Interview guide for focus group interviews

A: General questions:

1. How do you experience the screening of oncological patients with the exercise thermometer?
	1. How helpful do you find the distress thermometer to record the psychosocial distress of cancer patients?
	2. How helpful do you find the distress thermometer to detect their psychosocial problems?
	3. How helpful do you find the distress thermometer to get into conversation with the patients?
	4. How do you experience the acceptance of screening by patients?
	5. When does screening work well?
	6. In which situations is it difficult to screen?
	7. What hinders you to screen?
2. For what purpose do you use the BT?
3. When and to whom do you recommend a referral to psycho-oncology services?
4. Are there reasons why you do not recommend patient a referral to a further services?
5. What support would you like during screening?

B: Questions about the data:

1. The screening rate over the last 5 years is about 30 %. Can you explain why not every 2nd patient is screened?
2. What can be the reasons why emergency patients, male and palliative patients are screened much more frequently?
3. Overall, 9.4% of all screened patients are referred to the psycho-oncology service. In contrast, 44.7% of screened patients are referred to social services. What is the difference between referral to the psycho-oncology service and to the social service?
4. 20% of referrals are completed immediately after screening, 20% before screening and the rest later. How can this be explained that many transfers apparently take place independently of the stress thermometer?
5. To what extent does screening affect the nursing process – nursing diagnoses and interventions?