

# **Attachment B8:**

## **Screening and Treatment for Maternal Depression and Related Behavioral Disorders Champion Focus Group Discussion**

**Health Resources and Services Administration 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**

June 2022

Public Burden Statement: This data collection will provide the Health Resources and Services Administration with information to guide future program and policy decisions regarding increasing health professionals' (e.g., pediatricians, family physicians, physician assistants, advanced practice nurse/nurse practitioners, licensed practical nurses, registered nurses, counselors, social workers, medical assistants, patient care navigators) capacity to address patients' behavioral health and access to behavioral health services. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0906-XXXX and it is valid until XX/XX/202X. This information collection is voluntary. The current project will fully comply with the Privacy Act of 1974 (5 U.S.C. Section 552a, 1998; <https://www.justice.gov/opcl/privacy-act-1974>). The Privacy Act may apply to some data collection activities (e.g., the study will collect email addresses from some respondents). Public reporting burden for this collection of information is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov).

**Note for OMB Submission and Conducting Focus Group Discussions:** Questions discussing “the last 12 months” will be adjusted to “the last 24 months” based on the year of administration.

**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**

**SCREENING AND TREATMENT FOR MATERNAL DEPRESSION AND RELATED  
BEHAVIORAL DISORDERS CHAMPION FOCUS GROUP DISCUSSION GUIDE**

**CONDUCTED BY:**

JBS International, Inc.

Awardee Name:	_____		
Date Completed:	_____/	_____/	_____
	Month	Day	Year

## Instructions to Facilitators

The purpose of this guide is to provide an overview of the information that will be gathered through focus group discussions (FGDs) with champions involved with the MDRBD program. JBS will work with the awardee to determine which champions should participate in the FGD.

Members of the HRSA MCHB evaluation team will conduct and record the FGD via a web-based platform (e.g., Microsoft Teams, Zoom), and a notetaker will take detailed notes. FGDs will be transcribed to facilitate qualitative content analysis. The FGD will last approximately 1 hour.

The champion FGDs will cover the following topics:

- Program involvement
- Program implementation
- Health professional and practice communications
- Health equity
- Program usefulness
- Program outcomes
- Sustainability
- Advocacy activities

Champion FGD Introduction to **Group (2.5 minutes)**

The Health Resources and Services Administration (HRSA) funded [insert name of state] to implement a Screening and Treatment for Maternal Depression and Related Behavioral Disorders (MDRBD) program. HRSA also funded JBS International, Inc. (JBS) to conduct an evaluation of the Maternal and Child Health Bureau (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. *(Introduce team members, give brief description of qualifications, and describe functions during the FGD).*

As part of the HRSA MCHB evaluation, we are conducting FGDs with champions to learn more about the implementation of [insert name of state]'s HRSA MDRBD program. Through this discussion, we are hoping to learn about your experience with the implementation of the MDRBD program and how it has evolved over time, any challenges encountered, and program successes. We have prepared some questions to make sure we cover everything. We welcome your thoughts and comments. We expect this will take about 1 hour.

Your name and title will not appear in reports to HRSA, unless we specifically ask for your approval. Although we are taking detailed notes, we would also like to audio record the FGD in case we need to verify our notes with the FGD dialogue. Are you comfortable with us recording the FGD?

Do you have any questions about what I have explained? If not, we'll get started.

# CHAMPION FOCUS GROUP DISCUSSION GUIDE

## PROGRAM INVOLVEMENT (5 MINUTES)

*We'd like to start by having everyone introduce themselves.*

1. Please introduce yourself, and describe your involvement in your state's MDRBD program including:
  - o PROBE 1: Your current role
  - o PROBE 2: If you primarily interact with health professionals, practices, or both
  - o PROBE 3: How long you have been involved in your state's MDRBD program
  - o PROBE 4: To what extent you were involved in planning the MDRBD program in your state
2. How has your role in your state's MDRBD program changed over time (e.g., additional/different responsibilities)?

## PROGRAM IMPLEMENTATION (9 MINUTES)

*Next, we'd like to talk about implementation of your state's MDRBD program, including facilitators and challenges to program implementation.*

3. What factors supported the successful implementation of the MDRBD program in your state?
4. Please describe any challenges of which you are aware related to the implementation of the following MDRBD program components in your state. How have these challenges changed over time?
  - o Clinical behavioral health consultation
  - o Care coordination support (i.e., communication/collaboration, accessing resources, referral services)
  - o Health professional trainings
    - If there are current challenges to any of the program components:  
PROBE 1: Please describe any ideas or suggestions you have that could help mitigate the current challenges you mentioned.
5. What changes to practice workflow have you observed among enrolled/participating health professionals and practices to facilitate participation in your state's MDRBD program?
6. Which community resource partnerships (whether informal or formal) do you think have been most successful in supporting your state's MDRBD program?
  - o PROBE 1: What services did these partnerships provide?
  - o PROBE 2: What type of partnership did the community resource have with your state's MDRBD program (i.e., informal, formal)?
  - o PROBE 3: Why do you think these community resource partnerships were most successful?
  - o PROBE 4: In your opinion, what challenges would your state's MDRBD program have had without these established community resource partnerships?

