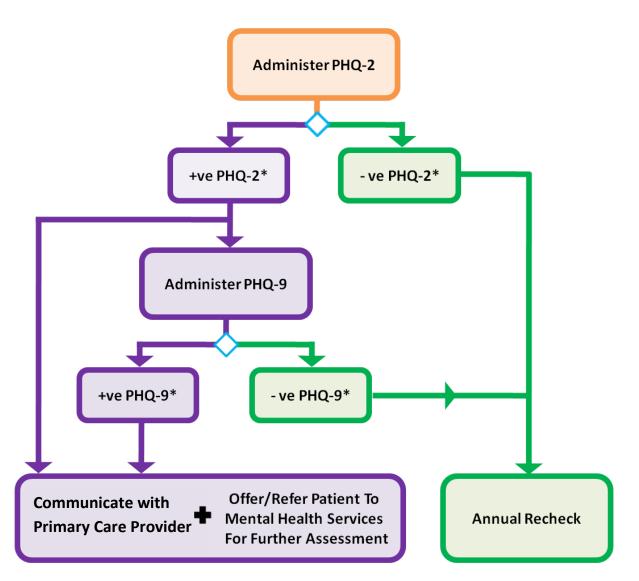
Depression Screening Toolkit



Stand UP to Diabetes
Faisons face au diabète

Depression Screening Flow Map





PHQ 2

+ve = A score of 3 or greater

-ve = A score under 3

PHQ9

+ve = A score of 5 or greater

- ve = A score under 5

Depression Screening

- 1. Complete PHQ2 with client at initial or follow up visit as a baseline depression risk screen (a score of 3 or more is positive for depression risk)
- 2. If PHQ 2 is negative, repeat annually.

If PHQ 2 is positive, ensure a PHQ 9 is administered by the Diabetes Care Team or offer/refer to internal Mental Health Services for further assessment.

- 3. If PHQ 9 is administered by the Diabetes Care Team and positive, refer to the PHQ2/9 Intervention Protocol scoring for next steps in intervention.
- 4. Communicate and offer resources.

To be used only with clients <u>not</u> already identified with mental health issues or receiving treatment.

Responses and actions are to be based on the client's total score.

Internal Mental Health Services to be utilized if applicable within your organization.

| PHQ 2 Scoring | Action | | |
|---------------|-------------------------------------|--|--|
| 0-2 | No action required. Repeat annually | | |
| >3 | Administer PHQ 9 questionnaire | | |

| PHQ 9 Scoring | Action |
|---------------|--|
| 0-4 | No action required. Repeat annually |
| 5-9 | Message physician with score |
| | Provide patient with Mental Health Resources |
| 10-14 | Message physician recommending need for assessment and suggest |
| | referral to Mental Health Services |
| >15 | Message physician recommending need for urgent assessment |
| | Refer to urgent Mental Health Services and/or hospital ER |
| | Physician and Mental Health Services to follow up with patient until |
| | symptoms have resolved |

| Urgent Mental Health Services contact: | |
|--|--|
| Location of nearest hospital Emergency Department: | |

If at any point you feel uncomfortable or feel the client would benefit from a mental health referral, please seek appropriate action.

PATIENT HEALTH QUESTIONNAIRE-2 (PHQ-2)

Over the last 2 weeks, how often have you been bothered by any of the following

| problems? | | Several | More than half | Nearly |
|---|------------|---------|----------------|-----------|
| | Not at all | days | the days | every day |
| Little interest or pleasure in doing things | 0 | 1 | 2 | 3 |
| Feeling down, depressed or hopeless | 0 | 1 | 2 | 3 |
| FOR OFFICE CODING: | 0+ | + | + | |

Total Score:

Scoring Instructions:

If the response is 3 or greater, consider administering the PHQ-9 questionnaire or asking the person more questions about possible depression.

If the response to questions is less than 3, the screen is negative and can be reviewed again annually.

PATIENT HEALTH QUESTIONNAIRE-9 (PHQ-9)

| Over the last 2 weeks, how oft been bothered by any of the for problems? | • | Not at all | Several days | More than half the days | Nearly every day |
|--|----------------|------------|-----------------|----------------------------|---------------------|
| Little interest or pleasure in doing things | | 0 | 1 | 2 | 3 |
| Feeling down, depressed or ho | peless | 0 | 1 | 2 | 3 |
| Trouble falling or staying aslee | p, or | 0 | 1 | 2 | 3 |
| sleeping too much | | | | | |
| Feeling tired or having little en | ergy | 0 | 1 | 2 | 3 |
| Poor appetite or overeating | | 0 | 1 | 2 | 3 |
| Feeling bad about yourself-or t | that you are | 0 | 1 | 2 | 3 |
| a failure or have let yourself or | your family | | | | |
| down | | | | | |
| Trouble concentrating on thing | gs, such as | 0 | 1 | 2 | 3 |
| reading the newspaper or water | ching TV | | | | |
| Moving or speaking so slowly t | hat other | 0 | 1 | 2 | 3 |
| people could have noticed? O | r the | | | | |
| opposite-being so fidgety or re | stless that | | | | |
| you have been moving around | a lot more | | | | |
| than usual | | | | | |
| Thoughts that you would be be | etter off | 0 | 1 | 2 | 3 |
| dead or of hurting yourself in s | • | | | | |
| FOR C | OFFICE CODING: | 0+ | + | + | |
| | | | | Total Score: | |
| | | | | | |
| If you checked off any proby your work, take care of thing | | | • | - | r you to do |
| | П | | | | П |
| Not difficult | Companyly = t | | \\\ | | Futura maralus |
| Not difficult | Somewhat | | Very | .11 | Extremely |
| at all | difficult | | difficu | IIT | difficult |

Developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke and colleagues, with an education grant from Pfizer Inc. No permission required to reproduce, translate, display or distribute.



| Regional Resources: |
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| Professional Resources: |
| PHQ-9 In Multiple Languages - Multicultural Mental Health Resource Centre – Mental Health Commission of Canada: http://www.mmhrc.ca/?q=en/node/100000469 |
| 2008 CPG's Psychological Aspects of Diabetes S82-S85 http://www.diabetes.ca/documents/2008CPG/18%20PSYCHOLOGICAL%20ASPECTS%20OF%20DIA/ETES-S82-S85.pdf |
| Client Resources: |
| Mood Disorders Association of Ontario Check Up From The Neck Up: http://www.mooddisorders.ca/program/check-up-from-the-neck-up |
| ConnexOntario: http://www.connexontario.ca/ |
| Mind Over Mood by Dennis Greenberger and Christine A. Padesky |
| Feeling Good: The New Mood Therapy by David D. Burns |
| The Anxiety and Phobia Workbook by Edmund J. Bourne |
| Life After Trauma by Dena Rosenbloom, Mary Beth Williams and Barbara F. Watkins |

Fibromyalgia and Chronic Myofascial Pain by Devin J. Starlanyl and Mary Ellen Copeland