Care Coordinator SSI Guide, Version 2 – MMHSUD

Screening and Treatment for Maternal Mental Health and Substance Use Disorders Care Coordinator Semi-Structured Interview

Health Resources and Services Administration Evaluation of the Maternal and Child Health Bureau Pediatric Mental Health Care Access and Screening and Treatment for Maternal Mental Health and Substance Use Disorders Programs Project

May 2025

Public Burden Statement: This data collection is for the evaluation of the Maternal and Child Health Bureau Pediatric Mental Health Care Access and Screening and Treatment for Maternal Mental Health and Substance Use Disorders programs. This project will collect data to provide HRSA with information to guide future program decisions regarding increasing health professionals' (HPs) 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 0906-0105 and it is valid until 12/31/2027. This information collection is voluntary. Data will be private to the extent permitted by the law. Public reporting burden for this collection of information is estimated to average approximately 45 minutes, including the time for reviewing instructions and completing 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 Information Collection Clearance Officer, 5600 Fishers Lane, Room 14NWH04, Rockville, Maryland, 20857 or paperwork@hrsa.gov. Please see https://www.hrsa.gov/about/508-resources for the HRSA digital accessibility statement.

HRSA EVALUATION OF THE MATERNAL AND CHILD HEALTH BUREAU PEDIATRIC MENTAL HEALTH CARE ACCESS AND SCREENING AND TREATMENT FOR MATERNAL MENTAL HEALTH AND SUBSTANCE USE DISORDERS PROGRAMS PROJECT

SCREENING AND TREATMENT FOR MATERNAL MENTAL HEALTH AND SUBSTANCE USE DISORDERS CARE COORDINATOR SEMI-STRUCTURED INTERVIEW GUIDE

CONDUCTED BY:

JBS International, Inc.

Awardee Name:						
Date Completed:		/		/		
	Month		Day		Year	

Instructions to Interviewers

The purpose of this guide is to provide an overview of the information that will be gathered through interviews with the Screening and Treatment for Maternal Mental Health and Substance Use Disorders cooperative agreement program care coordinators. JBS International, Inc. will work with the awardees to identify and select one project staff person who is the most familiar with the program's care coordination services to participate in the interview.

Members of the Health Resources and Services Administration (HRSA) Maternal and Child Health Bureau (MCHB) evaluation team will conduct and record the interview via a web-based

platform (e.g., Microsoft Teams, Zoom), and a notetaker will take detailed notes. Interviews will be transcribed to facilitate qualitative content analysis. The interview will last approximately 45 minutes.

The care coordinator interviews will cover the following topics:

- Program involvement
- Community-based or other resource connections
- Community-based and other resource referrals
- Optimal access to behavioral health care
- Change over time
- Lessons learned

Care Coordinator Interview Introduction to **Interviewee** *(2.5 minutes)* The Health Resources and Services Administration (HRSA) funded [insert program location] to implement a Screening and Treatment for Maternal Mental Health and Substance Use Disorders (MMHSUD) program, [insert program name]. HRSA also funded JBS International, Inc. (JBS) to conduct an evaluation of the Maternal and Child Health Bureau (MCHB) MMHSUD program. This project will be referred to as the HRSA MCHB evaluation throughout the interview. 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 interview).

As part of the HRSA MCHB evaluation, we are conducting an interview with the cooperative agreement-funded program care coordinator, or designee, to learn more about community-based and other resources for [insert program location]'s HRSA MMHSUD program. Through this interview, we are hoping to learn about your MMHSUD program's systems and processes for providing care coordination services and how they have 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 45 minutes.

Your name, job title, organization name, or the MMHSUD program name will not be associated with the information you share during this interview; information shared will be reported to HRSA in the aggregate, unless we specifically ask for your approval. Although we are taking detailed notes, we would also like to record the interview in case we need to verify our notes. Are you comfortable with us recording the interview?

Before starting our discussion, I'd like to note that during the interview I'll use "the MMHSUD program" to refer to [insert program name].

