



An Easy Pill to Swallow: Nonpharmacological Interventions for Long-term Care Residents

October 29, 2024



CENTER OF
EXCELLENCE
FOR BEHAVIORAL HEALTH
IN NURSING FACILITIES

Today's Event Host

Nikki Harris, MA, CBHC-BS

COE-NF TRAINING AND EDUCATION LEAD

Nikki serves as the training and education lead for the Center of Excellence for Behavioral Health in Nursing Facilities (COE-NF). 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 program 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

Anthony Nedelman, PhD

DIRECTOR OF PSYCHOLOGY SERVICES, MINDCARE SOLUTIONS

Dr. Anthony Nedelman, an esteemed clinical psychologist based in Ohio and internationally recognized for his expertise in addressing mental health concerns across the lifespan.

Renowned for his impactful presentations, Dr. Nedelman has shared his insights at conferences nationwide. These include leading workshops on psychiatric illness in long-term care, staff burnout and employee turnover, and models for effective leadership in healthcare.

A leader in his field, he chaired the Ohio Psychological Association's Science and Research Committee and oversees a dedicated team providing counseling and psychological services in long-term care settings.

With a commitment to both leadership and clinical excellence, Dr. Nedelman continues to make significant contributions to the field of psychology.



Learning Objectives

1. Understand and apply person-centered care principles in geriatric populations.
2. Recognize the presence and impact of mental illness in nursing home residents.
3. Develop and implement a comprehensive approach to mental illness using nonpharmacological interventions.

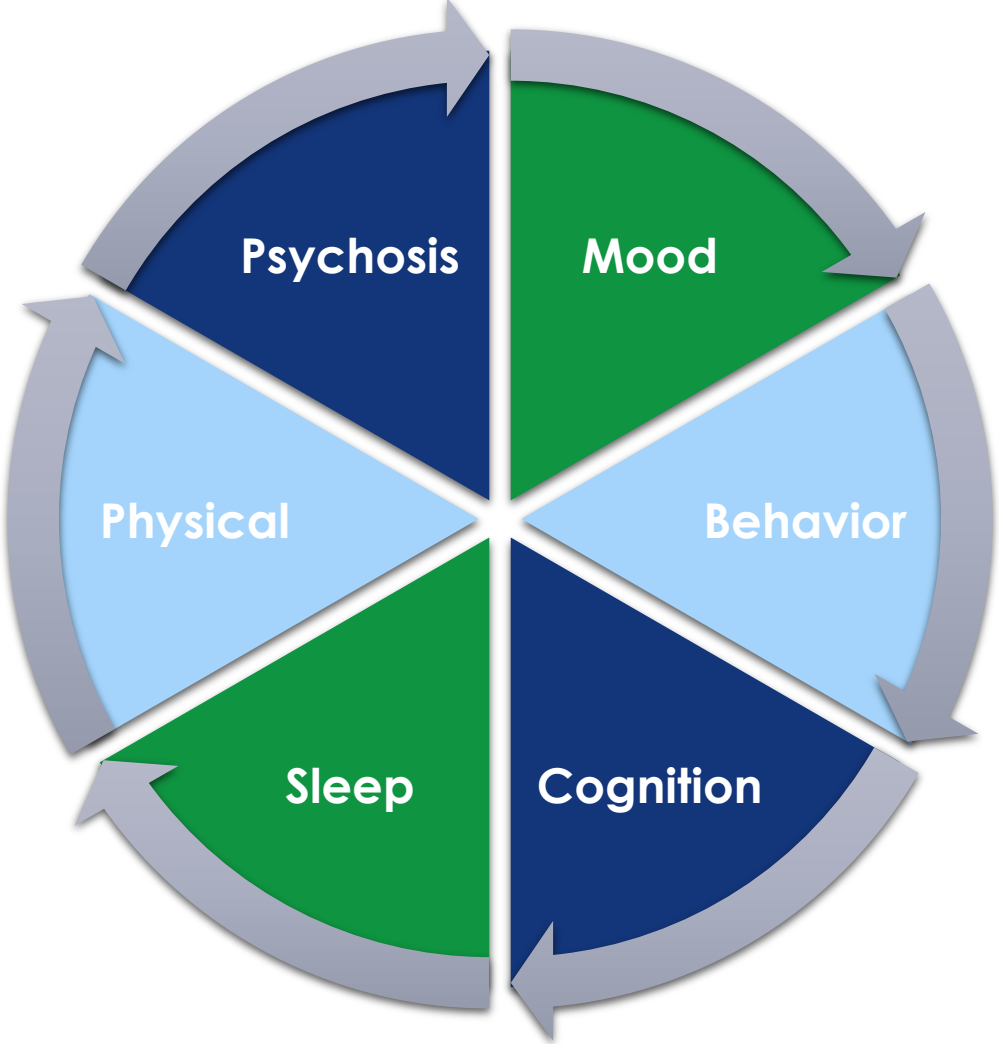
What is Person-centered Care?

