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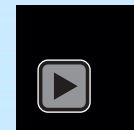
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Addressing Co-Occurring Disorders in Nursing Facilities  
May 24, 2023



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# Today's Event Host

## **Nikki Harris, MA, CBHC-BS**

### **COE-NF TRAINING AND EDUCATION LEAD**

- For the past 20 years, Nikki has provided program implementation, development, management, external and internal trainings, policy development, quality assurance, and managed training coordination and technical support throughout the southeast region.
- Previously, she served as the project manager for the Division of Behavioral Health and Substance Use Services within the South Carolina Department of Corrections.
- She has a B.A. in Psychology from the University of South Carolina, a M.A. in Counseling from Webster University and is a Certified Behavioral Specialist.



# Today's Presenter

## Mr. Mark Sanders, LCSW, CADAC

**OWNER - ON THE MARK CONSULTING -**

Mark Sanders is an international speaker, trainer and consultant in the behavioral health field whose work has reached thousands throughout the United States, Europe, Canada, Caribbean and the British Islands.

Mark is the author of five behavioral health books. Recent writings include "Slipping through the Cracks: Intervention Strategies for Clients Multiple Addictions and Disorders, Recovery Management," and "Relationship Detox: Helping Clients Develop Healthy Relationships in Recovery." He has also had two stories published in the New York Times best-selling books series, "Chicken Soup for the Soul."

Mark has been a certified addictions counselor for 34 years. He has received numerous awards including a Lifetime Achievement Award from the Illinois Addiction Counselor Certification Board and the Barbara Bacon Award for outstanding contributions to the social work profession as a Loyola University of Chicago Alumni.

Mark is co-founder of Serenity Academy of Chicago, the only recovery high school in Illinois. He is past president of the board of the Illinois Chapter of NAADAC and has had a 30-year career as a university educator having taught at the University of Chicago, Illinois State University, Illinois School of Professional Psychology, and Loyola University of Chicago, School of Social Work.

**Contact:** [Onthemark25@aol.com](mailto:Onthemark25@aol.com)



# Addressing Co-occurring Disorders In Nursing Facilities Objectives

By the end of this course, nursing home staff will be able to:

## Define Co-Occurring Disorders

- Articulate seven (7) ways substance use disorders and mental illness interact with each other for residents with co-occurring disorders
- Explain the differences between three (3) types of co-occurring disorders treatments
- Be able to provide services and make referrals based upon a resident's level of readiness to change
- Provide support for residents with co-occurring disorders

# Definition of Co-occurring Disorders

- Two coexisting disorders, independent of each other, but, yet interacting with each other.
- Each is characterized by denial/ambivalence and is treatable.
- When mental illness and substance use disorders co-exist, both should be considered primary and treatment for both disorders is needed.

# Prevalence

According to the National Alliance on Mental Illness (NAMI), approximately 50 percent of individuals with severe mental health disorders are affected by substance abuse. NAMI also estimates that 29 percent of all people diagnosed as mentally ill abuse alcohol or other drugs.

According to the National Survey on Drug Use and Health, [17 million](#) U.S. adults experienced both mental illness and a substance use disorder in 2020.

# How the Two Interact

- Marijuana used to medicate psychotic symptoms (CBD)
- Alcohol used to medicate the grief caused by mental illness
- Drugs used to avoid the side effects of psychiatric medication
- Alcohol minimizing the effectiveness of meds, increasing the risk of overdose and suicide



## How the Two Interact (cont.)

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- Drug use exacerbating psychiatric symptoms
- The medication of feelings of uselessness with illicit drugs
- Alcohol and illicit drug use making it difficult to follow treatment regimens

# Symptoms of Co-occurring Disorders

People who suffer from mental illness often experience more serious symptoms when drug or alcohol addiction is involved.

## **Some of these symptoms include:**

- Intrusive thoughts
- Hopelessness
- A lack of motivation or a fear of public situations

The more the individual uses substances to cope with their symptoms, the greater the risk of developing addiction.

<https://www.dualdiagnosis.org/mental-health-and-addiction/>

# Warning Signs of Co-occurring Disorders

Changes in eating

Feeling numb

Withdrawing from others

Unexplained aches and pains

Thoughts of harm to self or others

Changes in sleeping

Sadness or hopelessness

Loss of interest in activities

Unable to stop certain thoughts or memories

Increased alcohol or substance use

Changes in mood

Anger

Unusually confused or forgetful

Believing things that are not true

Hearing voices

# Three (3) Types of Co-Occurring Disorders Treatment

- **Sequential**-The resident receives services for mental health and substance use disorders one at a time.
- **Integrated**-The resident receives services for mental health and substance use disorders in the same facility at the same time.
- **Concurrent**-The resident receives services for mental health and substance use disorders in two different facilities (within the nursing facility and in the community) at the same time.

