

## MMH Provider Survey

**Our local Maternal, Child, and Adolescent Health program is interested in learning more about if and how health care providers are screening pregnant and postpartum (up to a year after birth) women for perinatal mood and anxiety disorders (PAMDs). Please take a moment to complete this short survey on screening, referral, and treatment of perinatal mood and anxiety disorders. The survey will include questions about your practice and encounters with pregnant and postpartum women. It should take no longer than 15-20 minutes to complete.**

**Thank you!**

1. County where your practice is located:

2. Type of practice:

- Federally Qualified Health Center FQHC
- Community Clinic that is not an FQHC
- Private practice - OB-GYN
- Private practice - Family Medicine
- Private practice - Pediatric
- Other:

For 'other', please specify type of practice:

3. Are you affiliated with any of the below healthcare systems?:

- Kaiser
- Sutter
- Dignity

For 'other', please specify type of practice:

4. Specify type of practice:

- Group Practice
- Solo Practice
- Other:

For 'other', please specify type of practice:

5. What is your agency's area of specialty?

- OB-GYN
- Family Practice
- Pediatrics
- Other (please specify)

6. What is your position? Check multiple if more than one applies:

- Physician
- Registered Nurse
- Medical Assistant
- Physician Assistant
- LCSW
- Administrative Staff
- Other (please specify)

7. Does your practice screen women during the pregnancy and/or postpartum period for perinatal mood and anxiety disorders disorders?

- Yes
- No
- Other (please specify)

8. Please tell us how often your practice screens during the following times:

	Never	At least once	More than once	Not Applicable
Pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Postpartum - up to one year after birth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Between one and two years after birth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. What method do you use to screen for PAMD? Check all that apply:

- Edinburgh Postnatal Depression Scale
- 4 Ps Plus
- Patient Health Questionnaire 9 (PHQ-9)
- Patient Health Questionnaire 2 (PHQ-2)
- Beck Inventory
- General Anxiety Disorder 7 (GAD-7)
- Questions developed by your office
- Informal method
- Not Applicable
- Other (please specify)

10. Approximately what percent of the women that you screen experience MMH disorder?

- Less than 10%
- 10-25%
- 25-50%
- 50-75%
- 75-100%

11. When you screen a woman and determine that she is experiencing a perinatal mood or anxiety disorder, do you prescribe her medication?

- Yes
- No
- Not Applicable
- Only sometimes (please explain)

12. If you do prescribe medications for women with perinatal mood or anxiety disorders, what do you prescribe?

13. When a woman that visits your practice is experiencing the symptoms of a perinatal mood or anxiety disorder, what is your current response process? (Check all that apply):

- Contact warmlines and hotlines (ex: PSI Warmline or Suicide Hotline)
- Refer patient to in-house clinicians/mental health providers
- Refer patient to urgent care or emergency department
- Refer patient to mental health provider
- Mobilize family or friends for support
- Involve law enforcement
- Sometimes (please specify)

14. If you do refer women for mental health treatment, to what services do you refer them?

15. Do you provide education on PMADs for pregnant and postpartum moms that are at-risk?

- Yes
- No
- Not Applicable

16. Do you have a process in place to insure follow-up care after your referral? (please explain for the relevant choice)

Yes

No

Only sometimes

17. How confident are you that a woman will follow-up on your referral to receive treatment?

- Very Confident
- Confident
- Somewhat Confident
- Not Confident

18. Are any of these reasons that you prefer *not* to screen for, treat or refer women experiencing mental health disorder to care? (Please check all that apply):

- Scarcity of providers and organizations for referral - worried that there will be no help
- I am not connected to a local referral network or there is no local referral network
- It is outside of my area of expertise and the scope of my practice
- There is not enough time during patient visits
- I need more training on screening for PMADs
- General discomfort with the topic
- I have liability concerns
- I am not able to get any/enough reimbursement for screening
- The mother is not my patient
- Other (please specify)

19. Have you received any specialized training on PMADs?

20. Are there any resources or trainings that would be helpful to you to that would allow you to increase screening, treatment, and/or referral of perinatal mood and anxiety disorders?

21. How do most prefer to receive Continuing Medical Education (CME)? Please check all that apply:

- Book or Journal Article
- Full or multiple day conference/course
- Grand Rounds or other staff meeting
- Online Course
- I don't need CME
- Other (please specify)

22. Please share with us any questions or comments that you have following this survey:

23. (Optional) We would like to collect additional information, but please only complete this portion if you DO NOT wish to remain anonymous:

Name

Title

Practice/Agency/Clinic  
Name

Email Address