

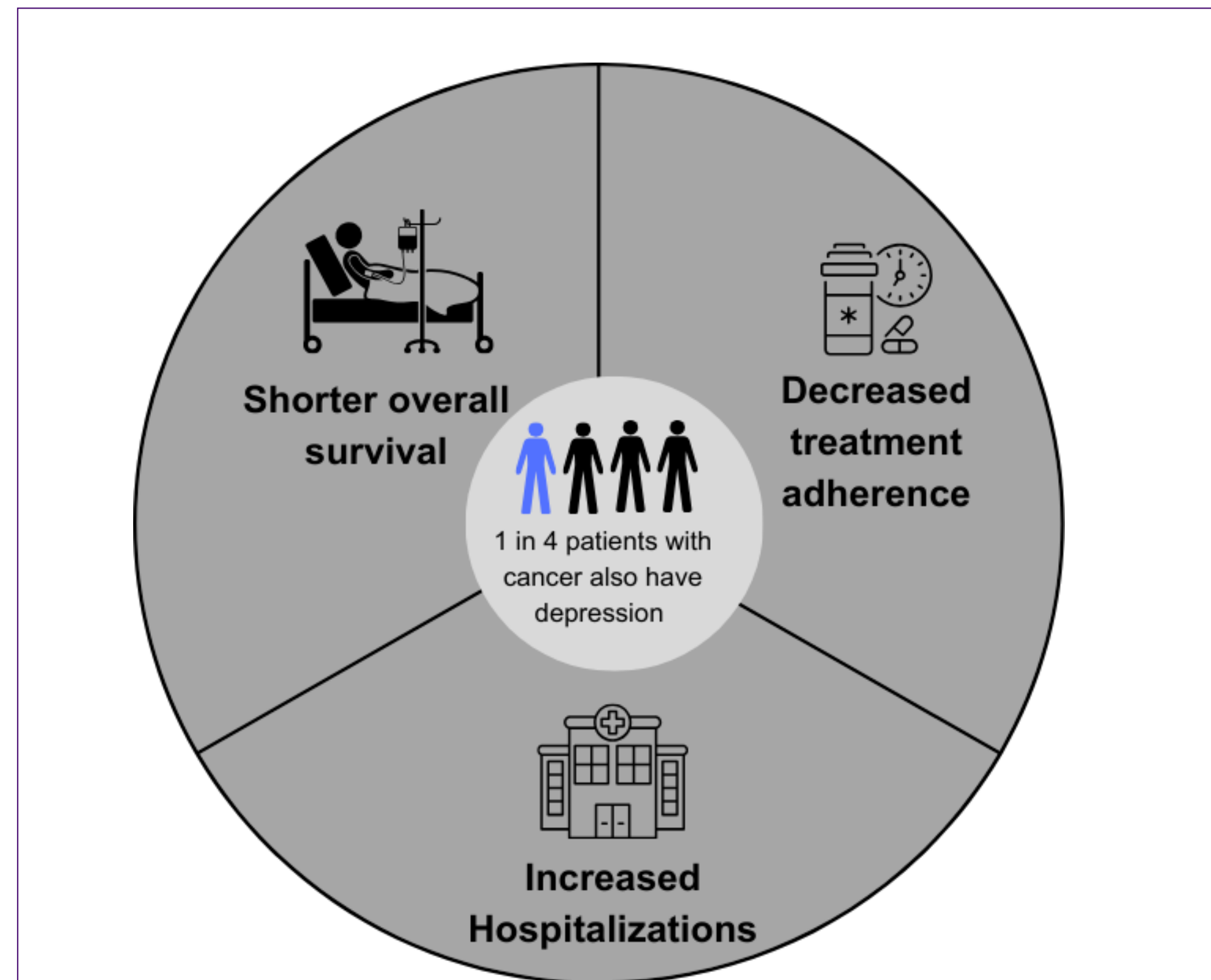
Surveying Barriers to Depression Screening in Oncology Clinics in Rural Eastern North Carolina



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BACKGROUND



- Depression screening is a critical part of comprehensive cancer care; however, there are no standard recommendations regarding program implementation.

