

Consecutive attendees at low vision services in SE Wales and London (n=1000)

All complete routine **pre assessment questionnaire** which includes: 7 item NEI VFQ & GDS-15. An additional brief information sheet about the study will be included.

GDS score of 6 or more
(n=300)

GDS score of less than 6
(n=700) routine low vision
assessment

Low Vision Assessment (LVA)

All are given detailed information about the study (orally and in writing) and copies of the questionnaires (7 item NEI VFQ, near subscale VFQ-48, BDI-II, EQ-5D, ICECAP & CSRI) that will form the basis of the baseline telephone interview.

INFORMED CONSENT OBTAINED (n=100)

Baseline biographical information extracted from participant's notes

Those scoring 2 or 3 on the suicidal ideation scale (BDI-II) will be referred to GP and will not take part in the trial.

BASELINE TELEPHONE INTERVIEW

(within 1 week)

7 item NEI VFQ +VFQ-48 near subscale, BDI-II & EQ-5D, CSRI, ICECAP, Cognitive Screen (referral for medication evaluation for those with a score of 29 or more on the BDI-II) then,

RANDOMISATION

“LETTER”

Within 2 weeks: Letter to the GP informing him / her of GDS score

“PST”

Within 2 weeks: Problem-solving treatment begins

“CONTROL”

After 6 weeks: follow up LVA (n=34)

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After 3 months: (n=31)
Telephone interview: VFQs, BDI-II, ICECAP & EQ-5D

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After 6 months: (n=24)
Telephone interview: VFQs, BDI-II, EQ-5D, ICECAP, CSRI & GDS-15
Letter to GP informing him / her of GDS score

After 6 months: (n=24)
Telephone interview: VFQs, BDI-II, EQ-5D, ICECAP, CSRI & GDS-15
Questions about outcome of referral and acceptability of this intervention

After 6 months: (n=24)
Telephone interview: VFQs, BDI-II, EQ-5D, ICECAP, CSRI & GDS-15
Questions about acceptability of PST intervention

After 9 months
Questions about outcome of referral and acceptability of this intervention & GDS-15

Participants still screening positive for depression (GDS-15) will be offered a GP referral.
All participants thanked for their involvement in study and feedback on study provided.