



Understanding Post Traumatic Stress Disorder (PTSD): A Brief Overview

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CENTER OF
EXCELLENCE
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IN NURSING FACILITIES

Today's Presenter

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Bryan is a licensed professional counselor and the founder and CEO of TalkForward, which provides psychotherapy and executive consulting services. Bryan has practiced in behavioral health for the past 30 years.

With 20 years of executive management experience, Bryan served as a chief executive officer in a public behavioral health agency, with over 450 employees and an annual budget of \$27 million.

Bryan is active in his profession. He is a specialist in clinical supervision and served on the Board of the Licensed Professional Counselors Association of Georgia (LPCA) as President from 2021-2024.

Bryan has an Executive MBA from Kennesaw State University and both a master's and bachelor's degree in psychology.

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Learning Objectives

1. Participants will understand Post Traumatic Stress Disorder (PTSD).
2. Participants will understand symptoms of PTSD.
3. Participants will understand what ways to support residents with PTSD.

Source: National Institute of Mental Health

Post-traumatic Stress Disorder (PTSD)

“Fight-or-Flight”



Anyone can develop Post-traumatic Stress Disorder (PTSD)
at any age because of a triggering event or loss.

What is Post-traumatic Stress Disorder (PTSD)?



Post-traumatic stress disorder (PTSD) is a disorder that develops in some people who have experienced a shocking, scary, or dangerous event that violates a person's core sense of safety and integrity.

Events That Can Cause PTSD

While the common image of this is combat, it can be any event that meets these criteria:

- Combat
- Witnessing violence or the results of violence
- Pandemic/Covid
- Being in a traumatic event such as a car crash
- Suffering abuse as a child or an adult
- Witnessing the loss of a loved one
- Vicarious trauma from helping others with trauma

Recognizing PTSD

- Symptoms of PTSD usually begin within three (3) months of the traumatic event, **but they sometimes emerge later.**
- To meet the criteria for PTSD, a person must have symptoms for longer than one (1) month that are severe enough to interfere with aspects of daily life, such as relationships or work.
- **Can only be diagnosed by a mental health professional.**

Recognizing PTSD

Symptoms often begin within a few months of the event, but they can emerge much later.

These fall into categories of:

- Re-experiencing
- Avoidance
- Arousal
- Cognition

All of these symptoms can be triggered though apparently unconnected events!



Symptoms: Re-experiencing

Re-experiencing symptoms include things such as:



- Flashbacks of the event(s)
- Intrusive thoughts or memories
- Dreaming of the event(s)
- Physical sensations that match time incident(s)
- Triggered anxiety attacks or panic attacks (Arousal)

Symptoms: Avoidance

Avoidance includes:

- Staying away from events, places or objects that can be reminders
- Restriction of activities that can worsen over time
 - Experiencing panic attacks makes restriction more likely
- Avoiding thoughts or feelings related to the traumatic event
- Change their routines to avoid triggers (i.e. riding in a car after car accident)

Symptoms: Arousal

Arousal symptoms include things like:

- Easily being startled
- Hypervigilance
- Agitation
- Short temper
- Loss of sleep
- Poor concentration
- Anxiety attacks and panic attacks



Symptoms: Cognition

Cognition symptoms can range from:

- Gaps in memory of the event
- Loss in sense of safety
- Increased blame on self or others
- Depression
- Losing interest in enjoyable activities
- Feelings of social isolation
- Detachment from friends and family members
- Suicidal Ideation



Triggers of PTSD Episodes

The triggers for each person are based on his or her experience:



MIND TRIGGER

- People who have been in combat, loud noises can be that trigger
- Riding in a car may be the trigger for someone who has had a car accident
- A survivor of sexual abuse may be triggered with proximity of certain touches even if not sexual in nature
- A song or show
- Shouting or raised voices

Caring for Residents with PTSD

Observe residents and watch for repeated responses around a certain behavior, activity, and/or person. This can be a clue that an assessment for trauma and PTSD is in order.

What is critical to remember is that **any event**, *even if it does not seem traumatic to others*, can be a source of PTSD.

