**Attachment B14 – MDRBD Program Implementation 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 Project**

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:   * 17 min * 17 min * 21 min | Projected time to complete the survey has been changed to 20 minutes. |
| **General Comment:** All questions seemed clear. | N/A—no changes required. |
| **General Comment:** For the most part, the questions were straight forward. I found the ones that involved subtle distinctions between health care providers, professionals and practices a bit confusing but it could be because my current job does not deal with such distinctions. | N/A—no changes required. |
| **General Comment:** Overall questions were clear and easy to understand. | N/A—no changes required. |
| **Format:** Format made it easy to complete in a short amount of time. | N/A—no changes required. |
| **Format:** Fairly straightforward. | N/A—no changes required. |
| **Format:** The format flows well, is easy to read and language use aligns with field of focus. | N/A—no changes required. |
| **Question 1:** May want to upfront differentiate employment position and project role in order to obtain information sought. | Added clarifying language to differentiate between employment position and project role and answer choices have been added as response options to Question 3. |
| **Question 3:** Wonder how much detail you expect and whether forced choices might be more efficient. | Answer choices have been added as response options. |
| **Question 3**: Maybe ask this question first or incorporate distinction as noted in comment for Q1 above. | Question order has not been changed; however, clarifying language has been added to differentiate between employment position and project role and answer choices have been added as response options. |
| **Question 4:** I found it difficult to figure out what to put in the FTE column if there were multiple staff I have to account for. Did you only want the 100%/FTEs? If so, not sure if it gets you what you want. | An example has been added to the question for clarification. |
| **Question 5:** For responses would keep language same including health care in response 2 or removing from response 3. | This change has been made. |
| **Question 6:** Suggest bolding practices to bring attention to the distinction from the other option (i.e., providers). | This change has been made. |
| **Question 7:** Suggest bolding practices. | This change has been made. |
| **Question 8:** Suggest bolding individual health care providers. | This change has been made. |
| **Question 9:** Found myself wondering if the question about health professionals was different from health providers and health practices. | This question refers to health care providers as well as other professionals (e.g., social worker), so the change has not been made. |
| **Question 9:** Assuming there will be a place to include "how many" on the actual survey once you check that a category is applicable. | This change has been made. |
| **Question 10:** Am I supposed to know what KIND of training to count- all training or only training on certain topics? Also was I only supposed to count training to health care providers vs. health practices or health professionals? | A large component of these programs is offering training to health care providers, so Project Directors will be familiar with this language. |
| **Question 10:** Is training healthcare providers the only focus for training under this effort? Does this include counselors, social workers etc. - identified above as hire categories affiliated with effort? | This change has been made, since training is available to health care providers and other professionals. |
| **Question 11:** Same as 10 above. | Provide acceptance has been added as an answer choice. |
| **Question 11:** I see options in #12 that seem applicable to #11 (provider acceptance for example). | Provide acceptance has been added as an answer choice. |
| **Question 12:** Same as 10 above. | Has been changed to “lack of provider acceptance”. |
| **Question 12:** Is it provider acceptance or provider resistance? | Has been changed to “lack of provider acceptance”. |
| **Question 13:** Maybe bold clinical behavioral health consultation. | This change has been made. |
| **Question 14:** Maybe bold clinical behavioral health consultation. | This change has been made. |
| **Question 15:** Maybe bold care coordination. | This change has been made. |
| **Question 16:** Maybe bold care coordination. | This change has been made. |
| **Question 17:** Not sure if applicable but I thought of Recovery coaching - supports as other. | This has been left for the “other-specify” category. |
| **Question 19:** Not my area of expertise but do you have to offer neutral -- seems its either hard or not so much - maybe this offers folks who don’t want to commit an option. | Use of a 5-point Likert scale was a methodological decision based on discussions with HRSA. |
| **Question 20:** Again, not sure if this is applicable but I entered State, funder agencies/orgs in the other category. | This has been left for the “other-specify” category. |
| **Question 21:** Should text messaging be an option? | This has been left for the “other-specify” category. |
| **Question 22:** I wonder if everyone knows the answer to this question - might need a don’t know here -- in my prior life as a primary funder I often found agencies that received funding for a service thought it did not exist when it did and vice versa. | The answer choice “Don’t know” has been added as a response option. |
| **Question 23:** I was confused if you meant concurrent to the HRSA money (how distinguished from question 22 above unless it is in timing of other funding). | This has been changed to include “since receiving HRSA cooperative agreement funding.” |
| **Question 24:** I wonder if this is received or rely on for your MDRBD program -- i.e., Medicaid may be relied upon. | No change made. Adding “rely on” changes the intended information to be collected. |
| **Question 25:** Should the word sustainability be incorporated into this question. | This change has been made. |
| **Question 26:** In other I included unrestricted funding, contributions as some agencies rely on this to support such efforts. | This has been left for the “other-specify” category. |
| **Question 27:** Noted that this is the first place that the Advisory Committee appears - wondering if this is applicable to any other areas within the survey. | We have reviewed the survey and Advisory Committee is not applicable anywhere else in the survey. |
| **Question 28:** I included Workforce, recruitment and patient engagement in the other category. | Provider recruitment has been added as an option. |
| **Question 30:** Depending on how much someone writes here this could extend time by just a few minutes 5 or so minutes. | Agree, we have added a couple of minutes to the average time to account for this. |