



# 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.

**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:

Tear Here

## 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](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 <input checked="" type="checkbox"/>	Abnormal	Comments
<i>Alertness</i> <input type="checkbox"/>	Hypervigilant    Sleepy    Confused	
<i>Posture</i> <input type="checkbox"/>	Slumped    Rigid    Jerky	
<i>Walking Movement</i> <input type="checkbox"/>	Abnormal	
<i>Facial Expression</i> <input type="checkbox"/>	Immobile    Sad    Worried    Angry Happy    Confused	
<i>Eye Contact</i> <input type="checkbox"/>	Poor	
<i>Attention Span</i> <input type="checkbox"/>	Poor    Highly Distractible	
<i>Motor Level</i> <input type="checkbox"/>	Hypoactive    Hyperactive	
<i>Mannerisms</i> <input type="checkbox"/>	Posturing    Spontaneous Movements	
<i>Physiological</i> <input type="checkbox"/>	Tearful    Crying    Blushing    Sweating Tremulous    Drooling	
<i>Response to Staff</i> <input type="checkbox"/>	Seductive    Indifferent    Cold	
<i>Cooperativeness</i> <input type="checkbox"/>	Uncooperative    Sarcastic    Hostile Evasive    Demanding    Unfriendly	

### APPEARANCE

Normal <input checked="" type="checkbox"/>	Abnormal	Comments
<i>Actual Age:</i> _____	Appears Older    Appears Younger	
<i>Build</i> <input type="checkbox"/>	Malnourished    Obese	
<i>Hygienic State</i> <input type="checkbox"/>	Disheveled    Unshaven    Odorous	

### SPEECH

Normal <input checked="" type="checkbox"/>	Abnormal	Comments
<i>Quantity</i> <input type="checkbox"/>	Mute    Answer's questions only    Talkative	
<i>Speed</i> <input type="checkbox"/>	Slow    Rapid    Pressured	

### MOOD AND AFFECT

Normal <input checked="" type="checkbox"/>	Abnormal	Comments
<i>Emotions</i> <input type="checkbox"/>	Lack of emotion    Overly relaxed Anxious    Tearful    Scared Angry    Depressed	
<i>Mood Intensity</i> <input type="checkbox"/>	Moderate    Extreme	
<i>Affectation</i> <input type="checkbox"/>	Uninterested    Inappropriate	

### SENSORIUM

Normal <input checked="" type="checkbox"/>	Abnormal	Comments
<i>Perception of:</i> <i>Person</i> <input type="checkbox"/> <i>Place</i> <input type="checkbox"/> <i>Time</i> <input type="checkbox"/>		

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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](http://www.va.gov/landing2_vetsrv.htm)

### Mental Illness

- NAMI: Support Organizations: [http://www.nami.org/Template.cfm?section=Find\\_Support](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/](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.



For consultation services or more information contact us at

**1-800-TEX-LUNG**

**[www.HeartlandNTBC.org](http://www.HeartlandNTBC.org)**