

Comparing your practice The Management of Depressive Symptoms

Name of Facility: _____

Date Reviewed: ____/____/20____

- DIRECTIONS:**
1. Enter the resident's clinical record number or initials.
 2. Review the clinical record for evidence of each practice.
 3. Enter a "Y" if it is identified and an "N" if it is not identified. (Reviewers may have N/A for some records.)
 4. Tally the Number of "Y" s identified for each Best Practice, divide by the total number of applicable records reviewed to determine the percent.

	Clinical Record										TALLY		%	
	1	2	3	4	5	6	7	8	9	10	# Yes	Total #		
Enter Resident's Clinical Record ID # or Initials														
NHIFT														
1. Resident was screened for depression using a validated screening tool (not MDS) within seven calendar days of admission.														
2. For residents who screened positive for depression, follow-up treatment was initiated.														
3. Resident was re-evaluated within two weeks of interventions to monitor the effects.														
Screening/Evaluation														
4. Resident screened for depression using a validated screening tool (not MDS) with each MDS assessment (past 12 months).														
5. For cognitively impaired residents, depression screening was completed at each MDS assessment (past 12 months) using a validated tool for cognitively impaired residents (e.g., Cornell).														
6. For residents with new-onset depression or worsening of depressive symptoms, a medical evaluation was received.														
Management														
7. For residents who have been diagnosed with depression, SSRI antidepressant was prescribed.														
8. For residents who have been diagnosed with depression, their care plan includes psychosocial approaches (e.g., psychotherapy) or adjunctive strategies (e.g., exercise and activities).														
9. For residents who have been diagnosed with depression and show no or little improvement in depressive symptoms in 6 weeks, referral to mental health professional was made.														
10. For residents with suicide ideation, referral made to mental health professional per facility policy.														