	Key question	Check questions	Precise questions	Maintenance/ control questions
I	**Which experience do you personally have with working patients having MHDs?**	How can the patients be characterized? Surroundings of your patients? Particularities in comparison to patients with somatic problems? Common or rather rare situation for you?	Which diseases/diagnoses do your patients have? To what extent play addictions a role? How would you describe your role with your patients with MHDs?	Can you tell me some more about that? Can you describe that a little further? Can you give an example to that?
II	**If you decide to give a patient with a MHD a sick leave, how do you proceed?**	Describe the process when a patient with a MHD visits your practice! Do you face problems when writing a sick leave for a patient with a MHD, too? What else is important to the patient? How is your usual proceeding after writing the sick leave? How do you evaluate the right time for your patient to return to work?	Are there special approaches, e.g. tools or typical questions that you use which help you evaluate? Do you have a certain scheme for follow-up appointments? Are there goal agreements with your patients?	Can you describe your proceeding some more? Can you think of additional examples to that? Do you remember a certain case in particular?
III	**What is important for patients with long term sick leave and/or with the need to go to a psychiatric clinic, in your opinion?**	Do you see any differences when comparing them to patients with a short-term sick leave? What is your experience with RTW of those patients?	How is your definition of a ‘short-term’ and a ‘long-term’ sick leave? Describe your first contact to a patient after his/her discharge from psychiatric clinic!	Can you give an example for that?
IV	**In your reckoning, what is important for a successful RTW?**	What can you tell about the circumstances at the workplace of your patients, how do they influence the patients’ situation? How important are the different stakeholders usually engaged in a RTW process? How would you describe your level of integration with	Many would consider work as the root or the fuel to a MHD. Others would claim that work or RTW is a cruel part of the treatment of patients having a MHD. How do you feel about that? Which other factors do you consider as relevant for a successful RTW?	Are there any more factors?

		other stakeholders taking part in the RTW process? Social workers at the clinic, doctors at the clinic, outpatient psychiatrists and psychotherapists, health insurance, RTW managers, company doctors? Do you think there is potential for improvement at certain interfaces? How would you describe the role of the social surroundings? What would **you** wish for, to improve the process for **you**?	What could be changed/has to chance in your opinion to alleviate the RTW process?	Can you name any other stakeholders who are important in your opinion? Do you have a certain example to that?
V	**Is there anything you would like to add, did we miss a spot important to the issue?**		Do you like to go in further detail about a specific point we mentioned before? Did I miss a spot completely which is crucial to you when speaking about this topic?	