What is important is how the individual experienced the event and how that is playing out now.

What Can You Do?

- Assess residents at intake for trauma (early intervention).
- Refer for assessment and treatment
- Be kind and supportive: Caring for someone with PTSD requires patience, understanding, and grace.
- Know the resident
 - Learn their triggers
 - Understand the individual's personal responses to triggers
- Reassure the resident that he or she is safe
- Help with positive distractions, such as walks, outings, and other activities

Treatment of PTSD



A mental health professional who has experience helping people with PTSD, such as a psychiatrist, psychologist, or clinical social worker, can determine whether symptoms meet the criteria for PTSD.

Non-pharmacological Interventions

Non-pharmacological interventions can be used to improve the resident's activities of daily living.

Psychosocial Interventions:

- Social skills training
- Coping skills
- Coaching (problem & symptom focused interventions)
- Talk therapy (EMDR, cognitive therapy, trauma-focused therapy)*Utilize community behavioral health providers.

What You Can Do Today

Educate

- Train your assessment team on proper PTSD criteria (physicians, nurses, social workers)
- Train staff at all levels on the signs, symptoms and supportive responses when working with residents with a PTSD diagnosis.

Psychiatric care

- Ensure that residents with a diagnosis of PTSD get the appropriate level of counseling and psychiatric care in your facility.

Interdisciplinary Team

- Ensure that resident's treatment and symptoms are communicated with staff at all levels.

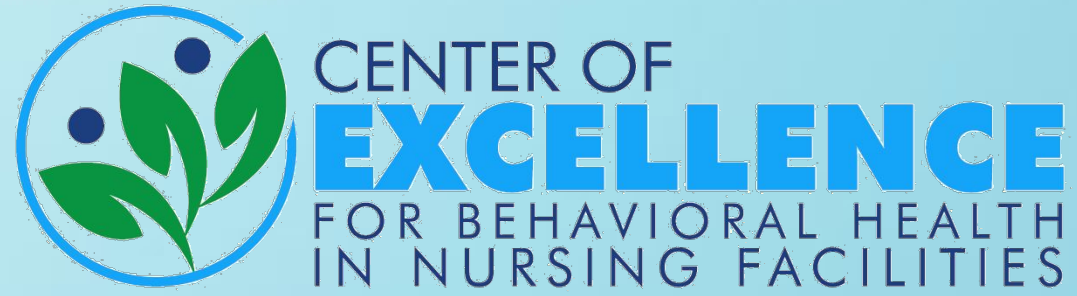
What You Can Do Today (cont.)

Assess the stimuli in the nursing facility environment

- Create calming areas within the facility if possible.

Planning activities

- Work with residents with a PTSD Diagnosis
 - Assess individual needs
 - Support slow, safe, and secure community integration



Questions?



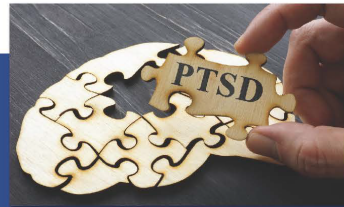
COE-NF Resources



Understanding Post-Traumatic Stress Disorder

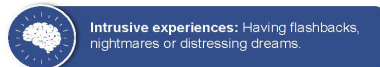
Post-Traumatic Stress Disorder (PTSD) is a brain disorder that some people develop after experiencing or witnessing a terrifying traumatic event. A traumatic event in this context refers to threatened loss of life, actual loss of life, a serious injury, physical or sexual violence, or learning that such an event happened to a close family member or friend.

Common examples of traumatic events include:



An event may be traumatic for one person and not for another. Not everyone exposed to a traumatic event will develop PTSD.

A person with PTSD experiences intense fear and other symptoms during and long after the traumatic event has ended. Symptoms may start immediately after the event or, in some cases, months or even years later. Symptoms of PTSD can vary but generally fall into the following categories:



Intrusive experiences: Having flashbacks, nightmares or distressing dreams.



Changes in mood and thoughts: Inability to remember details of the event, feeling guilty or ashamed or losing interest in activities.



Avoidance: Avoiding reminders of the event, situations similar to the event, or even talking about the event.



