Expert Teams – Depression

Case-Based Learning & Mentorship

Tuesday, November 8, 2022

Facilitator: Julie Moss, ESRD National Coordinating Center



Meeting Logistics

- Call is being recorded
- Lines will be open for all high performing organizations
 - Please stay on mute unless you are speaking
 - Do not place the call on "hold"
- Everyone is encouraged to use the video and chat features
- Meeting materials will be posted to the ESRD NCC website.



Meeting Guidelines



INTRODUCE YOURSELF BEFORE SPEAKING



KEEP PATIENT-SPECIFIC INFORMATION CONFIDENTIAL



BE WILLING TO SHARE SUCCESSES AND DIFFICULTIES



BE OPEN TO FEEDBACK



ASK THE DIFFICULT QUESTIONS



RESPECT OTHERS



USE "...AND" STATEMENTS



KEEP TO TIME LIMITS



Who is on the call?

- Case Study Presenter Joni Baker, Freeman Health System,
 Joplin and Webb City, Mo
- High Performing Organizations
- ESRD Networks
- Centers for Medicare & Medicaid Services (CMS)



Expert Team Topic Goals

- Increase the percentage of patients screened for depression
- Increase the percentage of patients identified with depression that have received treatment by a mental health professional



Case Study Presentation & Discussion

Joni Baker, MSW, LCSW, LSCSW Freeman Health System, Joplin and Webb City, Mo



CASE STUDY

Freeman East Dialysis-Joplin, MO Medical Director: Dr. Nagaria





CASE STUDY



- Patient is white female in her 40's with Type I Diabetes, currently on PD.
- She has had several hospitalizations over past year for Hyperglycemia.
- Patient lives alone and has little supports.
- She is legally blind but can see enough to walk and administer medications and do CAPD.
- KDQOL scores are all below average. Patient admits to feeling depressed and anxious.

PROBLEM

HOME LIFE

Patient talks to her mother daily via phone. Mother lives several hours away in another state. Patient has a boyfriend who "occasionally" lives with her. He doesn't work and often uses her money to survive

FINANCIALS

Patient resides in Kansas. She is on a limited income with SSDI.

MEDICAL ISSUES

Patient is ESRD, Legally Blind, Type I Diabetic



FINANCIAL

Patient has been referred to HUD, food stamps, LIHEAP and qualified for all.



SUPPORTS

Patient has been referred to local community mental health center for counseling and case management services.



SUPPORT AT HOME

Patient has been referred to HCBS emergency waiver due to increased hospitalizations. She was previously pending as there are 2,400 on waiting list.

MEDICATION MANAGEMENT



Patient's insurance is trying to get her a talking scale. Patient declined mail-order pharmacy due to medications constantly changing.



PATIENT GOALS

- Remain at home doingPD
- Stay out of hospital

Case Study Discussion and Q&As



Discussion Questions



How Might We ...

- Improve depression screening and patient reporting of mental health symptoms?
- Improve patient access to treatment for depression?
- Communicate differently to reduce the stigma of depression?



Sample Resource



Screening for the Best Possible You!

Today, your doctor may ask you some questions about how you're feeling, including if you feel depressed.

Why?

- We want you to be the healthiest "You" that you can be.
- Depression is a real and treatable condition.



We ask because we care.

We'll use what you tell us to:

- Ensure your medications are appropriate and up-to-date.
- Make suggestions to help you balance your nutrition, physical and social activity.
- Offer information on actions you can take to improve your health.

If you have any questions, please ask our staff.

Created by Patients for Patients



Helping Your Patients Understand the Depression Screening

Today, you may perform depression screenings on your patients. They may not understand why they are being asked certain questions or how these questions help them to live a healthier life.

Take the time to explain that:

- You want them to be the healthiest they can be.
- Depression is a real and treatable condition.
- You ask because you care and want to help.





When you're explaining the screening:

- Show a genuine interest in the patient and what his or her life is like.
- Acknowledge the patient's feelings.
- Make sure the patient understands that this is necessary to get a complete "picture" of his or her health.

The patient can opt out of the screening.

Created by Patients for Patients



Knowledge Into Action



Top Take-Aways



What is one thing you learned today that you could start doing immediately?



How will this action improve your current way of doing the practice/process?



Who is involved and how can they support the action to make it sustainable?



Recap & Next Steps

- Additional pathways for learning
 - Sharing Best Practices to a greater community
 - Using Case Study examples to identify new ways of doing something and missed opportunities
- Next meeting Tuesday, February 14, 2023

 Visit the ESRD NCC website to find materials and share https://esrdncc.org/en/professionals/expert-teams/



Social Media









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Thank You

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