

# Condition Insight Report (CIR)

## Depression

Completed in collaboration with  
**Mind**

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# Overview

## What is the condition usually called / any abbreviations used?

Depression

## Brief overview of the condition

Depression is more than simply feeling unhappy or fed up for a few days. Most people go through periods of feeling down, but when you're depressed you feel persistently sad for weeks or months, rather than just a few days.

Presentations of depressive disorder can be divided into three main types:

- **Major depression** (or Clinical Depression) is characterised by duration of at least two weeks, with a number of symptoms present including depressed mood and/or lack of interest/pleasure. Within this category there will be a range of severity, dependent upon the severity of individual symptoms and the degree of disability.
- **Milder depressions** do not meet the full criteria for major depression, either in duration, number, or severity of symptoms.
- **Dysthymia** is a chronic depressive state of more than two years duration. It does not meet full criteria for major depression, nor is it a consequence of partly resolved depression.

## What is the generally preferred term for someone with this condition?

Someone experiencing depression/someone who has been diagnosed with depression.

# Presenting Symptoms

It is very important to remember that someone with depression may not obviously look depressed. Depression is a mood disorder and is diagnosed according to how someone feels so it is best to focus on asking the person about their feelings and experiences rather than judging according to how they appear.

Depression symptoms vary among people and in severity, from mild and moderate to severe depression, but generally encompass a feeling of sadness or hopelessness.

Other symptoms can include:

- Tiredness and **loss of energy**
- **Sadness** that doesn't go away
- **Loss of self-confidence** and self-esteem
- **Difficulty concentrating**
- **Not being able to enjoy** things that are usually pleasurable or interesting
- Feeling **anxious** all the time
- **Avoiding other people**, sometimes even your close friends
- Feelings of **helplessness and hopelessness**
- Sleeping problems – difficulties in getting off to sleep or waking up much earlier than usual
- Very strong feelings of **guilt or worthlessness**
- Finding it hard to function at work/college/school
- **Loss of appetite**
- Loss of sex drive and/or sexual problems
- Physical aches and pains
- **Thinking about suicide and death**
- **Self-harm**

# Fluctuations



People with depression may be affected more or less severely on different days or at different times of day. Their ability to perform basic tasks, plan, make decisions and work may vary from day to day but they may either experience constant low mood, or often experience periods of feeling low. It is important to understand that people with depression may not feel low all the time and that feeling happy sometimes, enjoying some activities or sometimes feeling hopeful does not mean that the person does not have depression.

Think about exploring things like:

- How does it manifest for them, how does it feel, what thoughts do they experience?
- Are they able to talk to others about their condition?
- What activities if any, do they have motivation for?
- Are they motivated to maintain their personal appearance and hygiene?
- Do their symptoms have a trigger?
- How are they managing their personal relationships?

# Reliability

What specific areas should be covered to ensure a complete, reflective report?

**S**AFETY



Do they have any symptoms which could cause a safety consideration?

Consider safety if there are suicide and/or self-harm risks. Remember if there are imminent plans of suicide and no protective factors the claimant may require safeguarding.

**T**IMELY



For any activities where restriction is reported how long does it take them to complete these activities? Has how long it takes them changed over time?

Poor motivation and other symptoms associated with depression can impact on how timely an activity is. This should be explored where relevant.

**A**CCEPTABLE  
STANDARD



How have they adapted to completing tasks over time – is this different to what might be considered 'normal'?

What level of motivation do they have? Some activities are intrinsic in nature therefore require very little levels of motivation to complete (eat, drink, toilet) however some are more social/engagement activities that even a small reduction in motivation can impact on.

**R**EPEATEDLY



Are they able to repeat a task as often as required? Is this the same every day?

Individuals may not experience the same emotions throughout the day or between days. They may have triggers or have better days than others which mean that the way they describe a task may not be typical for them. It should be explored what the impact any task has on their mental health and how they manage this to determine if it is repeatable as often as required.

# Sensitivities

**What areas might they find difficult to mention or perhaps understate the impact of?**

Someone with depression may find it hard to admit that they are struggling to perform basic self-care tasks such as washing and dressing or may fear that they will not be believed if they have managed to perform these tasks on the day of the assessment. They may find it hard to mention the effects that depression can have on personal relationships. They may also find it hard to mention feelings they have had of wanting to take their own life.

