

Instructions for Completing Assessments

Before you begin: The materials you need will be listed under each task. The **Tool to Schedule Implementation Meetings and Create Practice Goals** is the main form that will be used to help visualize and measure your progress towards your goals. The **Tool to Schedule Implementation Meetings and Create Practice Goals** can be loaded either on your desktop computer in Microsoft Excel, or in the online version of the program which can be found at <https://office.com>. The Tool was developed in Excel Office 365 and it may not run correctly in older versions of Excel; see the FAQ at the end of these instructions for troubleshooting.

Task 1: Complete *Chart Spot Check Forms*

- **What you will need:** 10-20 charts of patients who are at least 3 months (12 weeks) postpartum, 10-20 paper copies of the *Chart Spot Check Form*
- **Who completes:** Any person(s) in the practice may complete this step
- **Time required:** Approximately 15 minutes per chart
- **Overview:** Each patient chart will be scored using a paper *Chart Spot Check Form*. These data will be entered into the *Tool to Schedule Implementation Meetings and Create Practice Goals* in **Task 3**.
- **Instructions:**
 1. Identify the 10-20 charts for spot checking.
 2. Fill out one *Chart Spot Check Form* for each chart. To avoid having to switch between applications on a computer monitor while doing the chart extraction, it may be easiest to do this task using one paper form for each chart.
 3. Follow **Task 3** below to enter the data into the *Tool to Schedule Implementation Meetings and Create Practice Goals* or, if someone else will be doing the data entry, give the completed forms to them.

Task 2: Complete the *Practice Self-Assessment Instrument*

- **What you will need:** 2 or more paper versions of the *Practice Self-Assessment Instrument*. Paper is recommended if there will be more than one person completing the survey since individual responses will need to be reconciled before entering the data.
- **Who completes:** 2 or more members of the leadership team. Ideally, they will complete together; if completed separately, one responder must reconcile the responses into one final version.
- **Time:** 30-60 minutes
- **Overview:** Each practice will have one completed instrument. Therefore, though multiple paper versions may be completed, there will only be one final version entered into the *Tool to Schedule Implementation Meetings and Create Practice Goals* in **Task 4**.
- **Instructions:**
 1. Decide who will be responsible for filling out the paper version of the *Practice Self-Assessment Instrument*. If completing separately, thus generating two or more sets of answers, reconcile all the versions and create 1 summary set of results.
 2. After completed, follow **Task 3** below to enter the data into the *Tool to Schedule Implementation Meetings and Create Practice Goals* or, if someone else will be doing the data entry, give the completed form to them.

Task 3: Enter paper copies of the *Chart Spot Check Forms* and the *Practice Self-Assessment Instrument* into the *Tool to Schedule Implementation Meetings and Create Practice Goals*.

- **What you will need:** All completed *Chart Spot Check Forms* from Task 1 and the *Practice Self-Assessment Instrument* from Task 2.
 - **Who completes:** The person assigned to conduct the assessment
 - **Time:** approximately 2 minutes/chart and 15 minutes for *Practice Self-Assessment Instrument*
 - **Overview:** Each paper tool will be entered as its own entry into the *Tool to Schedule Implementation Meetings and Create Practice Goals*.
- **Instructions:**
1. Enter each paper *Chart Spot Check Form* from Task 1 into the *Tool to Schedule Implementation Meetings and Create Practice Goals*:
 - a. Enter data from the forms into the tab entitled “Baseline_Chart data.” Each numbered column (starting in C) corresponds to a *Chart Spot Check Form*. You can enter up to 40 forms.
 - b. Enter data exactly as you see it in the form (i.e., the words). If you enter data incorrectly, an error message will show up in Task 4.
 2. Enter the paper *Practice Self-Assessment Instrument* from Task 2 into *Tool to Schedule Implementation Meetings and Create Practice Goals*:
 - a. Enter data from the form into the tab entitled “Baseline_Practice info.” There is only one column (in D) because you should be entering the summary practice assessment.
 - b. Enter data exactly as you see it in the form (i.e., the words). If you enter data incorrectly, an error message will show up in Task 4.
 - c. Some fields in the *Practice Self-Assessment Instrument* do not contribute to the crosswalk output. These fields are retained in the Excel sheet to help you enter data in order but are marked in gray and pre-filled with “skip.”

Task 4: Generate the *Assessment Crosswalk Output* and select practice goals

- **What you will need:** *Tool to Schedule Implementation Meetings and Create Practice Goals*
- **Who completes:** The person assigned to conduct the assessment
- **Time:** Variable
- **Overview:** You will be reviewing the summary results from the *Chart Spot Check Forms* and *Practice Assessment Instrument* information you put in. This output, along with your practice’s priorities, will be used to write practice goals.

