**Annual Provider Self-Efficacy Survey**

**Baseline Questionnaire**

*For selected practices, this baseline self-efficacy survey will need to be completed by all providers within 45 days of being selected and once again in the last quarter of 2020.*

***Survey Monkey Link:***Provider Baseline Self Efficacy Survey: <https://www.surveymonkey.com/r/ProviderSelfEfficacy>

**Thank you for taking a few minutes to complete this questionnaire. The following questions address your experiences with perinatal mental health.**

Provider name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of assessment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Practice name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| 1. What is your primary medical specialty?  Obstetrics only   Gynecology only  General Obstetrics and Gynecology  Maternal-Fetal Medicine Specialist  General Psychiatry  Perinatal Psychiatry  Primary Care/Family Medicine  Other (Specify)   1. How many years have you been in practice? 2. Which of the following best describes your practice location?  Urban – inner city   Urban – non-inner city  Suburban  Mid-sized town (10,000-50,000)  Rural  Military  Other (Specify)   1. Which of the following best describes your type of practice?   Solo Private Practice  Partnership or Group Practice  Multi-Specialty Group  HMO/Staff Model  University Full-Time Faculty and Practice  Military  Other (Specify) | 1. What is your gender?  Female   Male  Other (Specify)  Prefer not to answer   1. What race do you consider yourself? (select all that apply)  American Indian/Native American   Alaska Native  Asian/Asian American  Black/African American/African  Native Hawaiian/Other pacific Islander  White/Caucasian   Other (Specify)  Prefer not to answer   1. What ethnicity do you consider yourself?  Hispanic or Latino   Non-Hispanic or Latino  Prefer not to answer   1. What is your professional title?  Physician   Attending  Fellow  Resident  Certified Nurse Midwife  Nurse Practitioner  Nurse Manager  Social Worker or Case Manager  Other (Specify) |

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| **At the following time points, which of the following do you consistently screen for (using a validated screening tool)?** | | | | | | | |
|  | *Never* | *Rarely* | *Sometimes* | *Often* | *Always* | *Not applicable* |
| **Depression?** | | | | | | |
| Early pregnancy *(0-20 wks. GA)* |  |  |  |  |  |  |
| Late pregnancy *(21 wks. or more GA)* |  |  |  |  |  |  |
| Hospitalization for delivery |  |  |  |  |  |  |
| Early postpartum *(0-3 months PP)* |  |  |  |  |  |  |
| Late postpartum *(4-12 months PP)* |  |  |  |  |  |  |
| **Anxiety?** | | | | | | |
| Early pregnancy |  |  |  |  |  |  |
| Late pregnancy |  |  |  |  |  |  |
| Hospitalization for delivery |  |  |  |  |  |  |
| Early postpartum |  |  |  |  |  |  |
| Late postpartum |  |  |  |  |  |  |
| **Bipolar disorder?** | | | | | | |
| Early pregnancy |  |  |  |  |  |  |
| Late pregnancy |  |  |  |  |  |  |
| Hospitalization for delivery |  |  |  |  |  |  |
| Early postpartum |  |  |  |  |  |  |
| Late postpartum |  |  |  |  |  |  |
| **Substance use disorders?** | | | | | | |
| Early pregnancy |  |  |  |  |  |  |
| Late pregnancy |  |  |  |  |  |  |
| Hospitalization for delivery |  |  |  |  |  |  |
| Early postpartum |  |  |  |  |  |  |
| Late postpartum |  |  |  |  |  |  |
| **Trauma/PTSD?** | | | | | | |
| Early pregnancy |  |  |  |  |  |  |
| Late pregnancy |  |  |  |  |  |  |
| Hospitalization for delivery |  |  |  |  |  |  |
| Early postpartum |  |  |  |  |  |  |
| Late postpartum |  |  |  |  |  |  |

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| **Please consider the following statements regarding your pregnant and postpartum patients and indicate the most appropriate response:** | | | | | | |
|  | *Never* | *Rarely* | *Sometimes* | *Often* | *Always* | *Not applicable* |
| I am able to provide education around depression and anxiety to my patients. |  |  |  |  |  |  |
| I discuss depression and anxiety and their treatment options with my patients. |  |  |  |  |  |  |
| I discuss the risks and benefits of antidepressant use during pregnancy and postpartum. |  |  |  |  |  |  |
| I discuss the risks and benefits of other psychiatric medications during pregnancy and postpartum. |  |  |  |  |  |  |
| I am able to treat my patients with antidepressant medications. |  |  |  |  |  |  |
| I am able to treat my patients with other psychiatric medications. |  |  |  |  |  |  |
| I am confident determining when to refer for therapy vs. when to start medications for depression or anxiety in my patients. |  |  |  |  |  |  |
| I am able to adequately access non-medication treatments for my patients with depression and anxiety. |  |  |  |  |  |  |
| When I need a perinatal psychiatric consultation, I am able to receive one in a timely manner. |  |  |  |  |  |  |
| I can facilitate referrals for my patients to depression/anxiety treatment. |  |  |  |  |  |  |
| I am able to ensure that my patients with depression and anxiety receive treatment in a timely manner. |  |  |  |  |  |  |
| I am confident monitoring depression/anxiety and adjusting medications for depression/anxiety in my patients. |  |  |  |  |  |  |
| When my patient’s care is complete, I am able to transition her for ongoing depression or anxiety follow-up if needed. |  |  |  |  |  |  |

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| **Please consider the following statements regarding your pregnant and postpartum patients and indicate the most appropriate response:** | | | | | | |
|  | *Never* | *Rarely* | *Sometimes* | *Often* | *Always* | *Not applicable* |
| I am able to provide education around substance use disorders to my patients. |  |  |  |  |  |  |
| I discuss substance use disorders and treatment options with my patients. |  |  |  |  |  |  |
| I am able to treat my patients with opioid use disorders by prescribing medications such as buprenorphine or methadone. |  |  |  |  |  |  |
| I am confident determining when to refer for therapy vs. when to start medications for substance use disorders in my patients. |  |  |  |  |  |  |
| I am able to adequately access non-medication treatments for my patients with substance use disorders. |  |  |  |  |  |  |
| When I need a perinatal substance use consultation, I am able to receive one in a timely manner. |  |  |  |  |  |  |
| I can facilitate referrals for my patients to substance use disorder treatment. |  |  |  |  |  |  |
| I am able to ensure that my patients with substance use disorders receive treatment in a timely manner. |  |  |  |  |  |  |
| I am confident monitoring substance use disorders and adjusting medications for substance use disorders. |  |  |  |  |  |  |
| When my patient’s care is complete, I am able to transition her for ongoing substance use disorder follow-up if needed. |  |  |  |  |  |  |