Person-centered care is an approach to healthcare that emphasizes the individual's preferences, needs, and values in the planning, delivery, and evaluation of care. It shifts the focus from a traditional, provider-centered approach (Medical Model), where the healthcare professional primarily makes decisions, to one where the person receiving care is at the center of all decisions (Social Model).

Person-centered Care Principles

1. Respect for the individual
2. Involvement in decision-making
3. Personalized care
4. Coordination and integration
5. Emotional support
6. Physical comfort and environment
7. Accessibility

Common Signs of Mental Illness



The Impact of Mental Illness on LTC Residents

Cognition

Emotional
Well-being

Social
Interaction

Behavior

Physical
Health

Quality of
Care

Staff
Impact

Legal &
Ethical

Family

End of Life

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Cognition

Memory Loss

- Dementia and alzheimer's can lead to memory loss, confusion, and difficulty with completing daily tasks.
 - *E.g.,* Forgetting recent events, not recognizing familiar faces, misplaces items, daily routines get disrupted
- Can lead them to lose a sense of continuity in their lives.

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Cognition

Confusion

- Accompanies memory loss
- Can lead to being disoriented to person, place, or time
 - *E.g.*, A resident might forget where they are and why they need care. This can lead to anxiety, fear, and agitation with staff.

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Cognition

Decision-Making

- Cognitive decline can impact their ability to make sound decisions about their care, finances, social interactions, etc.
- Planning and organization can be affected.
 - *E.g.*, A resident might not be able to get dressed by following the correct sequence of events
- Residents begin to make poor decisions regarding safety awareness.

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Emotional Well-being

Depression and Anxiety

- Depression is common among residents and can result in feelings of hopelessness, withdrawal from activities, and a lack of interest in life. Anxiety can lead to constant worry and fear, exacerbating feelings of insecurity.

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Social Interaction

Isolation

- Mental illness can lead to social withdrawal, making it difficult for residents to interact with others, participate in social activities, or form relationships.

Stigmatization

- Residents with visible symptoms of mental illness may face stigma or be misunderstood by other residents and staff, leading to further isolation.

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Behavior

Aggression or Agitation

- Mental illnesses like schizophrenia or certain types of dementia can result in aggressive or agitated behaviors, which can be distressing for the resident and others.

Noncompliance

- Some residents may refuse medication or treatment due to paranoia, delusions, or a lack of understanding of their condition.

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Physical Health

Neglect of Personal Care

- Mental illnesses can lead residents to neglect personal hygiene, nutrition, and taking their medications. All of which can negatively impact physical health.

Increase in Falls

- Conditions like depression or anxiety can affect a resident's mobility and balance, increasing the risk of falls.

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Quality of Care

Communication Barriers

- Residents with mental illness may have difficulty communicating their needs or symptoms, leading to misunderstandings and unmet care needs.

Complex Care Needs

- Managing mental illness often requires specialized care, which may be challenging in facilities with little experience/exposure to these populations.

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Staff Impact

Staff Stress

- Caring for residents with mental illness can be emotionally and physically demanding for staff, leading to burnout.

Training Needs

- Staff may require additional training to effectively care for residents with mental illness, especially in understanding and managing challenging behaviors.

