



TRAIN YOUR EMPLOYEES

An Online video training series for the long term care environment.



mmLearn.org is a program of Morningside Ministries

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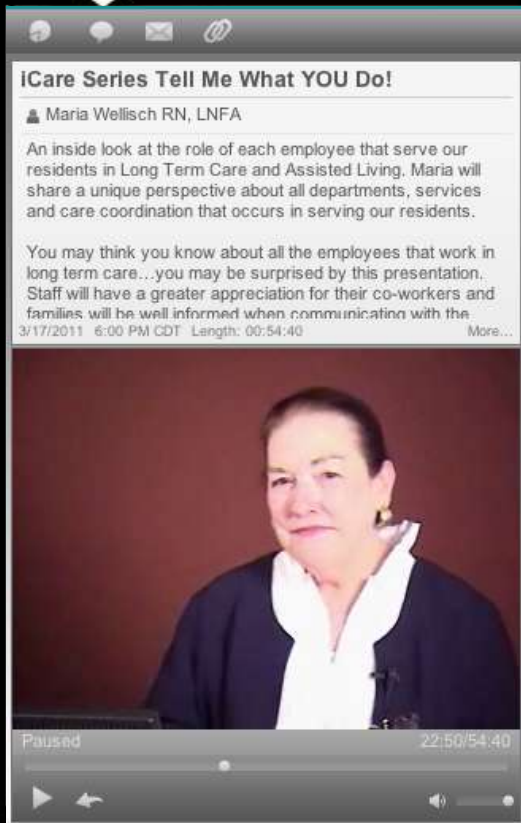
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OR

If you are watching live you may text your questions to (210) 889-1285



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TRAIN YOUR EMPLOYEES

An online video training series for the long term care environment.

Preventing Suicide in Senior Communities

Promoting Mental Health and Preventing Suicide

*For Independent Living
Assisted Living
Skilled Nursing Facilities/Nursing Homes*

Why This Topic Is So Important

- Older adults die by suicide at a higher rate than the national average
- Rates go up after the age of 65*
- When older adults attempt suicide they are more likely to die

Statistics We Know

- 1 out of 4 older adults who attempt suicide, dies.
- 1 out of every 100-200 younger adults who attempt suicide, die.



Statistics We Are Missing

- There are few reliable statistics on suicide in Senior Living Communities.



Risk Factors

- We know that residents in Senior Communities have many of the risk factors associated with suicide.
 - » Depression
 - » Social Isolation
 - » Lack of a sense of purpose in life
 - » Illness and Pain
 - » Family losses

Our Responsibility

It is our responsibility to understand we have the opportunity to prevent suicide and other self-destructive behaviors without having to create new programs or hire new staff.