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

CARE COORDINATOR SEMI-STRUCTURED INTERVIEW GUIDE

PROGRAM INVOLVEMENT (2 MINUTES)

We'd like to begin by asking you about your involvement with the MMHSUD program. 1. What is your job title with the MMHSUD program?

- PROBE 1: How long have you been involved in the MMHSUD program?
- PROBE 2: Do other program staff or health professionals provide care coordination services?

COMMUNITY-BASED AND OTHER RESOURCE CONNECTIONS (10 MINUTES)

Next, we'd like to discuss the community-based and other resources, hereafter referred to as resources, you've connected with to help clients, including any related challenges and facilitators. For this interview, a client refers to pregnant and postpartum women in need of resources and their families.

2. What types of resources has the MMHSUD program connected with to support community health factors for clients. For example, resources related to behavioral health, which includes mental illness and substance use treatment services, as well as housing, food, transportation, and financial assistance.

• PROBE 1: What geographic areas do the resources cover?

3. Please describe processes you have to identify and connect with resources for the MMHSUD program.

• PROBE 1: Please describe any challenges you have faced in identifying and connecting with resources.

PROBE 1a: How have you addressed these challenges?

• PROBE 2: What strategies have you found to be most successful for identifying and connecting with resources?

4. Please describe systems or databases you use for managing identified resources.

- PROBE 1: Who can access it, for example, the MMHSUD program or community members?
- PROBE 2: What information is included, for example, insurances accepted, hours of operation, and/or waitlist information?
- PROBE 3: Please describe any challenges and/or facilitators to managing this system or database.

COMMUNITY-BASED AND OTHER RESOURCE REFERRALS (10 MINUTES)

Now, we would like to talk with you about your referrals to resources.

5. Please describe the MMHSUD program's process for receiving care coordination requests.

6. Please describe your processes for making referrals.

• PROBE 1: Do you communicate with health professionals, clients, or both?

• PROBE 2: What types of support do you offer to facilitate a successful referral?

• PROBE 3: What systems or processes do you have in place to track referrals, for example, whether the client scheduled an appointment or received services?

• PROBE 3a: How often do you follow up with clients who did not follow through with a referral?

7. How is the MMHSUD program using telehealth for care coordination? Telehealth includes use of technology, such as email, telephone, text messaging, video conferencing, and screensharing, for provider-to-provider or provider-to-client communication.

- PROBE 1: What barriers, if any, do the MMHSUD program, health professionals, and/or clients experience related to using telehealth?
 - PROBE 1a: What strategies has the MMHSUD program used to overcome these barriers?

8. What are the most common resource needs among pregnant and postpartum clients?

• PROBE 1: What resources have been most effective for addressing those needs?

9. What do you estimate is the typical time between referring clients to resources and their receipt of services?

- 10. What strategies have you found to be most successful in making referrals?
- 11. What are the common barriers or challenges to making referrals?
 PROBE 1: What approaches have you used to address these challenges?

OPTIMAL ACCESS TO BEHAVIORAL HEALTH CARE(8 MINUTES)

12. A goal of the overall MMHSUD program is to address barriers to optimal access to behavioral health care related to community health factors and demographic factors. Optimal access is intended to result in healthy outcomes for all. The following question will be used to inform the goal of improving access. How do you think the MMHSUD program is supporting access to behavioral health care?

CHANGE OVER TIME (5 MINUTES)

Now we would like to discuss how the MMHSUD program care coordination services have changed over time.

14. What factors contributed to change in care coordination over time, for example, changes in legislation or insurance coverage or the availability of community-based or other resources?

LESSONS LEARNED WITH COMMUNITY-BASED AND OTHER RESOURCES (5 MINUTES)

As we near the end of our interview, we would like to hear your reflections on lessons learned. 15. Please share any additional lessons learned from providing care coordination services for the MMHSUD program.

CLOSING COMMENTS (2.5 MINUTES)

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

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