



Caregiver Depression Playbook

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About This Document

Key Driver Diagram

The Key Driver Diagram displays a shared theory of how outcomes might improve based on information gathered from research, observation, and experience, and sets forth the collaborative's goal. The primary drivers represent key components of the system that need to be in place to achieve the goal.

Change Package

The Change Package identifies a set of changes (i.e., how to put primary drivers in place) and offers links to PDSA examples and resources to support these interventions. The Change Package lays out change ideas to help home visiting programs improve the key outcome and processes.

Measurement System

The Measurement System Guide lists the shared aims and a set of common measures that teams will report during the collaborative.

Key Driver Diagram

SMART Aim <i>The goal of the collaborative</i>	Primary Driver (PD) <i>Critical system elements that are necessary and sufficient to achieve the aim</i>
80% of primary caregivers who screen positive for depression and access services will report a 25% reduction in symptoms within 3 months from first service contact	PD1. Caregiver depression screening and discussion of results
	PD2. Competent, skilled, and supported workforce to address caregiver depression
	PD3. Effective referral, access to evidence-based (EB) treatment and follow-up

Change Package

PD1: Caregiver Depression Screening and Discussion of Results

Change Ideas (for LIAs)	PDSA Examples	Resources
Use reliable and validated screening tools	CD.PD1.C1.Example1. PHQ-9 Screening CD.PD1.C1.Example2. Choice of Screening Tool CD.PD1.C1.Example3. Using the PHQ-9	• Edinburgh Perinatal/Postnatal Depression Scale (EPDS) • Patient Health Questionnaire (PHQ-9) • HV CoIIN 2.0 Process Map for Maternal Depression
Establish screening periodicity (e.g., prenatally, postnatally, rescreening as needed)	CD.PD1.C2. Example1. Prenatal Screening CD.PD1.C2.Example2. Protocol at Intake	
Ensure screening protocols are strength-based and include talking points for explaining the depression screening	CD.PD1.C3. Example1. Screening Guide CD.PD1.C3.Example2. Script CD.PD1.C3.Example3. Remove “depression” from script	• Talking about Depression with Families: A Resource for Early Head Start and Head Start Staff • Depression Screening Guidelines • Addressing Maternal Depression in the Context of Home Visiting
Guide and support HV response to screening results (e.g., decision trees including crisis, urgent and non-urgent results; caregiver education materials)	CD.PD1.C4.Example1. Clearly Written Policy, Protocols, and Referral Lists CD.PD1.C4.Example2. Resource List & Education Packets	• Finding a Mental Health Provider for Children and Families in Your Early Head Start Program • National Maternal Mental Health Hotline Materials

	CD.PD1.C4.Example3. Database of Providers	• Maternal Depression Screening Decision Tree: PHQ-9 • Guide for Elevated Depression • Depression Crisis Intervention Algorithm
Use a tracking system (e.g., calendar alerts, file stickers, data system alerts) for caregiver depression screening periodicity and results, referral, acceptance of referral, and follow-up to treatment	CD.PD1.C5. Example1. Tickler system CD.PD1.C5.Example2. Registry Approach to Measures	• Registry template • Registry example #1 • Registry example #2

PD2. Competent, Skilled, and Supported Workforce to Address Caregiver Depression

Change Ideas (for LIAs)	PDSA Examples	Resources
Educate and support home visiting staff on caregiver depression prevalence, symptoms, impact, and treatment	CD.PD2.C1.Example1. Perinatal Mood Training CD.PD2.C1.Example2. Free Training	• Postpartum Support International (PSI) • Adult Mental Health Part Two: Perinatal Depression module
Train and support home visiting staff to improve skills and capacity to support families experiencing caregiver depression (e.g., Motivational Interviewing, IECMH)	CD.PD2.C2.Example1. Use of MI techniques CD.PD2.C2.Example2. Training and Education on Motivational Interviewing CD.PD2.C2.Example3. Enhance Skill Development in Motivational Interviewing	• What Is Motivational Interviewing? • Motivational Interviewing Network of Trainers (MINT) • Readiness Ruler • Motivational Interviewing Reminder Card

Train and support home visiting staff on evidence-based preventive support (e.g., Mothers & Babies, model curricula)	CD.PD2.C3.Example1. Practice with MH Consultant	• HV CoIIN 2.0 Mothers and Babies Professional Development series [note: requires an hvcoiin account]
Leverage / adapt reflective supervision to support home visitors connecting with families on caregiver depression	CD.PD2.C4.Example1.Shadowing CD.PD2.C4.Example2. Reflective Practice	• Virtual Reflective Supervision Tip Sheet
Support home visitors on protocol responses, including crisis response		• Case Study: Measure 6

PD3. Effective Referral, Access to EB Treatment and Follow-Up

Change Ideas (for LIAs)	PDSA Examples	Resources
Support home visitors to refer and link caregivers who screen positive to services (internal and/or external services)	CD.PD3.C1.Example1. Social Media CD.PD3.C1.Example2. In House RN CD.PD3.C1.Example3. Motivational Interviewing	• Checklist for Facilitating the Referral Process
Implement in-house, evidence-based preventative support effectively (e.g., Mothers and Babies)	CD.PD3.C2.Example1. Partnering with Behavioral Health Staff to host treatment group CD.PD3.C2.Example2. Mothers & Babies Session 1 CD.PD3.C2. Example 3. Check In for Completion of modules	• Implementing the Mothers and Babies Program

	CD.PD3.C2. Example 4. Completing M&B curriculum during visits CD.PD3.C2.Example5. Introducing M&B with clients	
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The Measurement System

