

Quality Measure Tip Sheet:

Depression – Long Stay

This measure was previously approved or given time-limited endorsement by the National Quality Forum (NQF) but has been withdrawn from NQF submission.

Quality Measure Overview

- This measure reports the percentage of long-stay residents who have had symptoms of depression during the two-week period preceding the Minimum Data Set (MDS) 3.0 target assessment date.
- This measure involves a resident and/or staff interview (PHQ*-9/PHQ-9OV).
- This measure will trigger if resident meets one of the following two conditions:

Condition A (Resident mood interview must meet Part 1 and Part 2.)

- Part 1: Little interest or pleasure in doing things half or more of the dates of the last two weeks OR feeling down, depressed or hopeless half or more of the days over the last two weeks.
- Part 2: The resident interview total severity score (TSS) indicates the presence of depression.

Condition B (Staff assessment of resident mood must meet Part 1 and Part 2.)

- Part 1: Little interest or pleasure in doing things half or more of the days over the last two weeks OR feeling or appearing down, depressed or hopeless half or more of the days over the last two weeks.
- Part 2: The staff assessment TSS indicates the presence of depression.
- Exclusions
 - Resident is comatose or comatose status is missing.
 - Resident is not included in the numerator (the resident did not meet the depression symptom conditions for the numerator), and both of the following are true: 2.1. D0200A2 = [^, -] or D0200B2 = [^, -] or D0300 = [99, ^, -]. 2.2. D0500A2 = [^, -] or D0500B2 = [^, -] or D0600 = [^, -].

Minimum Data Set (MDS) Coding Requirements

In the MDS, refer to section D:

- Conduct resident interview (PHQ-9).
- Conduct staff member interview (PHQ-9OV) if resident is unable or unwilling to complete (PHQ-9).
- Include a 14-day look-back period.
- Ask interview questions as written per Resident Assessment Instrument (RAI) requirements.
- Record code 99 if resident is unable to complete the interview process.
- Record TSS based on the interview questions.

Note:

- Coding the presence of indicators in Section D does not automatically mean that the resident has a diagnosis of depression or other mood disorder. Assessors do not make or assign a diagnosis in Section D. They simply record the presence or absence of specific clinical mood indicators.
- TSS can be interpreted as follows: 1–4: minimal depression; 5–9: mild depression; 10–14: moderate depression; 15–19: moderately severe depression; 20–27: severe depression.

Consider These Questions:

- Was the MDS coded per RAI requirements?
- Was the timing of the interview individualized to the resident's behavior patterns (i.e., if resident is normally in a bad mood in the morning, was interview conducted in the afternoon)?
- Are hunger, thirst, boredom, rest, sleep, warmth, cold, continence, pain being managed?
- Is the resident dealing with adjustment disorders?
- Is the resident's family involved and supportive?
- Is the resident involved in daily decision-making related to care and preferences?
- Are religious preferences and spiritual needs being met?
- Are activities developed based on the resident's individual needs and preferences?
 - Does the resident have cultural or ethnic traditions or practices that are important to him or her?
 - What are the resident's hobbies or interests?
 - What are the resident's likes and dislikes?
- Does the resident understand his or her illness/disease and reason for admission?
- Are psychological services offered when needed?
- Is there a behavior tracking process in place and are possible adverse side effects of medications monitored?

Visit Mountain-Pacific Quality Health at <https://www.mpqhf.org/QIO/quality-tools-resources/> for more information.