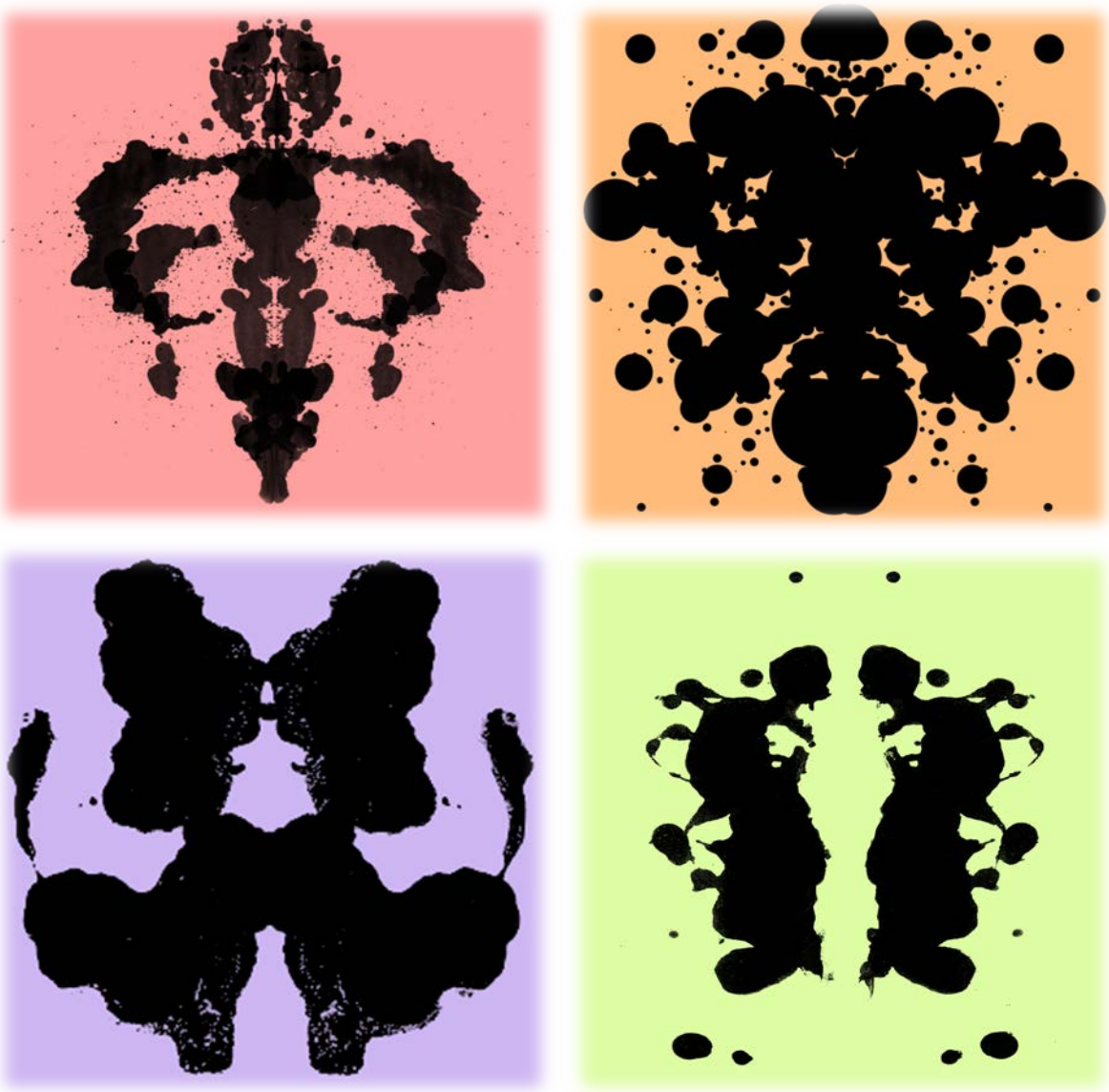

MENTAL HEALTH ASSESSMENT TOOL

FORWARD

The *Mental Health Assessment Tool* was developed to bring awareness to behaviors that may potentially disrupt the TB treatment regimen. Substance abuse and mental illness may complicate case management. Knowledge of these issues can help TB program staff anticipate problems.

This tool includes a series of questionnaires and observations that can be documented during the patient's medical evaluation. This information may highlight significant issues which should be addressed by TB program staff or require referral to a mental health professional.

The design of the *Mental Health Assessment Tool* encourages TB program staff to learn as much as possible about the patient and involve them in creating a treatment plan that will increase treatment success. This may involve the recognition and management of mental health diagnosis and substance abuse problems.

CAUTIONS

Please keep in mind the following cautions:

Use of the screening tools and ratings does not produce a diagnosis. Rather, the tools and scales can point toward significant behaviors that may require further assessment by a professional. In addition, the tool can identify behaviors that may need to be addressed to ensure successful patient adherence or that require referral to a mental health professional.

A particular "score" does not mean that the individual has a specific condition. These screening tools and rating scales are only one component of an evaluation.

Programs may benefit from a protocol that clearly identifies which behaviors, scores, or responses require referral to a mental health provider. For further assistance see the attached *Mental Health Resource Guide*.