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Legal & Ethical

Informed Consent

- Mental illness can complicate issues of consent, particularly if a resident has impaired cognitive abilities and cannot make informed decisions about their care.

Restraints and Seclusion

- In extreme cases, managing challenging behaviors may involve the use of restraints or seclusion, raising ethical concerns about the resident's rights and dignity.

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Family

Family Stress

- Families may experience stress, guilt, or helplessness when their loved one struggles with mental illness, impacting their involvement in the resident's care.

Decision-Making

- Family members may need to take on a more significant role in decision-making, particularly if the resident is unable to do so themselves.

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Palliative Care Needs

- Residents with severe mental illness may require specialized palliative care that addresses both their mental and physical symptoms as they approach the end of life.

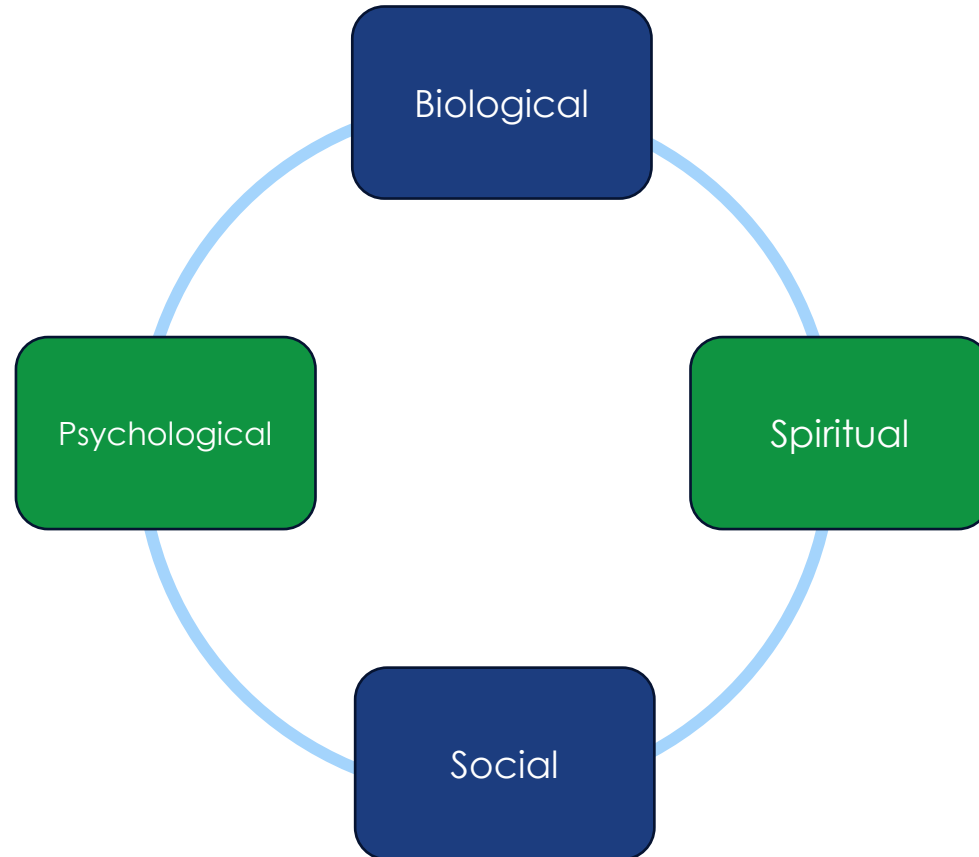
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Addressing mental illness in nursing home residents requires a comprehensive approach that includes appropriate medical treatment, psychological support, and a compassionate, understanding environment.

