

RI MomsPRN Practice-Level Baseline Questionnaire - Cohort 3

**Thank you for taking a few minutes to complete this questionnaire. Please complete this survey by July 31, 2022.**

**Administration note: This questionnaire is to be completed by practice leader, 1 per practice. It should be administered at baseline, and in follow-up.**

\* 1. Practice Name

\* 2. Person responding to the interview

\* 3. Title of person responding to the interview:

\* 4. Date of assessment:

Date

Date

 

\* 5. Type of Practice:

- |   |   |
|---|---|
| <input type="radio"/> Private with no health system or university affiliation | <input type="radio"/> Academic medical center                               |
| <input type="radio"/> Private with health system or university affiliation    | <input type="radio"/> Federally qualified health center                     |
| <input type="radio"/> Health system with no university affiliation            | <input type="radio"/> Public clinic with no university/academic affiliation |
| <input type="radio"/> Health system with university affiliation               | <input type="radio"/> Public clinic with university/academic affiliation    |
| <input type="radio"/> Other (please specify)                                  |   |

\* 6. Please enter the number of the following staff in this practice:

Number of  
Obstetrics/Gynecology  
(OB/GYN) providers

Number of Obstetrics  
(OB) only providers

Number of Gynecology  
(GYN) only providers

Number of Family  
Medicine/Primary  
Care providers

Number of Medical  
Residents

Number of Medical  
Fellows

Number of Licensed  
independent  
practitioners (PAs,  
RNCS, NPs)

Number of Nurse  
midwives

Number of MAs, RNs,  
PCAs, CIPs

Other

\* 7. Does the practice have an onsite behavioral health professional available?

Yes

No

\* 8. If yes, the behavioral health professional is a:

Psychiatric prescriber

Masters' level clinician

Psychotherapist

All of the above

Other (please specify)

\* 9. Does the practice have a system in place to facilitate access to a behavioral specialist?

Yes

No

\* 10. If yes, which one?

- co-located behavioral health specialist
- case manager to assist with referral
- access to telephone consultation with mental health specialist
- ensure that all patients are referred to a behavioral health specialist
- All of the above
- Other (please specify)

\* 11. Is this location part of a larger practice with multiple locations?

- Yes
- No

\* 12. If yes, name the larger practice:

\* 13. Number of locations in the larger practice where prenatal services are provided:

\* 14. Number of births per year for all providers/clinicians in the larger practice:

\* 15. What is the total number of births per year for all providers/clinicians in this location?

\* 16. What is the total number of perinatal patients per year for the practice?

\* 17. **Approximate payer mix:** For the list of payers that follows, regarding the approximate payer mix for this practice location/office, list the percent for each payer. Please provide an estimate if the exact percent is not known. The total percentage of all payers cannot be greater than 100%. (*\*if possible, provide this breakdown based on the practice's perinatal patient panel*)

Tricare/Other Military %

Medicaid %

Other Public %

Private or Commercial %

Self-Pay %

Other %

Other - Specify

Unknown/not reported %

\* 18. **Observed or reported ethnicity of first prenatal care visit patients:** For the first prenatal care visit patients at this medical practice location/office, please indicate the percent of those patients with the following observed or reported ethnicity. Please provide an estimate if the exact percent is not known. (*\*If a behavioral health practice, reference your perinatal patient panel*)

Hispanic, Latina, or Spanish origin %

\* 19. **Observed or reported primary race of first prenatal care visit patients:** Using the following categories, list the observed or reported primary race of patients at this medical practice location/office. Again, the focus is on patients seen at the first prenatal care visits. Please provide an estimate if the exact percent is not known. (*\*If a behavioral health practice, reference your perinatal patient panel*)

Black/African American/African %

White/Caucasian %

Asian/Asian American %

Native Hawaiian/Other Pacific Islander %

American Indian/Native American %

Alaska Native %

More than one race %

Other %

Other - Specify:

Unknown/not reported %

\* 20. **Observed or reported primary language preferred by first prenatal care visit patients:** Using the following options, indicate the reported primary language preferred by first prenatal care visit patients at this medical practice location/office. Please provide an estimate if the exact percent is not known. The total percentage of all languages cannot be greater than 100%. (*\*If a behavioral health practice, reference your perinatal patient panel*)

English %

Spanish %

Other %

Other - specify:

\* 21. How well do you feel you know this practice?

