

Attachment B9 – PMHCA Program Health Care Provider Survey Pilot Test Results

Health Resources and Services Administration (HRSA) Evaluation of the Maternal and Child Health Bureau (MCHB) Pediatric Mental Health Care Access (PMHCA) and Screening and Treatment for Maternal Depression and Related Behavioral Disorders (MDRBD) Programs Projects

Note: The instruments included in this OMB package have been revised and incorporate the pilot test results. The question numbers correspond with the instruments pilot tested.

Feedback	Changes Made to Instrument
Time to complete: <ul style="list-style-type: none"> • 6 minutes • 15-20 minutes due to open-ended responses • 7 minutes 	Projected time to complete the survey has been changed to 10 minutes.
General Comments: I think that in MA providers are not familiar with the term PMHCA, and only know the program as MCPAP.	This is intended for health care providers who have enrolled in their state’s HRSA cooperative agreement-funded PMHCA program, so assumes some familiarity with the PMHCA program.
General Comments: Also, some of the options for communication are not locally available.	Providers will only select the options they use.
Question 2: No option for “did not receive training”. Switch order of questions 2 and 3?	Have added a “Did not participate in trainings” response option to Question 2.
Question 5: Consider asking for common reasons not just the most common?	We have changed to a ranking question and have asked respondents to rank the three most common reasons.
Question 14: I did not really understand this question as I did not know it facilitated access —PMHCA did this and are they referring to developmental peds or counseling? We do this ourselves.	Have clarified the language in the question to address this feedback as follows: “My interaction with the PMHCA program increased referrals to specialty behavioral health services for my pediatric patients.”
Question 16: I am unsure about my answer as MCPAP does not seem to consult/help with any (community linkages) in facilitating access.	Have clarified the language in the question to address this feedback as follows: “In the last 12 months, my interaction with the PMHCA program increased my pediatric patients’ use of services in the community to support their behavioral health.”
Question 21: These happen in my office by others.	The wording has been changed to “What behavioral health treatments do you personally provide” because we want to know what provider clinical actions.
Question 26: Some practices serve both urban and suburban populations. Not sure you want	The wording has been changed to: “In what setting(s) does your patient population live?”

Feedback	Changes Made to Instrument
to only reference the practice location as opposed to the population served.	<i>Select all that apply.</i> ” to address this feedback.