

Family Strengthening Home Visitation Programs

Updated 3.17.14

Guidelines for Perinatal Depression Screening and Follow-up

Purpose

The guidelines for Perinatal Depression Screening and Follow-up are intended to provide clear and consistent guidelines that allow home visitation staff to effectively support clients who are experiencing depression.

- I. In accordance with the Family Strengthening Network’s strength-based and relationship-based philosophies, depression and mental health issues will be addressed with empathy and in a nonjudgmental manner.
- II. At one visit each month, the home visitor will ask the following questions as part of the PHQ-2 depression screening. (The questions will be asked in a culturally sensitive, casual and conversational way without using a formal questionnaire.)
 - a. Over the last two weeks have you felt down, depressed, or hopeless?
¿En las últimas dos semanas, se ha sentido decaída, deprimida, o sin esperanza?
 - b. Over the last two weeks have you felt little interest or pleasure in doing things?
¿En las últimas dos semanas, ha sentido poco interés o placer en hacer las cosas?
- III. If the client responds “yes” to at least one question from the PHQ-2, the home visitor will complete the PHQ-9 depression screening.
- IV. The steps below are recommended for clients exhibiting **any** symptoms of depression:
 - a. Provide empathetic support and feedback.
 - b. Normalize and validate client’s feelings and experience.
 - c. Provide information about maternal depression.
 - d. Observe maternal and infant interactions.
 - e. Explore support system with client and family.
 - f. Explore ways to cope, manage, or overcome depression with client and possibly her family.
 - g. Document key points, referrals and follow up in progress notes.
 - h. Put original copy of PHQ-9 in client file.
- V. The additional steps below will be followed based on the client’s PHQ-9 score:

PHQ-9 Score	Symptom Severity	Additional Procedures to Support Client
0-4	No symptoms	<ol style="list-style-type: none">1. Continue routine visits2. Rescreen monthly during the first year postpartum
5-9	Minimal symptoms	<ol style="list-style-type: none">1. Discuss client’s mental health status with the direct Supervisor.2. Utilize tools such as a goal sheet and educational materials to explore ways she can take care of herself such as:<ol style="list-style-type: none">a. Exercise

PHQ-9 Score	Symptom Severity	Additional Procedures to Support Client
		<ul style="list-style-type: none"> b. Sleep c. Nutrition d. Talking to someone that she trusts e. Spending time with friends and family <ol style="list-style-type: none"> 3. Offer referrals for support groups, and/or mental health hotline, if the client is interested. 4. Offer referrals for mental health counseling if there seem to be more than minimal symptoms of depression or if the client expresses other emotional issues. 5. Follow up with client to ensure that client is getting the support that she needs at the next visit (i.e., through her support system, referrals, etc.). 6. Use motivational interviewing skills to assist with problem solving. 7. Continue to conduct PHQ-9 once each month during the first year postpartum.
10-14	<p>Minor depression Major depression: <i>mild*</i></p> <p><i>*Note: If symptoms are present for ≥ two years, then it is a probable chronic depression which warrants antidepressant or psychotherapy (ask “In the past 2 years have you felt depressed or sad most days, even if you felt okay sometimes?”).</i></p>	<ol style="list-style-type: none"> 1. Discuss client’s mental health status with the direct Supervisor. 2. If appropriate (client has minor depression), utilize tools such as a goal sheet and educational materials to explore ways to support mom’s mental health such as setting self-care goals around: <ul style="list-style-type: none"> a. Exercise b. Sleep c. Nutrition d. Talking to someone that she trusts e. Spending time with friends and family f. Activities to support healthy infant bonding, attachment and development 3. Explain and offer referrals for mental health counseling, support groups, and/or mental health hotline. 4. Follow up with client to ensure that she is receiving the needed support and services. 5. Use motivational interviewing skills to assist with problem solving. 6. Continue to conduct PHQ-9 once each month. 7. Notify supervisor if no change in 1 month 8. Consider referral for mental health assessment if not previously completed and there is no change in PHQ-9 score in 1 month.
15-19	Major depression: <i>moderately severe</i>	<p>Mental Health Treatment is indicated</p> <ol style="list-style-type: none"> 1. Connect mom with mental health services and support services immediately. Call during home visit to schedule appointment. Ensure that client has a way to get to the appointment (bus tokens/taxi voucher, if needed). 2. Explore with client and family the need for a support system to help take care of mom and baby.

PHQ-9 Score	Symptom Severity	Additional Procedures to Support Client
		<ol style="list-style-type: none"> 3. Review client's mental health status with direct Supervisor following the visit; provide summary of the visit and interventions. 4. Follow up with client and referral source to ensure that client has been served. 5. Follow up every 1-2 weeks to provide coaching and support as needed to assist client in following their treatment plan, goals, and barriers. 6. Carefully observe maternal-infant interactions and offer activities to support healthy infant bonding, attachment and development as needed. 7. Continue to conduct PHQ-9 once each month for up to one year postpartum; update supervisor with PHQ-9 results.
≥20	Major depression, <i>severe</i>	<p>Mental Health Treatment is indicated</p> <p>Same as above for 1-3</p> <ol style="list-style-type: none"> 4. Follow-up with client about the referral for evaluation and treatment within 72 hours. 5. Use motivational interviewing skills as needed to assist with problem solving to complete the referral. 6. Follow up every 1-2 weeks regarding treatment plan, goals, and barriers. 7. Carefully observe maternal-infant interactions and offer activities to support healthy infant bonding, attachment and development as needed. 8. Continue to conduct PHQ-9 once each month for up to one year postpartum; update supervisor with PHQ-9 results.

Note: If client is a danger to self or others, please take immediate action and refer to the Guidelines for identifying Suicide Risk.