

# Improving Depression Management Referral Rates in the ED Utilizing a Nurse-Driven Depression Screening Protocol



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## Problem / Question

Will a nurse-driven depression screening protocol improve depression identification and management over an implementation period of 4 to 5 weeks?

## Purpose

The purpose of this project is to reduce suicide rates through implementation of a depression screening protocol in the ED.. This intended protocol will both identify and refer patients who fall in the category of moderate to severe depression.

## Objective

The learner will be able to:

- 1) Screen patients for depression using the PHQ2 and PHQ9 tools.
- 2) Make an accurate diagnosis of either mild, moderate, or severe depression.
- 3) Provide the appropriate referrals for treatment.

## Background/Significance

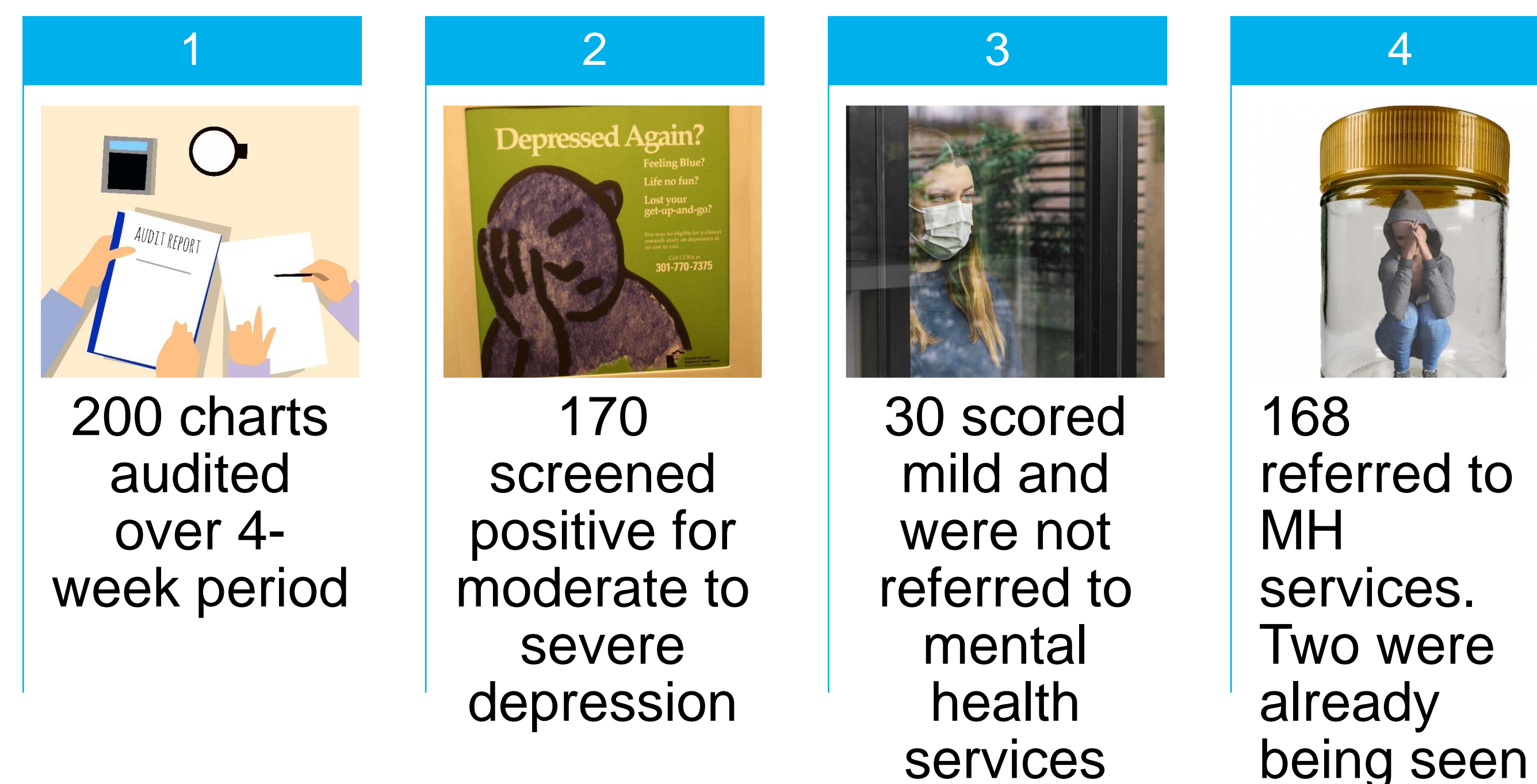
The occurrence of depression among patients in the ED is much higher than in the general population (Abar et al., 2017).

Despite national practice guidelines for depression screenings, many healthcare settings, including the ED, are not in compliance. Screening for depression, supported by appropriate referral to mental health services, were found to be significant in identification and management of patients seen in the ED. Barriers such as a busy ED, coupled with fast turnover rates, have contributed to missed opportunities to identify patients at risk for depression. Undiagnosed depression can lead to increased risk of suicide.

## Methods and Data

- The PHQ-2 computerized template was utilized initially to screen for depression. If the patient scored positive, the triage nurse continued with the PHQ-9 computerized template.
- All patients who scored positive for moderate or severe depression, were referred to mental health services.
- The Fisher Exact Test was utilized to measure the project objectives due to the small sample size.

## Charts Audited



## Fisher's Exact Test for Compliance

	Referred	P	Proportion
	Yes/No	0.99	
Moderate	160/2		160/162 = 0.99
Severe	8		8/8 = 1.0

## Major Outcomes

- The depression screening protocol at the site resulted in the utilization of standardized screening tools to identify, document, and refer patients to mental health services. Depression screenings went from 0% to 100% over the 4 weeks of implementation.
- There was a 95% increase in referrals to mental health services. The results were for the ED only. The protocol was not tested in other types of healthcare settings. A major limitation of the project was that there was no follow-up on patients referred to mental health services.

## Conclusion

Depression is a major mental health disorder that is treatable. ED providers who are trained in administering the screening tools will be better equipped to identify signs of depression in their patients. Findings from this project suggested that the implementation of a depression screening protocol in the ED has sustainability and potential for great benefits.

## Works Cited

Abar, B., Hong, S., Aaserude, E., Holub, A., & DeRienzo, V., (2017). Access to care and depression among emergency department patients. *Jiurnall of Emergency Medicine*, 30-37. doi:10.1016/j.jemermed.2016.11.029