


Title page



**NC Department of
Health and Human Services
NC Nurse Aide I Curriculum**

**Module U
Mental Health and Mental Illness**

July 2024

1

Objectives

1. Discuss the risk factors of social isolation and loneliness for the older adult
2. Describe the most common mental health illnesses for older adults
3. Identify symptoms of mental illness in the older adult
4. Explain the role of the nurse aide in the de-escalation of the resident who is agitated

NCDHHS/DHSR/HCPEC | Module U Mental Health and Mental Illness | July 2024

2

Mental Health and the Older Adult

- Older adults may experience
 - Life changes impacting their mental health
 - Feelings of grief
 - Social isolation or loneliness
- Persistent feelings related to loss may lead to a clinical diagnosis of mental illness

NCDHHS/DHSR/HCPEC | Module U Mental Health and Mental Illness | July 2024

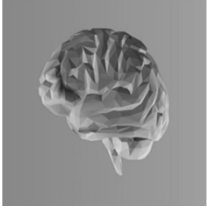
3

Module U Handout 2

Causes of Mental Illness

Contributing Factors

- Physical factors
- Psychosocial factors
- Genetics
- Stress



NCDHHS/DHSR/HCPEIC | Module U Mental Health and Mental Illness | July 2024

4

Symptoms of Mental Illness for the Older Adult

Noticeable changes in mood, energy level, or appetite

Seeing, hearing, and feeling things other people do not see, hear, or feel

Thoughts of death or suicide

NCDHHS/DHSR/HCPEIC | Module U Mental Health and Mental Illness | July 2024

5

Most Common Mental Health Illness for Older Adult

Mood Disorder

Anxiety Disorder


Psychotic Disorder

NCDHHS/DHSR/HCPEIC | Module U Mental Health and Mental Illness | July 2024

6

Module U Handout 3

Mood Disorders



- Major Depression
- Dysthymia
- Bipolar Disorder

NCDHHS/DHSR/HCPEIC | Module U Mental Health and Mental Illness | July 2024

7

Mood Disorders and the Older Adult


- Feelings of sadness, anxiety or emptiness
- A persistent sense of hopelessness, guilt, worthlessness, or helplessness
- Loss of interest in previously enjoyable activities
- Decreased energy and increased fatigue
- Changes in eating and/or sleeping patterns
- Thoughts about death or suicide

NCDHHS/DHSR/HCPEIC | Module U Mental Health and Mental Illness | July 2024

8

Anxiety Disorders and the Older Adult

- Generalized Anxiety Disorder
- Obsessive Compulsive Disorder
- Panic Disorder
- Post Traumatic Stress Disorder
- Social Anxiety Disorder



NCDHHS/DHSR/HCPEIC | Module U Mental Health and Mental Illness | July 2024

9

Module U Handout 4

Anxiety and the Older Adult

- Anxiety disorders are frequently related to:
 - Traumatic events such as a fall or acute illness
 - Multiple medical conditions
 - Concern for physical problems
 - Use of numerous prescription medications
- Symptoms of anxiety may include headaches, back pain, or a rapid heartbeat

NCDHHS/DHSR/HCPEG | Module U Mental Health and Mental Illness | July 2024

10

Psychotic Disorders

Schizophrenia

Schizoaffective Disorder

Delusional Disorder

Substance/Medication Induced Psychotic Disorder

NCDHHS/DHSR/HCPEG | Module U Mental Health and Mental Illness | July 2024

11

Psychotic Disorders and the Older Adult

Psychotic disorders can be highly distressing and greatly impact a resident's quality of life

↓

Residents with a psychotic disorder often lose touch with reality

↓

The disorder is often managed with medication and therapy

NCDHHS/DHSR/HCPEG | Module U Mental Health and Mental Illness | July 2024

12

Module U Handout 5

Psychotic Disorders and the Older Adult

- Refusal of care by nursing staff
- Refusal of medical treatment
- Suicidal thoughts or attempts