## HEALTH PROFESSIONAL AND PRACTICE COMMUNICATIONS (9 MINUTES)

*Now, we would like to talk about your communications with [health professionals and/or practices] enrolled/participating in your state's MDRBD program.*

7. To what extent did you communicate directly with [health professionals and/or practices] enrolled/participating with your state's MDRBD program?

- o PROBE 1: How did you communicate with [health professionals and/or practices]?
  - o PROBE 2: How frequently did you communicate with [health professionals and/or practices]?
  - o PROBE 3: What were the most common information/resource needs among [health professionals and/or practices]?
  - o PROBE 4: What strategies have you found to be most successful to engage [health professionals and/or practices] in your state's MDRBD program?
8. Which aspects of your state's MDRBD program (i.e., health professional trainings, care coordination support, clinical behavioral health consultation) do you think [health professionals and/or practices] find most valuable?
  9. What are the common barriers or challenges that [health professionals and/or practices] face in participating in your state's MDRBD program?
    - o PROBE 1: What are solutions to mitigate or overcome these challenges?
  10. What feedback have you received from [health professionals and/or practices] related to the benefits of participating in your state's MDRBD program?

### HEALTH EQUITY (8 MINUTES)

*A goal of the MDRBD program is to focus on achieving health equity related to social determinants of health (SDOH) and racial, ethnic, and geographic disparities in access to behavioral health care, especially in rural and other underserved areas. The following question will be used to inform our goal of improving health equity.*

11. How does your state's MDRBD program support health equity related to access to behavioral health care?

### PROGRAM USEFULNESS (8 MINUTES)

*We would like to hear about how your state's MDRBD program is accomplishing its purpose of promoting behavioral health integration into primary care by supporting screening and treatment for maternal depression and related behavioral disorders.*

12. To what extent do you think your state's MDRBD program has affected health professional capacity to address behavioral health?
13. To what extent do you think your state's MDRBD program is meeting the behavioral health needs of pregnant and postpartum patients?

### PROGRAM OUTCOMES (3.5 MINUTES)

*Next, we would like to talk with you about the impact of the MDRBD program and any outcomes/accomplishments.*

14. How do you think you, in your role as the program champion, contributed to the success of your state's MDRBD program?
15. From your perspective, what are the biggest accomplishments of the program?
  - o PROBE 1: What have been the most significant outcomes?
  - o PROBE 2: Please describe any factors that supported these accomplishments/outcomes.
16. From your perspective, please describe what have been the biggest challenges or needed areas of improvement for the program?
  - o PROBE 1: What were some of the challenges/barriers to addressing these areas of improvement?

- o PROBE 2: In your opinion, what support would the program need to overcome these challenges?

## SUSTAINABILITY (8 MINUTES)

*We are also interested in hearing your thoughts on sustainability of your state's MDRBD program services following the end of the HRSA cooperative agreement funding.*

17. To what extent have you been involved in the sustainability planning for your state's MDRBD program?
18. What recommendations do you have to support the sustainability of your state's MDRBD program once cooperative agreement funding ends?
19. What suggestions do you have to facilitate [health professionals and/or practices] to sustain behavioral-health-related practice changes made as a result of participating in your state's MDRBD program?

## ADVOCACY ACTIVITIES (8 MINUTES)

*Lastly, we are interested in hearing your efforts related to advocacy activities for your state's MDRBD program.*

20. To what extent have you been involved in advocacy activities for your state's MDRBD program (e.g., advocating for funding, educating stakeholders, meeting with public officials)?
  - o *If not involved: Skip to closing comments.*
  - o If involved:
    - PROBE 1: Can you please share about specific advocacy activities in which you have participated?
    - PROBE 2: How responsive/interested have stakeholders/representatives been to your advocacy efforts?
21. Please describe lessons learned from participating in advocacy activities.

## CLOSING COMMENTS (1.5 MINUTES)

*Thank you very much for taking the time to meet with us and to discuss your MDRBD program activities.*

22. Do you have any additional questions, comments, or feedback at this time?