

Clinical Screening Questionnaires Reference Table: Introduction

Purpose of the Clinical Screening Questionnaires Table:

The purpose of this reference document is to provide information to service providers about each clinical screening questionnaire completed by YWHO youth, including number of items, purpose, frequency of administration, alerts, scoring, and relation of scores to intensity level of services offered (i.e., stepped care).

Time to Complete Clinical Screening Questionnaires:

It takes, in general, approximately 15-30 minutes to answer all the clinical screening questionnaires. Individual times may vary.

Some General Examples of Low-Medium-High Level Intensity Services at YWHO Sites (*Please note this is not a comprehensive list; Services offered differ across hubs, depending on availability and local community needs*):

- **Low Intensity:** Single Session Solution Focused Brief Therapy; Active monitoring; Motivational Enhancement Therapy (MET) or Cognitive Behavioural Therapy (CBT; 1-4 sessions); Individual or group peer support; Care navigation; Education; Primary care.
- **Medium Intensity:** Evidence-based structured psychotherapy for mental health concerns (Dialectical Behavioural Therapy (DBT) skills, CBT; 6-12 sessions); Evidence-based group treatments for substance use/concurrent disorder concerns (MET, CBT, DBT; 6-12 sessions); Family support; Medication consult; Supported education/employment/housing, if relevant.
- **High Intensity:** Psychiatric response (telepsychiatry or in person); Pharmacotherapy; Access to crisis supports; Linkage to other existing higher intensity youth mental health and/or substance use services (e.g., long term psychotherapy, day treatment, inpatient, residential, ongoing psychiatric services, addiction medicine, specialist addiction treatment, withdrawal support).

Notes/Disclaimer:

None of the screening instruments/clinical questionnaires listed in the document operate in isolation. Service providers are encouraged to take into account findings from other screening questionnaires, clinical judgment, discussions with youth and their families, and youth's goals and preferences to make the most appropriate decisions regarding interventions for youth available at their specific YWHO site.

For further information, please contact Janis Wolfe: janis.wolfe@youthhubs.ca

Clinical Screening Questionnaires Before Session

Clinical Questionnaire Name	Number of items	Purpose	Frequency of Administration			Scores on My Wellness Passport (MWP): Over time on progress tracker or single point in time?	Items flagging immediate risk/action	Scores mapping onto low (L) - medium (M) - high (H) intensity services (Hub-specific)
			First Visit	Subsequent Visit (≤ 7 days later)	Subsequent Visit (> 7 days later)			
Kessler Psychological Distress Scale (K6) or Kessler Psychological Distress Scale (Past Week) – (K6W)	6	Global measure of distress based on questions about anxiety and depressive symptoms that a person has experienced in the most recent <i>30 days</i> Global measure of distress based on questions about anxiety and depressive symptoms that a person has experienced in the most <i>recent week</i>	✓ –	– –	✓ (30+ days later) ✓ (8-29 days later)	Can see scores over time on MWP progress tracker		<5 Likely experiencing no/minimal distress; no/mild depression and/or anxiety disorder (L) 6-12 Likely experiencing moderate distress; moderate depression and/or anxiety (M) 13-24 Likely experiencing high distress; severe depression and/or anxiety (H)
Self-Rated Health (SRH)	1	Simple self-reported measure of general health	✓	–	✓	Can see scores over time with MWP progress tracker		Excellent - L Very good - L Good - L Fair - M/H Poor - M/H
Self-Rated Mental Health (SRMH)	1	Simple self-reported measure of general mental health	✓	–	✓	Can see scores over time with MWP progress tracker		Excellent - L Very good - L Good - L Fair - M/H Poor - M/H
Global Appraisal of Individual Needs: Short Screener (GAIN- SSS) or YWHO Substance Monitoring Form (YSMF)	11 (5 substance use items scored. Other items for clinical use only) 4 (First three items scored - last item for clinical use only)	Screen to identify substance use disorders, and issues with disordered eating, disordered thinking, traumatic distress, gambling, gaming, internet overuse Measure of number of days in the past week that alcohol and drugs were taken and frequency of negative consequences	✓ –	– –	✓ (30+ days later) ✓ (8-29 days later)	Can see substance use scores over time with MWP progress tracker Can see scores of first three items over time with MWP progress tracker	“Thinking or feeling that people are watching you, following you, or out to get you.” May represent potential flag for psychosis (no MWP alert)	0: L (unlikely to have a diagnosis or need services) 1-2: M (1 or 2 past year symptoms; possible diagnosis in area of substance overuse) 3-5: H (3+ past-year symptoms; high probability of substance overuse diagnosis) ¹ Total score ranges from 0-9 (three items): Higher score, higher frequency of weekly substance use

