Implementing a Depression Screening in a Pediatric Acute Care Setting for Adolescents with Type 1 Diabetes

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Place: Remote

Abstract
Depression among adolescents with Diabetes Mellitus type 1 (DM 1) occurs three times more in adolescents than in their peers without DKA. Diagnosis of depression has been found to negatively affect the quality-of-care management, quality of life, and results in increases in hospital admissions with hypoglycemia/hyperglycemia events. A depression screening, the patient health questionnaire 9 (PHQ-9), a validated screening tool for use among adolescents was implemented in this quality improvement (QI) project. It was the first cycle of a plan-do-study-act (PDSA) cycle for in a pediatric ICU. Adolescents between the ages of 12 – 18, were English speaking and had been downgraded to a general status accommodation were the sample who meet inclusion criteria of for this project. The projects question was: What the is the impact of implementation of the PHQ-9 on identification of depression in this population and if needed, on referral to behavioral health? Data collected from seven adolescents found that depression was identified in this population (n=4 or 57%) and one of these four patients showed suicidal tendencies. The majority of those positive for depression were found to be white and female. Limitations of the project included a small sample size and a short time of implementation. Future PDSA cycles should include establishing policies and procedures for those found to be suicidal for placement within a facility, as well as facilitating observational needs of the patient while in the hospital. Depression screening of this population should continue as it had a positive impact of detecting depression among these adolescents.

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