

Worksheet: Mental Health Service Corps Primary Care Application

For questions or assistance with the MHSC Application, contact Emily Carroll at ecarrol@health.nyc.gov

This worksheet is designed to assist individual sites in completing the MHSC online application. We recommend that each site complete one worksheet by completing all of the white fields.

I. SITE BASICS		
LEADERSHIP	Who will be responsible for Mental Health Service Corps activities at your site?	Name and Title: Email: Direct Phone Number:
	Will this individual be directly supervising the Corps Member at the site?	Y/N
HOURS OF OPERATION	Sunday	
	Monday	
	Tuesday	
	Wednesday	
	Thursday	
	Friday	
	Saturday	
AFFILIATIONS	Hospital(s)	
	DSRIP PPS	
	ACO (circle applicable)	Pioneer/Medicare Shared Savings Program/N/A
ELECTRONIC HEALTH RECORD	Vendor Name	
	Version Number	
	Is your EHR Patient Portal activated?	Y/N
SPACE	Does your site have the following available for use by a Corps Member?	
	Computer terminal and access/login to the practice's EHR for a Corps Member?	Y/N
	Consultation areas that can accommodate privacy (exam rooms, office space)	Y/N
	Secured storage space (closet or cabinet) to keep screening tools and exam materials	Y/N

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II. PATIENT PANEL		
PATIENT PROFILE	Number of Total Unique Patients	
	Language needed for treating the majority of site's non-English speaking patients	Language: _____ Percentage of Patient Population Speaking this Language: _____%
	Identify special populations receiving care at site (e.g., elderly, homeless, uninsured, etc.)	
PATIENT POPULATION	Please estimate the following percentages (out of 100% total):	
	Estimated % White Non-Hispanic Patients	_____ %
	Estimated % Black Non-Hispanic Patients	_____ %
	Estimated % Hispanic Patients	_____ %
	Estimated % Asian/Pacific Islander Patients	_____ %
	Estimated % Other Patients	_____ %

III. PROGRAM ENROLLMENT JUSTIFICATION
Please be prepared to respond to the following prompts in under 500 characters:
1) Describe the unmet mental health needs at this site.
2) Why do you want to participate in the Mental Health Service Corps program?
3) What do you hope that participating in the Mental Health Service Corps program will achieve for your site/practice and patients?