Scripts for Screening and Referral for PPD(A)

These are scripts to be used as a guide by staff and providers to discuss pregnancy and postpartum depression and anxiety.

This should NOT to be given to patients, parts of it could be adapted into written form if desired. The italics are recommended words to be used when speaking to the parent.

Please review and adapt to the needs of the families using your clinic.

**Handing out the Screen**

This block can be printed on the screen:

Congratulations on your new baby! It’s a big adjustment and we would like to know how you are feeling. Please check the answer that comes closest to how you have been feeling in the past 7 days, not just how you feel today.

Front desk staff: (The person handing the parent the screening tool.)

Having a baby is a big adjustment and your provider would like to check in with you and find out how you are feeling. Please fill this out, thinking about how you have been feeling over the past week. Your (nurse/MA) will collect it from you in the room.

**Introducing the Screen to Patients:**

Well-Child Visit:

- PROVIDER: As your child’s provider, I’m concerned about the wellbeing of your child and so I’m also concerned about the wellbeing of the people who take care of your child. I’d like to know how you are feeling and how you have been coping. Please take a few minutes to fill out this short survey. (OR – Thank you for filling this out.)

Prenatally:

- PROVIDER: I’d like to check in with you to understand how you are feeling since you’ve become pregnant. Please take a few minutes to fill out this short survey. (ACOG NY- Toolkit 2008)
- PROVIDER: Since you are now in the third trimester of your pregnancy and getting closer to your delivery, I’d like to check in with you and understand how you are feeling lately. Please take a few minutes to fill out this short survey. (“Behavioral Risk Factor (BFR) screen and A.L.E.R.T. Brief Interventions,” Medical and Health Research Association of New York City, Inc.)

Postpartum Visit:

- PROVIDER: Now that you have had your baby I would like to know how you are feeling and how you have been coping lately. Please take a few minutes to fill out this short survey. (“Behavioral Risk Factor (BFR) screen and A.L.E.R.T. Brief Interventions,” Medical and Health Research Association of New York City, Inc.)
Response to a positive PPD(A) screen:

- PROVIDER: This is a screen for depression and anxiety. I’m concerned because you have a high score. Have you been feeling down, depressed, or anxious lately?
  - PROVIDER: Would you be willing to see someone for help?
    - PROVIDER: Do you have someone you feel comfortable talking with, such as your clinician, doctor, midwife, or a therapist you already see?
      - Yes: PROVIDER: Can we help you make an appointment?
      - No: PROVIDER: Let’s talk about who you would like to talk with.
        - PROVIDER: Can we help you identify a provider or connect you to a therapist?

Follow Up Plan:

If the screen was high:

- A follow up phone call within hours or days after the initial screen was high
  - clinic should decide who will be the staff member who makes this call consistently use this staff member
- A follow up appointment with the parent’s provider or therapist should take place within a week.

Follow-up Call:

- PROVIDER: I wanted to follow up with you about the discussion we had when you were in last week. Have you been able to connect with your provider or therapist?
  - Yes: PROVIDER: How did everything go?
    - Things went well: PROVIDER: I am glad to hear that, please let us know if you need any additional information or referrals.
    - Things did not go well: PROVIDER: Can I help connect you to a different provider?
  - No: PROVIDER: What has prevented you from connecting with the referral?
    - Try to problem solve with the parent—if wait time is long provide second referral, if require childcare/transportation provide additional information.

How to Respond to High Positive Screen:

- PROVIDER: This is a screen for depression and anxiety. Based upon your response(s) and/or our discussion, I’m worried about your wellbeing. I believe you need to see someone today. I can help you set something up right now.
  - PROVIDER: Let’s talk about how this process will go.
    - Discuss how clinic handles crisis- walk parent through the process, and physically have a staff member get them to emergency room, OR bring in behavioral health OR find transportation for them to emergency room.
    - It’s very important that the clinic has a plan for the child while the parent receives care
      - Option 1: Clinic is connected to behavioral health/emergency room and can provide child care
• Option 2: Clinic with transfer parent to Mother-Baby Program at Hennepin County Medical Center (612)873-6262, which allows child to come with mother to treatment
• Option 3: Clinic does not have child care, or place where parent is being transferred does not have child care: ask parent if they have someone they can call to come and be with them, who can also watch child (mother, sister, partner)
  ▪ Help parent manage any additional responsibilities (Childcare, eldercare etc.)

If the parent says they do not want to see someone today:

  o PROVIDER: Is there a reason why you are hesitating?
    ▪ Listen to parent, try to help parent deal with issues around why they don’t want to see someone. Try NOT to be confrontational, rather gently work with parent to help them feel safe visiting additional resources.
    ▪ PROVIDER: Can I call someone to be with you? (Such as your mom, partner, sister, friend etc.)
    ▪ If a parent absolutely refuses to seek further care today, work as hard as you can to have someone come meet them.

Follow up for High Positive Screen:

Make a follow up call to high positive screens within days or hours. Child’s clinic will make call to see if the mother has connected to care. It would be best to have mother make an appointment for herself within 1 week.

If a patient refused further care, call them within 24 hours and continue trying to follow up call until reached. If having trouble reaching them use emergency contact to try and reach them (without breaking HIPAA-just ask if the emergency contact can help you reach the parent for follow up)

• I wanted to follow up with you about the referral you received when you were in last week. Have you been able to connect with the referral?
  o Yes: Did everything go alright?
    ▪ Yes: I am glad to hear that, please let us know if you need any additional information or referrals
    ▪ No: Would you like a referral to a different provider?
  o No: What has prevented you from connecting with the referral?
    ▪ Try to problem solve with the parent—if wait time is long provide second referral, if require childcare/transportation provide additional information.

Every clinic should have a Crisis Response Plan prepared. If clinic has no Crisis Resource in place at time of emergency call 911. *If clinics need help preparing a Crisis Response Plan please contact MDH Perinatal Mood and Anxiety Disorders (Email: Tessa.Wetjen@state.mn.us Phone: 651-201-3625).

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To obtain this information in a different format, call: 651-201-4999.