

Attachment B12:

Screening and Treatment for Maternal Depression and Related Behavioral Disorders Care Coordinator Semi-Structured Interview

**Health Resources and Services Administration Evaluation of the
Maternal and Child Health Bureau Pediatric Mental Health Care
Access and Screening and Treatment for Maternal Depression and
Related Behavioral Disorders Programs Project**

June 2022

Public Burden Statement: This data collection will provide the Health Resources and Services Administration with information to guide future program and policy decisions regarding increasing health professionals' (e.g., pediatricians, family physicians, physician assistants, advanced practice nurse/nurse practitioners, licensed practical nurses, registered nurses, counselors, social workers, medical assistants, patient care navigators) capacity to address patients' behavioral health and access to behavioral health services. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0906-XXXX and it is valid until XX/XX/202X. This information collection is voluntary. The current project will fully comply with the Privacy Act of 1974 (5 U.S.C. Section 552a, 1998; <https://www.justice.gov/opcl/privacy-act-1974>). The Privacy Act may apply to some data collection activities (e.g., the study will collect email addresses from some respondents). Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.

Note for OMB Submission and Conducting Interviews: Questions discussing "the last 12 months" will be adjusted to "the last 24 months" based on the year of administration.

**HRSA EVALUATION OF THE MATERNAL AND CHILD HEALTH BUREAU
PEDIATRIC MENTAL HEALTH CARE ACCESS AND SCREENING AND
TREATMENT FOR MATERNAL DEPRESSION AND RELATED BEHAVIORAL
DISORDERS PROGRAMS PROJECT**

**SCREENING AND TREATMENT FOR MATERNAL DEPRESSION AND RELATED
BEHAVIORAL DISORDERS CARE COORDINATOR SEMI-STRUCTURED
INTERVIEW GUIDE**

CONDUCTED BY:

JBS International, Inc.

Awardee Name:	_____		
Date Completed:	_____ /	_____ /	_____
	Month	Day	Year

Instructions to Interviewers

The purpose of this guide is to provide an overview of the information that will be gathered through interviews with the MDRBD cooperative agreement-funded program care coordinators. JBS will work with the awardees to identify and select one project staff person who is the most familiar with the program's care coordination services to participate in the interview.

Members of the HRSA MCHB evaluation team will conduct and record the interview via a web-based platform (e.g., Microsoft Teams, Zoom), and a notetaker will take detailed notes. Interviews will be transcribed to facilitate qualitative content analysis. The interview will last approximately 30 minutes.

The care coordinator interviews will cover the following topics:

- Program involvement
- Community linkage resources implementation
- Community linkages communications
- Health equity
- Sustainability

Care Coordinator Interview Introduction to **Interviewee (2.5 minutes)**

The Health Resources and Services Administration (HRSA) funded [insert name of state] to implement a Screening and Treatment for Maternal Depression and Related Behavioral Disorders (MDRBD) program. HRSA also funded JBS International, Inc. (JBS) to conduct an evaluation of the Maternal and Child Health Bureau (MCHB) MDRBD program (hereafter referred to as the HRSA MCHB evaluation). JBS is an independent evaluator of the program and is not part of HRSA or any other federal agency. *(Introduce team members, give brief description of qualifications, and describe functions during the interview).*

As part of the HRSA MCHB evaluation, we are conducting a semi-structured interview with the cooperative agreement-funded program care coordinator (or designee) to learn more about community linkages of [insert name of state]'s HRSA MDRBD program. Through this interview, we are hoping to learn about your MDRBD program's community linkages systems and processes and how they have evolved over time, any challenges encountered, and program successes. We have prepared some questions to make sure we cover everything. We welcome your thoughts and comments. We expect this will take about 30 minutes.

Your name and title will not appear in reports to HRSA, unless we specifically ask for your approval. Although we are taking detailed notes, we would also like to audio record the interview in case we need to verify our notes with the interview dialogue. Are you comfortable with us recording the interview?

Do you have any questions about what I have explained? If not, we'll get started.

