

Implementation of the PHQ-9 in an Acute Care Setting: To
Improve Admission Diagnosis of Depression

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Abstract

Introduction: Mental illness consists of diagnosable mental disorders, one of them is depression, and if identified early, quality of life outcomes will increase. The purpose of this quality improvement project was to introduce the Patient Health Questionnaire -9 into an Acute Care setting to screen adult patients ages 20 to 65+ years for depression upon admission to begin early treatment.

Research Methodology: The integrative review was based on the literature search of screening patients for depression in an acute care setting. Four databases were searched in the Chamberlain University library (CINAHL, PubMed, Academic Search Complete, and MedLine), selecting studies published between January 2015 and August 2020. Initial searches yielded a total of 88 articles assessed for relevance from the databases, articles relevant for integrative review 5. Relevant articles identified from reference list 26, articles relevant for integrative review 10. Total articles for integrative review 15. Inclusion criteria: were published between 2015 to 2021; English language; screening depression in acute care settings; patients age 20 to 65+ years old; and acute conditions (diabetes, hypertension, and heart disease). Excluded were patients who did not have inclusion criteria and studies that only focused on the questionnaire tool and not its effect on patient care.

Results and Discussion: The search of the literature analysis of the studies and results of the integrative review shows that the Patient Health Questionnaire-9 was well represented in the literature and has proven to be a useful instrument to identify patients who have depression. Relevant data gathered for the integrative review were divided into four major themes to show the overall impact and positive outcomes of the PHQ-9 in different studies. They were 'background of depression,' 'tools used to screen for depression,' 'patient health questionnaire

and implementation' and 'considerations and challenges for implementation.' Also included were three subthemes that continued to identify the PHQ-9 and how it had positively affected the population in question: 'specific diagnosis,' 'specific settings' and 'validity and reliability.'

Conclusions and Further Recommendations: It is recommended that nursing staff demonstrates competency in recognizing patients with mild, moderate, and severe depressive symptoms; when to notify a clinician to begin treatment on the patient; how to effectively answer questions regarding depression and provide education; and when to implement the nursing care plan specific to patient care.

keywords: Adult depression, depression screening in primary care and acute care settings, Patient Health Questionnaire-9.