


Name of Policy: <u>Psychosocial Assessment</u> Policy Number: 3364-162-01 Department: Ambulatory Services-Cardiovascular Rehab Approving Officer: Chief Executive Officer - UTMC Responsible Agent: Director Cardiovascular Services Scope: Ambulatory Services	 Effective Date: 06/01/19 Initial Effective Date:
<input checked="" type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> 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.

