Educating Pediatric Registered Nurses to Address Suicide Screening in the School Age Child and Early Adolescent
Nina Allen, MSN, RN; Judith Ascenzi, DNP, RN

Background
- Suicide is the second most common cause of death among young people between 10-24 years of age
- Successful intervention requires early identification
- Gap in bedside pediatric nurse education, comfort and confidence when assessing for suicide
- Ask Suicide Screening Questions (ASQ)
- Hospital policy requires RNs to administer ASQ screen within first 24 hours of admission for all pediatric patients >10 years of age
- Poor unit hospital compliance

Purpose
- To develop, implement, and evaluate a registered nurse educational intervention to increase nurse confidence, comfort, and adherence to hospital-based policy when assessing for suicide in the school age child and early adolescent.
- Project Aims:
  - AIM 1: Identify barriers to administering the ASQ screen
  - AIM 2: Improve nurse comfort, confidence when screening
  - AIM 3: Improve unit adherence to hospital policy

Methods
- Design: A convenient sample pre/post intervention design conducted over 12-weeks
- Sample: All nurses (n= 45)
- Setting: 20-bed inpatient pediatric medical/surgical unit within a large academic medical center
- Intervention: 6-minute pre-recorded education session available for 3 weeks
- Measures:
  - AIM 1: Open ended interview questions (n = 5)
    - Prompt: What hinders your ability to administer the ASQ?
  - AIM 2: Pre/Post Zero Suicide Workforce Initiative Survey
  - AIM 3: Compliance chart audits
  - 4 questions asked on admission in EMR

Results
- AIM 1 interview extracts:
  - “I feel like we say welcome to the unit, have you thought about killing yourself?”
  - Not feeling comfortable asking [ASQ questions]”
  - “Fear that a patient will say yes and I don’t know how to respond.”

Discussion
- Data revealed increase comfort, confidence when screening for suicide; No significant improvement in policy adherence
- Limitations: COVID-19, survey fatigue
- Implications: Brief, 6-minute education session improved nurse comfort and confidence; timing of screening is still a challenge.

Conclusion
- This project highlighted the importance of nurse education to increase comfort and confidence when screening for pediatric suicide.