Symptoms suggestive of suicidal or harmful behaviors warrant immediate attention by a trained mental health clinician.

Please see *Considerations for a Successful Interview* at the end of this booklet.

DISCLAIMER

THIS DOCUMENT CONTAINS A SCREENING TOOL.

IT IS NOT INTENDED TO BE USED AS A MENTAL HEALTH DIAGNOSTIC TOOL.

MENTAL HEALTH ASSESSMENT TOOL

DEPRESSION DISORDER

Patient Health Questionnaire (PHQ-2)

	Yes	No
1. Do you often feel down, depressed, or hopeless?		
2. Do you lack interest in activities, hobbies, and what is happening around you?		

***Interpretation**: If patient answers "yes" to either of these questions, it may be an indicator that further assessment is needed.*

SUICIDE – SELF HARM

Suicide Assessment

	Yes	No
1. Do you feel hopeless about the present or future? If yes move to question 2. If no, go to question 4.		
2. Have you had thoughts about taking your life? If yes move onto question 3.		
3. When did you have these thoughts and do you have a plan to take your life?		
4. Have you ever attempted to harm yourself or attempted suicide?		

***Interpretation**: If the patient answered "yes" to any of the questions, seek immediate attention from a trained clinician.*

BIPOLAR DISORDER

Black Dog Institute's Self-Test

	Yes	No
1. Have you been too depressed to work, or only able to work with difficulty?		
2. Do you experience 'ups' as well as 'downs' with your mood?		
3. Are your ups 'wired' or 'hyper' – more than when you are just happy?		

***Interpretation**: If patient answered "yes" to all 3 questions, seek referral. If all three answers were not "yes", then the patient may have another condition such as depression or* Attention Deficit Hyperactivity Disorder *(ADHD). Adjustment of the care plan may be needed. If in question, it is always best to seek referral to a trained clinician.*

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SUBSTANCE ABUSE AND DRUG ABUSE

*CAGE-AID (CAGE questions adapted to Include drugs)**

	Yes	No
1. Have you ever felt you should cut down on your drinking or drug use?		
2. Have people annoyed you by criticizing your drinking or drug use?		
3. Have you ever felt bad or guilty about your drinking?		
4. Have you ever had a drink or used drugs first thing in the morning, to steady your nerves, or to get rid of a hangover?		

***Interpretation**: Yes = 1 pt, No = 0 pts A higher score is a stronger indication of an alcohol or drug problem. A total score of 1 or greater is considered significant and suggests a referral to a professional addiction counselor.*

Miscellaneous Drug and Alcohol Questions

1. What do you think it looks like if someone has an alcohol or drug problem?
2. What are your reasons for drinking or using drugs?
3. What do you think would happen if you decreased or stopped your alcohol or drug use?

Interpretation: The previous questions may be effective as they allow a means for patient to be more open in discussing their substance use.

PROVIDER OBSERVATION OF PATIENT

This section is completed through observations made by the TB program staff.

The following observations represent behaviors and/or thoughts that identify the need for further assessment and referral to a mental health professional:

- The patient gives inappropriate responses to normal questions
- The patient does not exhibit a grasp of reality
- The patient indicates that they are a person of authority or power
- The patient exhibits an inappropriate or unusual facial expression
- The patient exhibits unusual behavior

Observations noted:

INTRODUCING THE MENTAL HEALTH SCREENING TOOL TO YOUR PATIENT

Prior to beginning questionnaire, introduce the purpose of the tool.

- Caution the patient that the following questions may be personal. A patient-centered case management approach is most successful when tailored to each person's individual clinical and social circumstances.
- Advise the patient that TB treatment is more often successful when underlying psychological issues, and or substance abuse are identified and addressed.

REFERENCES

1. Black Dog Institute. (2011). Self-test for bipolar disorder. Retrieved from http://www.blackdoginstitute.org.au/public/bipolardisorder/self-test.cfm

2. Ewing, J.A. (1984). Detecting alcoholism: The CAGE questionnaire. *JAMA: Journal of the American Medical Association, 252*, 1905–1907.

3. Kroenke, K., Spitzer, R. L., & Williams, J. B. (2005). The patient health questionnaire-2: Validity of a two-item depression screener. *Medical Care 41*(11), 208-213.

4. United States Department of Veterans Affairs. (2011). Mental Health: Suicide prevention. Retrieved from http://www.mentalhealth.va.gov/suicide_prevention/index.asp

*'CAGE' is an acronym formed from the italicized letters in the questionnaire (Cut-Annoyed-Guilty-Eye). For more information see JA Ewing (1984) 'Detecting Alcoholism: The CAGE Questionnaire', *Journal of the American Medical Association* 252: 1905-1907.