Nonpharmacological Interventions

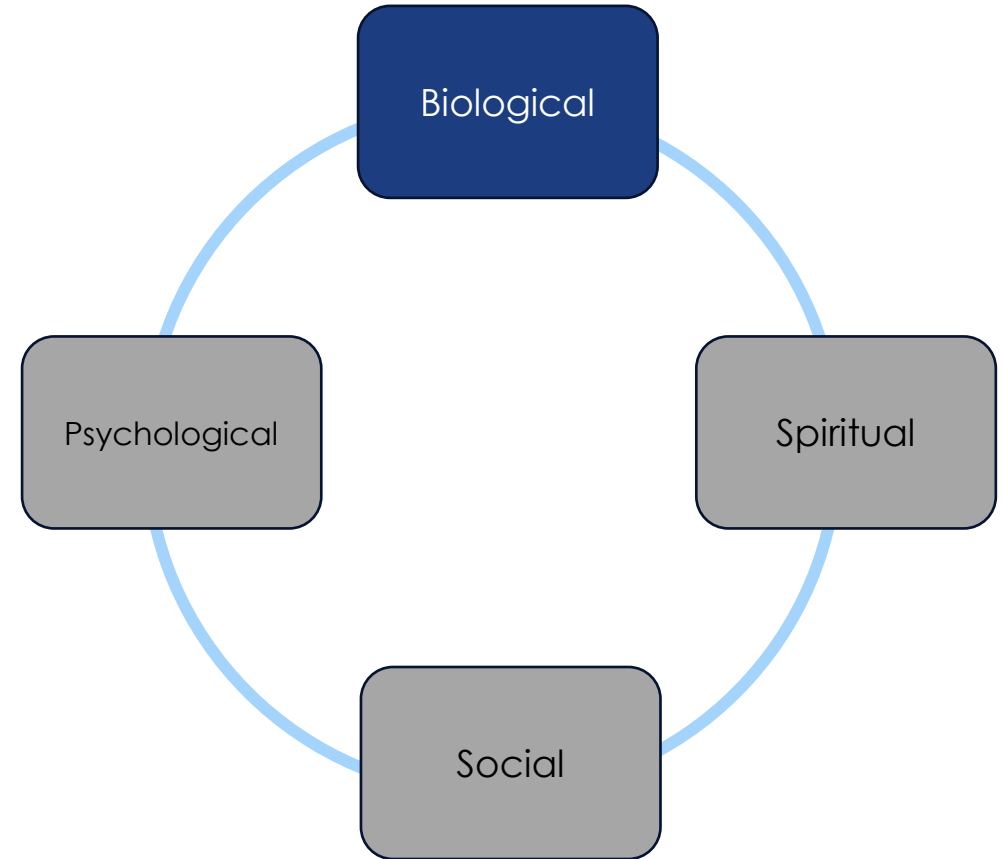
Bio-Psycho-Social-Spiritual Model



Nonpharmacological Interventions

Biological

