

# Guidance: Creating a Framework for Administering Behavioral Health Screenings

## Select screening tools:

1. Identify a validated\* screening tool for the population and behavior risk
2. Determine screening frequency based on each tool's guidance and recommendations.

## Prepare your agency:

1. Create a universal screening policy for the population. The policy should include a response protocol for positive screens and crisis intervention.
2. Staff should receive training on the screening tool and the policy. Staff should administer the screens consistently during all applicable interactions.
3. Ensure all staff are equipped and trained to explain to clients the purpose of the screening tool, with whom the information will be shared, and who will review and follow-up with the patient regarding their responses and when.
4. Integrate universal screening into office workflow. Determine roles and responsibilities (e.g., who will ask the patient to complete the screen, discuss results with the patient, provide relevant education and resources, coordinate treatment when indicated).

## Establish and formalize a local system of care:

1. Ensure the local system of care meets the behavioral health needs of clients and their families. The referral network should consist of a wide range of clinician types and treatment services.
2. Execute Memorandum of Agreements/Understanding (MOA/MOU) with behavioral health clinicians and/or centers for treatment referrals and improving timely access to mental health care.
3. Follow-up with patients and referral partners to ensure the connection was successfully completed.

## Capture the data:

1. Enter all screens and action plans into DAISEY, or other electronic health record systems, when applicable.

## Support Resources:

In addition to the following guidance, the following resources are available to local programs to support the identification, intervention, referral, and treatment of clients with behavioral health concerns:

### Perinatal Behavioral Health

- Perinatal Mental Health Integration [Toolkit](#)
- Perinatal Substance Use Screening, Brief Intervention, and Referral to Treatment (SBIRT) [Toolkit](#)
- Kansas Connecting Communities (KCC) offers free provider-to-provider psychiatric consultation and care coordination support, access to free trainings, and best practice recommendations, including resources and referral support. For more information, call the Consultation Line at 833-765-2004 or visit the [KCC webpage](#).

### Pediatric Behavioral Health

- Pediatric Mental Health Toolkit: *Coming soon!*
- Pediatric Substance Use Screening, Brief Intervention, and Referral to Treatment (SBIRT) Toolkit: *Coming soon!*
- KSKidsMAP supports primary care physicians and clinicians' treatment of children and adolescents with behavioral health concerns through a Consultation Line, mental health and community resources, toolkits and best practices information, and KSKidsMAP TeleECHO Clinic. For more information, call the Consultation Line at 1-800-332-6262 or visit the [KSKidsMAP webpage](#).

\*A validated screening tool is an instrument that have been tested for reliability (the ability of the instrument to produce consistent results), validity (the ability of the instrument to produce true results), and sensitivity (the probability of correctly identifying a patient with the condition).<sup>1</sup>

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<sup>1</sup> The Joint Commission. *Definition of validated and non-validated screening tool for substance use*. Retrieved on 5/10/21 from [here](#).

# Edinburgh Postnatal Depression Scale (EPDS)

Anxiety and Depression Screening	
Risk Assessment	Anxiety and depression during the perinatal period (pregnancy through 12-months post-delivery)
Administration	<ul style="list-style-type: none"> <li>• 10-item questionnaire</li> <li>• Administered via interview by health worker or self-administered</li> <li>• Validated for use with both caregivers: maternal cutoff score is 10; paternal cutoff score is 8</li> <li>• Takes less than 5 minutes to complete</li> </ul>
Ages	14-44
Frequency	<ul style="list-style-type: none"> <li>• ACOG <a href="#">recommends</a> screening for depression and anxiety at least once during the perinatal period; if screened during pregnancy, an additional screening should occur during the postpartum visit</li> <li>• Kansas Medicaid <a href="#">policy</a> supports Postpartum Support International’s <a href="#">recommendations</a>: Up to 3 times during the prenatal period, and up to 5 times during the 12-months postpartum period</li> </ul>
Pre-Screening Tool	EPDS-3
References	<ul style="list-style-type: none"> <li>• KDHE <a href="#">Perinatal Mental Health Integration Toolkit</a></li> <li>• Kansas Medicaid <a href="#">Maternal Depression Screening Policy Guidance</a></li> <li>• EPDS <a href="#">Language Translations</a></li> </ul>
Rationale	Follow the U.S. Preventive Services Task Force <a href="#">recommendation</a> for depression screening, Women’s Preventive Services Initiative’s <a href="#">recommendation</a> for anxiety screening, American Congress of Obstetricians and Gynecologists <a href="#">recommendation</a> for perinatal depression and anxiety screening, and Bright Futures <a href="#">recommendation</a> for maternal depression screening during well-child visits.

## Introduce screening tool and establish rapport.

Introduce the screening tool to the patient; a sample script is included, below. Scripts can be customized for clinic use. If the patient declines screening, advise the patient that you respect that decision but would like to inform him/her about the potential harms of unidentified perinatal anxiety and depression.

*Sample Script: Having a new baby is an important and sometimes difficult change. We ask these questions to all families we work with because 1 in 5 women and 1 in 10 men who’ve recently had a baby are at risk for depression. Expectant and new parents may also experience other mental health symptoms, such as anxiety, which is also covered in this questionnaire. Your responses will help us determine if it would be helpful to talk with a medical provider about how you’re feeling. It will also help me understand if there are any additional resources I should help you connect with.*

## Administer the EPDS screening.

Patient responds to questions 1-10 based on how they have felt in the past 7 days.

## Scoring the screen and determining risk level.

Questions 1, 2, and 4 (without an \*) are scored 0, 1, 2, or 3 with top box scored as 0 and the bottom box scored as 3.

Questions 3, 5-10 (marked with an \*) are reverse scored, with the top box scored as 3 and the bottom box scored as 0.

LOWER Risk Score < 10	MODERATE Risk Score = 10+	HIGH Risk Score = 12+	Crisis Q10: Any response other than ‘Never’
At low risk of experiencing perinatal anxiety or depression. Provide positive reinforcement	Indicates further discussion is needed to determine the most appropriate intervention.	Indicates a high possibility of anxiety and/or depression. Provide brief intervention and referral for diagnostic assessment and treatment by a primary care provider and/or mental health specialist. Follow up with patient to verify they accessed and received care.	Indicates <b>immediate</b> action is required. Make a plan for <b>immediate</b> assessment by a primary care provider, mental health specialist, and/or emergency services, as appropriate. Urgency of referral will depend on whether the suicidal ideation is accompanied by a plan, if there has been a history of suicide attempts, whether symptoms of a psychotic disorder are present, and/or if there is concern about harm to the baby or others.
<i>“Your responses indicate you are at a low risk of experiencing anxiety or depression. Is there anything not on the questionnaire that you want to discuss? If anything changes, please give me a call so we can talk more about how you’re feeling.”</i>	<i>“Your responses indicate you might be struggling some right now. Does that sound like how you have been feeling lately?”</i>	<i>“A lot of parents experience these feelings! Some find it helpful to talk to a friend or counselor. Have you talked to anyone else about how you’re feeling?” “Some effective treatment options include medication and talking to a mental health clinician. Do you think this would be helpful?”</i>	