

## Questions for the Keynote Speakers:

- Is the COVID Coach app specific to the users' regional location (for example- finding food resources specific to the users' zip code)?

*Yes and no. Many of the resources for food, parenting, and substance use are for national and international public and private organizations. However, for COVID-19 resources, individuals may enter their city/state for local connections.*

- Will all of these resources be available after this? I would like to share this with my clinicians.

*Yes, the slides were shared with the organizers to be disseminated. If you are interested in handouts, magnets, pens, mousepads, hand sanitizer, or apps script pad, please email me at [Marlana.Webster@va.gov](mailto:Marlana.Webster@va.gov). I can mail some educational items to you.*

- Are devices ever provided to the Veterans? (Dr. Babel answered this in the chat, but it would be nice to get a response from our keynotes)

*I believe Dr. Babel noted the Digital Divide consult at the VA. This consult gives veteran's a "rental" iPad to use for telehealth. This is a national endeavor across the VA system. I imagine that there may be some community partners or grants that could support a similar offering for civilians.*

- Are there ways that other community organizations, such as a public library, can help support this work?

*Certainly. These resources were created for Veterans and are helpful for anyone. Each of the apps are free and could be accessible at a public library computer. Librarians and community partners may be helpful in computer literacy to expand options for self-management mental health resources for civilians using the apps.*

- What was the mood scale used on the COVID Coach app?

*It is the PHQ-9. If someone's scores are positive on it, he/she is automatically offered the option to call or text the crisis line.*

- How do you assess if someone is tech savvy?

*We typically have psychology technicians explore the veteran's access to a smartphone/tablet/laptop while completing their tele phone assessment. This may also include questions about the veteran's comfort with using technology independently. We provide practice sessions prior to the actual appointment to troubleshoot issues. For our group sessions, our psychology technicians reach out to veteran's who have not been*

*able to join immediately, providing additional support. Though I have not used these, I found two assessments online that may be useful in determining goodness of fit:*  
[TLHT TRA Tool.pdf \(maryland.gov\)](#) and [Telehealth Satisfaction Questionnaire: National First Nations Telehealth Research Project \(ahra.gov\)](#).

- Who updates the information on these applications, for example, resources?

*The National Center for PTSD manages updates. However, they take recommendations from the community of providers using the apps as well.*

## Questions for the Panelists:

- Do you feel that the COVID pandemic has assisted or created more road blocks to collaboration in services? Unite Us has been funded through the cares act and I was wondering if this will be used by each agency. I know CHKD is looking at this referral service.

*The COVID pandemic in many ways has created more road blocks to collaboration as those natural and informal meetings no longer exists. COVID requires purposeful and intentional connections/communication. The Up Center uses the Unite Us platform across multiple programs and lines of service. The platform serves as a centralized referral system and enhances ease of access across organizations in Hampton Roads.*

- You have three wishes: what would you want to further the support for pediatric mental health care?

*More trauma informed approaches when assessing for and dispensing psychotropic medications. Using psychotropic medications as a treatment method of last resort and as a temporary intervention, not a long-term solution. Real investments to create opportunities for providers of color and increase the number of providers of color. Having mental health providers of colors removes barriers to treatment for many communities of color.*

- How can we help the mental health physicians thrive?

*Utilizing a collaborative approach by including representatives from all life domains during assessment and treatment*

- Telehealth has given an opportunity to see what is possible in changing the paradigm of mental health care. What is the forum to continue this discussion in what else is possible in breaking down the traditional assumptions and models?

*Continue to engage and collaborative with providers across sectors  
Establish a universal call to action*

*Mutual outcomes that we are all tracking for. Outcomes that optimize and improve delivery and impact collectively, across organizations and sectors.*