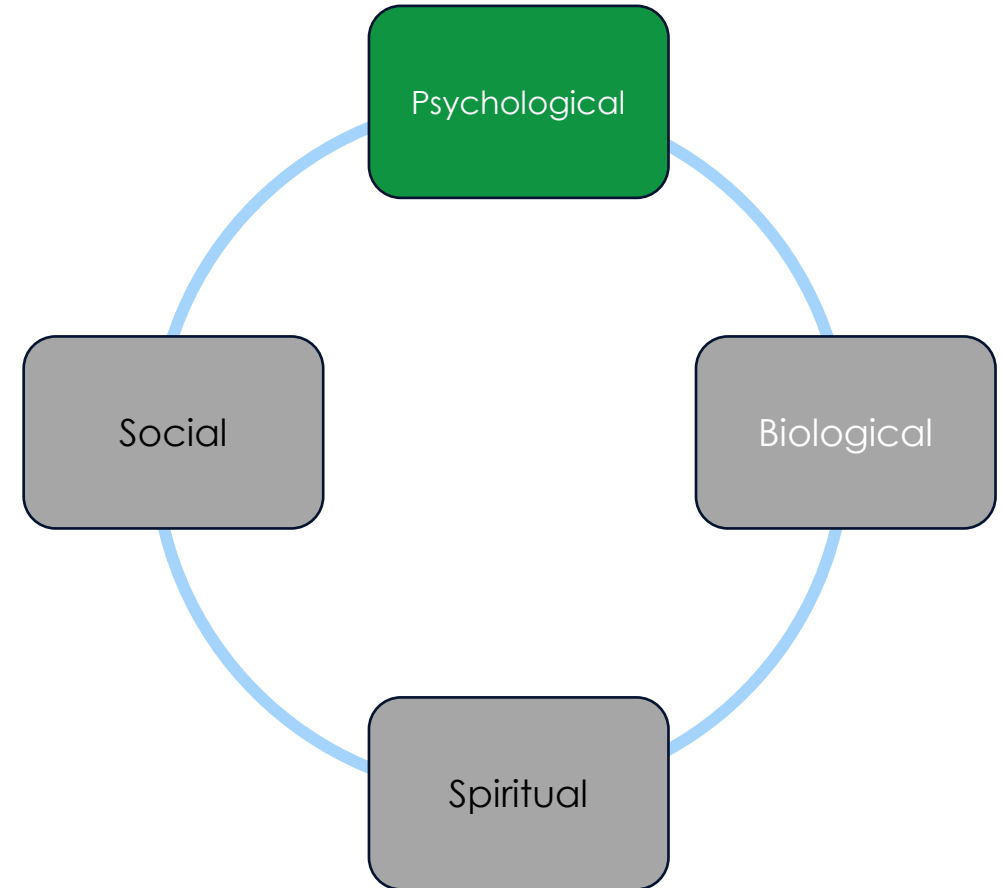
- Exercise! Exercise! Exercise!
- Physical therapy
- Diet and nutrition counseling
- Take medications as prescribed.
- Genetic knowledge is power