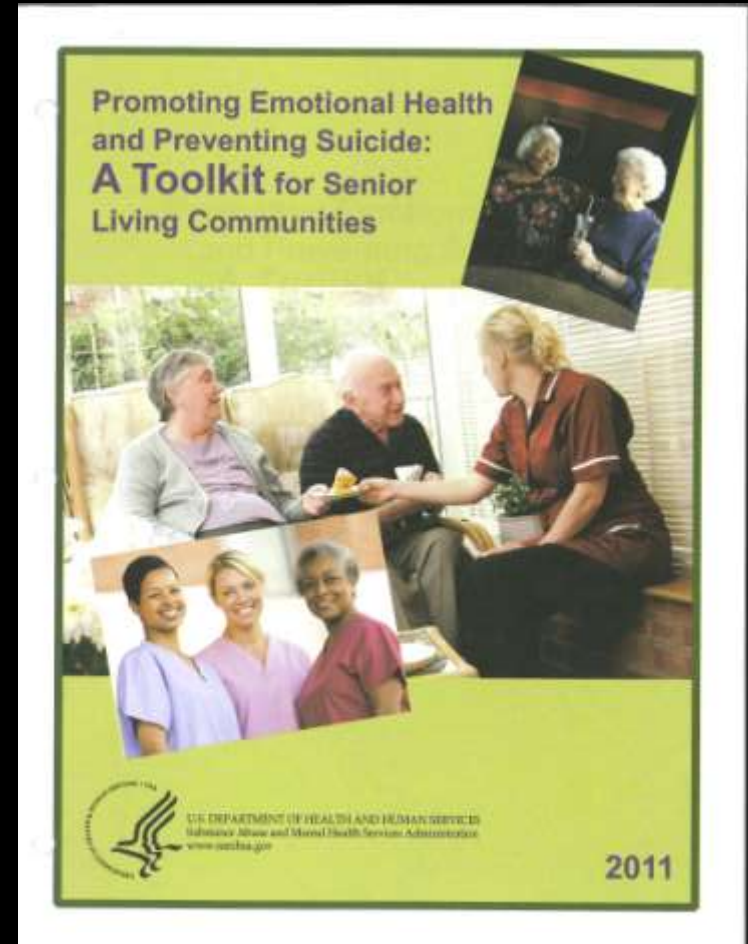
The Full Program

This publication may be downloaded or ordered at <http://www.samhsa.gov/shin>

Or, please call SAMHSA's Health Information Network at 1-877-SAMHSA-7 (1-877-726-4727)



Click the paperclip button for a link to the samhsa.gov website and for links to the fact sheets.



Definitions

Suicide- A death from injury, poisoning, or suffocation where there is evidence that a self-inflicted act led to the death

Definitions Continued

Suicide Attempt- Potentially self-injurious behavior with a non-fatal outcome for which there is evidence that the person intended to kill himself (may or may not result in injury)

Definitions Continued

Suicidal Ideation- Self Reported thoughts about engaging in suicide-related behaviors

Definitions Continued

Passive Suicide- also called indirect suicide includes behaviors that occur over time and can reasonably be expected to result in death...refusal to eat, drink, take meds, follow treatment plans, unnecessary risks

Passive Suicide is Different from End of Life Decisions

Note an end of life decision made by a terminally ill older adult, in which the health care team supports a rationally thought out decision by the individual to have treatment and medication withheld or withdrawn is NOT suicide.

Studies

- There are no current studies that demonstrate the rate of suicide is higher in senior living communities or those not in communities
- Several Studies have shown that suicidal ideation and depression are more common in residents in nursing homes than among those not in nursing homes

Most Common Methods of Suicide

- In older adults firearms was cited by CDC in 2006.
- However, in nursing homes, jumping from high places, hanging, taking overdoses of medications and cutting have been cited
 - » Other passive suicide measures such as refusing to eat, drink, takes meds accounts for suicide among residents in nursing homes



Older Adult Population Suicide Attempts More Likely to Result in Death

- Older adults plan carefully and use more deadly methods such as guns
- Older adults are less likely to be discovered and rescued than younger people
- Many older adults are physically frail. They are less likely to recover from a suicide attempt

Risk Factors

- Risk factors are personal characteristics, life circumstances and situations that lead to or associated with suicide
- People with one or more of these risk factors have a greater potential for suicide

Please Note

- Some risk factors cannot be changed-
 - » Such as a previous suicide attempt but they can help identify someone who may be more vulnerable



RISK FACTORS

Illness

- Depression
- Mood Disorders
- Psychotic Disorders



RISK FACTORS

Substance Misuse and Abuse

- Alcohol
- Prescription and over-the-counter medications



RISK FACTORS

Physical Illness, Disability, Pain

- Poor physical health
- Functional Impairments
- Pain
- Side effects of some medications
- Insomnia



RISK FACTORS

Personal and Family History of Suicide

- Previous suicide attempt
- A family member who has died by suicide

RISK FACTORS

Current Life Circumstances

- Social Isolation
- Major life transitions, such as moving to a new setting
- Family conflict and loss
- Financial Problems

RISK FACTORS(Cont.)

Current Life Circumstances

- Lack of a sense of safety
- Losing autonomy, respect , supportive relationships and participation in activities
- Other people have lower expectations for them

RISK FACTORS

Personal Characteristics

- Inability to adjust to change
- Low rating of their own health
- Low self-esteem
- Hopelessness
- Impulsive or aggressive behavior
- Cultural or religious beliefs favorable to suicide

RISK FACTORS

Access to Means of Suicide

- Jumping from building
- Hanging
- Cutting
- Taking an overdose of medication



Protective Factors That Can Help Prevent Suicide

Some actions can be taken by staff in senior living communities and some by friends, family members and residents themselves.



