

## Core Components of Evidence-based Depression Care

TWO PROCESSES	TWO NEW 'TEAM MEMBERS' Supporting the Primary Care Provider (PCP)	
	Care Manager	Consulting Psychiatrist
<b>1. Systematic diagnosis and outcomes tracking</b>  e.g., PHQ-9 to facilitate diagnosis and track depression outcomes	-Patient education / self management support  -Close follow-up to make sure pts don't 'fall through the cracks'	-Caseload consultation for care manager and PCP (population- based)  -Diagnostic consultation on difficult cases
<b>2. Stepped Care</b>  a) Change treatment according to evidence-based algorithm if patient is not improving  b) Relapse prevention once patient is improved	-Support anti-depressant Rx by PCP  -Brief counseling (behavioral activation, PST-PC, CBT, IPT)  -Facilitate treatment change / referral to mental health  -Relapse prevention	-Consultation focused on patients not improving as expected  -Recommendations for additional treatment / referral according to evidence-based guidelines