

## **Recruitment**

1. Divisions of General Practice were asked to seek expressions of interest from 10-12 practices in their areas.
2. These practices were approached by the research team and asked to participate. Our original target was to involve at least 80 practices in the study across two States. Criteria for participation included:
  - a. As a minimum, a majority of GPs in each practice agreed to participate.
  - b. The practice used computer software for prescribing.
  - c. There was a practice manager or practice nurse.

## **Baseline data collection**

3. Once recruited, the practice was asked to complete a pre-visit questionnaire about the practice and its staff.
4. Then one or two members of the research team visited the practice. This visit involved two major tasks: -
  - Interviewing practice staff including participating GPs. Interviews with GPs took approximately 30 minutes
  - Supporting practice staff to generate a list of patients using the practice software who had been prescribed diabetes, ischaemic heart disease or hypertension medications and to mail invitations to them to participate, together with the baseline survey, information and consent forms.

## **Randomisation to early and late intervention**

5. When sufficient practices completed their data collection, the practices were then randomised in blocks to early or late intervention groups.

## **Early intervention**

6. The early intervention group were then offered an education session, practice visits, telephone support, a practice needs assessment and support to work on improvement of systems known to impact on teamwork.

## **Late intervention**

7. Practices randomised to receive a late intervention received a similar intervention.

## **Payment**

8. A payment was made for non-GP staff time but not for GP time.