CARE COORDINATOR SEMI-STRUCTURED INTERVIEW GUIDE

PROGRAM INVOLVEMENT (5 MINUTES)

We'd like to start by asking you about your specific role and overall involvement with your state's MDRBD program.

1. Please provide an overview of your current role in your state's MDRBD program.
 - o PROBE 1: How long have you been involved in your state's MDRBD program?
 - o PROBE 2: How has your role in your state's MDRBD program changed over time (e.g., additional/different responsibilities)?

COMMUNITY LINKAGE RESOURCES IMPLEMENTATION (7 MINUTES)

Next, we'd like to discuss the community linkages that have developed over the course of your MDRBD program and any related challenges and facilitators.

2. What types of community linkages has your MDRBD program established to support social determinants of health (SDOH)? (As defined in [Healthy People 2030](#), SDOH include economic stability, neighborhood and built environment, health care access and quality, social and community context, and education access and quality.)
 - o PROBE 1: How would you describe the types of partnerships your organization has with the established community linkages (i.e., informal partnerships, formal partnerships)?
 - o PROBE 2: Are your program's community linkages primarily statewide, regionally based, or both?
 - o PROBE 3: How have your linkages with community-based services developed/progressed over time?
 - o PROBE 4: Please describe how you use the community linkages for your MDRBD program.
3. Please describe any processes you and your organization have in place to identify and connect with community resources.
 - o PROBE 1: Describe the types of outreach/awareness activities in which you and your organization engage to identify and establish community linkages.
 - o PROBE 2: Describe any challenges you have faced in identifying and establishing community linkages.
 - PROBE 2a: What have you done to mitigate these challenges?
 - o PROBE 3: What strategies have you found to be most successful for identifying and connecting with community linkages?
4. Please describe any systems/databases you and your organization use to manage/track the community resources you have identified.
 - o PROBE 1: Who can access and utilize this system/database (e.g., MDRBD program only, community organizations)?
 - o PROBE 2: What information is included in the system/database?

COMMUNITY LINKAGES COMMUNICATIONS (7 MINUTES)

Now, we would like to talk with you about your communications with community linkages.

5. Please describe your processes for facilitating referrals.
 - o PROBE 1: To what extent do you communicate directly with community linkages representatives?
 - o PROBE 2: What do you estimate is the typical time between referring patients to a community-based service and their receipt of those services?
 - o PROBE 3: What types of support do you or your organization offer to help facilitate a successful referral?
 - o PROBE 4: What systems/processes do you and your organization have in place to track referrals (e.g., the patient scheduled an appointment, the patient received services)?
 - PROBE 4a: To what extent do you follow up with patients who did not follow through with a referral?
6. What strategies have you found to be most successful in referring health professionals and/or patients to community resources?
7. What are the common barriers or challenges to facilitating community linkage referrals?
 - o PROBE 1: What are solutions to mitigate or overcome these challenges?
8. What are the most common needs of patients?
 - o PROBE 1: What community resources have been most impactful for patients?

HEALTH EQUITY (3 MINUTES)

A goal of the MDRBD program is to focus on achieving health equity related to SDOH and racial, ethnic, and geographic disparities in access to behavioral health care, especially in rural and other underserved areas. The following question will be used to inform our goal of improving health equity.

9. How does your state's MDRBD program support health equity related to access to behavioral health care?

SUSTAINABILITY (3 MINUTES)

We are also interested in hearing your thoughts on sustainability of your state's MDRBD program services following the end of the HRSA cooperative agreement funding.

10. In your opinion, how might the community linkages your organization has established support sustainability of your state's MDRBD program?

CLOSING COMMENTS (2.5 MINUTES)

Thank you very much for taking the time to meet with us and to discuss your MDRBD program activities.

11. From your perspective, what role have community resources played in the success of your program?
 - o PROBE 1: What has been the impact of community resources on your program?

12. Please share any additional lessons learned from the process of establishing and referring to community linkages that would facilitate future development and utilization of community linkages.
13. Do you have any additional questions, comments, or feedback at this time?