opendor Community Health Centers	Depression Screening and Management	STANDARD OPERATING PROCEDURE
		Policy Ref:
Enacted: 5/19	Owner: Associate Chief Medical Officer	Revision Date:

Printed copies are for reference only. Please refer to the electronic copy of this document for the latest version.

## **OVERVIEW:**

Open Door Community Health Centers' (ODCHC) providers follow a well-defined, evidence-based process to ensure patients diagnosed with depression have the support needed to treat their depression.

## **RESPONSIBILITY:**

Medical Assistant: Screen patients for depression based on the ODCHC-approved workflow.

PCP: Review and follow up on positive depression screening

BH Provider: Patients either due to a "Warm Hand-Off" (WHO) or internal referral. Case Manager: Assist patients with connecting to community resources as needed. Health Coach: Assist patients who needs help with self-management skills as needed.

QI Staff: Provide reports for completing and monitoring follow-up care.

#### PROCEDURE:

## Screening:

Before each patient's visit, the Medical Assistant (MA) reviews the patient's Health Maintenance Alerts and Registries. If the patient is due or they are listed as being in the Depression Registry, the patient is screened for depression following the approved workflow.

If the screening is positive, the MA communicates the result to the provider who then reviews and discusses the depression screening results with the patient and develops an evidence-based care plan. The generalized care plan is documented using the dot phrase, .ODDEPRESSION, which includes one or more of the following:

- Patient education, coaching, and/or counseling in visit
- Provider does a warm hand-off (WHO) and/or referral to the BH Provider
- Assessed, no additional follow-up needed
- Additional evaluation performed as needed

## Warm Hand-offs (WHOs)

When an ODCHC BH provider receives a "warm hand-off" (WHO), they do a brief initial assessment and then one or more of the following:

- Schedule a visit for treatment using clinical decision making and patient preference.
- Refer the patient:
  - If housing, transportation, employment, or other resources are needed, refer them to Case Management
  - o If the patient's depression is largely due to complex medical needs, consider referral to a Health Coach and/or the Health Connections staff.
  - If the patient is in care with County Mental Health or a private therapist, ask the patient complete an ROI. If the patient is in crisis, they will contact the County for a WHO.
  - o If the patient has a Substance Use Disorder, refer the patient to a Substance Abuse Counselor.

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## **Follow-up Care Management:**

The BH Provider or designee follows all patients diagnosed with depression until they are in remission. A follow-up PHQ is completed and documented in EPIC with each follow-up contact.

- If the patient is prescribed antidepressants, then a follow-up call will be made within 3-7 days and a minimum of two contacts within 30 days.
- If the patient is not prescribed antidepressants, then an initial contact will be made within 2 weeks and depending on the patient's preference, contacted again within 30 days.
- If the patient was referred to an outside therapist, verify that they went to their visit.

# Monitoring:

A follow-up PHQ is completed and documented in EPIC with each follow-up visit.

Each week, Quality Improvement staff will send to the site BH providers a list of patients who had a PHQ9 score of 20 or more during the previous work week. The BH provider will review the patient chart to ensure that the patient has an active care plan that addresses the patient's BH needs. The BH provider will follow-up with the patient if they have not had any BH needs addressed or if they determine that the patient would benefit from additional follow-up.

## **Perinatal and Postpartum Patients:**

ODCHC's perinatal and postpartum patients are screened and provided Behavioral Health using the Edinburgh Postnatal Depression Scale (EPDS). In the event of a positive screening, the workflow above is followed.

### **REFERENCES:**

None

### **ASSOCIATE DOCUMENTS:**

ODCHC Annual PHQ\_SBIRT (CRAFFT), Functional Status and PHC Staying Healthy Assessments Workflow ODCHC Depression Treatment Policy

## **KEYWORD TAGS:**

Depression, PHQ, Screening, WHO, Warm hand off