Clinical Screening Questionnaires Before Session

Clinical Questionnaire Name	Number of items	Purpose	Frequency of Administration			Scores on MWP: Over time via progress tracker or single point in time?	Items flagging immediate risk/action	Scores mapping onto low (L) - medium (M) - high (H) intensity services (Hub-specific)
			First Visit	Subsequent Visit (≤ 7 days later)	Subsequent Visit (> 7 days later)			
Patient Health Questionnaire (PHQ-9)	9	Screen for suicide risk within past two weeks (last item); Positive screen leads to C-SSRS completion. All items measure depression-related symptoms	✓	✓ (if item #9 positive prior time)	✓	Can see scores over time with MWP progress tracker	Item #9 response triggers suicidal ideation MWP alert to service provider. C-SSRS then completed by provider with youth in session.	*Item #9 response (on several days, more than half of days, nearly every day) → H 0-4 Depression severity of none (L) 5-9 Depression severity of mild (L) 10-14 Depression severity of moderate (M) 15-19 Depression severity of moderately severe (M/H) 20-27 Depression severity of severe (H)
Generalized Anxiety Disorder - 7 scale (GAD-7)	7	Measure of worry and anxiety symptoms and severity	✓	—	✓	Can see scores over time with MWP progress tracker		0-4 Likely experiencing no to minimal anxiety (L) 5-9 Likely experiencing mild anxiety (L) 10-14 Likely experiencing moderate anxiety (M) 15-21 Likely experiencing severe anxiety (H)
Outcome Rating Scale (ORS)	4	Measure of areas of life functioning using four visual analog scales	✓	—	✓	Can view past single points on same youth to provide information over time (no progress tracker)		Total possible score = 40 Clinical cutoff scores: Youth ages 13-17: 28 Youth ages 18+: 25 Scores at or below cutoffs are typical of youth who seek help/have concerns/would benefit from L/M/H intensity services Lower scores, lower levels of well-being ²
Goal-Based Outcomes (GBO)	Self-developed number of goals plus single progress rating	Evaluation of change and progress toward youth goals that are most important to youth	✓	—	✓	Can see ratings over time with MWP progress tracker; can review past forms to see previous goals		Goals represent youth voice and help inform best intervention at any intensity level (L/M/H) and/or within community and social support services

Clinical Screening Questionnaires During Session If Relevant

Clinical Questionnaire Name	Number of items	Purpose	Frequency of Administration			Scores on MWP: Over time via progress tracker or single point in time?	Items flagging immediate risk/action	Scores mapping onto low (L) - medium (M) - high (H) intensity services (Hub-specific)
			First Visit	Subsequent Visit (≤ 7 days later)	Subsequent Visit (> 7 days later)			
Columbia – Suicide Severity Rating Scale (C-SSRS) *to be completed by service provider if suicidal ideation is disclosed on PHQ-9 or if clinician feels youth is at risk.	6 (5 suicidal ideation, 1 suicidal behaviour)	Suicidal ideation and behaviour rating scale to establish youth's immediate risk of suicide	✓	✓ (if deemed necessary)	✓	Can view past single points on same youth to provide information over time (no progress tracker)	"Yes" to item 4 (Have you had these thoughts and had some intention of acting on them?) or item 5 (Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?) indicates presence of ideation with at least some intent to die in the past one month → severe risk and clear need for further evaluation and clinical management (e.g., immediate referral to ER, other community mental health services, client safety precautions). "Yes" to item 6 (Have you ever done anything, started to do anything, or prepared to do anything to end your life?) If in past 3 months → severe risk and clear need for further evaluation and clinical management	Would typically map on to H intensity services offered at, or outside, Hub

