

What are PRC's protocols for interviewing mental health patients?

PRC understands the importance of including ALL types of patients within the sample of patients selected to participate in the interview research, and the importance of keeping the methodology consistent within a given study. We also recognize that there are certain issues pertaining to the management of patient information and the approach to interviewing which are unique for behavioral health, psychiatric, and mental health patients. Our utmost concern in all of our studies is maintaining professional conduct throughout the telephone interview and making sure our respondents feel comfortable and informed when providing us their opinions. This is why we take extra care in the respondent screening process and supply only the necessary information to our interviewers who make the calls.

Respondent Screening Process

All of PRC's studies are HIPAA-Compliant and use a standard introduction. When calling patients, interviewers read this to the person who answers the phone:

Hello, this is _____. (Facility Name) has asked us to conduct a survey about doctors and the services they provide. (If necessary, interviewers read: I work for Professional Research Consultants. We are a business associate of (Facility Name)).

When we are dealing with psychiatric/mental health/behavioral health patients, it is our policy to take extra steps to ensure that our respondents have a positive interview experience. We understand that there are instances where individuals receive psychiatric/mental health/behavioral health care without informing anyone else of their condition. In cases where the formal facility name includes a sensitive term, such as "psychiatric," we try to use a more generic facility name or system name in the introduction, before we know we have the patient on the phone (at which point we may use the actual facility name).

We appreciate the confidentiality that this particular segment of patients may be concerned with, and in these cases where we can identify these patients through the information provided to us by the hospital, we use a slightly different screening procedure. After the introduction, the interviewer's response changes based on who PRC is calling to survey.

If PRC is calling to survey an **adult patient**, the interviewer then asks for the patient by name before mentioning anything else regarding the nature of the call. If the patient is not available, we tell the person who answered the phone that we will call back another time. For adult patients, we **never mention any specifics** about the study (e.g., the name of the doctor or counselor or therapist, the type of patient study we are conducting, or the type of services received) **unless we are speaking with the actual patient**. Completion of the survey by proxy (i.e. a relative or friend familiar with the care) is not permitted in these types of studies.



If PRC is calling to survey the **parent or guardian of a pediatric patient**, the interviewers ask for the parent or guardian of the child patient, using the name supplied to us by the client, following the introduction. Once we have the parent/guardian on the telephone, we ask if the child patient was ever seen at the hospital/facility supplied to us. If the parent says no, we terminate the phone call; again, we do not want to give parents or guardians any information about care that their children may be receiving without their knowledge. If the parent indicates that the child has received care at this hospital/facility, we then provide a more complete introduction to the survey, explaining for whom we are making the calls and the random selection process.

Information Available for Interviewers

The interviewers **do not** have access to medical details of the patient's record. The interviewers do not have any information regarding the specific type of care the patient received, the medical diagnosis, the length of stay in cases of hospitalization, or the frequency or nature of outpatient visits.

At most, the interviewer will know the location where the visit/hospitalization took place, the name of the physician seen by the patient and possibly the physician's specialty, and the date of the visit/hospital discharge. Our intent in providing this information to the interviewers is to ensure that the patient interview we conduct is attached to the correct, corresponding patient data provided by the client. If a respondent expresses concerns about the confidentiality of their medical information, the interviewer will explain that he/she does not have access to the patient's medical record.