What Can We Do?



Staff Awareness and Interventions

- Know the Key Symptoms of Depression in older adults
 - » Depressed mood most of the time, sad or “empty” feelings
 - » Loss of interest or pleasure in activities
 - » Too much or too little sleep

Staff Awareness and Interventions (Cont.)

- Know the Key Symptoms of Depression in older adults
 - » Weight loss or gain
 - » Lack of energy
 - » Feelings of worthlessness or extreme guilt
 - » Difficulty with concentration
 - » Noticeable restlessness

Depression is a Treatable Disease

Who in your facility is designated for staff to report to if they recognize a resident showing signs of depression?



Depression Screening in LTC and Assisted Living

- Nursing Homes are required to conduct the MDS with all new residents.
- Global Depression Scale
- Patient Health Questionnaires
- Beck Depression Inventory
- Cornell Scale for Depression in Dementia

Substance Abuse

- Diagnosing alcohol and medication abuse can be difficult.
- Many of us do not know that sensible drinking limits are different for older adults



Recommended Drinking Limits for Older Adults

- Older adults can drink low amounts of alcohol and drink infrequently and still experience problems

Recommended Drinking Limits for Older Adults (Cont.)

- For adults over 65, both men and women, recommended drinking means no more than one alcoholic drink per day



Recommended Drinking Limits for Older Adults (Cont.)

- No alcohol for older adults who have:
Prescription pain med, sleeping pills, meds for anxiety or depression



Some Signs and Symptoms to Watch For

- Withdrawal symptoms when alcohol is removed
- Increased tolerance for alcohol
- Slurred speech
- Dehydration/Malnutrition

Some Signs and Symptoms to Watch For (Cont.)

- Denial of drinking
- Persistent irritability when asked about alcohol
- Hiding Alcohol
- Neglecting home or pets
- Changes in personal grooming or hygiene

Addressing Alcohol or Substance Abuse

- Be gentle and caring
- Be discreet
- Be Specific-using words such as “I’ve noticed” or “I’m worried because”
- Ask for agreement on important points

Activities to Promote Emotional Health and Well Being

- Social activities often are not aimed at including men.



Activities to Promote Emotional Health and Well Being(Cont.)

- There is a demonstrated need to offers stress reduction activities and to promote discussions or presentations on the effects of stress



Activities to Promote Emotional Health and Well Being (Cont.)

- Support groups may be well accepted however, often starting a discussion/book group that addresses life issues; spirituality, finance, communication, loss etc. may be better attended.



Activities with a Purpose

- Teaching/tutoring
- Fundraisers
- Maintaining Community Gardens
- Assisting other residents with shopping, appointments, etc.



Q&A

Session



Appreciation is extended to:

- Baptist Health Foundation
- Methodist Healthcare Ministries Foundation
- The South, West, & Central Consortium Geriatric Education Center of Texas (SWAC-C GEC)
- Prior Trust
- Many other individuals and organizations who support the mission of mmLearn.org

To Access Resources:



Click on the "paperclip" button above the video player to open links to resources.

The screenshot shows a video player interface. On the left, a video titled "iCare Series Tell Me What YOU Do!" is displayed, featuring Maria Wellisch RN, LNFA. The video is paused at 22:50/54:40. On the right, a "Presentation Links" popup menu is open, listing several topics: "Advocacy, Action, Answers on Aging", "What is a Matter of Balance?", "Healthy Aging Programs", and "A Home Fall Prevention Checklist for Older Adults". The background of the video player shows a slide with the text "cast" and "our Doctor" and a photo of David A Smith MD, FAAFP, CMD, President of Geriatric Consultants of Central Texas, PA. The iCare logo is visible in the bottom left corner of the video player.

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The screenshot shows the mmLearn.org website with a navigation menu (Home, Contact Hours, Pastoral Caregivers, Family Caregivers, Online Videos, MSM Use) and a main content area. The main content area features a mission statement, a 'Donate today...' link, and several video series links. The footer contains social media icons, a 'Subscribe to our Newsletter' button, and a 'Donate' button.

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Thank You!

