Doctor of Nursing Practice Projects   School of Nursing

Implementation of Depression Screening in a Nursing Home

TITILAYO RAJI
Southern Illinois University Edwardsville

Follow this and additional works at: https://spark.siue.edu/dnpprojects

Part of the Nursing Commons

Recommended Citation

Executive Summary

Introduction of the Problem

The general diagnostic criteria for major depression include sadness or low mood, loss of interest in or pleasure in daily activities, and reduced energy every day for more than two weeks (Juniarni & Wulandari, 2020). This is in addition to having some specific symptoms including reduced self-esteem, feelings of guilt, disturbed sleep, change in appetite, problems in concentration, change in activity, ideation of self-harm; and impaired function(Juniarni & Wulandari, 2020).

Depression can be a challenging process to diagnose in elderly population living in nursing home due to co-morbid medical conditions imitating symptoms of depression or the transition of changing residence. It will often persist if undetected and untreated, especially with the older population having higher risks of unrecognized depression (Brown et al., 2018). The Center for Disease Control (2016) reported that 20-25% of the elderly population is affected by depression. Having routine screening using an appropriate tool allows for early screening and prompt treatment to enhance utmost quality of life.

Literature Review

Benefits of Depression Screening

Early detection is one of the main benefits of depression screening in the elderly living in nursing homes. With Ellison et al. (2015) noting that depression affects an estimated 2 million Americans of ages 65 years and above. It is a condition that impact quality of life; therefore, it is important to identify symptoms and treat early. El-Den, Chen, Gan, Wong, & O'Reilly, (2018) reported that when residents have been diagnosed with depression and received appropriate treatment, more than seventy-five percent still experience recurrent episodes, with about thirty

percent having residual symptoms. Appropriate treatment for the elderly can result in better quality of life that is financially less burdensome on the healthcare system.

Barriers to Depression Screening

Chronic medical condition such as dementia manifestations mimics some depression symptoms in the elderly and therefore makes it challenging to recognize by healthcare professionals. Maurer, Raymond, & Davis (2018) reported that there have been significant criticisms against healthcare practitioners who believe that individuals in nursing homes have several reasons for being depressed and giving antidepressants to these residents is a wasteful intervention.

Geriatric Depression Screening

Geriatric Depression Scale (GDS) was reduced from 30 to 15 items to accommodate possible elder fatigue. Items relating to the physical symptoms that have historically over-inflated the scores of depressions among elderly patients are removed (Costa et al., 2016). It is ideal for the evaluation of clinical severity of the depressive disorder and monitoring treatment.

Its administration is quite simple and does not require any prior psychiatric knowledge (Brown, 2018). The Geriatric Depression Scale recommends that depression screening should be done in about three weeks after being admitted into a nursing home. Its evaluation needs to be conducted by a skilled health worker (Maurer, Raymond, & Davis, 2018). According to the cross-sectional study conducted by Friedman et al.(2005), there was remarkable psychometric properties of the GDS-15 when administered to a sample of functionally impaired, cognitively intact, community-dwelling primary care patients.

Theoretical Framework

Normalization Process Theory (NPT) is the process theory that as a used for this project. The four constructs of the NPT are coherence, cognitive participation, collective action, and reflexive monitoring. This construct synergistically identifies areas of quality improvement, readiness of team, relational workability of new intervention, and appraisal of necessary intervention for change.

Project Method

The aim of this project is to implement depression screening in a nursing home in 5weeks. The depression screening tool selected for the project is the Geriatric Depression Scale (GDS). The nurses and nursing assistants were educated about the GDS screening tool. Training was conducted over a one-week period, allowing time for return demonstration. The implementation of the project lasted for 8 weeks with some re-education of nurses due to turnover. Scores greater than or equal to 5 boldened answers are considered a positive screen. All positive screens were referred to the facility psychiatrist who is aware of the project and agreed to review referrals.

Evaluation

30 patients total were administered the GDS on two units of the nursing home. Twelve nurses completed the post screening survey. 92% of the nurses that completed the survey strongly agree on the usefulness, continued use, and appropriateness of using the Geriatric Depression Screening tool in a nursing home setting. This implementation resulted in 7 positive screens that was addressed with appropriate intervention by the psychiatrist but more importantly is the awareness and the excitement of the families that the individualized intervention will either enhance or improve their loved one's quality of life.

Impact on Practice

  The feasibility of the project, ease of use, and suggestions from nurses who participated in the project resulted in the nursing home administration putting together an action team that wrote a policy to administer GDS to every new patient on admission and every 6months thereafter. The GDS training is included in the new nurse hire orientation for nurses and annual continuous education. The facility is training everyone in the facility to recognize signs of depression on the GDS tool but only the nurses will administer the screening.

Conclusion

  Smith (2019) discussed that research has shown the benefit of better depression management through early screening and timely treatment. The GDS result assisted the nurses to recognize symptoms of depression in their patients which led to appropriate care. The project demonstrates that depression screening for nursing home residents can result in quicker identification of symptoms and early treatment.