Los Angeles Harbor College

Associate Degree Nursing Program

**Description:**

*Unit I - Theoretical Concepts and Principles of Mental Health Nursing, Therapeutic Relationships/Communication, Nursing Process, Legal and Ethical Issues, & Culture*

**This unit presents an introduction to psychiatric nursing and an analysis of the dominant conceptual models for psychiatric nursing practice. Student nurses begin to explore and cultivate their own personal integration within that practice. Critical thinking skills are emphasized and therapeutic communication strategies, developmental theories/therapies and patient assessment methodologies are presented. A bio-psycho-social approach is used in examining principles of patient centered care, the mental health-psychiatric illness continuum and the nursing process as related to psychiatric disorders. The psychobiological basis of behavior is reviewed. The concepts of culture, ethnicity, worldview and cultural competency are applied to mental illness. The legal and ethical guidelines for safe practice are identified.** **Additionally, the concept of neurotransmitters in relation to psychiatric illness and psychotropic medication are introduced.**

**Estimated time of achievement**: One week.

 **Objectives Course Content Learning Activities**

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| After appropriate study of the assigned resources, and assigned practice of the psychomotor and communication skills, the nursing student will be able to:1. Distinguish the concepts of mental health and mental illness and relate these concepts to a continuum.
2. Explore the roles of resilience and stress as they relates to personal response to mental illness.
3. Identify how culture influences the view of mental illness and behaviors associated with them.
4. Discuss the nature/nurture etiology of psychiatric disorders.
5. Compare and contrast psychiatric disorders prevalence rates.
6. Distinguish the differences between the DSM-V diagnosis and the nursing process/diagnosis.
7. Explore services provided by electronic health care.
8. Describe advocacy opportunities for patient-centered care.
9. Discuss the purpose of the National Behavioral Health Safety Goals.
10. Identify the role of the psychiatric nurse and the different populations served.
11. Distinguish reliable Internet resources for health information and evidence-based practice.
12. Explain how the multidisciplinary team collaborates to plan and implement care for the hospitalized client.
13. Compare and contrast the major theories of personality: psychoanalytic, interpersonal humanistic, behavioral and cognitive.
14. Utilize Maslow’s hierarchy of needs in prioritizing nursing diagnosis.
15. Apply Erickson’s Eight Stages of Development in planning appropriate nursing interventions.
16. Compare and contrast the major therapeutic modalities and their evidence-base for the psychiatric patient: classical psychoanalysis, psychodynamic and psychoanalytic psychotherapy, short-term dynamic psychotherapy, interpersonal psychotherapy, cognitive therapy, and behavioral therapy.
17. Identify the implication of nursing theorist in mental health (Peplau, Roy).
18. Relate the components of milieu therapy and the nurse’s role in the milieu.
19. Explain the significance of evidence-based nursing practice.
20. Recognize and discuss the phenomenon and potential outcomes of transference and countertransference in the clinical setting.
21. Discuss major functions of the brain and how psychotropic drugs can alter these functions.
22. Compare and contrast physiologic responses in the sympathetic and parasympathetic nervous systems.
23. Relate the dysfunction of select neurotransmitters to their corresponding psychiatric conditions.
24. Describe how the use of imaging techniques can be helpful for understanding mental illness.
25. Identify the main neurotransmitters that are affected by the following psychotropic drugs and their subgroups: antianxiety, antidepressants, mood stabilizers, antipsychotics, sleep inducers, and herbal treatments.
26. Differentiate worldviews, values, and health practices of Western, Eastern, and Indigenous cultures.
27. Discuss potential problems of applying Western cultural values, belief systems and nonverbal communication patterns with various other cultures.
28. Relate knowledge of barriers to quality mental health care (language, misinterpretation of symptoms, culture-bound syndromes).
29. Distinguish genetic variations that affect drug metabolism.
30. Distinguish the criteria for voluntary versus involuntary psychiatric hospitalization.
31. Discuss civil rights and patient rights in the psychiatric setting.
32. Outline the criteria and steps taken when patient’s rights are denied in the inpatient setting.
33. Differentiate informed consent for psychotropic medication from court ordered psychotropic medication administration (Riese criteria).
34. Identify additional criteria for patient confidentiality and disclosure in the acute psychiatric setting.
35. Relate knowledge of the duty to warn and protect third parties and the least restrictive alternative doctrine.
36. Explain the components of the mental status examination.
37. Differentiate components of a social relationship and a therapeutic relationship.
38. Compare different techniques used in the assessment of children and adolescents.
39. Relate the importance of and demonstrate genuineness, empathy, positive regard, attending skills and a non-judgmental attitude in the therapeutic relationship.
40. Identify nursing behaviors indicative of blurring of professional boundaries.
41. Differentiate nursing responsibilities in the three phases of the nurse-patient relationship.
42. Identify testing behaviors of the patient (shifts the focus of the nurse off the patient, tries to get the nurse to take care of him/her, makes sexual comments/advances) and plans for appropriate nursing responses.