Instructions:

1. Review the results on the tab entitled “Crosswalk output.” Read through in its entirety to see how you have scored on each of the Aims, and what is recommended for your practice.
 - a. For example, your results for Aim 1 may appear as the following:

Aim 1: Provide psychoeducation, destigmatize perinatal mental health conditions, and help engage women in treatment using a strength-based approach.		
Review the information below to learn about your areas of strength and weakness, and for ideas on how to improve on Aim 1:		
To directly review all suggested goals for Aim 1, click here		
	YOUR PRACTICE'S RESULT	Other recommendations
Our practice explains to all our patients that screening for perinatal mental health conditions will happen routinely as part of their obstetric care.	#N/A	Something is wrong. Click here to check data entry for errors.
Our practice has procedures for providing training to providers and clinical staff about perinatal mental health conditions.	Currently met	
Our practice has procedures for providing education to patients about perinatal mental health conditions.	Currently met	
Our practice's website has information on perinatal mental health conditions readily available.	Currently met	
Our practice's social media account(s) and/or app-based education platforms have information on perinatal mental health conditions or links to available resources.	Not currently met	Consider adding this as a goal. Click here for some ideas.
Our practice supports and expects providers and staff to have the confidence and skills they need to discuss perinatal mental health conditions with patients.	Currently met	
According to our patient charts, our providers are documenting patient engagement in treatment in those who screen positive on a mental health screen at the following rate:	60%	
According to our patient charts, our providers are providing psychoeducation to patients who endorse a prior psychiatric history at the following rate:	100%	
According to our patient charts, our providers are providing psychoeducation to patients who screen positive on a mental health screen at the following rate:	100%	
Educational materials are posted or available (e.g., posters, brochures, etc.) in the following percentage of our practice's spaces:	25%	If < 50%, consider adding it as a goal. Click here for some ideas.
The educational materials in our practice represent the diversity of the women we serve.	Not currently met	Consider adding this as a goal. Click here for some ideas.

- b. This indicates that, in Aim 1, you have 7 sub-aims that your practice is already doing well with (those in green), 3 sub-aims that your practice may choose to pursue further (those in red), and 1 area where data is entered incorrectly (in orange).

- i. Those in **green** should be reflected upon and may be areas of success that you can share with your practice overall.
- ii. Those in **orange** should be fixed so that you get an accurate summary of your practice. If you click on the link to the right (“something is wrong...”), it will take you to the item(s) that need to be fixed.
- iii. Those in **red** can be considered as areas needing improvement. If you click on the link to the right, this will take you to suggestions for goals you can include to guide your practice implementation.

2. Once you have reviewed the “Crosswalk Output” and corrected any data entry errors, you can select sub-aim related goals for your practice to pursue as part of implementation. This is done on the tab entitled “Goal ideas.”

- a. The structure of the “Goal ideas” tab mirrors the “Crosswalk output” tab, but with more details. You will see the same Practice Results next to each sub-aim to remind you of your practice’s strengths and opportunities for improvement.
- b. After having reviewed the “Crosswalk output”, you may now have some ideas of sub-aims and goals you want to pursue. For each sub-aim, there is at least one example goal listed underneath.

- c. If a goal is one you would like to pursue, put an “X” in column I, indicating that you would like to include this goal in the final goal template.
 - i. You can customize the goal by editing its text on the “Goal ideas” tab. Be sure to update any fields *in italics and red*, which indicate areas of required customization.
 - ii. You can see an example below of some selected and customized goals, based on the “Crosswalk output”.

Educational materials are posted or available (e.g., posters, brochures, etc.) in the following percentage of our practice's spaces:	25%	
Examples:		
By <i>July 2021</i> , 50% of the practice's spaces (e.g., bathrooms, waiting room, etc.) will have educational materials about perinatal mental health posted or available.		x
The educational materials in our practice represent the diversity of the women we serve.	Not currently met	
Examples:		
By <i>[DATE]</i> , we will review all patient perinatal educational materials, the website, and posted materials to determine if they represent the full breadth of perinatal individuals we serve.		
By <i>July 2021</i> , we will update all patient perinatal educational materials, the website, and other posted materials to represent the full breadth of perinatal individuals we serve.		x

- d. Choose as many or as few goals as you would like to pursue, based on your “Crosswalk output”.

3. Once you have selected all sub-aim related goals of interest for your practice to pursue as part of implementation, you can see your final, summary goal list (by aim) on the tab entitled “Final goal template.”

- a. Any goals that you checked in Task 4 – Part 2 above will appear here. Please note that there may be blank rows between the goals. These can be deleted for ease in viewing the worksheet contents. Customizations to the text now will also be present. See the example below and compare to Part 2 above. You can see that the checked goals appear and that the text matches the customized goals above.

Aim	Goal	How will this can be measured
1. Provide psychoeducation, destigmatize perinatal mental health conditions, and help engage women in treatment using a strength-based approach.	By July 2021, 50% of the practice's spaces (e.g., bathrooms, exam rooms, waiting room, etc.) will have educational materials about perinatal mental health posted or available.	The [designee] will walk through all practice spaces and document the number of spaces where perinatal mental health materials are displayed/posted.
	By July 2021, we will update all patient perinatal educational materials, the website, and other posted materials to represent the full breadth of perinatal individuals we serve.	Identify the date by which the practice will have updated the perinatal educational materials, website, and posted materials.