NON SPECIFIC MENTAL HEALTH ASSESSMENT CHECKLIST

BEHAVIOR

Normal ☑	Abnormal	Comments
Alertness ☐	Hypervigilant Sleepy Confused	
Posture ☐	Slumped Rigid Jerky	
Walking Movement ☐	Abnormal	
Facial Expression ☐	Immobile Sad Worried Angry Happy Confused	
Eye Contact ☐	Poor	
Attention Span ☐	Poor Highly Distractible	
Motor Level ☐	Hypoactive Hyperactive	
Mannerisms ☐	Posturing Spontaneous Movements	
Physiological ☐	Tearful Crying Blushing Sweating Tremulous Drooling	
Response to Staff ☐	Seductive Indifferent Cold	
Cooperativeness ☐	Uncooperative Sarcastic Hostile Evasive Demanding Unfriendly	

APPEARANCE

Normal ☑	Abnormal	Comments
Actual Age: ———	Appears Older Appears Younger	
Build ☐	Malnourished Obese	
Hygienic State ☐	Disheveled Unshaven Odorous	

SPEECH

Normal ☑	Abnormal	Comments
Quantity ☐	Mute Answer's questions only Talkative	
Speed ☐	Slow Rapid Pressured	

MOOD AND AFFECT

Normal ☑	Abnormal	Comments
Emotions ☐	Lack of emotion Overly relaxed Anxious Tearful Scared Angry Depressed	
Mood Intensity ☐	Moderate Extreme	
Affectation ☐	Uninterested Inappropriate	

SENSORIUM

Normal ☑	Abnormal	Comments
Perception of: *Person* ☐ *Place* ☐ *Time* ☐		

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INSTRUCTIONS

Indicate whether normal or abnormal. If abnormal circle the appropriate response, or add a comment (e.g., patient wearing shorts in very cold weather). If you have not been able to assess a specific item, come back to it at a later time.

INTERPRETATION

If numerous responses are identified as abnormal, it may indicate issues that should be addressed during TB treatment, and/or issues to be addressed by a mental health professional.

MENTAL HEALTH RESOURCE GUIDE

General

- 2-1-1: Free and confidential community information and referral service: http://www.211.org/
- Centers for Disease Control and Prevention: http://cdc.gov
- United Way: http://liveunited.org/
- US Department of Health and Human Services: http://www.hhs.gov/
- US Department of Veterans Affairs: http://www.va.gov/landing2_vetsrv.htm

Mental Illness

- NAMI: Support Organizations: http://www.nami.org/Template.cfm?section=Find_Support
- National Alliance on Mental Illness: http://www.nami.org/
- Veteran's Administration Mental Health: http://www.va.gov/healtheligibility/

Substance Abuse

- 12 Step Program: http://www.12step.org/
- Addiction Technology Transfer Center (ATTC): http://www.nattc.org/index.asp
- Alcoholics Anonymous: http://aa.org/?Media=PlayFlash
- Alcohol and Drug Abuse Council: http://www.adacdet.org/
- Assistance for Persons Who Use Drugs; Find services near you for:
  - Buprenorphine Physicians & Treatment Program: http://buprenorphine.samhsa.gov/bwns_locator/
  - Drug and Alcohol Treatment Facilities: http://dasis3.samhsa.gov/
  - Mental Health Services: http://mentalhealth.samhsa.gov/databases/
  - Opioid Treatment: http://dpt2.samhsa.gov/treatment
- CDC: Substance Abuse Treatment (for HIV Infected Persons): http://www.cdc.gov/pwud/substance-treatment.html
- Centers for Disease Control and Prevention, Persons Who Use Drugs: http://www.cdc.gov/pwud/Default.html
- National Substance Abuse Index: http://nationalsubstanceabuseindex.org
- Substance Abuse and Mental Health Services Administration (SAMHSA): http://www.samhsa.gov/
- Substance Abuse and Mental Health Services Administration (SAMHSA): Substance Abuse Treatment Facility Locator: http://dasis3.samhsa.gov/
- Alcohol & Drug, Treatment Centers & Programs: http://www.theagapecenter.com/Treatment-Centers/

CONSIDERATIONS FOR A SUCCESSFUL INTERVIEW

Before using this questionnaire, it is important to make the patient comfortable and establish rapport. Good rapport can build trust which may contribute to honest disclosure. Establish rapport by:

- Offering a glass of water, a chair, and a private setting
- Exhibiting a demeanor that is calm, respectful, and genuine
- Encouraging open communication
- Acknowledging and validating the patient's distress and concerns
- Avoiding interruptions while interviewing the patient
- Modifying language to use a communication style appropriate to the patient's cultural background.

This assessment should be completed by the TB program staff; not the patient.

The mental health assessment can be started during the medical evaluation. TB staff should ask questions about substance abuse and mental health symptoms, preferably in the context of other lifestyle questions so that these potentially sensitive topics seem less threatening. This tool can also be used throughout the treatment phase as better patient rapport is established.

If the patient declines to answer a question, skip the question and try to address the question at a later time.

The assessment can be used to record patient responses as well as observations of the patients' verbal and nonverbal behavior.

MENTAL HEALTH REFERRAL

Healthcare professionals can refer patients to appropriate treatment programs or counselors. The likelihood of a successful referral is increased by:

- Telephoning for a specific appointment while the patient is present.
- Following up with an encouraging note or phone call to the patient.
- Arranging for the patient to be seen without delay.

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For consultation services or more information contact us at

1-800-TEX-LUNG

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