Depression After Stroke: Implementing Nurse Administered Screening in Acute Care

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Introduction
- 40% of stroke patients experience depression.  
- Poststroke depression (PSD) = poor outcomes  
- Lack of formalized depression screening  
- TJC requirement for PSD screening-2013

Purpose
To: Implement nurse administered PSD screening on inpatient stroke units

Objectives:
1. Select PSD screening tool
2. Incorporate PSD screening into electronic health record (EHR)
3. Educate nursing staff
4. Survey nurses on PSD and screening process (pre- and post-project)
5. Select patient education materials
6. Create and implement policy/procedures
7. Achieve and sustain PSD screening

Methods
- IRB approval not required
- Site: Surgical and neuroscience intensive care unit (SNICU) and the neuroscience intermediate unit (6JU) at UIHC
- Model: Iowa Model of Evidence-Based Practice (EBP) to Promote Quality Care
- Tools: Patient Health Questionnaire-2 (PHQ-2) and subsequent use of the Patient Health Questionnaire-9 (PHQ-9), if the PHQ-2 is positive
- Process:
  - Nurse administers PHQ-2
  - Total score PHQ-2 ≤ 2 (negative screen)
  - Nurse administers PHQ-9
  - Total score PHQ-2 ≥ 3 (PHQ-9 auto fills)
  - Total score PHQ-9 ≥ 10 (Psychiatric consult initiated)

100% of patients with PHQ-9 ≥ 10 received appropriate follow-up

Outcomes

Evaluation

Nursing Staff PSD Survey Results

Keys for Success:
- Automation of EHR processes
- Reinfusion education-Continuous!
- Patient education resources
- Screening completion for ALL stroke categories
- Provider collaboration

Nursing Profession Enhancement:
- DNP Essentials III and VI
- IOM Future of Nursing Recommendations 2 and 6

Conclusions
PSD Screening:
- PSD awareness enhanced in acute care
- Provides framework for depression screening in other conditions
- Recommend research and tool development for patients currently excluded from screening
- Holistic approach to improve quality of care

References

Public: ecmr@arn.org@Philippines@mbg@2017/10/psd_screening.pdf

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