Overview of Measures

SMART AIM	Outcome Measure
80% of primary caregivers who screen positive for depression and access services will report a 25% reduction in symptoms within 3 months from first service contact.	% of primary caregivers who screen positive for depression and access services with a 25% reduction in symptoms 3 months from first service contact.
Primary Drivers	Process Measures
Caregiver depression screening and discussion of results	% of primary caregivers screened for depression within 3 months of enrollment % of primary caregivers screened for depression within 3 months of their child's birth
Competent, skilled, and supported workforce to address caregiver depression	

Effective referral, access to EB treatment and follow-up	• % of primary caregivers who screened positive for depression not in evidence-based services offered a referral to evidence-based services • % of primary caregivers who screened positive for depression not in evidence-based services that verbally accept a referral to evidence-based services • % of primary caregivers who screened positive for depression and verbally accept a referral that have at least one evidence-based service contact • % of primary caregivers who screened positive for depression and did not access evidence-based services that receive a home visitor 'check in' within 30 days
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In-Depth Look at Measures

The following measures were selected to reflect the processes necessary to achieve the SMART aim.

Measure #1 (SMART Aim)

% of primary caregivers who screen positive for depression and access services with a 25% reduction in symptoms 3 months from first service contact.

Data Elements

- *Numerator:* # of primary caregivers who screen positive for depression that had a first evidence-based service contact 3 months or more ago with a 25% reduction in symptoms.
- *Denominator:* # of primary caregivers who screen positive for depression that had a first evidence-based service contact 3 months or more ago

Primary Caregiver: Children may have more than one caregiver. Identify one primary caregiver for reporting purposes. Home visitors should discuss this with families, screen all caregivers for depression, and support anyone with a positive screen. Submit data for one caregiver per child, preferably the one with a positive screen.

Frequency

Monthly

Associated Driver

SMART Aim

Measure #2

% of primary caregivers screened for depression within 3 months of enrollment

Data Elements

- *Numerator:* # of primary caregivers enrolled 3 months or more ago that were screened for depression within 3 months of enrollment
- *Denominator:* # of primary caregivers enrolled 3 months or more ago Associated Driver

Primary Driver 1

Frequency

Monthly

Measure #3

% of primary caregivers screened for depression within 3 months of their child's birth

Data Elements

- *Numerator:* # of primary caregivers whose child's birth was 3 months or more ago that were screened for depression within 3 months of their child's birth
- *Denominator:* # of primary caregivers whose child's birth was 3 months or more ago

Positive Depression Screen: A positive screen means the caregiver scored above the cutoff for depression on a validated tool.

- Edinburgh – 10 or greater
 - PHQ – 10 or greater
 - PDSS – 60 or greater
 - CESD – 16 or greater
- Evidence-Based Services:** These are proven approaches that improve depression outcomes, such as Cognitive Behavioral Therapy (CBT), Interpersonal Therapy (IPT), Moving Beyond Depression™, Mothers and Babies, and medication. Services may be offered through community referrals or within the home visiting program, where a credentialed therapist can integrate short-term CBT, IPT, or Mothers and Babies sessions and provide reflective supervision to support home visitors delivering prevention models.

Associated Driver

Primary Driver 1

Measure #4

% of primary caregivers who screened positive for depression not in evidence-based services offered a referral to evidence-based services

Data Elements

- *Numerator:* # of primary caregivers who screened positive for depression not in evidence-based services offered a referral to evidence-based services
- *Denominator:* # of primary caregivers who screened positive for depression not in evidence-based services Associated Driver

Primary Driver 3

Frequency of Data Reporting:

Monthly

Offered a Referral to Evidence-Based Services: The home visitor offers to refer the primary caregiver with a positive depression screen to treatment, explaining that services can improve both caregiver and child well-being. The offer includes discussing available options, providing resources, helping with contact or referral steps, and confirming what actions the caregiver wants taken.

Measure #5

% of primary caregivers who screened positive for depression not in evidence-based services that verbally accept a referral to evidence-based services

Data Elements

- *Numerator:* # of primary caregivers who screened positive for depression not in evidence-based services that verbally accept a referral to evidence-based services
- *Denominator:* # of primary caregivers who screened positive for depression not in evidence-based services offered a referral to evidence-based services

Verbally Accepted a Referral: When offered a referral to mental health services, the caregiver stated they were willing or interested in pursuing it.

Associated Driver

Primary Driver 3

Frequency of Data Reporting:

Monthly

Measure #6

% of primary caregivers who screened positive for depression and verbally accept a referral that had at least one evidence-based service contact

Data Elements

- *Numerator:* # of women who screened positive for maternal depression and verbally accepted a referral to evidence-based services that had at least one evidence-based service contact
- *Denominator:* # of women who screened positive for maternal depression not in evidence based services that verbally accepted a referral to evidence-based services

Had at Least One Evidence-Based Service Contact: The caregiver had at least one contact with an evidence-based service provider. An initial evaluation appointment counts as contact.

Associated Driver

Primary Driver 3

Frequency of Data Reporting:

Monthly

Measure #7

% of primary caregivers who screened positive for depression and did not access evidence-based services that receive a home visitor 'check in' within 30 days

Data Elements

- *Numerator:* # of primary caregivers who screened positive for depression and did not access evidence-based services that receive a home visitor 'check in' within 30 days
- *Denominator:* # of primary caregivers who screened positive for depression 30 or more days ago that did not access evidence-based services within 30 days

Home Visitor Check-In: A re-screen or focused conversation about depressive symptoms. The goal is to ensure caregivers with ongoing symptoms who have not accessed outside support remain engaged. Programs may test different check-in approaches, as long as the conversation centers on depressive symptoms, such as motivational interviewing or regular follow-up with those who decline screening.

Associated Driver

Primary Driver 3

Frequency of Data Reporting

Monthly

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