The psychological and physical impact that depression can have on an individual can be extremely profound. People may find it difficult to understand and empathise with them, may tell them to 'cheer up' or 'think positive' and may fail to understand that someone with depression is not simply feeling sad, it is not being lazy, it is experiencing symptoms of a recognised medical condition rather than choosing to behave in a certain way and cannot simply decide to feel better.



Watch Kat talk about  
her lived experience of Depression.

Talking about depression  
with mind

# Customer Care

**How is it best to ask about any sensitive topics and what are the common courtesies?**



## In general

- Brief them on exactly what the consultation involves and what they will be asked to do.
- Ask them if they have any initial concerns about the consultation and see if you can address these.
- Ask if there are any adjustments that would make them more comfortable e.g. if they would like a friend or family member for support, and offer them breaks if they need it.
- Be understanding, empathetic, patient and try not to put the individual under any pressure by encouraging them to take their time. Be aware that the person may feel more worthless, low or upset as a result of answering the questions. Also be prepared for what you would do if the person mentioned feeling suicidal or wanting to harm themselves.
- Do not assume the person lacks intelligence, or does not care, if they have difficulty responding to questions or appear as if they are taking no interest.
- Both reading and concentration may be difficult so comprehension may be slow. Keep questions straightforward and give people time to respond. Some antidepressant medication may also slow people down.
- Some people with depression may appear irritable or angry as a result of their condition and it is easy to misinterpret this.
- If they do not have a physical condition please do not ask them about their physical ability to complete tasks but instead focus on the psychological ability.

## Informal observations and examinations

- **REMEMBER: The day of the assessment is simply a snapshot. We cannot assume because someone has attended an assessment and appears well kempt, that they do not lack motivation to complete ADL.**
- Please also ensure any observations made via telephone, video or f2f assessment are factual. We cannot assume someone showed no signs of low mood via a telephone consultation for example.

# Functional Impact

*A brief summary of the functional impact those living with this condition may experience*

## Activity 1: Preparing food

Tiredness and loss of energy, over thinking, difficulty concentrating, not being able to enjoy things that are usually pleasurable or interesting, feeling anxious all the time and poor motivation affect initiation of preparation of food, or the ability to complete the task to finish.

### Remember in PIP...

Only the psychological aspects of this activity need to be covered if only this is reported affected. How often do they make meals? Are they motivated, if not why not? When would they initiate the activity? What stops them? What do they usually make? Have they had any incidents and burnt items due to poor concentration and intrusive thoughts? If so, how do they manage this? Are there any risks of intentional self-harm in the kitchen?

## Activity 2: Taking nutrition

Depression can lead to a poor appetite and someone neglecting their dietary needs. They may not prioritise their need to eat.

### Remember in PIP...

You need to have established the individual's ability to be nourished. Motivation to eat, even if food is given to them should be explored and the extent of any weight loss with how this is managed. Do they require prompting throughout the duration of the meal?

**REMEMBER: Lack of dietician input alone does not negate a need for prompting to take nutrition. We must always look at the entire picture.**

## Activity 3: Managing therapy and monitoring a health condition

Impacts on personal, social and physical functioning can make it very difficult to engage with health services. Someone with depression may struggle to leave the house and attend appointments due to a lack of mental and physical energy. This can affect their ability to access treatment. In some cases people can be embarrassed to talk about the extent of their worries or difficulties for fear of being judged or misunderstood.

### Remember in PIP...

Do they have the motivation to manage their own medication? Do they require prompting? Do they lack the understanding of the importance of managing their condition? Do they have any therapies for their depression? If they take place in the home environment, is this as a direct result of their condition? Does this occur on the majority of weeks in the year? Are they at risk of overdose? Do they require supervision?

# Functional Impact

*A brief summary of the functional impact those living with this condition may experience*

## Activity 4: Washing and bathing

Tiredness and loss of energy, over thinking, difficulty concentrating, not being able to enjoy things that are usually pleasurable or interesting, feeling anxious all the time and poor motivation affect completion of personal hygiene and self care tasks.

### Remember in PIP...

Explore what strategies are used to manage the effects of symptoms and consider whether prompting is needed on the majority of days. Remember to only discuss the psychological impacts within this condition if this is all that is reported. They are likely to be physically able but may be restricted with their intrusive thoughts, lack of self worth, and apathy. How often do they wash? When would they initiate the activity? If not motivated, why not? What stops them? Do they take an interest in their physical appearance?