Nonpharmacological Interventions

Psychological

- Persistent maladaptive thoughts and behaviors that cause distress can signify an underlying mental health disorder.
- Counseling can be extremely useful to learn and implement coping skills to reduce depression, anxiety, worry, stress, etc.
- There is a bidirectional relationship between mental health and physical health.



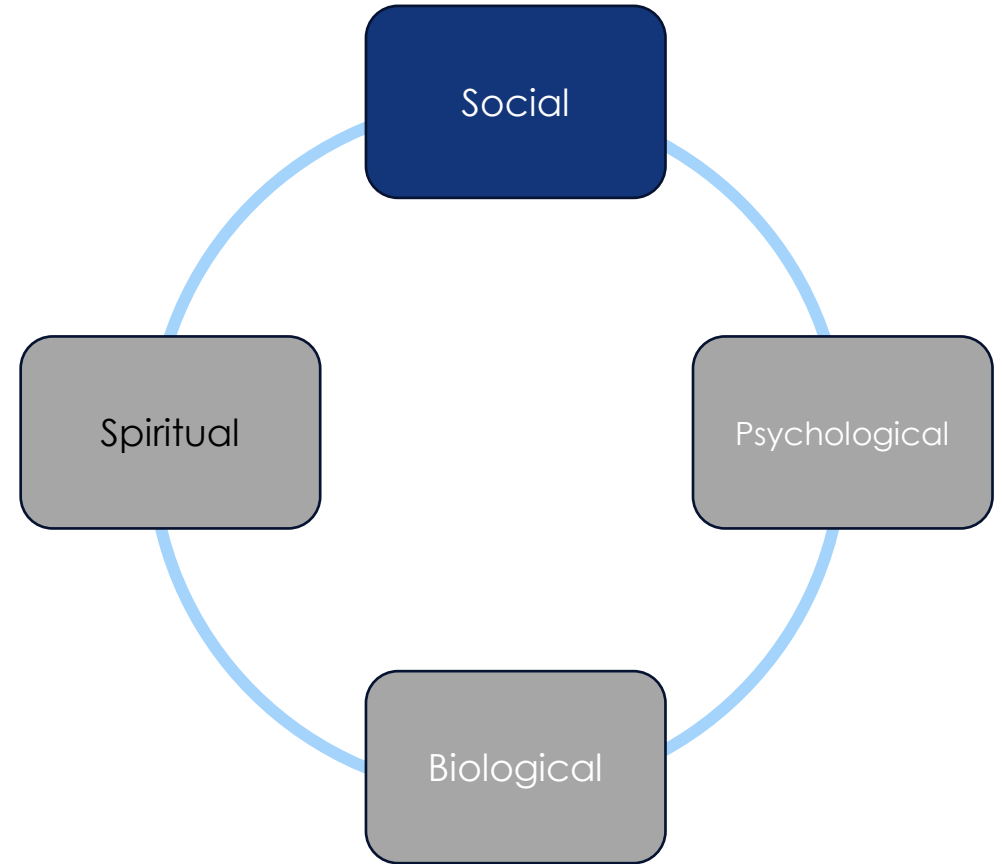
Nonpharmacological Interventions

Social

Environment → Genetic Expression

Positive Environmental Changes = Positive Mood Changes