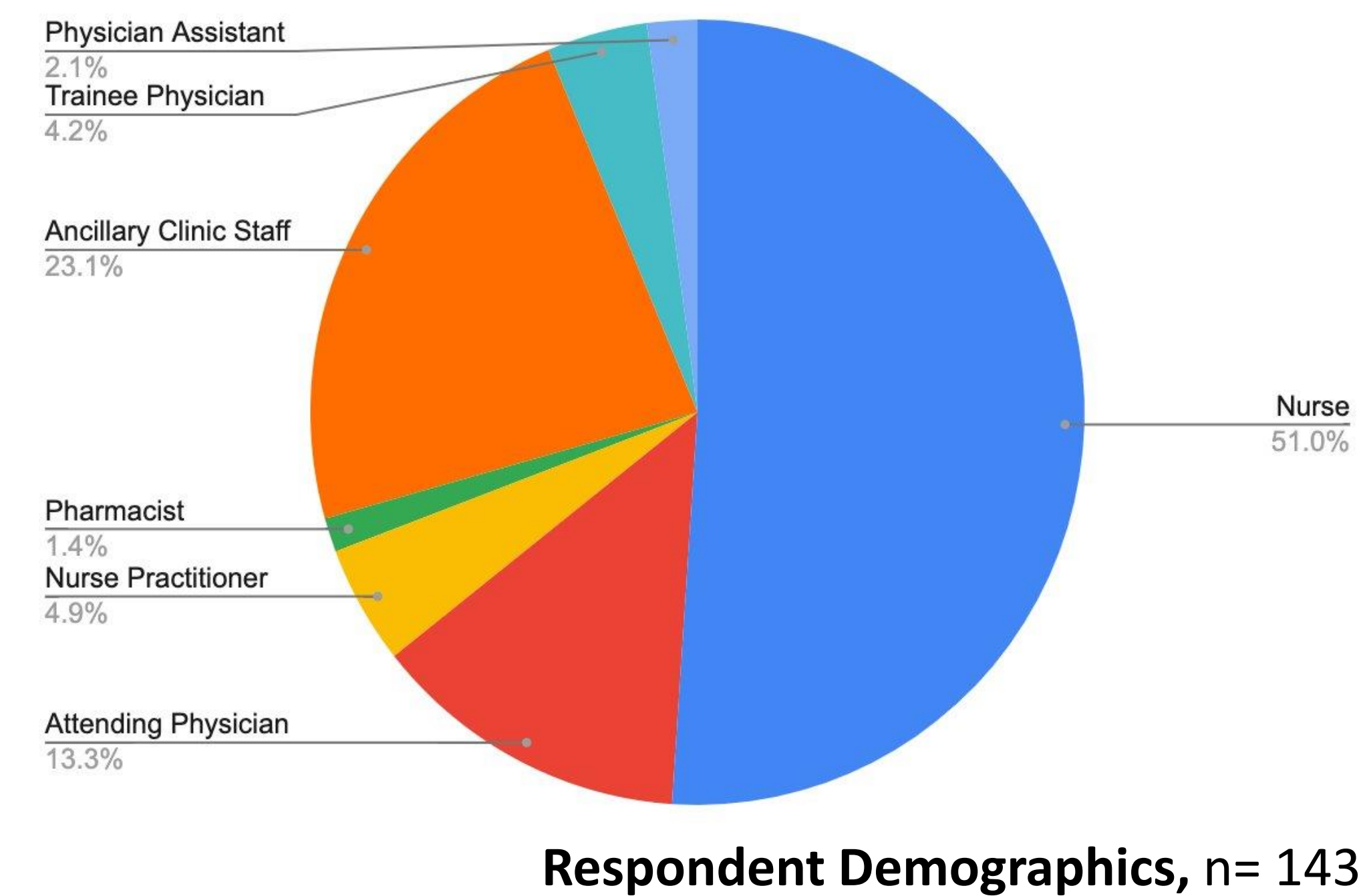
PROJECT AIM

- Evaluate clinical teams' perceptions, readiness, and experiences towards patient depression screening within a multi-site rural cancer care system
- Inform a clinical workflow for depression screening