- Extremely well
- Quite well
- Fairly well
- Not very well

\* 22. How consistently does the practice use a validated screening tool at the following time points to screen for: **Substance use disorders**

	Never	Rarely	Sometimes	Often	Always	Don't know/NA
Early pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Late pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospitalization for delivery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Early postpartum	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Late postpartum	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 23. Please indicate tool used to screen for **Substance use disorders** (check all that apply):

- DAST-10
- AUDIT-C
- NIDA Quick Screen
- Other (please specify)

\* 24. How consistently does the practice use a validated screening tool at the following time points to screen for: **Depression**

	Never	Rarely	Sometimes	Often	Always	Don't know/NA
Early pregnancy (0-20 weeks GA)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Late pregnancy (21 weeks or more GA)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospitalization for delivery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Early postpartum (0-3 months PP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Late postpartum (4-12 months PP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 25. Please indicate tool used to screen for **Depression** (check all that apply):

- PHQ2
- PHQ9
- EPDS
- Other (please specify)

\* 26. How consistently does the practice use a validated screening tool at the following time points to screen for: **Anxiety**

	Never	Rarely	Sometimes	Often	Always	Don't know/NA
Early pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Late pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospitalization for delivery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Early postpartum	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Late postpartum	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 27. Please indicate tool used to screen for **Anxiety** (check all that apply):

- GAD-2
- GAD-7
- Other (please specify)

\* 28. How consistently does the practice use a validated screening tool at the following time points to screen for: **Bipolar Disorder**

	Never	Rarely	Sometimes	Often	Always	Don't know/NA
Early pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Late pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospitalization for delivery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Early postpartum	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Late postpartum	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 29. Please indicate tool used to screen for **Bipolar Disorder** (check all that apply):

- MDQ
- CIDI
- Other (please specify)

\* 30. How consistently does the practice use a validated screening tool at the following time points to screen for: **Trauma/PTSD**

	Never	Rarely	Sometimes	Often	Always	Don't know/NA
Early pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Late pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospitalization for delivery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Early postpartum	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Late postpartum	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 31. Please indicate tool used to screen for **Trauma/PTSD** (check all that apply):

- PCL-C
- Intimate Partner Violence
- Other (please specify)

\* 32. Does your practice have a system in place to monitor and follow up on patients who screen positive for perinatal mental health and substance use disorders?

- Yes
- No

\* 33. Is it explained to patients that screening for perinatal mental health and substance use disorders will happen routinely as part of their obstetric care?

- Yes
- No

\* 34. Does your practice have procedures for providing education and treatment options for patients with perinatal mental health and substance use disorders?

- Yes
- No

\* 35. Does your practice have procedures for obtaining mental health and substance use disorders care for pregnant and postpartum women?

- Yes
- No



## RI MomsPRN Practice-Level Baseline Questionnaire - Cohort 3

### Pregnant and Postpartum Patients

**Please consider the following statements regarding this practice and its pregnant and postpartum patients:**

\* 36. Providers meet the needs of patients with depression and anxiety.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

\* 37. Providers ensure that patients with depression and anxiety receive timely treatment.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

\* 38. Providers treat patients with antidepressant medications for depression and anxiety.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

\* 39. When a patient is prescribed an antidepressant, providers will follow up with the patient.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

\* 40. When a patient is prescribed an antidepressant, providers will monitor the patient's depression and/or anxiety severity with a validated screening tool at subsequent visits.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

\* 41. Providers facilitate referrals for patients to mental health specialists.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

\* 42. This practice has standard processes for directing patients to appropriate mental health resources in the community.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

\* 43. Support staff have the knowledge and skills they need to detect and address depression and anxiety disorders.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

\* 44. Providers meet the needs of patients with substance use disorders.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

\* 45. Providers ensure that patients with substance use disorders receive timely treatment from a substance use specialist.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

\* 46. Providers facilitate referrals for patients to substance use specialists.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

\* 47. This practice has standard processes for directing patients to appropriate substance use disorder resources in the community.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

\* 48. Support staff have the knowledge and skills they need to detect and address substance use disorders.

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| <input type="radio"/> Never     | <input type="radio"/> Often          |
| <input type="radio"/> Rarely    | <input type="radio"/> Always         |
| <input type="radio"/> Sometimes | <input type="radio"/> Not applicable |

