

## Stakeholder interview schedule; Phase 1

### **Phase 1 - Interview Schedule Domains – Stakeholders**

In these interviews we are interested in exploring whether and how MBCT services are delivered locally/regionally, including any relevant implementation issues. The areas we will be interested in exploring with participants include the following:

- Whether there is any provision of MBCT and if/ how it fits into local/regional psychological services strategy/delivery/commissioning
- What constitutes service provision (re benchmarks of what a ‘good’ MBCT service should include), including models of teacher training
- Resource allocation to deliver MBCT services
- Facilitators and barriers to MBCT service implementation – historic and current (e.g., leadership/championing, particular implementation strategies, service configuration)
- Data/information on outcomes (e.g. costs and benefits, formal evaluation, service user surveys)
- Anything else the participants would like to add about their experiences

Questions in these areas will be tailored to the particular participant (e.g. commissioner, manager, MBCT teacher)

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**Version 1 (08.11.13)**

**Section 1: Scoping existing services:**

This section scopes whether there is any provision of MBCT and if/ how it fits into local/regional psychological services strategy/delivery/commissioning

*How would you describe the degree to which MBCT has been implemented in your area?*

*How would you say it fits within the local/regional area with regards to:*

- *the mental health service strategy*
- *the delivery of mental health services*
- *the process of commissioning in mental health*

*What would you say are the benefits associated with implementing MBCT?*

*What would you say are the costs associated with implementing MBCT?*

*Are you aware of any data/information supporting implementation activities around MBCT?*

**Section 2: Barriers to Implementation:**

This section asks about historic and current barriers to implementation.

*What are the barriers with regards to the planning, coordination required to embed MBCT Within the organisation?*

*What are the barriers with regards to negotiating the politics of implementation?*

*What are the barriers with regards to building shared understanding and commitment around MBCT implementation?*

*What are the barriers with regards to enabling staff to acquire relevant knowledge, skills, and expertise to underpin MBCT implementation?*

**Section 3: Facilitators to Implementation**

*What are the facilitators with regards to the planning, coordination required to embed MBCT Within the organisation?*

*What are the facilitators with regards to negotiating the politics of implementation?*

*What are the facilitators with regards to building shared understanding and commitment around MBCT implementation?*

*What are the facilitators with regards to enabling staff to acquire relevant knowledge, skills, and expertise to underpin MBCT implementation?*

**Section 4: Other issues/Ending**

This section asks about anything else the participants would like to add about their experiences.

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**Version 6 (10.12.14)**

**Section 1: Scoping existing services:**

This section scopes whether there is any provision of MBCT and if/ how it fits into local/regional psychological services strategy/delivery/commissioning.

*Describe your role and then from your own perspective tell us what is currently happening with regards to MBCT in your area?*

*How many classes are running and since when?*

*How regularly are the classes running?*

*How many teachers? [If lone teacher:] What would happen if teacher left?*

*What do referral lists look like, what are the waiting times?*

*How does MBCT fit in your area with regards to the mental health services?*

*How are service prioritized? Why is MBCT prioritized/not prioritized in your area?*

*How are services evaluated and how is it documented?*

*How is the Mental health service delivery monitored/evaluated?*

*What evaluation of MBCT and other MH services are you aware of?*

*What would you say are the benefits associated with having MBCT available in your region?*

*What resources are needed to deliver MBCT in your area?*

*How is training delivered, how rigorous is this and how much in line with national guidelines? Who is paying for MBCT teachers and their training, e.g. how much organisation buy-in and is it fair if the cost is split in half for personal and professional development? How have teachers developed their skills and how are they maintaining it (e.g. supervision, retreats)?*

**Section 2: Mediators of the implementation of MBCT - Barriers and Facilitators:**

*Can you tell me about some of the things that helped, and what has been most important to make MBCT happen in your area? [OR:] If you think of the first MBCT group delivered in your area, what was needed to make it happen?*

*What are the barriers to making things happen with regards to MBCT in your area?*

**Section 3: Other issues/Ending**

This section asks about anything else the participants would like to add about their experiences.

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**Version 11 (20.02.14)**

**Section 1: Scoping existing services**

*Background and Context*

*Type of MBCT service? Who is the target population?*

*How many classes are running and how regularly, and since when?*

*How many staff in total (i.e. teachers, admin etc.)? [If lone teacher:]*

*What would happen if teacher left?*

*Fit with regards to mental health services*

*How do patients access your services? How are MBCT classes built into care pathways?*

*Where do referrals come from, what are the waiting times?*

*Geographical catchment area?*

*How does MBCT fit with other treatments and client groups in your service?*

*[Depending on stakeholder probe for relevant sections, i.e. strategy, delivery, commissioning:]*

*How would you say it fits within the local/regional area with regards to: the mental health service strategy; the delivery of mental health services; the process of commissioning in mental health?*

*How are service prioritized? Why is MBCT prioritized/not prioritized in your area?*

*Evidence: Role of NICE Guidance*

*How does your service provision match with these guidelines?*

*Quality: Evaluation, Training, Supervision, Delivery*

*When an individual is referred – when, how and by whom are they assessed; before, during, and after (e.g. treatment effectiveness)? If any, what follow ups (e.g. options of continued practice)?*

*How are services evaluated? Documented (audit/monitoring)? Data collected? What happened with this?*

*How do you assure the quality of delivery? (education, training and supervision)*

*How is this taken account of in terms of costing?*

## **Section 2: Barriers and Facilitators**

### *Success of delivery*

*How is MBCT perceived by your organisation / people involved in making MBCT available? -Level of awareness, interest, understanding/insight and level of acceptance?*

[For commissioners/managers only:]

*What do you think or know about MBCT? If any, what are your own experiences with MBCT?*

*What are the advantages of MBCT over alternative or existing solutions (e.g. cost-effectiveness, with regards to meeting patient needs, staff learning/employment, meeting organisational goals and values, competing with other services/organisations)? What is the balance between cost (the level of investment) and benefits (the return on investment)?*

### Barriers

*What are the challenges?*

*What are the barriers with regards to structures, e.g. time, workload, and funding?*

*What are the barriers with regards to logistics, e.g. training, resources, physical space/equipment/admin?*

### Facilitators

*What factors account for the successful implementation of MBCT in your context, e.g. financial, administrative and personal support?*

*What stakeholders and networks were involved (e.g. opinion leaders, internal/external champions)?*

*What strategies, if any, might have been helpful (e.g. doing pilots with staff, taster sessions for referrers)?*

**Section 3: Other issues/Ending**

This section asks about anything else the participants would like to add about their experiences and asks what they would like to be included in the *Implementation Plan*.