

Patient - Identify & Visually Display Depressed Patients (iQIIG)

Business Objective

To identify patients on a monthly basis who had Depression Screening and qualify as depressed. To provide facilities and networks with a monthly report that contains statistics for patients who have had Depression Screening and qualify as depressed.

Business Description

The ability to track patient depression once a month. The facility responses to the following questions need to be captured:

- Has the patient completed a depression screening this month?
 - We are not requiring every single patient to be screened every month, but if a patient is screened it should be reported that same month.
- Based on the screening, does the patient qualify as depressed? (this is determined from clinical questionnaires, please see attached example in additional resources)
- If the patient qualifies as depressed, is the patient receiving mental health treatment for depression?

The Measure only tracks depression annually but the facilities need this information on a more frequent basis in order to effectively provide support to the patient.

The ability to report on patient depression once a month. The Measure only tracks depression annually, but the facilities need this information on a more frequent basis, in order to effectively provide support to the patient. (Shift reporting requirement to a follow-on feature, the NCC will provide reporting in the short term - perhaps aligning with another reporting feature across EQRS, also consider enabling corporate users to have accessing to reporting for their facilities)

Benefit Hypotheses

Patients identified as depressed will receive the resources and support that they need.

Acceptance Criteria

Acceptance Criteria	Notes/Questions	Team(s) Involved
Has the patient completed a depression screening this month?	If yes, they can answer the next question. If no, they must provide an exclusion reason.	MoD
Based on the screening, does the patient identify as depressed?	Options are yes and no. If yes, they can answer the next question.	MoD
If they answer no...	<ul style="list-style-type: none"> • Has the patient been screened for cognitive decline? • Did their score indicate a decline? • Have they been referred for treatment? 	MoD
If the patient identifies as depressed, is the patient receiving mental health treatment for depression?	<p>Options are yes and no.</p> <p>If yes, we are looking for mental health therapy or medication treatment.</p> <p>Note: If patient is receiving medication treatment then a text box should be available to enter the medication. Patients could have both, mental health therapy and medication treatment. Consider a fixed list of medication vs free text fields. Free text fields may be MVP to form patterns and determine what fixed values could/should be used, or an integration with a medication management tool.</p> <p>Options for mental health therapy:</p> <ul style="list-style-type: none"> ▪ Psychiatrist or other doctor. ▪ Clinical psychologist. ▪ Clinical social worker. ▪ Clinical nurse specialist or nurse practitioner. ▪ Physician assistant ▪ Other (with a free text field) 	MoD
Facilities will provide this information on a monthly basis, within that month.	Facilities can provide February's depression data in February, by the end of March,	MoD

All roles that can provide clinical depression data will be able to provide this information		MoD
Late submissions will not be accepted	A late submission would be providing February's data in April	MoD
If a patient was admitted to a facility in a given month, this data can be submitted from the first of that month to the end of the that next month.	If the patient was admitted in February, the patient data can be submitted from 1st of Feb to Mar 31st.	MoD
If the patient was not discharged from a facility or if the patient was discharged and not admitted to another facility, then that facility will need to provide this information.		MoD
UI, Microservices, and EDSM		MoD
Training to the networks for Depression Reports to provide this on a monthly basis.		EOCT

Assumptions

- This information will be included in a batch file
- If a patient has not been in a facility for 60 days, the depression information will be submitted within the first 60 days
- This data will not impact the QIP clinical depression measure calculation
- All the patients will be available for this data submission - NCC will exclude patients that screen positive for cognitive decline

Dependencies

Dependency	Outgoing Team(s)	Receiving Team(s)	Date Needed	Date Completed	Notes
Training for the community	EOCT	ESRD facilities			

Notes

Additional Resources

Mock up:

<https://ummentalhealth.info/toolkit-download/pdf/PatientHealthQuestionnairePHQ9.pdf>