- b. Suggestions for how to measure whether you have met the goals are included in the “How will this be measured” column to the right of the goal. Edit this text as you see fit to reflect what you will do to know when you have met the goal.
- c. After you have finished any final editing you want to do, you can print it out. If you want to print all columns on a single page, select the “fit all columns on one page” scaling option in the print menu.

Task 5: Assess goal progress

- **What you will need:** *Tool to Schedule Implementation Meetings and Create Practice Goals, Chart Spot Check Forms, Practice Self-Assessment Instrument*
- **Who completes:** The person assigned to conduct the assessment
- **Time:** Variable
- **Overview:** After 3 months have passed since your baseline assessment, you will be entering new data into the *Tool to Schedule Implementation Meetings and Create Practice Goals* and assessing how your practice has progressed towards its goals. You will see areas of success and areas that need further work.
- **Instructions:**
 1. Repeat **Tasks 1 and 2**, collecting the data as before.
 2. Repeat **Task 3** but enter data into the “FollowUp Chart Data” and “FollowUp Practice Info” tabs. Enter *the Chart Spot Check Forms* data into the “FollowUp Chart Data” tab and the *Practice Self-Assessment Instrument* data into the “FollowUp Practice Info” tab.
 - a. Do **NOT** enter the new (follow-up) data into the tabs you used when you did your baseline assessment. Keep the first and second tabs as they were allowing the Tool to give you a comparison of baseline to follow-up results.
 3. Review the results on the last tab, entitled “FollowUp_comparison.” Compare your practice results from baseline to the follow-up results and see how your practice has done in achieving its goals for each sub-aim. An example is shown below.

Aim 1: Provide psychoeducation, destigmatize perinatal mental health conditions, and help engage women in treatment using a strength-based approach.			
		BASELINE	FOLLOW-UP
Our practice explains to all our patients that screening for perinatal mental health conditions will happen routinely as part of their obstetric care.		Not currently met	Currently met
Our practice has procedures for providing training to providers and clinical staff about perinatal mental health conditions.		Currently met	Currently met
Our practice has procedures for providing education to patients about perinatal mental health conditions.		Currently met	Currently met
Our practice's website has information on perinatal mental health conditions readily available.		Currently met	Currently met
Our practice's social media account(s) and/or app-based education platforms have information on perinatal mental health conditions or links to available resources.		Not currently met	Currently met
Our practice supports and expects providers and staff to have the confidence and skills they need to discuss perinatal mental health conditions with patients.		Currently met	Currently met
According to our patient charts, our providers are documenting patient engagement in treatment in those who screen positive on a mental health screen at the following rate:		60%	100%
According to our patient charts, our providers are providing psychoeducation to patients who endorse a prior psychiatric history at the following rate:		100%	100%
According to our patient charts, our providers are providing psychoeducation to patients who screen positive on a mental health screen at the following rate:		100%	100%
Educational materials are posted or available (e.g., posters, brochures, etc.) in the following percentage of our practice's spaces:		25%	60%
The educational materials in our practice represent the diversity of the women we serve.		Not currently met	Currently met

FAQs

1. I am getting an error code in the “Crosswalk output” (e.g., #N/A, #DIV/0!). How can I fix this?

This indicates that data was entered incorrectly or not entered at all. Some common errors include:

- Misspelling the data entered
- Adding a space to the start/end of the data entered
- Invalid response entered
 - o For example: entering “Yes” when the field called for a “Strongly disagree” to “Strongly agree” Likert-scale response)
 - o For example: entering “1” instead of the “Yes” (all input should be text-based answer and non-numerical, unless specified)
- No data entered for that item

Check the field this corresponds to and make sure the data has been entered as it appears on the paper form. You can do so by clicking the link highlighted in red to the right of the field.

It could also be due to Excel version incompatibility:

The *Tool to Schedule Implementation Meetings and Create Practice Goals* was developed in Microsoft Excel Office 365. If you are using an older version of Excel to enter your data, version incompatibility may be causing error messages. Version incompatibility may appear as a \$NAME? error code on your spreadsheet. If this happens, try saving your completed Tool document on your computer desktop. Go to <https://office.com> and upload your Tool document there. When you open the document, the error messages should be gone since the online version of Office is version blind.

2. I need to modify a field in the sheet, but it is locked. Why?

Each of the sheets in the Excel tool have areas that are “protected” or locked, so that you do not accidentally delete formulas or fields. There is no password to unlock the sheets, so you can unprotect whenever you want. *Please use caution when modifying fields that are locked – they usually are linked to other areas of the tool and may result in unforeseen errors in other areas.*