Evaluation of a PHQ-2/9 Depression Screening Process
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Introduction

- Problem: Accessibility, availability, and acceptability are barriers for rural MH disparities.
- 50 Million Americans live in rural areas, 18.7% suffers MH; 60% lives in shortage areas, 65% receive MH care from PCP; & 90% MH services in Met./Urban areas.
- Iowa: 40% live in rural areas; 1 in 5 have MH condition.
- USPSTF: Depression screen for Adults, validated tool for better MH outcomes.
- Good self-care behaviors prevent Mental Health & Physical health complications.

Purpose

To alter and evaluate a depression screening process in a rural Iowa medical clinic.
1. Expanded screening process for depression and self-care needs
2. Staff Perceptions of ease and efficiency

Methods

Project was deemed not human subjects’ research
- Setting: NESCO Family Medical Clinic in Zearing Iowa.
- Population: Adults 19 to 89 years old for all primary care visits.

- Expanded depression screening process
- Developed self-administered depression screener & self care assessment.
- Education with pre- and post surveys
- Implementation of depression screening tool.
- Data collection: PHQ-9 & self-inventory; chart review on preceding PHQ scores; Bi-weekly staff check-in’s
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- Evaluation and analysis of data

Outcomes

Staff Perceptions
- Scope: # of staff
- Simple to use
- Effective for depression & identification of self-care
- Efficient Process; Preferred over Prior Process
- Staff Comments: “patients are more honest when they read and write an answer”
  - staff (unknown)

Evaluation

- Self-administered screening tool: effectively identified depression symptoms & self-care needs
- PHQ-9 scores: higher 2020 visits
- Self-Care: Highest: Physical; then Emotional; & psychological least
- Staff Views: simple & efficient
- Limitations: sample size; manual documentation-possible errors, saturation of depression screeners.
- Future Recommendations: Repeat after Pandemic & Adolescent Pop.

Conclusions

- Increase in PHQ-9 scores from 2020 visits than retrospectively.
  1. administration difference of depression screening process
  2. Pandemic consequences
- Staff: Process simple, easy and efficient
- Dissemination: Presentation to NESCO Family Medical Clinic & Possible Publication in The Journal of Rural Health

References

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