NCDHHS/DHSR/HCPEIC | Module U Mental Health and Mental Illness | July 2024

13

Treatment for Mental Illness

MEDICATIONS PSYCHOTHERAPY

NCDHHS/DHSR/HCPEIC | Module U Mental Health and Mental Illness | July 2024

14

**Mental Health and the Older Adult
Nurse Aide's Role**

Observe	for changes in resident's mental health
Recognize	inappropriate behavior
Report	observations to the nurse
Document	observations
Participate	in de-escalation

NCDHHS/DHSR/HCPEIC | Module U Mental Health and Mental Illness | July 2024

15

Module U Handout 6

De-escalation of an Agitated Resident

- Supportive day-to-day relationships are the heart of de-escalation
- Know what is normal for the resident
- Be aware of specific triggers for the resident
- The primary objective in de-escalation is to reduce the level and intensity of the resident's behavior
- If de-escalation is not working, the nurse aide should STOP and calmly call for help
- Trust your instincts

NCDHHS/DHSR/HCPEC | Module U Mental Health and Mental Illness | July 2024

16

Nurse Aide's Role in De-escalation

- Control the environment
- Look for meaning of the behavior
- Check for underlying causes
- Respond in the resident's reality
- Engage in resident's story

NCDHHS/DHSR/HCPEC | Module U Mental Health and Mental Illness | July 2024

17

Nurse Aide's Awareness of Self Behaviors in De-escalation

<ul style="list-style-type: none">• Behavior• Posture• Position self for safety• Body movement and language• Facial expression	<ul style="list-style-type: none">• Eye contact• Attitude• Tone• Responses• Reasoning
--	---

NCDHHS/DHSR/HCPEC | Module U Mental Health and Mental Illness | July 2024

18

Module U Handout 7

Points to Remember

- All behavior has meaning. Identifying the meaning behind the behavior is key
- Each resident diagnosed with a mental illness is different from other residents with same diagnosis
- Residents with a mental health disorder are more than the mental health diagnosis

NCDHHS/DHSR/HCPEC | Module U Mental Health and Mental Illness | July 2024 19

19

Points to Remember

- The interdisciplinary care plan should identify specific interventions
- Healthcare professionals should acknowledge a resident with a mental illness as an individual with a unique background and often challenging life experiences
- Nurse aides can successfully handle situations when a resident is stressed and agitated by using effective communication skills

NCDHHS/DHSR/HCPEC | Module U Mental Health and Mental Illness | July 2024 20

20

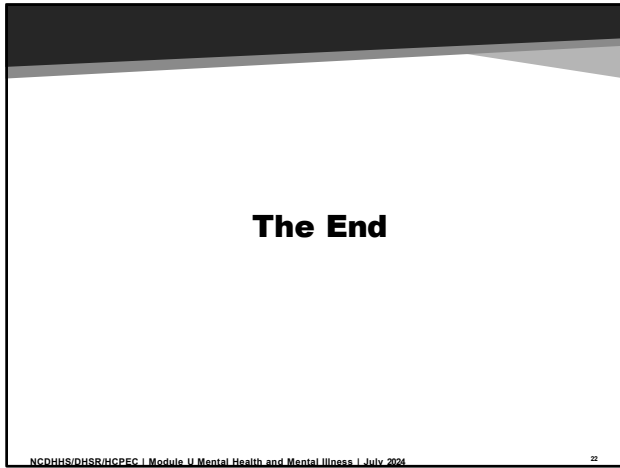
Points to Remember

- A resident with a mental illness may display behaviors beyond their control
- When unusual or inappropriate behavior escalates safety concerns should be the primary focus for the resident and others
- An important tool is de-escalation

NCDHHS/DHSR/HCPEC | Module U Mental Health and Mental Illness | July 2024 21

21

Module U Handout 8



22
