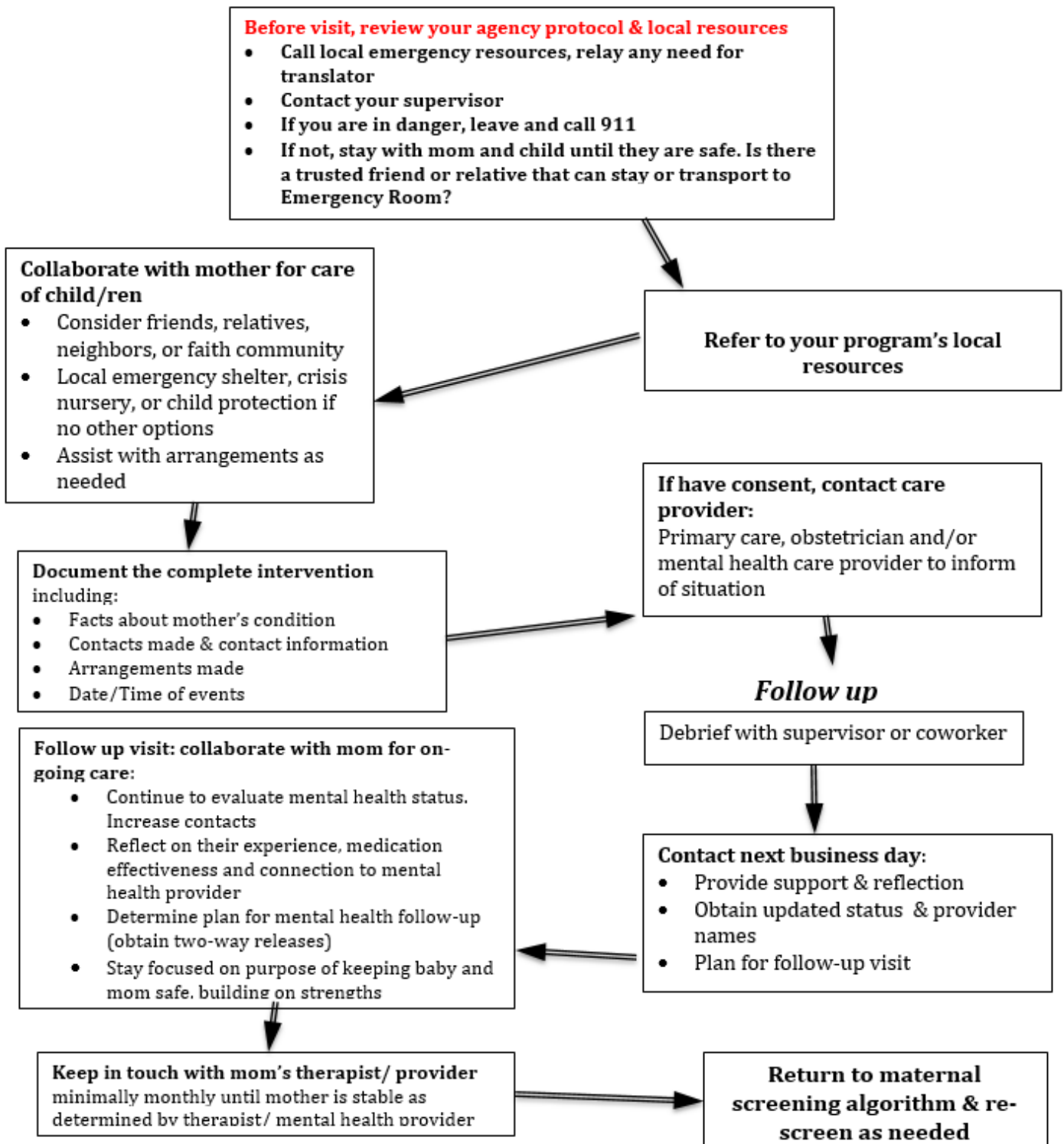


# Maternal Depression Crisis Intervention Algorithm

It is determined that mother is suicidal or homicidal and there is imminent danger



## Depression Crisis Intervention Algorithm in Word:

Before visit, review your agency protocol & local resources

- Call local emergency resources, relay any need for translator
- Contact your supervisor
- If you are in danger, leave and call 911
- If not, stay with mom and child until they are safe. Is there a trusted friend or relative that can stay or transport to Emergency Room?

Refer to your program's local resources

Collaborate with mother for care of child/ren

- Consider friends, relatives, neighbors, or faith community
- Local emergency shelter, crisis nursery, or child protection if no other options
- Assist with arrangements as needed

Document the complete intervention including:

- Facts about mother's condition
- Contacts made & contact information
- Arrangements made
- Date/Time of events

If have consent, contact care provider:

- Primary care, obstetrician and/or mental health care provider to inform of situation

Follow Up

- Debrief with supervisor or coworker

Contact next business day:

- Provide support & reflection
- Obtain updated status & provider names
- Plan for follow-up visit

Follow up visit: collaborate with mom for on-going care:

- Continue to evaluate mental health status. Increase contacts
- Reflect on their experience, medication effectiveness and connection to mental health provider
- Determine plan for mental health follow-up (obtain two-way releases)
- Stay focused on purpose of keeping baby and mom safe, building on strengths

Keep in touch with mom's therapist/ provider

- minimally monthly until mother is stable as determined by therapist/ mental health provider

Return to maternal screening algorithm & re-screen as needed

## References

(Edited Cindy Kellett, DNP Student, University of Minnesota for the Minnesota Department of Health). Developed by the El Paso County Department of Health & Environment Nurse -Family Partnership Program - Adopted by the work of Renquist, J. & Barnekow, K. (2008) Wisconsin Infant Mental Health Conference)

Kroenke, K.; Spitzer, R. L.; Williams, J. B. W. (2001) PHQ-9. Journal of General Internal Medicine, 16(9): 606–613.

Wisner, K.L; Parry, B. L.; Piontek, C. M. (2002). Postpartum Depression. N Engl J Med 347(3), 194-199.



Created by the Minnesota Department of Health | Community & Family Health Division | Family Home Visiting Section | [Minnesota Dept of Health Family Home Visiting page](#) P.O. Box 64882, St. Paul, MN 55164, [Health.HomeVisiting@state.mn.us](mailto:Health.HomeVisiting@state.mn.us) To obtain this information in a different format, call: 651-201-4090, Fax: 651-201-3590. October 2017