

You've Screened for Depression, Now What? Consideration for Follow-Up for Youth Identified At Risk

Oregon Pediatric
Improvement Partnership

R.J. Gillespie, MD, MHPE

Medical Director

Oregon Pediatric Improvement Partnership



CCO Incentive Metric Guidance

- **Follow-Up Plan** is the proposed outline of treatment to be conducted as a result of a positive depression screening. Follow-up for a positive depression screening must include one or more of the following:
- Additional evaluation.
 - Suicide Risk Assessment.
 - Referral to a practitioner who is qualified to diagnose and treat depression.
 - Pharmacological interventions.
 - Other interventions or follow-up for the diagnosis or treatment of depression.

Following Up After a Positive Screen

- General tips for all patients.
- Understanding protective factors and resiliency.
- Suicide ideation and safety plans.
- Setting follow-ups.
- Documentation to map to CCO incentive metric requirements.

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- **Hope:** Increase the family's hopefulness by describing your realistic expectations for improvement and reinforcing the strengths and assets you see in the child and family.
- **Empathy:** Communicate empathy by listening attentively.
- **Language:** Use the child or family's own language to reflect your understanding of the problem.
- **Loyalty:** Communicate loyalty to the family by expressing your support and your commitment to help.
- **Permission:** Ask the family's permission for you to ask more in-depth questions or make suggestions for further evaluation or management.
- **Partnership:** Partner with the child and family to find agreement on achievable steps that are aligned with the family's motivation.
- **Plan:** Establish a plan (or incremental first step).

Key Factors to Improve Engagement

- Patient self-management and monitoring.
- Patient and family education and support.
- Setting individual goals with the family.



Protective Factors and Resiliency

- Demonstrates physical, cognitive, emotional, social, and moral competencies.
- Engages in behaviors that promote wellness and contribute to a healthy lifestyle.
- Forms caring, supportive relationships with family, other adults, and peers.
- Engages in a positive way with the life of the community.
- Displays a sense of self-confidence, hopefulness, and well-being.
- Demonstrates resiliency when confronted with life stressors.
- Demonstrates increasingly responsible and independent decision-making.

General Tips for All Patients

- Positive capital
- Sleep hygiene
- Exercise
- Diet
- Screen time limits
- Community resources, support groups
- Referral decisions based on acuity/severity



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Safety Plans vs. “No Suicide Contract”

- “No Suicide Contract” doesn’t typically give teens the tools for coping.
- Gives a false sense of security to the provider.
- Safety plans include:
 - Prioritized list of coping strategies.
 - Framework for patient to address crisis.
 - Uses patient’s own words.
 - Involves commitment to therapeutic process.
- Not appropriate in imminent risk (send to ER/emergency psych eval) or if cognitive impairment.

Steps in Safety Plan Development

1. Warning signs
2. Internal coping strategies
3. People and places that provide distraction
4. People I can ask for help
5. Professionals or agencies I can contact
6. Making the environment safe

Patient Safety Plan Template

Step 1: Warning signs (thoughts, images, mood, situation, behavior) that a crisis may be developing:

1. _____
2. _____
3. _____

Step 2: Internal coping strategies – Things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):

1. _____
2. _____
3. _____

Step 3: People and social settings that provide distraction:

1. Name _____ Phone _____
2. Name _____ Phone _____
3. Place _____ 4. Place _____

Step 4: People whom I can ask for help:

1. Name _____ Phone _____
2. Name _____ Phone _____
3. Name _____ Phone _____

Step 5: Professionals or agencies I can contact during a crisis:

1. Clinician Name _____ Phone _____
Clinician Pager or Emergency Contact # _____
2. Clinician Name _____ Phone _____
Clinician Pager or Emergency Contact # _____
3. Local Urgent Care Services _____
Urgent Care Services Address _____
Urgent Care Services Phone _____
4. Suicide Prevention Lifeline Phone: 1-800-273-TALK (8255)

Step 6: Making the environment safe:

1. _____
2. _____

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Step 1: Understanding Warning Signs

- How will you know when you need to use your plan?
- What do you experience when you are distressed?
- Identify thoughts, images, thinking processes (like racing thoughts), moods or behavior that will help the teen know when they are in trouble.

Step 2: Internal Coping Strategies

- What can you do on your own if you become suicidal again to help yourself?
- Identify the types of positive capital activities that might help the teen to remain calm.



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Step 3: People and Places That Can Distract

- If step 2 doesn't help, identify places the patient can go, or people they can talk to that would provide a distraction.
- Who do you enjoy socializing with?
- Who helps you take your mind off things?
- Identify several people or places in case one or more are not available.

Steps 4 and 5: Getting Help

- If step 3 doesn't help – move on to personal and then professional contacts.
- Include local, state, or national suicide prevention hotlines as appropriate.



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Step 6: Making the Environment Safe

- Important that any means available to the teen are removed.
 - Excess or unnecessary prescriptions.
 - No firearm access.



Other Tips

- May consider adapting safety plans into brief crisis cards.
 - Our clinic is developing one that fits in an iPhone case.
- Generally recommended to follow-up in 1-2 weeks.
 - PHQ-9 can be used as a follow-up assessment to document symptom severity.

Documentation

- CCO Incentive Metric includes screening *and follow up plan*.
- Basics of documentation:
 - Screening tool administered, scored and interpreted
 - Safety plan completed
 - Guidance subjects discussed (positive capital, sleep hygiene, diet)
 - Referrals (Mental Health providers and community resources)
 - Next appointment

References

- **Enhancing Pediatric Mental Health Care: Algorithms for Primary Care.** *Pediatrics* 2010;125;S109.
- **Guidelines for Adolescent Depression in Primary Care (GLAD-PC): II. Treatment and Ongoing Management.** *Pediatrics* Vol. 120 No. 5 November 1, 2007 pp. e1313 - e1326.
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