Questionnaires After Session

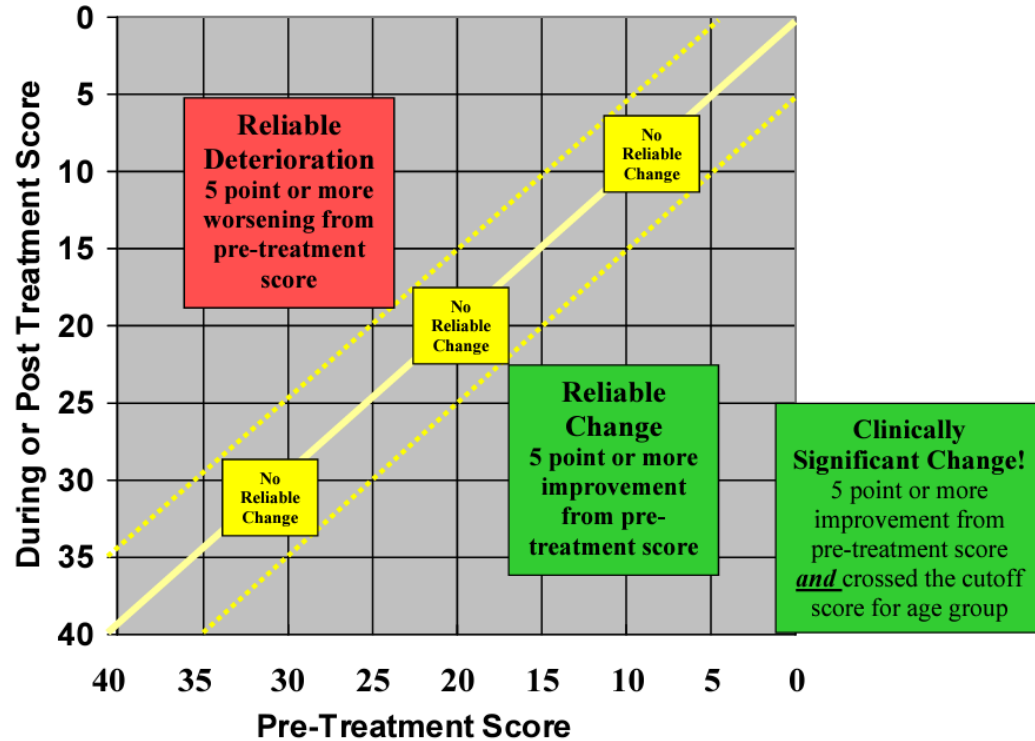
Session Rating Scale (SRS)	4	Visual analog scales to assess key dimensions of effective therapeutic relationships	✓	✓	✓	Can view past single points on same client to provide information over time; no progress tracker		Total possible score = 40 Any score < 36 overall (or < 9 on any scale) could be a source of concern - invite youth to comment. (Clients tend to score all alliance measures highly, so service providers should address any suggestion of a problem)
Satisfaction with Services (SWS)	16 Administered in quarterly blitzes after every visit	Youth evaluation regarding Hub services received	✓	✓	✓	Information is collected primarily for group evaluation		There are no scores associated with this questionnaire

1 GAIN-SSS:

- If the youth answers "Never" or "12+ months ago" as one of their answers, then the score for that answer is 0
- If the youth answers "4 to 12 months ago" "2 to 3 months ago" or "Past month" the score for that answer is 1
- Since there is a total of 5 questions for the substance use domain, the highest score for this domain is 5

2 See ORS reliable change chart on page 4

ORS/CORS Reliable Change Chart



Instructions: To determine if any measured change is reliable, find the point where the initial session “Pre-Treatment Score” and the “During or Post Treatment Score” intersect.

Use cutoff scores table below to help work out if “Reliable Change” is also “Clinically Significant Change”.

Clinical Cutoff Scores

CORS (ages 6-12)	
Child (Self-reporting)	32
Carer (Reporting on child)	28
ORS (ages 13 +)	
Ages 13-17	28
Ages 18 +	25

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