# The Alcohol Brief Intervention (BI) Initiative Reflection Survey

**Save this survey to your computer before starting.**

*Please fill in this survey by simply typing below or next to each question and using up as much space as needed. Once completed, email to* *psimmonds@snhn.org.au**.*

**GP Name:**

**Start Date:**

Finish Date:

**In relation to your alcohol screening and brief interventions during this Initiative:**

1. Approximately how often do you see patients who drink outside the alcohol guidelines?

e.g. Daily, weekly, monthly

2. How did you decide which patients to screen?

3. What was your process for determining how much alcohol the patient consumed?

4. What were the elements of your brief interventions which were effective from a patient and GP perspective? (Min 50 words)

5. What were the elements of your brief interventions which were not effective from a GP or patient perspective? (Min 50 words)

6. What resources did you give patients?

7. What GP resources did you find most useful?

8. What referral services did you use?

9. Did you seek advice on problematic alcohol use? If so from whom?

10. What other education or supports would be useful?

11. Comments on your experience in general. (Please include advice on how to improve this Initiative for the next round of participating GPs.)