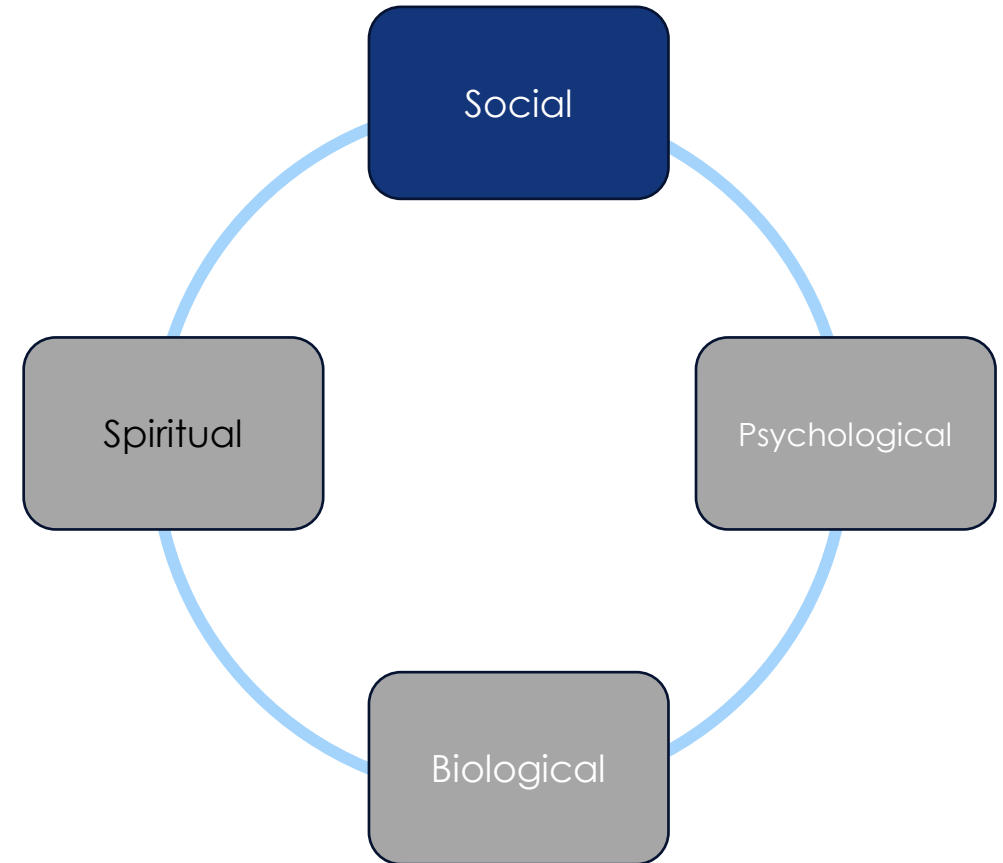
Social Support → Mental Health Outcomes



Nonpharmacological Interventions

Social

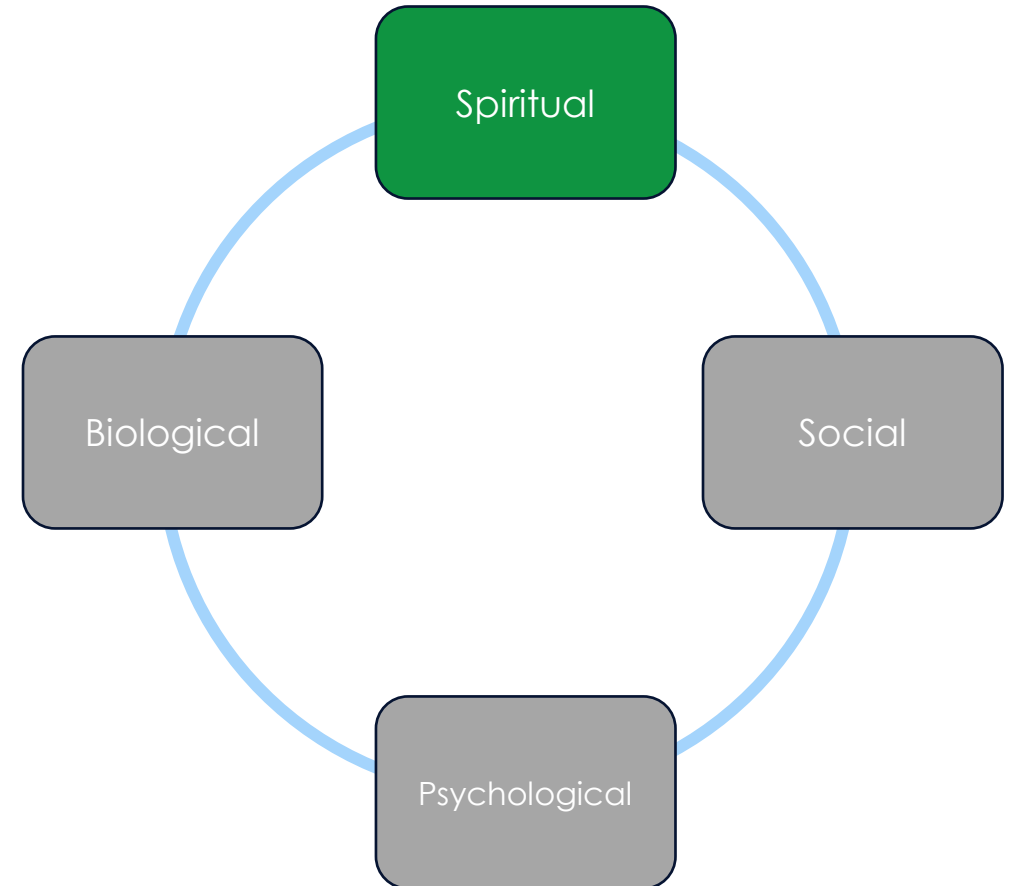
- Interest-based clubs
 - Books, gardening, knitting, etc.
- Family game nights
- Themed events
 - Holiday parties, cultural awareness events, celebrations that election day is over!
- Incentivize activity participation for those prone to isolate
- Buddy systems for new admissions
- Intergenerational activities
 - Visits from schools, trick-or-treating for neighborhood kids, etc.



