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Staff Education to Expand Clinicians' Knowledge on the Use of Depression Screening Tools in a Longterm Care Facility

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This is to certify that the doctoral study by

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has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

Review Committee

Dr. Mark Wells, Committee Chairperson, Nursing Faculty

Chief Academic Officer and Provost
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Walden University
2025

Executive Summary: Staff Education Project

Staff Education to expand clinicians' knowledge on the use of Depression Screening Tools in a
Longterm Care Facility

by

Abibatu Bangai

Executive Summary Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Nursing Practice

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Summary

This Doctor of Nursing Practice (DNP) project is an educational project to expand clinicians' knowledge on using Depression Screening Tools, PHQ-2 and PHQ-9, in a long-term care facility. The facility staff failed to follow evidence-based depression screening protocols, which resulted in delayed treatment and adverse resident health outcomes. The solution to this problem is essential for delivering person-centered care while meeting requirements of the Centers for Medicare and Medicaid Services (CMS) standards.

The question for this project was: Will evidence-based training for Nursing staff would enhance their knowledge and practice of PHQ-2/PHQ-9 depression screening tools in a long-term care facility? The purpose of this project was to create and assess a systematic educational program to teach staff members about depression detection and CMS-mandated screening procedures.

I used pre- and post-assessment knowledge tests, PHQ-2/ PHQ-2/PHQ-9 documentation reviews, and staff feedback surveys to analyze the findings. The results demonstrated that staff members gained better knowledge, started documenting better, and became more confident in their ability to detect depression. The primary deliverable is an evidence-based staff education module, which includes quick-reference pocket guides. The recommendations included the integration of the training into new staff orientation and annual refresher sessions, as well as regular audit feedback. The findings have the potential to enable depression detection at an early stage, decreasing mental health recognition disparities among elderly patients, and creating beneficial social change.

Background

Depression is one of the prevalent mental health disorders among older adults in long-term care facilities. The inconsistent screening practices and insufficient staff training maintained the gap between quality care and compliance standards (Siu & U.S. Preventive Services Task Force, 2016). The CMS requires standardized screening, but staff members who lack proper training and inconsistent knowledge about the process lead to different implementation methods.

I examined whether staff education programs would improve PHQ-2/PHQ-9 screening compliance to enhance resident care (see Kroenke et al., 2001). I focused on staff education to resolve the existing gap in depression screening practices.

Research evidence from systematic reviews and quasi-experimental studies demonstrated that staff education improved mental health screening adherence and treatment results. I used research evidence to support this intervention through systematic reviews at Level I and randomized control trials at Level II, indicating that staff education is an effective method to change practice (see APA, 2022; Kroenke et al., 2001; Mitchell et al., 2009).

Staff Education Project Development

Registered nurses and licensed practical nurses participated in the study as research participants. Through presentations, case-based discussions, and practical training for PHQ-2 and PHQ-9 administration, the educational program provided hands-on training. The staff received pocket cards and workflow aids that supported their implementation of new practices during their regular work activities.

The data collection process consisted of three parts, which included pre- and post-education knowledge tests, PHQ-2/ PHQ-2/PHQ-9 documentation rate chart audits, and staff surveys to assess feedback and self-assessed confidence levels. To find recurrent patterns in staff

perception, I thematically coded qualitative responses and used descriptive statistics to analyze quantitative data.

Following the initial assessments, staff members gained confidence and improved their documentation, and the evaluation system tracked how knowledge scores increased. I defined positive outcomes as significant enhancements across all three assessment domains.

Results

The evaluation results showed significant improvements across every assessment domain.

- The training program resulted in substantial growth in participant understanding levels.
- The chart audits showed that PHQ-2/PHQ-9 documentation rates exceeded 85% after program implementation because the initial 40% rate increased to above 85%.
- Survey results showed staff members gained confidence in their ability to detect depression and initiate mental health dialogues with residents.

The organization achieved better CMS guideline compliance and improved resident care quality while reducing regulatory exposure. The research included limitations that resulted in a lack of results applicable to all settings. The program provides a functional model with three primary limitations because it operated with a small participant group at one facility and experienced personnel departures, which term care facilities can be used as a basis for implementation. The education program can be used by facilities as a framework to enhance depression screening methods and improve patient compliance.

Table 1

Pre- and Post-Test Knowledge Scores of Nursing Staff (N = 65)

Item	Pre-test <i>M (SD)</i>	Post-test <i>M (SD)</i>	Percentage change improvement
Understanding of	65 (± 10)	88 (± 8)	+23

PHQ-2 use			
Understanding of	62 (± 12)	90 (± 6)	+28
PHQ-9 use			
Documentation	70 (± 9)	92 (± 5)	+22
requirements			
Confidence identifying	60 (± 11)	89 (± 7)	+29
depression			

Note. The data come from staff education pre- and post-tests which were administered at the long-term care facility. The results show how well staff followed PHQ-2/PHQ-9 screening documentation procedures before and after receiving education.:

Conclusions

The staff education program provided to clinicians led to enhanced knowledge about depression screening methods, which resulted in better protocol adherence and improved resident outcomes. The following recommendations should be implemented:

- The PHQ-2/PHQ-9 training program must become a required part of onboarding new staff members.
- The organization needs to establish yearly training sessions for all staff personnel.
- The organization should perform ongoing chart reviews with performance feedback to sustain its achievements.

The nursing practice benefits from this project because it clinicians can use this guidance to screen for depression more effectively and provide better early intervention support and mental health equity for older adults. The project results in positive social change through its mission to improve resident health outcomes while fighting mental health discrimination and delivering personalized care in elderly care facilities.

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