Name of Policy:	Psychosocial Assessment		
Policy Number:	3364-162-01	THE UNIVERSITY OF TOLEDO	
Department:	Ambulatory Services-Cardiovascular Rehab	Č.	
Approving Officer:	Chief Executive Officer - UTMC		
Responsible Agent:	Director Cardiovascular Services		
Scope:	Ambulatory Services	Effective Date : 06/01/19 Initial Effective Date:	
X New policy proposal Minor/technical revision of existing policy Major revision of existing policy Reaffirmation of existing policy			

(A) Policy Statement

There shall be specific policies and procedures to assess the psychosocial status of patients admitted into the UTMC Cardiovascular Rehabilitation Program.

(B) Purpose of Policy

The purpose of this policy is to ensure that UTMC Cardiovascular Rehabilitation staff members identify and report clinically significant levels of psychosocial distress using the combination of clinical interviewing and psychosocial screening instruments at program entry and exit. UTMC Cardiovascular Rehabilitation staff members will provide appropriate education for patients about anxiety, depression and stress.

(C) Procedure

Patients will be screened for anxiety, depression, stress and suicidal ideations via the DASS-21 and PHQ-9 (Appendix A) and for quality of life.

- (1) Patients will complete a DASS-21 and a PHQ-9 at their first encounter in Cardiovascular Rehabilitation and upon completion of their program at 36 therapy sessions.
 - (a) Cardiovascular Rehabilitation staff members will identify patients that screen positive for suicidal ideations with the PHQ-9 by indicating that they have thoughts that they would be better off dead, or of hurting themselves in some way.
 - (i) The staff member will remain with the patient for the entire visit and remove all harmful objects from the room.
 - (ii) The staff member will complete the Outpatient Clinic Suicide Precautions Checklist in Athena (Appendix B)
 - (iii)The patient's primary care provider and/or referring physician will be contacted.
 - (iv)The patient will be provided the Suicide Hotline phone numbers and the Depression Treatment Care Instructions handout.
 - (v) The staff member will give the patient the option to be escorted to the Emergency Department for further treatment/observation.
 - (vi)Once the patient has been identified as safe to leave or has been escorted to the Emergency Department, the staff member will scan into Athena the completed Outpatient Clinic Suicide Precautions Checklist.

- (b) Completed questionnaires are submitted to Cardiac Behavioral Health to be scored and assessed for further recommendations and to be entered in the patient's Individualized Treatment Plan (ITP).
- (c) Cardiac Behavioral staff members will identify patients who screen positive for psychiatric risk (any score in the moderate or higher range AND/OR suicidal ideations indicated by a 1, 2, or 3 for question #9 see screening criteria below) and notify all Cardiovascular Rehabilitation staff members by email.

	PHQ-9 Total	Suicidal Ideations Score
Minimal Depression	0-4	0
Mild Depression	5-9	1
Moderate Depression	10-14	2
Moderately Severe Depression	15-19	3
Severe Depression	20-27	

- (d) Cardiac Behavioral Health staff member will call patients who screen positive for psychosocial risk, contact the patient's primary provider by phone and will document these phone calls in the patient's ITP.
- (e) A clinical psychologist will provide care for a patient as indicated.
- (2) Patients will complete a quality of life survey at their first encounter in Cardiovascular Rehabilitation and upon completion of their program at 36 therapy sessions. This survey assesses overall perceived satisfaction as a cardiovascular patient with the following four scores: Health/Functioning Score, Social/Economic Score, Spiritual Score, and Family Score. This instrument is scored and documented in the patient's ITP. The data is collected to report quarterly outcomes for quality of life.

Approved by:		Review/Revision Date: 06/01/19		
/s/ Todd Korzec Director Cardiovascular Services	06/18/19 Date			
/s/ Anil Mathew, M.D. Assistant Professor	06/19/19 Date			
/s/ Dan Barbee, MBA, BSN, RN, FACHE Chief Executive Officer – UTMC	06/19/19 Date			
Review/Revision Completed By: Todd Korzec Heart Station		Next Review Date: 06/01/2022		
Policies Superseded by This Policy:				