Nonpharmacological Interventions

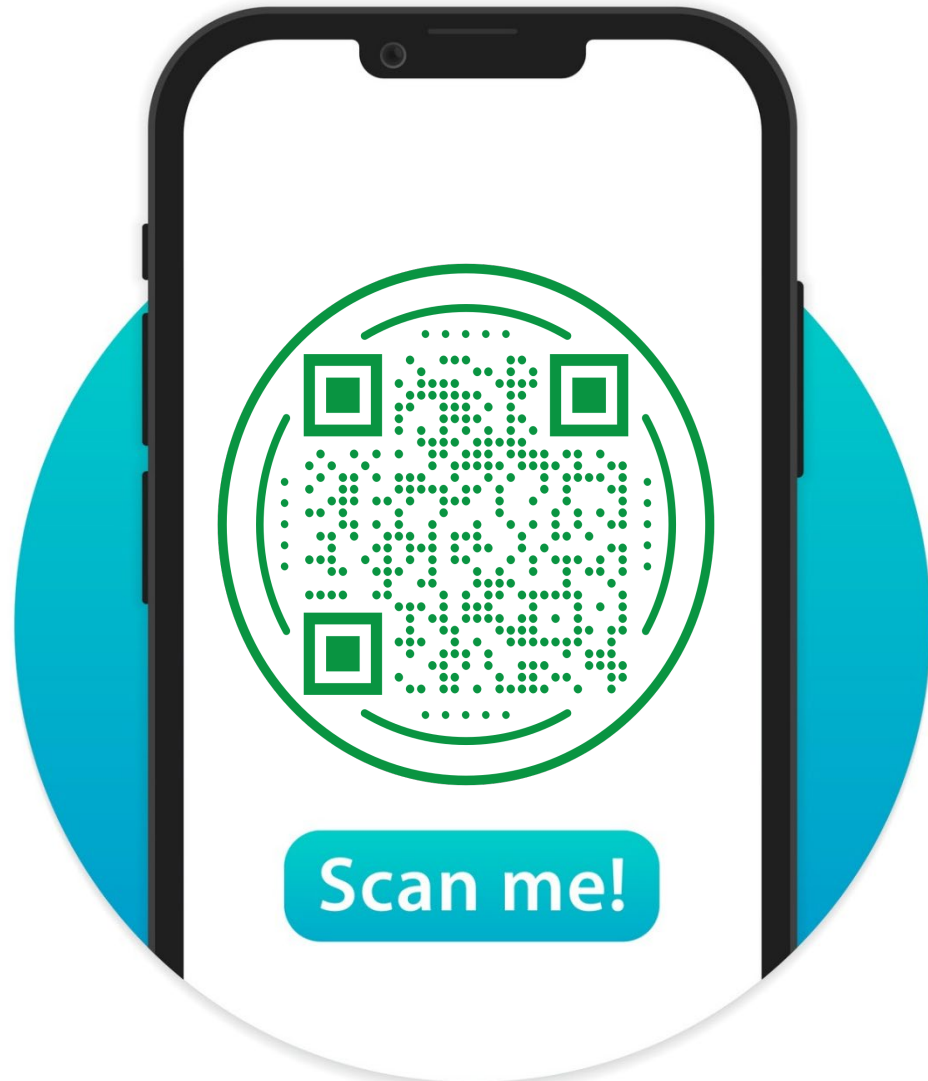
Spirituality

- Well-established Religions
- Ethereal connections to a higher power.
- Common Interventions:
 - Bible studies
 - Church groups/visitors
 - Prayer circles
 - Mindfulness/Meditation
 - Journaling/Reflection
 - Nature time



Question & Answer

Request Assistance



To submit a request for assistance, scan the QR code.

We look forward to assisting you!

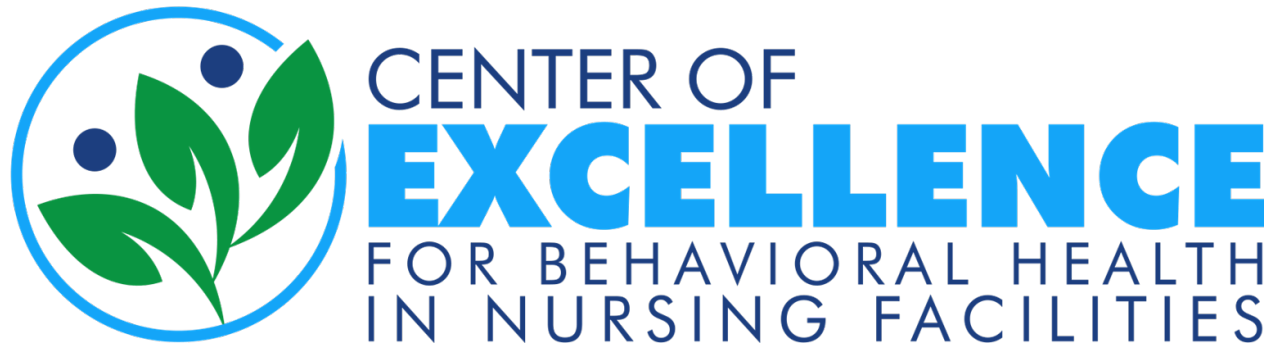
Contact us:

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.

Visit the website:

nursinghomebehavioralhealth.org

Thank You!



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