43. Relate techniques that promote a positive environment to begin a patient interview (setting, seating, introduction, and open-ended starting question).
44. Demonstrate appropriate attending behaviors in the therapeutic relationship (eye contact, body language, physical orientation/distance, vocal qualities, verbal tracking).
45. Distinguish tactics to avoid (arguing minimizing feelings, challenging, confrontation, praise, speculation of the patient’s situation, question the patient about sensitive areas, trying to sell the patient on accepting treatment, join in on patient attacks, participate in criticism of another staff member).
46. Distinguish cultural communication barriers and potential misconceptions due to cultural filters.
47. Appraise common patient behaviors (crying, asking to keep a secret asks personal questions, leaves the interaction, admits to suicidal ideation, seeks to prolong the interview, gives the nurse a present) that may cause discomfort in the nurse and helpful responses by the nurse.
48. Identify therapeutic responses during patient interactions versus responses that block the therapeutic relationship.
49. Relate the importance of clinical supervision to develop professional skills.
50. Evaluate the effectiveness of therapeutic techniques and obstructive techniques through the practice of process recordings.
51. Create alternative communication techniques when blocks to communication are identified.
 | **Mental Health and Mental Illness**Concepts of the mental health and illness continuumEpidemiology and prevalence ratesMedical diagnosis versus nursing diagnosisNursing Interventions Classification (NIC)Nursing Outcomes Classification (NOC)DSM-VResilienceDiathesis-stress modelRecovery modelStigmaElectronic health careRoles of the multidisciplinary teamNational Behavioral Safety Goals**Theories and Therapies** Major theories of personalityPsychodynamic TheoryInterpersonal TheoryErickson’s Ego TheoryHumanistic TheoriesBehavioral TheoriesCognitive TheoriesNursing TheoriesBiological TheoriesTherapeutic approachesPsychoanalysisPsychodynamic and Psychoanalytic psychotherapyShort-term dynamic psychotherapyInterpersonal PsychotherapyCognitive TherapyBehavioral TherapySystematic DesensitizationMilieu Therapy**Biological Basis for Understanding Psychotropic Drugs**Structure and functions of the brainOrganization and function of the nervous systemCellular composition of the brain (neurons, neurotransmitters, synapse, enzymes)Neurotransmitters (Dopamine, Serotonin, Norepinephrine, Histamine, GABA, Glutamate, Acetylcholine) and their association with mental health conditionsBrain imaging modalities (MRI, CT, PET, SPECT)Pharmacogenetics*Antipsychotics*Typical Antipsychotics (first generation)Atypical AntipsychoticsThird Generation Antipsychotics*Mood Stabilizers**Antidepressants*Tricyclic AntidepressantsSelective Serotonin Reuptake InhibitorsMonoamine Oxidase InhibitorsSerotonin-Norepinephrine Reuptake InhibitorsNorepinephrine Reuptake Inhibitors Serotonin Receptor Antagonists/AgonistsNorepinephrine Dopamine Reuptake InhibitorSerotonin-Norepinephrine DisinhibitorsOther Antidepressants*Benzodiazepines**Sedative/Hypnotics**Melatonin Receptor Agonist**Other Anxiolytics (non-benzodiazepines)**Herbal Medicines*St. John’s wortSAMeKava kavaGinko bilobaGinsengFeverfewGarlic**Cultural Implications for Psychiatric Mental Health Nursing** Worldviews and mental health nursingNonverbal communication patterns Cultural belief and value systemsCulture-Bound SyndromesEthnic variation in pharmacodynamicsBarriers to quality mental health servicesCultural competence**Legal and Ethical Guidelines** Admission criteria (voluntary versus mental health holds)Patient rights CompetencyPsychotropic medication consentRiese hearingsWrit of Habeas CorpusConfidentiality in the mental health setting (HIPPA)Least restrictive alternative doctrineDuty to warn and protect third parties **Assessment Strategies and the Nursing Process**Mental Status ExaminationAssessment of children and adolescentsHEADSSS Psychosocial Interview Technique**Developing Therapeutic Relationships**Factors that enhance the therapeutic relationship (genuineness, empathy, positive regard, attending, suspending value judgments)Establishing boundaries (overhelping, controlling, countertransference, transference, self-disclosure.)Phases of the nurse-patient relationshipTesting behaviors used by patients**Clinical Interview and Communication Skills**How to start an interviewClinical supervision Process RecordingsAttending Behaviors (eye contact, body language, physical orientation/distance, vocal qualities, verbal tracking)Cultural Communication Barriers (eye contact, touch, cultural filters)Common patient behaviors and useful nursing responsesEffective therapeutic communication techniquesObstructive (blocking) nontherapeutic communication techniques  | *Reading:* Varcarolis’ Foundations of Psychiatric Mental Health Nursing, 7h Ed.Chapters:1: Mental Health and Mental Illness2: Relevant Theories and Therapies for Nursing Practice3: Biologic Basis for Understanding Psychotropic Disorders and Treatments (p 37-52) 5: Cultural Implications for Psychiatric Mental Health Nursing6: Legal and Ethical Guidelines for Safe Practice7: The Nursing Process and Standards of Care for Psychiatric Mental Health Nursing8: Therapeutic Relationships9: Communication and the Clinical *Discussion/Lecture* *Clinical Experiences*Prep/Pathophysiology SheetsDaily ChartingMental Status AssessmentProcess Recordings History and Assessments  Nursing Care Plans Client Interaction*Simulated Experience**Online Student Resources:*<http://evolve.elsevier.com/Varcarolis>Answer key to chapter review questionsAnswer key to critical thinking guidelinesCase Studies and nursing care plansNCLEX review questionsPre and post tests*Kaplan Resources:*<http://nursing.kaplan.com>Focused psych review testsPsychiatric case studiesNCLEX text bank*NLL Audio Visuals:***DVD26** Assessment, Intervention, Treatment: Psychotropic Medications |