

Attachment 2

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Behavioral Health Information Technologies and Standards In-Depth Qualitative Data Collection Activities

Focus Group Materials

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Proposed Focus Group Research Areas and Topics for Discussion

Research Areas

The focus group sessions are designed to inform the following proposed topical areas for research

- 1) Health information technology priorities for behavioral health providers in the areas of certified electronic health record technology, telehealth, mobile health, and social media.
- 2) Organizational and system drivers for these priorities?
- 3) Significant challenges to addressing health information technology priorities.
- 4) Providers' perception of SAMHSA's role in addressing these challenges.

Topics for Discussion

The focus group discussion questions reflect the proposed topical outline:

- 1) What kinds of processes does your organization engage in for identifying health information technology priorities? _
- 2) When your organization is identifying health information technology priorities, what factors typically influence the decisions you make?_
- 3) What kinds of barriers and challenges does your organization encounter when addressing health information technologies priorities?
- 4) How do SAMHSA-funded grant programs and initiatives help your organization meet these health information technologies priorities?
- 5) How might SAMHSA best help your organization meet its health information technologies priorities in the future?

Unscripted (open-ended) questions will be used to encourage participants to explore these topics including identification of lessons learned and facilitators/barriers to success. The types of unscripted questions to be used include engaging (introductory), exploratory (probing), and exit (closing) questions.

Anticipated Themes

The anticipated themes listed below commonly emerge in the discussion of information technology and behavioral health. The explorations of the questions posed to the focus groups are likely to concern these themes.

- 1) Consideration of 42 CFR Part 2 (Federal statute protecting the confidentiality of patient information that originates from a substance use disorder treatment provider).

- 2) HIPAA Privacy and Security of patient health information (Federal statute protecting all types of patient health information).
- 3) Financing and sustainability, including consideration of business rules, the potential impact of adoption on both short and long-term revenue.
- 4) Technology limitations such as the quality of the technologies available.
- 5) Clinical quality considerations including the availability and utility of the data.
- 6) Integrating technology adoption with clinical workflows such as treatment planning.

“Meta-level” Thematic Analysis

In consultation with the data analyst, the moderator and assistant moderator will identify “meta-level themes” for analysis, and examine these themes for patterns related to the presence or absence of participant understanding of health information technologies.

Because the financing mechanisms for health information technologies largely excluded these providers, the focus group participants are not likely to have sufficient information about health information technologies, or sophisticated demand for healthcare information technologies tools. The “meta-level” thematic analysis anticipates the emergence of themes related to the absence of knowledge and understanding about health information technologies and the roles these technologies play in health care today.

This “meta-level” analysis will identify themes that concern the participant’s awareness and present use of technologies to improve the effectiveness, efficiency and quality of patient care. The awareness (or absence of awareness) and use would be anticipated in the following themes:

- 1) Strategic planning
- 2) Staffing considerations
- 3) Financial considerations
- 4) Clinical and practice management concerns (workflows)
- 5) Exchange of patient health information within a community network of care

“Child” themes to these “parent” themes will explore the level of sophistication displayed by the participants in terms of the technologies of interest, but also any other technologies that may emerge in the focus group discussion. Anticipated technologies of interest include:

- 1) Certified electronic health records
- 2) Telehealth
- 3) Mobile health
- 4) Social media

The analysis will compare the community behavioral health provider perception of their needs with that of other behavioral health stakeholders and policy-makers (e.g., ONCHIT Issue Brief¹, Behavioral Healthcare Roundtable²).

¹ Office of the National Coordinator for Health Information Technology (2013). “Issue Brief: Behavioral Health and Health IT.” Retrieved May 2015 from http://www.healthit.gov/sites/default/files/bhandhit_issue_brief.pdf

² Office of the National Coordinator for Health Information Technology (2012). “Behavioral Health Roundtable: Using Information Technology to Integrate Behavioral Health and Primary Care. Retrieved May 2015 from http://www.healthit.gov/sites/default/files/bh-roundtable-findings-report_0.pdf

Proposed Focus Group Invitation

TO: Substance Abuse and Mental Health Services Administration Grantees

FROM: Dr. Pete Delany, Center Director, Center for Behavioral Health Statistics and Quality (CBHSQ)

SUBJECT: Behavioral Health Information Technologies and Standards (BHITS) Site Visit

DATE: XX, XX, XXXX

Dear Colleagues,

The Substance Abuse and Mental Health Services Administration (SAMHSA) wishes to commend the efforts that [insert program name] has done in the area of Health Information Technology (HIT).

