



# National LAN Event: Unanswered Questions

**National Learning & Action Network Event:**  
***Integrating Alcohol and Depression Screenings into Whole-Person Care***  
Wednesday, May 9, 2018, 3:00-4:30 PM ET

QUESTION	ANSWER
1. What would you recommend a rural practice begin with implementing these services when resources are limited?	Dr. Rachel Hovis, Cherokee Health Systems: To address the rural clinic, I would suggest starting with screening for one thing at a time, likely depression. Educate MA's and nurses on asking the two questions from the PHQ-2 immediately after taking medical vitals. If positive, give the patient a PHQ-9 form. The provider can review this with the patient and explore their depression and create a treatment plan. Even if resources within and outside the clinic are limited, you can start with identifying those patients at risk and evaluating their level of risk and need for intervention from there. Hopefully, the providers can make themselves aware of the nearest specialists in psychiatry and psychology for referral services when needed. Creating a handout for the nurses and providers to have on hand with resources in the area can be helpful.
2. Are patients queried about ACEs, and if so, how are the results utilized clinically or in approach to patients?	Dr. Melissa Clark, Medical Home Development Group: At MHDG we query patients about ACEs within the context of the comprehensive assessment and include that information in their care plan. The care plan has goals formulated in partnership with the patient that address any barriers to care the patient might be experiencing as identified through the assessment. Our social worker meets with them as often as once a month or to address these.

## ADDITIONAL QUESTIONS?

Questions for the QIN NCC can be submitted here: [QINNCC@area-d.hcqis.org](mailto:QINNCC@area-d.hcqis.org).

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