table below, mark how easy or difficult was it for you to carry out the listed tasks in your daily practice.

In your daily practice, how difficult or easy do you find:	Very easy	Quite easy	Neither easy nor difficult	Quite difficult	Very difficult	
1. Raising the issue of alcohol with patients	5	4	3	2	1	exp1
2. Using a screening test to explore current alcohol use of patients	5	4	3	2	1	exp2
3. Explaining risks to health from different levels of alcohol consumption	5	4	3	2	1	exp3
4. Providing patients with ideas and practical advice on how to cut down	5	4	3	2	1	exp4
5. Helping patients to manage high risk drinking situations	5	4	3	2	1	exp5
6. Using a screening test to explore whether or not a patient has depression	5	4	3	2	1	exp6
7. Dealing with both alcohol issues and depressive symptoms when they are present at the same time	5	4	3	2	1	Exp7
8. Referring patients to an appropriate service in case of severe problems with alcohol	5	4	3	2	1	Exp8
9. Referring patients to an appropriate service in case of severe problems with depression	5	4	3	2	1	Exp9
10. Avoiding blame and judgement when giving alcohol-related advice to patients	5	4	3	2	1	Exp10

Do you have any other comments on what was especially difficult for you?

comment1

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Part III.

This section is asking about your exposure to various information related to SCALA protocol.

Community actions

Please indicate which of the following statements about alcohol screening and brief advice apply to you. During the past three months:

1.	I have received information and/or support from others regarding alcohol screening and brief advice (for example: from my manager, researchers, public health experts).	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	community1
2.	I have read or heard that alcohol screening and brief advice is simple to deliver.	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	community2
3.	I have read or heard that alcohol screening and brief advice can help a large number of patients.	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	community3
4.	I have read or heard about doctors or nurses who were screening and advising many of their patients.	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	community4
5.	I have been told the number of patients that I am screening and advising.	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	community5
6.	I have been encouraged to share with others my experiences with alcohol screening and brief advice (for example: with doctors, nurses, health care centres managers).	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	community6
7.	I have had the opportunity to request changes to materials used in alcohol screening and brief advice.	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	community7
8.	I have been asked suggestions about how to make alcohol screening and brief advice easy to deliver.	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	community8
9.	I have been asked about training that I need in order to deliver alcohol screening and brief advice.	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	community9
10.	I have been asked about how to maintain and increase alcohol screening and brief advice in the future.	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	community10
11.	I was asked to use tele-medicine to screen and advise on heavy drinking for my patients.	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	community11
12.	I have received specific information on alcohol problems during the COVID-19 pandemic.	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	community12

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Communication campaigns and media coverage about health aspects of alcohol

During the past three months, have you noticed any SCALA campaigns or media coverage about the health aspects of alcohol?

1. Posters in the Primary Health Care Centre	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	campaign1
2. Articles in newspapers or magazines	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	campaign2
3. Programmes or interviews on the radio	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	campaign3
4. Programmes or interviews on the television	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	campaign4
5. Information leaflets for patients in the primary health care centre	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	campaign5
6. Promotional videos in primary health care centre and/or other institutions	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	campaign6
7. Whatsapp messages	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	campaign7
8. Other	<input type="checkbox"/> 1 – Yes, often <input type="checkbox"/> 2 – Yes, sometimes <input type="checkbox"/> 3 – Yes, rarely <input type="checkbox"/> 4 – No	Campaign.other

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