**Attachment A9:**

**Screening and Treatment for Maternal Depression and Related Behavioral Disorders Program Practice-Level Survey**

**Notification Email**

**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**

**October 2019**

**Attachment A9: Screening and Treatment for Maternal Depression and Related Behavioral Disorders Program Practice-Level Survey**

 **Notification Email**

Thank you for your participation in the Health Resources and Services Administration’s (HRSA) Maternal and Child Health Bureau (MCHB) Screening and Treatment for Maternal Depression and Related Behavioral Disorders (MDRBD) program—[insert program name]. HRSA funded JBS International, Inc. (JBS) to conduct an evaluation of the 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.

As part of the HRSA MCHB evaluation, a survey of practices that have providers who are participating in [insert state name]’s HRSA MDRBD program is being conducted by JBS and administered by us. The survey is designed to collect information on your practice’s experiences with the MDRBD program (e.g., assessing and treating behavioral health conditions, accessing behavioral health care services for your patients, and capacity to address behavioral health conditions).

This email is to notify you that we will be sending you the online Practice-Level Survey within the next 2 weeks. Your participation in this survey is important to the HRSA MCHB evaluation. This online survey will be available for 31 days, and will take less than 15 minutes for you to complete.

If you have any questions, please contact [insert email address].

Kind regards,

[Insert State/Program Name]