As you may know, SAMHSA has established a HIT Strategic Initiative aimed at advancing the use of HIT to support integrated behavioral healthcare and its potential to transform the healthcare system. SAMHSA will soon begin conducting focus group sessions (of no less than 60 and no more than 90-minutes in duration) with members of behavioral health provider organizations who have experience adopting health information technologies, including certified electronic health record technologies, telehealth, social media, and mobile health.

The focus groups are intended to share organization-specific information regarding the: (1) health information technology priorities for behavioral health providers; (2) organizational and system drivers of established HIT priorities; (3) challenges to addressing HIT priorities; (4) perceptions around SAMHSA's role in addressing challenges; and (5) areas in which SAMHSA can provide technical assistance. Because of your experience with [insert HIT rationale], SAMHSA has identified [insert program name] as one of the distinguished programs to participate in this effort.

SAMHSA values your time and contributions and looks forward to conducting the focus group on [insert focus group date here]. As discussed, participants shall include executive level leadership involved in implementing technologies. Please refer to the draft agenda (provided under separate cover) to help identify the appropriate staff to participate in the session. SAMHSA believes that this is an important project that will contribute to SAMHSA's strategic vision and we very much value your participation as it will help to inform the direction of SAMHSA's HIT initiatives.

If you have any questions, please contact Thomas Clarke at CBHSQ. His information can be found below.

Thomas Clarke, Ph.D. Center for Behavioral Health Statistics and Quality (CBHSQ);
SAMHSA

Daytime Phone: (240) 276-0493

Email: Thomas.Clarke@samhsa.hhs.gov

Rear Admiral Peter J. Delany, Ph.D., LCSW-C
Director, Center for Behavioral Health Statistics and Quality

Proposed Informed Consent for Focus Group Participants

Focus Group Purpose:

The Substance Abuse Mental Health Services Authority (SAMHSA) is collecting qualitative data to support its Strategic Initiative (5) specific to Health Information Technology (HIT). To further this initiative, SAMHSA has identified behavioral health programs that have direct implementation experience in at least one key HIT category (certified electronic health records, telehealth, mobile health, and/or social media) to participate in a focus group session.

Focus group findings will help to inform the nature of how behavioral health information technologies are being adopted and used among behavioral healthcare providers and the priorities they have identified to support implementation. The focus groups will further demonstrate how SAMHSA can promote HIT adoption in the field.

Participant Roles and Responsibilities:

Focus group participants shall include executive level leadership of community behavioral health provider organizations who have experience adopting health information technologies, including certified electronic health record technologies, telehealth, social media and mobile health.

Participants are expected to take part in a focus group session (of no less than 60 and no more than 90 minutes in duration) in which they will share organization-specific information regarding the: (1) health information technology priorities for behavioral health providers; (2) organizational and systemic drivers of established HIT priorities; (3) challenges to addressing HIT priorities; (4) perceptions around SAMHSA's role in addressing challenges; and (5) areas in which SAMHSA can provide technical assistance.

The focus group date and agenda have been mutually agreed upon by members of the behavioral health program and the SAMHSA-contractor staff facilitating the session.

Participant Risks and Benefits:

There are no known physical, psychological, social, financial, or other risks attributed to participating in the focus group. Participants are asked only to share their time and HIT implementation experience with focus group facilitators over the course of the encounter.

Participants will not receive financial or other tangible incentives for participating in the focus group; however, they will be among the first to receive a copy of findings submitted to SAMHSA.

Voluntary Participation:

Focus group participation is purely voluntary. Participants may withdraw at any time with no negative repercussions.

Participants may excuse themselves at any time during the course of the focus group to attend to personal or professional matters as they arise.

Confidentiality:

Information shared during the focus group will be transcribed for reporting purposes. A final report of findings obtained during the focus group will be submitted to SAMHSA.