## Activity 5: Managing toileting needs and incontinence

Consider other conditions. Also, if someone reports severe depression, it could be consistent that they are lacking motivation to the extent that they will not even attend to their toilet needs without prompting.

### Remember in PIP...

If there is no physical condition reported it is sufficient to explore that they can maintain their toileting hygiene needs and to confirm there is no comorbidity which may affect continence. Do not ask lots of physical questions if they report no physical restrictions.

## Activity 6: Dressing and undressing

Tiredness and loss of energy, over thinking, difficulty concentrating, not being able to enjoy things that are usually pleasurable or interesting, feeling anxious all the time and poor motivation affect completion of regular dressing and undressing.

### Remember in PIP...

Explore what strategies are used to manage the effects of symptoms and consider whether any prompting is required on majority of days. Do not ask about physical restrictions if there is no physical restriction reported. Instead explore: How often they get dressed? When would they initiate the activity? If not motivated, why not? What stops them? Do they take an interest in their physical appearance? Do they sleep in their clothes?

# Functional Impact

*A brief summary of the functional impact those living with this condition may experience*

## Activity 7: Communicating verbally

Many may find it difficult to engage in verbal communication and be distracted with their own intrusive thoughts and sadness but they will still be able to understand you.

### Remember in PIP...

Engaging with others is not considered within the scope of this activity. Do they have the cognitive ability to express and understand verbal information?

## Activity 8: Reading and understanding signs and symbols

Consider other conditions.

### Remember in PIP...

Motivation to read would not be considered within the scope of this activity. Consider cognitive ability to be able to read. For instance can they understand signs, symbols, letters. Can they read a text message?

## Activity 9: Engaging with others face to face

Someone with depression may avoid social events and activities they normally enjoy, lose interest in personal and romantic relationships, struggle to think or speak clearly, have difficulty remembering or concentrating on things and feel agitated.

### Remember in PIP...

If someone reports lack of motivation, does this impact their ability to engage with others? If so, how do they feel engaging with other people? Who can they engage with on the majority of days? If they require support to engage with unfamiliar people, who can provide this? If someone specific, why is this? Do they have any specific techniques they utilise to support the person to engage? Could anyone familiar provide this support?



# Functional Impact

*A brief summary of the functional impact those living with this condition may experience*

## Activity 10: Budgeting

Tiredness and loss of energy, over thinking, difficulty concentrating, feeling anxious all the time and poor motivation affect ability to plan future budgets.

### Remember in PIP...

Just because someone has cognitive ability, this does not mean that they have the motivation to manage their finances.

We must consider if someone is motivated to pay their bills. How would they feel if a new bill came through the post? Can they do online shopping or banking?

## Activity 11: Planning and following a journey

They may also experience psychotic symptoms such as paranoia or hearing voices. While psychosis can be a symptom of other mental health problems, it can also be a symptom of depression. They may use self harming behaviours to cope with difficult feelings and may feel or act on suicidal feelings or urges. They may also experience anxiety which could impact their ability to plan and follow journeys.

### Remember in PIP...

Although lack of motivation is not considered within the scope of activity, risk and anxiety related symptoms meeting the OPD threshold would be. If they report psychotic symptoms are they at risk when out of the home? How does this manifest? Do they lack focus or insight? Does this make them vulnerable? If they experience anxiety, what are their physical symptoms? If this equates to OPD, do they leave the home on the majority of days? If they had the support, could they leave the home on the majority of days? Can they manage familiar and unfamiliar journeys?

## Activity 12: Moving around

Consider comorbidities.

### Remember in PIP...

Consider if they also report physical conditions, how this may impact their mobility. What examples of mobility can they provide? How far can they walk? How long does this take? Do they use an aid? Could they repeat this distance? Does their pace slow? How do they feel after?



## Additional reading or other resources

### EXTERNAL

- [www.mind.org.uk/information-support/types-of-mental-health-problems/depression/#.WDgtNX2gXpt](http://www.mind.org.uk/information-support/types-of-mental-health-problems/depression/#.WDgtNX2gXpt)
- [www.mind.org.uk/information-support/types-of-mental-health-problems/suicidal-feelings/#.WDgxkX2gXps](http://www.mind.org.uk/information-support/types-of-mental-health-problems/suicidal-feelings/#.WDgxkX2gXps)
- For further information including medications see NHS Conditions and Treatments: <https://www.nhs.uk/conditions/clinical-depression/>

### INTERNAL

- Desktop Aid – MSE, Activity 11

## Version control