Increase in arousal and reactivity: Feeling angry or irritable, being overly watchful and having difficulty sleeping.

Supporting Residents with PTSD

Once a PTSD diagnosis is confirmed by a qualified clinician, collaborate with the resident and their family to provide education about the disorder, identify strategies to manage their symptoms, include the strategies in the care plan and communicate them to the team. Facility staff should connect the resident to appropriate mental health treatment services and community resources. High-quality, free apps, such as [PTSD Coach](#), may also be helpful.

For additional information and resources, visit www.nursinghomebehavioralhealth.org

References:

Substance Abuse and Mental Health Services Administration. Post-Traumatic Stress Disorder
American Psychiatric Association. What is Post traumatic Stress Disorder



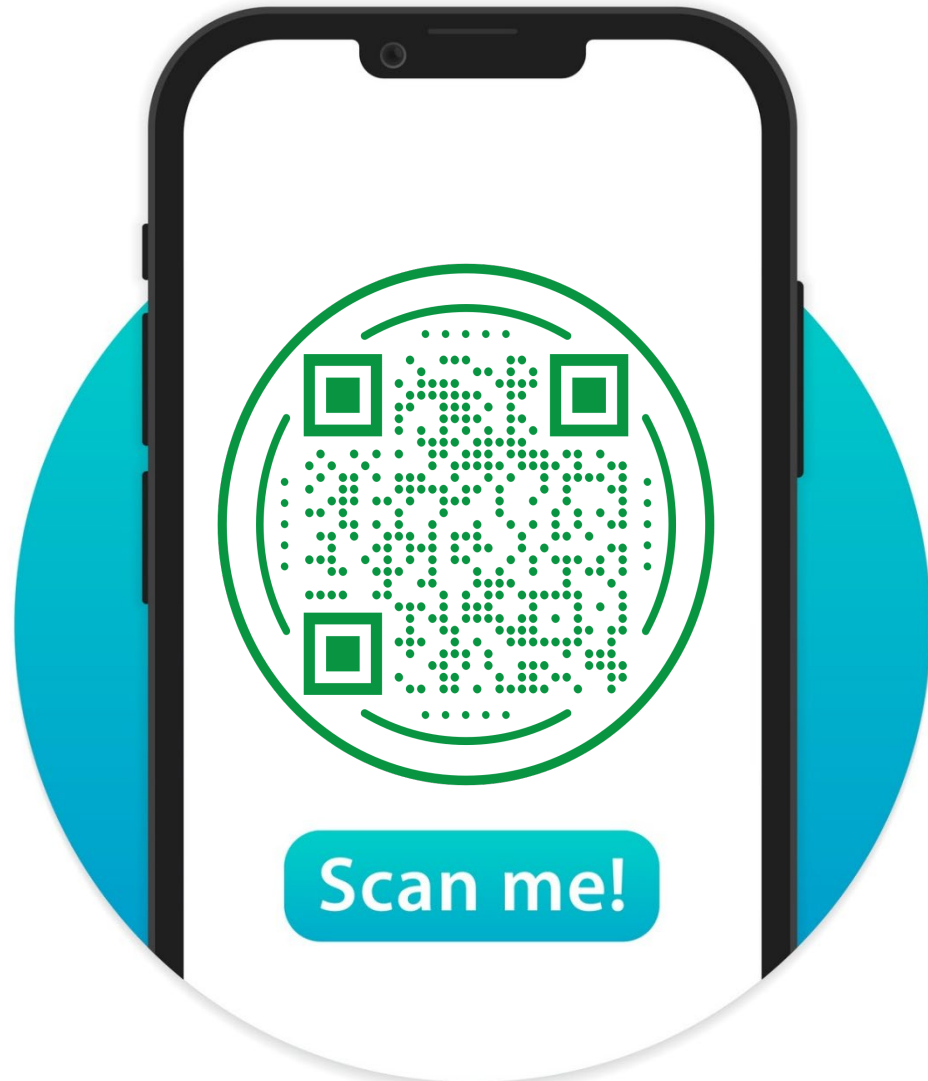
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Thank You!

