**Draft Survey Questions for MHSSA Grant Partners**

*The following questions will be presented as a Zoom Survey at the December 7, 2022,
MHSSA Collaboration Meeting:*

In the questions below, please select your specific needs for technical assistance in five (5) areas: *partnership development, workforce development, implementation, data collection, and sustainability.* This information will support the Commission’s planning to provide technical assistance to grantees. There are 23 questions below that should take approximately 5 to 10 minutes to complete.

 **Partnership Development**

1. Would you like to receive technical assistance to support partnership development?
2. Yes
3. No (If No, Skip to Question #4)
4. In which of the following areas related to partnership development, would you be interested in receiving technical assistance? (SELECT ALL THAT APPLY)
5. Developing Memorandums of Understanding (MOUs) with partners (e.g., CBOs)
6. Creating a leadership structure, common vision, and shared goals
7. Strategic planning through needs assessment, etc.
8. Building and strengthening relationships across systems (e.g., with County Behavioral Health, County Office of Education, School District)
9. Engaging students and families in planning
10. Enhancing communication through meetings, technology, developing shared language, etc.
11. Standardizing policies and procedures
12. Building databases that collect and share information between partners
13. Other (see Question #3)
14. Other TA needs for partnership development\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Workforce Development**

1. Would you like to receive technical assistance to support workforce development?
2. Yes
3. No (If No, Skip to Question #7)
4. In which of the following areas related to workforce development, would you be interested in receiving technical assistance? (SELECT ALL THAT APPLY)
5. Creative solutions to hiring and retaining staff
6. Maximizing staff scope of practice
7. Building the cultural and linguistic diversity of staff
8. Developing Internship programs
9. Utilizing peer and family partners
10. Establishing telehealth services
11. Creating a mental health workforce pipeline from middle/high school to college
12. Other (See Question #6)
13. Other TA needs for workforce development\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Implementation**

1. Would you like to receive technical assistance to support implementation of MHSSA activities and services?
2. Yes
3. No (If No, Skip to Question #10)
4. In which of the following areas related to implementation of MHSSA activities and services, would you be interested in receiving technical assistance? (SELECT ALL THAT APPLY)
5. Outreach and training (students, parents, and staff)
6. Peer and family leadership
7. MTSS/PBIS frameworks
8. Wellness promotion and universal prevention (Tier 1)
9. Targeted and intensive services (Tiers 2 and 3)
10. Screening and assessment
11. Suicide prevention and crisis support
12. Referral processes and linkages
13. Wellness Centers
14. Other (See Question #9)
15. Other TA needs for implementation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
16. Are you using a tool to monitor or assess school mental health systems performance like SHAPE?
17. Yes
18. No (In No, Skip to Question #12)
19. If yes, then please name or describe the tool:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
20. Would you like more information on SHAPE?
21. Yes
22. No

**Data Collection**

1. Do you currently have a system for collecting school mental health data?
2. Yes
3. No (If No, Skip to Question #15)
4. What is the name of your school mental health data collection system?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Would you like to receive technical assistance to support data collection?
6. Yes
7. No (If No, Skip to Question #18)
8. In which of the following areas related to data collection, would you be interested in receiving technical assistance? (SELECT ALL THAT APPLY)
9. Establishing data sharing Memorandums of Understanding (MOUs)
10. Setting-up data collection systems
11. Navigating HIPAA and FERPA laws
12. Collecting or reporting data from subcontractors
13. Creating consent or release of information forms
14. Utilizing data to inform internal program planning and decision-making
15. Other (See Question #17)
16. Other TA needs for data collection\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sustainability**

1. Would you like to receive technical assistance to support sustainability?
2. Yes
3. No (If No, Skip to Question #21)
4. In which of the following areas related to sustainability, would you be interested in receiving technical assistance? (SELECT ALL THAT APPLY)
5. Blending and braiding funding
6. Medi-Cal billing (LEA-BOP)
7. Student Behavioral Health Incentive Program (SBHIP)
8. Partnering with private insurance companies
9. Alignment of different initiatives and programs
10. Other (See Question #20)
11. Other TA needs for sustainability­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
12. Please list any additional topics or areas that you would like to receive technical assistance in:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**County Information**

The following information will help us identify local needs and the unique perspectives of different grant partners.

1. Please provide the name of your county\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Please indicate your affiliation/employer:
3. County Behavioral Health Department
4. Local Education Agency
5. Community-Based Organization
6. Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**THANK YOU!**