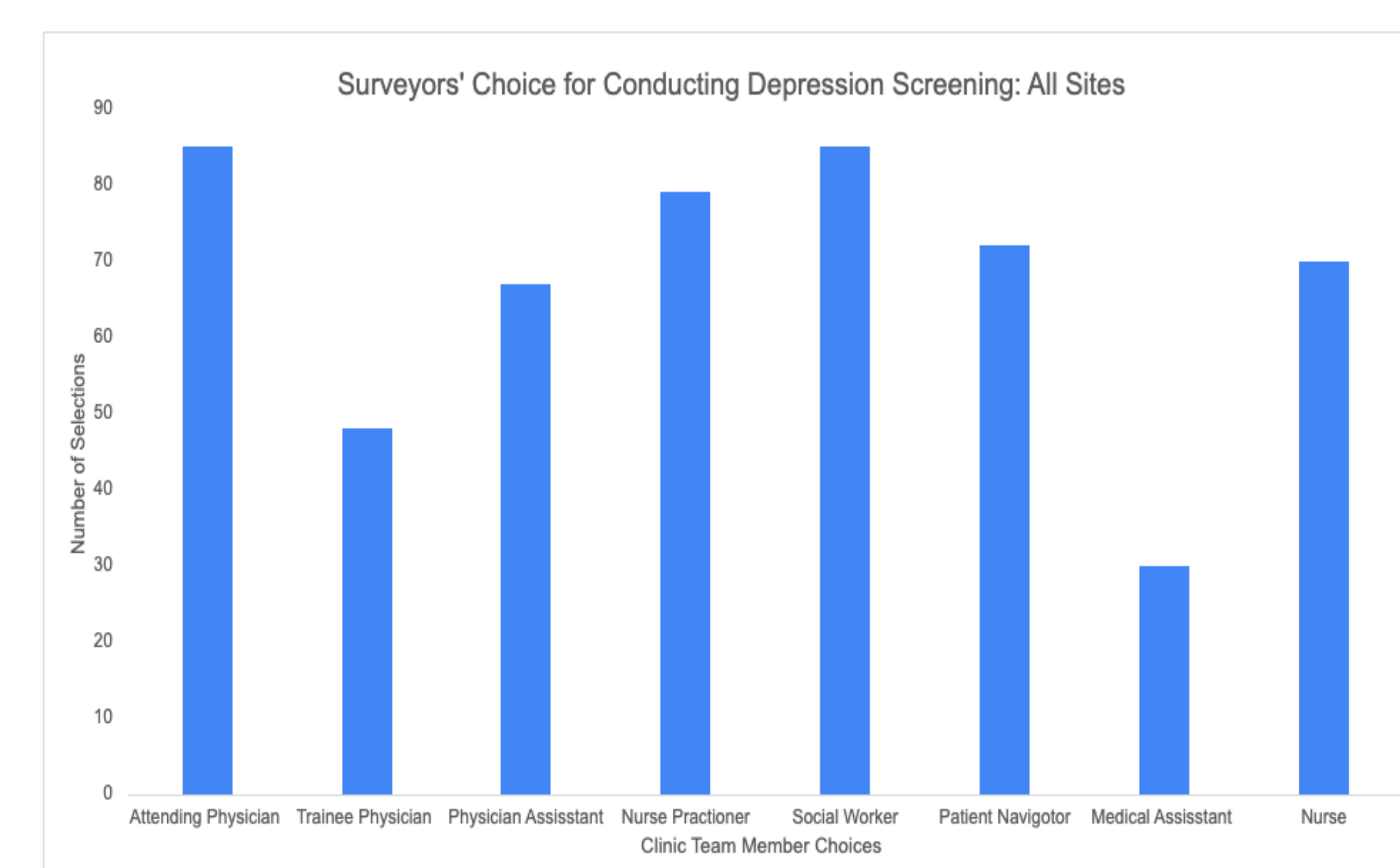
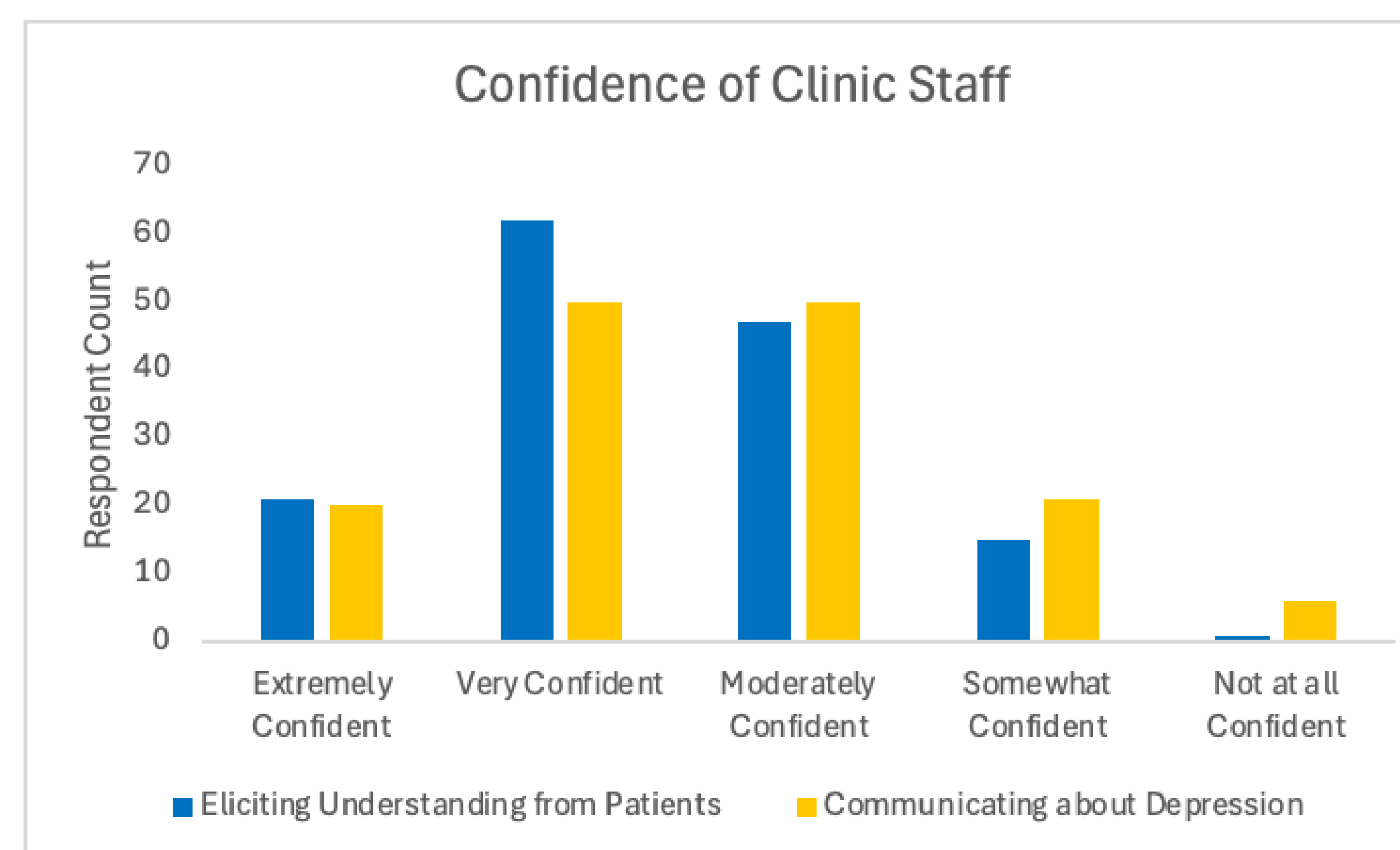
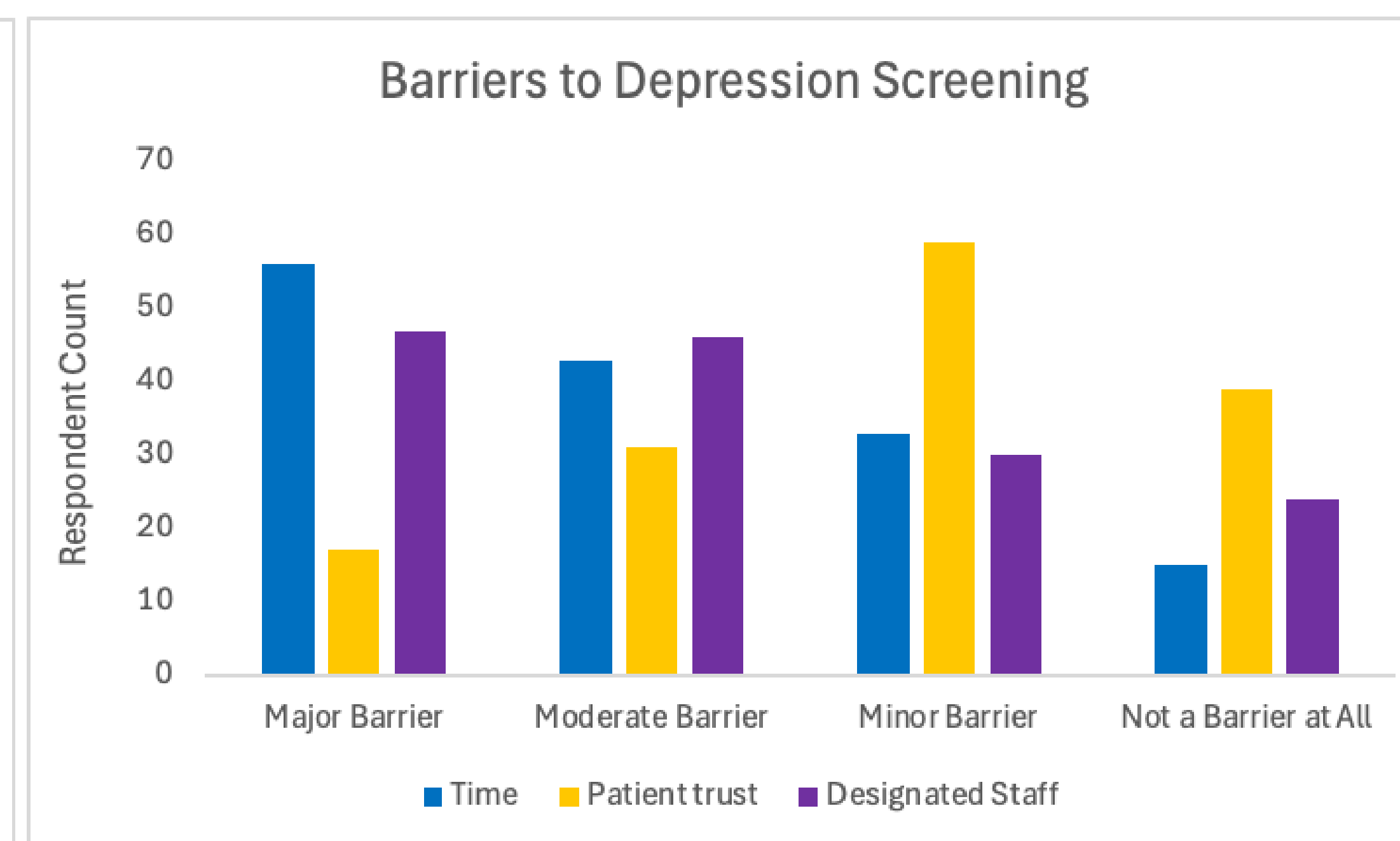
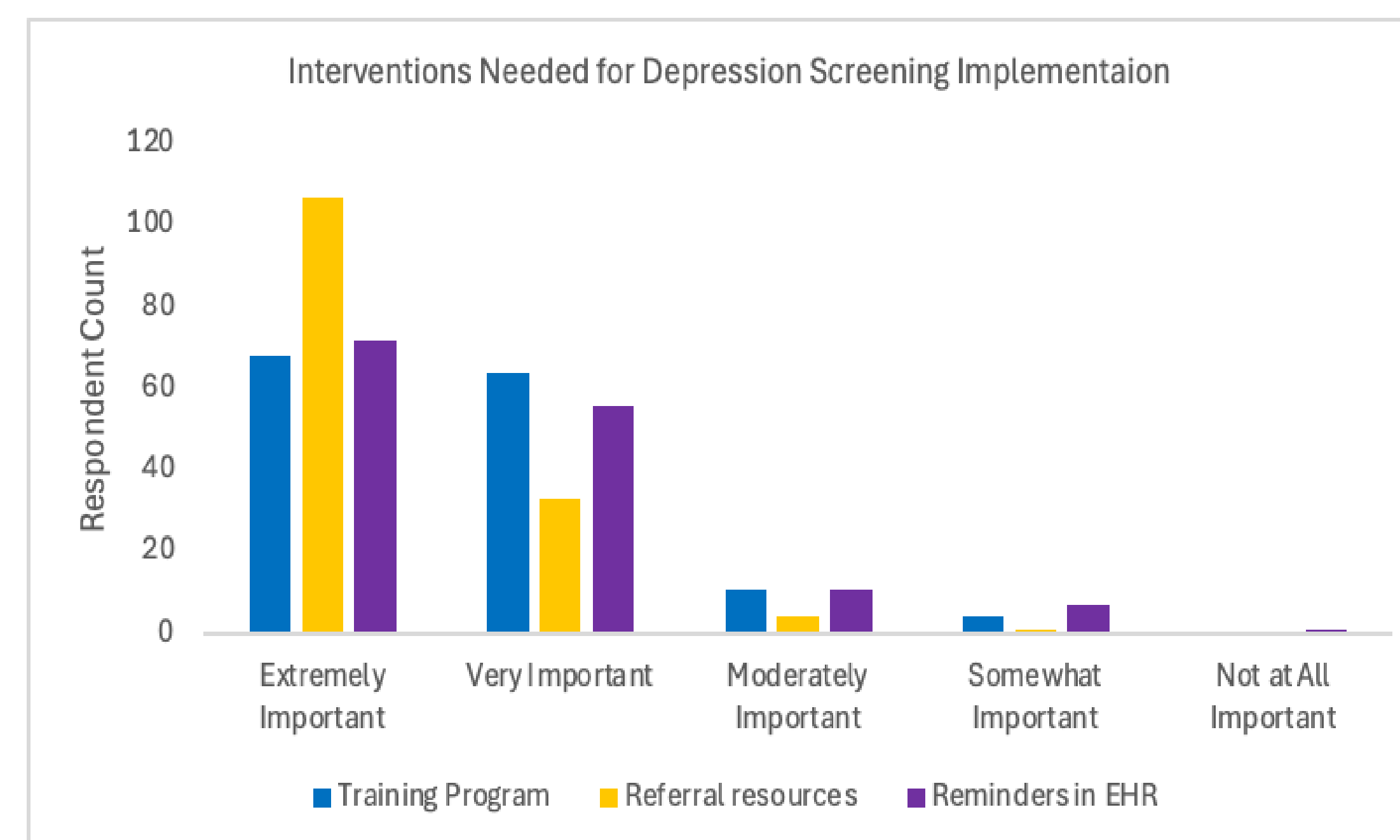
PROJECT DESIGN/STRATEGY

- Survey patient-facing members of the oncology care team at ECU Health Greenville and regional cancer clinics regarding their opinions and perceived barriers to depression screening

RESULTS/OUTCOMES



Medical Specialty	Respondents
Medical Oncology	86
Surgical Oncology	15
Radiation Oncology	27
Gynecologic Oncology	14
Other	3



LESSONS LEARNED

- Although most oncology care team members at ECU Health do not currently perform depression screening, most team members recognize the importance of depression screening.
- Team members identified lack of time and confidence in their skills communicating about depression as potential barriers to screening implementation.
- Physicians were most often identified as appropriate individuals to perform screening.
- Care team member education and training represents an opportunity for growth for implementation of depression screening for oncology patients in the ECU system.

NEXT STEPS

- Institute training opportunities focused on depression screening to facilitate program implementation
- Develop a clinical workflow for depression screening.

References

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3. Patel, K., Escamilla, V., Pradhan, I., Morris, T., Wolfe, L., Creasman, W., & Ross, J. (2023). Provider and patient barriers to mental health care in a predominant gynecologic cancer survivor population in the deep south (1146). *Gynecologic Oncology*, 176, S104