## Waitemata DHB Position Statement on Self-Report of Anxiety/Depression on PROMs Measure

(EQ-5D-5L) Item 5

Item five of the EQ-5D-5L asks patients the question:

Please tick the ONE box that best describes your health TODAY.

## **ANXIETY / DEPRESSION**

I am not anxious or depressed	
I am slightly anxious or depressed	
I am moderately anxious or depressed	
I am severely anxious or depressed	
I am extremely anxious or depressed	

- The EQ-5D-5L is not a diagnostic tool, and cannot clinically diagnose anxiety or depression. Low mood or anxiety can form part of the natural course of an illness or treatment and can fluctuate over time. Therefore the EQ-5D-5L is a self-report tool, subjective, and not a diagnostic tool.
- If a patient reports elevated levels of depression or anxiety, the clinician receiving the results must take time to explore the context of the report for the patient, e.g. is the low mood due to the impact of illness on someone's life, or something else.
- Those registered with a professional body will act under a Duty of Care. This means that most clinicians will have a mandate to act on reports of patient being at risk to themselves or others.
- Patient consent must be gained for referrals to mental health services and/or the patient's
  General Practitioner for mental health care (unless there is a case of risk to life the patient's or
  someone in the patient's care). If there is clear risk to the patient's life, or someone in their care
  then referrals can be made without consent, however the patient should be fully informed as
  soon as possible.
- PROMs will be stored in clinical records so results therefore accessible by those who might
  request them. Clinicians should be careful when writing judgements in a patient's record based
  on PROMs results, as any comments may have consequences for the patient if their notes are
  accessed by third parties, for example, insurers.