

PART IV – DATA ENTRY FOCUS GROUP

Behavioral Health Overview (15 minutes)

First, I'd like to ask you some general questions about how you document Behavioral Health screenings in the primary care setting. These screenings include Domestic/Intimate Partner Violence Screening for women ages 15-40, Alcohol Screening for women of childbearing age (15-44), and Depression screening for adults over age 18.

#	Question	Answer
1	How do you document BH screenings in RPMS? (PCC, BH GUI, etc.)	
2	Is screening data entered directly into RPMS by the provider, or do you do all of the data entry?	<i>If they (not the providers) do the data entry, skip to #5</i>
3	How do providers enter data? (PCC? Behavioral Health GUI or BH applications?)	
4	Is the accuracy of provider coding an issue?	
5	If you have any questions about how to enter screening data, who do you ask?	
6	Does this work for you?	

7	Do you have access to reference materials for codes?	
8	Does your facility provide BH patient education? <i>Such as pamphlets, handouts, verbal education.</i>	
9	Where is patient education documented in the patient's record?	

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Section B: Training and Other Factors (25 minutes)

Now, I'd like to ask you a few questions about your training and how you use RPMS.

#	Question	Answer
1	Were you trained on how to enter data?	Circle one: Yes or No <i>If no, skip to #5.</i>
2	By whom? <i>If the trainer is in the room, do not ask the following question.</i>	
3	On a scale of one to five, with one being poor and five being excellent, how would you rate the training?	Circle one: 1 2 3 4 5
4	How would you improve the training?	
5	On a scale of one to five, with one being poor and 5 being excellent, how satisfied are you with the data entry system?	Circle one: 1 2 3 4 5
6	What are you satisfied with?	
7	What needs improving?	

8	Do you use the behavioral health package?	Circle one: Yes or No <i>If no, skip to #11.</i>
9	How often do you use it?	
10	On a scale of one to five, with one being poor and 5 being excellent, how satisfied are you with the behavioral health package?	Circle one: 1 2 3 4 5
11	Did you receive training on the behavioral health package?	Circle one: Yes or No <i>If no, skip to #14.</i>
12	How would you rate your training?	
13	How would you improve it?	
14	Have you taken any refresher courses on training or coding?	Circle one: Yes or No <i>If no, skip to #17.</i>
15	Which ones?	

1 6	How useful were these trainings?	
1 7	What do you think makes your current system of data entry successful?	
1 8	What would you recommend as data entry "best practices" for other facilities?	

DOMESTIC VIOLENCE INTRODUCTION (2 MINUTES)

Now, we'd like to talk specifically about Domestic Violence. Before we start, I'd like to define exactly what I mean by Domestic Violence:

Domestic Violence is a pattern of assaultive and coercive behaviors that may include inflicted physical injury, psychological abuse, sexual assault, progressive social isolation, stalking, deprivations, intimidations, and threats. These behaviors are perpetrated by someone who is, was, or wishes to be involved in an intimate or dating relationship with an adult or adolescent, and are aimed at establishing control by one partner over the other. For this discussion we are going to talk about how your facility screens for domestic violence among women ages 15-40 years. Do you have any questions before we move on?

Section A: Documentation in RPMS (10 minutes)

#	Question	Answer
1	Thinking about the codes used at your facility for DV screening, which codes or fields are used to document DV screenings?	
2	Do you have any specific codes that have been developed just for your facility?	Circle one: Yes or No <i>If no, skip to #4</i>
3	If so, what are they?	
4	Overall, how would you rate your facility in terms of documenting DV screenings?	
5	Are there any specific problems that limit documentation?	Circle one: Yes or No <i>If no, skip to the next section</i>

6	How would you suggest overcoming these problems?	
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ALCOHOL SCREENING TO PREVENT FAS INTRODUCTION (1 MINUTE)

Next, we'd like to talk about alcohol screenings to prevent Fetal Alcohol Syndrome. For this discussion we are going to talk about how your facility screens for and documents alcohol use among women of childbearing age, specifically women between the ages of 15-44. Do you have any questions before we move on?

Section A: Documentation in RPMS (12 minutes)

#	Question	Answer
1	Thinking about the codes used at your facility for alcohol screening, which codes or fields are used to document alcohol screenings?	
2	Do you have any specific codes that have been developed just for your facility?	Circle one: Yes or No <i>If no, skip to #4</i>
3	If so, what are they?	
4	Overall, how would you rate your facility in terms of documenting alcohol screenings?	
5	Are there any specific problems that limit documentation?	Circle one: Yes or No <i>If no, skip to the next section</i>

6	How would you suggest overcoming these problems?	
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DEPRESSION SCREENING INTRODUCTION (1 MINUTE)

Finally, I'd like to talk about depression screenings. We will be discussing how your facility screens patients over the age of 18 for depression and documents that the screening was completed. Do you have any questions before we move on?

Section A: Documentation in RPMS (12 minutes)

#	Question	Answer
1	Thinking about the codes used at your facility for depression screenings, which codes or fields are used to document the depression screenings?	
2	Do you have any specific codes that have been developed just for your facility?	Circle one: Yes or No <i>If no, skip to #4</i>
3	If so, what are they?	
4	Overall, how would you rate your facility in terms of documenting depression screenings?	
5	Are there any specific problems that limit documentation?	Circle one: Yes or No <i>If no, skip to the next section</i>
6	How would you suggest overcoming these problems?	

CONCLUSION (2 minutes)

1 .	Do you have any other comments about behavioral health screening in the primary care setting that you would like to add?	
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