Final report materials will not attribute content to individuals or organizations, SAMHSA will maintain ownership of the database used to collect, organize, and analyze the data.

Contact Information:

For questions and/or requests for additional information, please contact:

Ms. Colleen O’Donnell, MSW, PMP, CHTS-IM
Policy and Practice Improvement Specialist
The National Council for Behavioral Health
Email: colleeno@thenationalcouncil.org
Phone: 202-684-7457 x278

Ms. O’Donnell may be reached during normal business hours (Monday – Friday from 9:00 am – 5:00 pm ET). All queries will be responded to within 24 hours, excluding holidays and weekends.

Consent Acceptance:

I _____ (print name) understand and agree to the terms pertaining to my participation in the focus group.

Signature: _____

Printed Name: _____

Title: _____

Organization: _____

Date: _____

Proposed Focus Group Agenda

[Insert Date] • [Insert Time]
[Insert Location]

Attendees:

[Insert Program Name]:

- [Insert Participant Name, Title]
- [Insert Participant Name, Title]
- [Insert Participant Name, Title]
- [Insert Participant Name, Title]
- [Insert Participant Name, Title]
- [Insert Participant Name, Title]
- [Insert Participant Name, Title]
- [Insert Participant Name, Title]

Focus Group Facilitators:

- [Insert Facilitator Name, Title]
- [Insert Participant Name, Title]

Discussion Topic	Timeline
Welcome: <ul style="list-style-type: none">• Introductions• Focus group purpose (goals/objectives)• Established ground rules/timeline	10 minutes
Structured Questions: <ul style="list-style-type: none">• Health information technology priorities• Organizational and systemic drivers• Overview of challenges• SAMHSA's role in addressing challenges• Potential areas for technical assistance	60 minutes
Open Discussion	15 minutes
Wrap-up and Adjourn	5 minutes

Proposed Focus Group Field Guide

Moderator Guide

Introduction

The Moderator will welcome the participants and introduce him- or herself and the Assistant Moderator. The Moderator will explain the topic of discussion and the focus group ground rules. The discussion will begin with an opening question and end with a discussion summary and ending question.

Purpose

SAMHSA (Substance Abuse and Mental Health Services Administration) is collecting information from grantees regarding behavioral health provider adoption and use health information technologies, including social media, mobile health, telehealth and certified electronic health records. Focus group discussions like this one are being held with ten (10) groups of executive level staff from each Department of Health and Human Services' region.

Ground rules

1. The final focus group report will include a list of participants, but comments will not be attributed to participant names or organizations.
2. There are no right or wrong answers, just differing points of view. Share points of view, especially when they differ from others.
3. Negative comments and positive comments are equally valuable.
4. The session is recorded and will be transcribed, so try to avoid talking over others.
5. Cell phones should be turned off during session. Undivided attention is needed.

Guidance

Do:

1. Ask questions in a sequence that leads from general to more specific
2. Use open-ended questions
 - a. Five Types of Questions
 - i. Opening question
 - ii. Transition questions
 - iii. Key questions
 - iv. Ending questions
3. When given a “yes” or “no” answer, initiate a probing question to elicit open-ended answers (e.g., “Tell me more” or “Can you give me an example?”)
4. Use “think back” questions: Take people back to an experience and not forward to the future

Don't:

1. Ask dichotomous questions that can be answered with a “yes” or “no” response
2. Ask “why?” as a probing question

Assistant Moderator Guide

Responsibilities

1. Prepare room:
 - a. Set up recording device and seating arrangement
 - b. Ensure name tents for each participant are in place
 - c. Ensure the availability of drinking water and writing materials
 - d. Ensure whiteboard and markers /eraser are in place and available
2. Welcome participants as they arrive
3. Take written notes during discussion
 - a. Anticipate that others will use your field notes
 - b. Consistency and clarity are essential

Moderator and Assistant Moderator De-brief

Immediately after the focus group:

1. Log any additional information and notes while still fresh
2. Discuss issues and concerns for additional clarification
3. Adjust the anticipated flow for the next focus group
4. Confirm shared understanding of the focus group main themes