# Evidence Based Treatment

- Integrated co-occurring disorders treatment

## Components of Integrated Treatment

- Psycho-education
- Family psycho-education and counseling
- Intensive family case management
- Assertive community treatment (ACT)



# Integrated Treatment (cont.)

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- Identification of goals and purpose in recovery
- Integrate within the resident's centered care plan
- Integrated treatment for co-occurring disorders by collaborating with community behavioral health services providers
- Medication management (based on consultation with Medical Director)

# Stage Based Intervention



# Five (5) Stages of Change

**Stage 1:** Pre-contemplation - Person does not believe they have a problem that needs to change

**Stage 2:** Contemplation Ambivalence - Mixed feelings about changing

**Stage 3:** Readiness - Motivated to change and has not initiated change yet

**Stage 4:** Action - Changing

**Stage 5:** Maintenance - In recovery for 6 months or longer

# How to Support Residents with a Co-occurring Disorder

- Treat residents with dignity and respect
- Be patient; sometimes residents with a mental health diagnosis need extra time to process instructions or new information
- Get to know the resident; find out what brings them comfort; learn if there are specific triggers that should be avoided
- Keep in mind that anger or irritability may be a symptom of their condition
- Ask the resident what you can do to help them feel better
- Consider whether a change of environment might be helpful
- Help the resident plan for what to do when they are not feeling well.

# How to Support Residents with a Co-occurring Disorder (cont.)

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- Identify and partner with organizations within your community that support co-occurring disorders recovery
- Listen, have empathy, have patience, celebrate small victories, help reduce stress, have hope, provide community
- Make sure the organization's policy and procedures are aligned with its approach to addressing co-occurring disorders



# What Can You Do Today

- Ensure all staff receive training on co-occurring disorders
- Receive education about harm reduction
- Encourage person first language
- Honor the resident's level of readiness to change
- Honor multiple pathways of recovery and provide individualized services
- Work with the Center of Excellence on additional training topics

# Resources

Atkins, C. Co-Occurring Disorders: A Whole-person Approach To The Assessment and Treatment of Substance Use and Mental Disorders (2021). Pesi. Eau Claire, WI

Brasler, P. The Clinicians Guide to Substance Use Disorders: Practical Tools For Assessment, Treatment and Recovery (2022). Pesi. Eau Claire, WI.

Chandler, T., Dombrowski, F., and Matthews, T. Co-Occurring Mental Illness and Substance Use Disorders. (2022). Routledge. New York, NY.

Mueser, K et.al. Integrated Treatment For Dual Disorders. (2003). Guilford Press. New York, NY.

Substance Use and Co-Occurring Mental Disorders. [nimh.gov/health/topics/substance-use-mental-health](https://www.nimh.gov/health/topics/substance-use-mental-health)

# Resources Continued

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Co-Occurring Disorders. (2021). Psychology Today. [www.psychologytoday.com/us/conditions/co-occurring-disorders](http://www.psychologytoday.com/us/conditions/co-occurring-disorders)

Co-Occurring Disorders Disorders and Other Health Conditions. [Samhsa.gov](http://Samhsa.gov)

Sanders, M. Slipping Through The Cracks: Intervention Strategies for Clients With Multiple Addictions and Disorders (2011). Health Communications, Inc. Deerfield Beach, FL.

TIP 42. Substance Abuse Treatment for Persons With Co-Occurring Disorders. [Samhsa.gov](http://Samhsa.gov)



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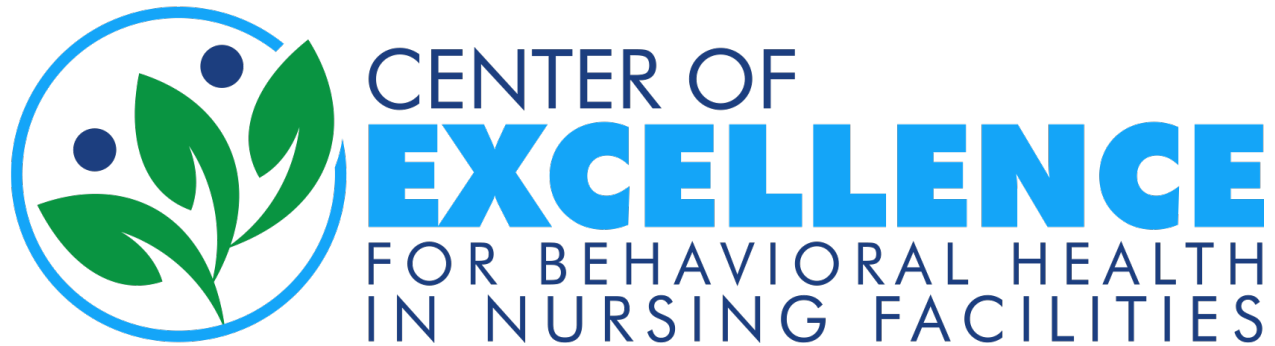
For more information or to request assistance, we can be reached by phone at **1-844-314-1433** or by email at [coeinfo@allianthealth.org](mailto:coeinfo@allianthealth.org).

## Visit the website:

[nursinghomebehavioralhealth.org](http://nursinghomebehavioralhealth.org)



# Thank You!



This material was created by the Center of Excellence for Behavioral Health in Nursing Facilities. This work is made possible by grant number 1H79SM087155 from the Substance Abuse and Mental Health Services Administration (SAMHSA). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Substance Abuse and Mental Health Services Administration.