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COVID-19: The Mental Health Effects in Aging Care



April 29, 2020

Objectives

- Assess for changes in condition and evaluate ways to monitor for changes in behavioral/mental health
- Identify strategies for assessing and addressing residents' emotional health and the supports they may need to manage stress and isolation
- Describe practical tips for effectively providing support services provided by health care and community-based organizations (e.g., telemedicine, video chats, etc.) for diagnosing and treating the mental health symptoms
- Incorporate strategies for managing the mental health care needs of residents and staff in this time of social distancing

Impact of COVID-19 on All

BURNOUT

A human response to chronic emotional and interpersonal stress at work signaled by exhaustion, cynicism, and work inefficacy.

GRIEF

Normal and natural emotional reaction to loss or change of any kind

COMPASSION FATIGUE

The resulting exhaustion from constant exposure to the same stressor leading to decreased compassion or empathy for others

COVID-19 Vs. Mental Health Symptoms

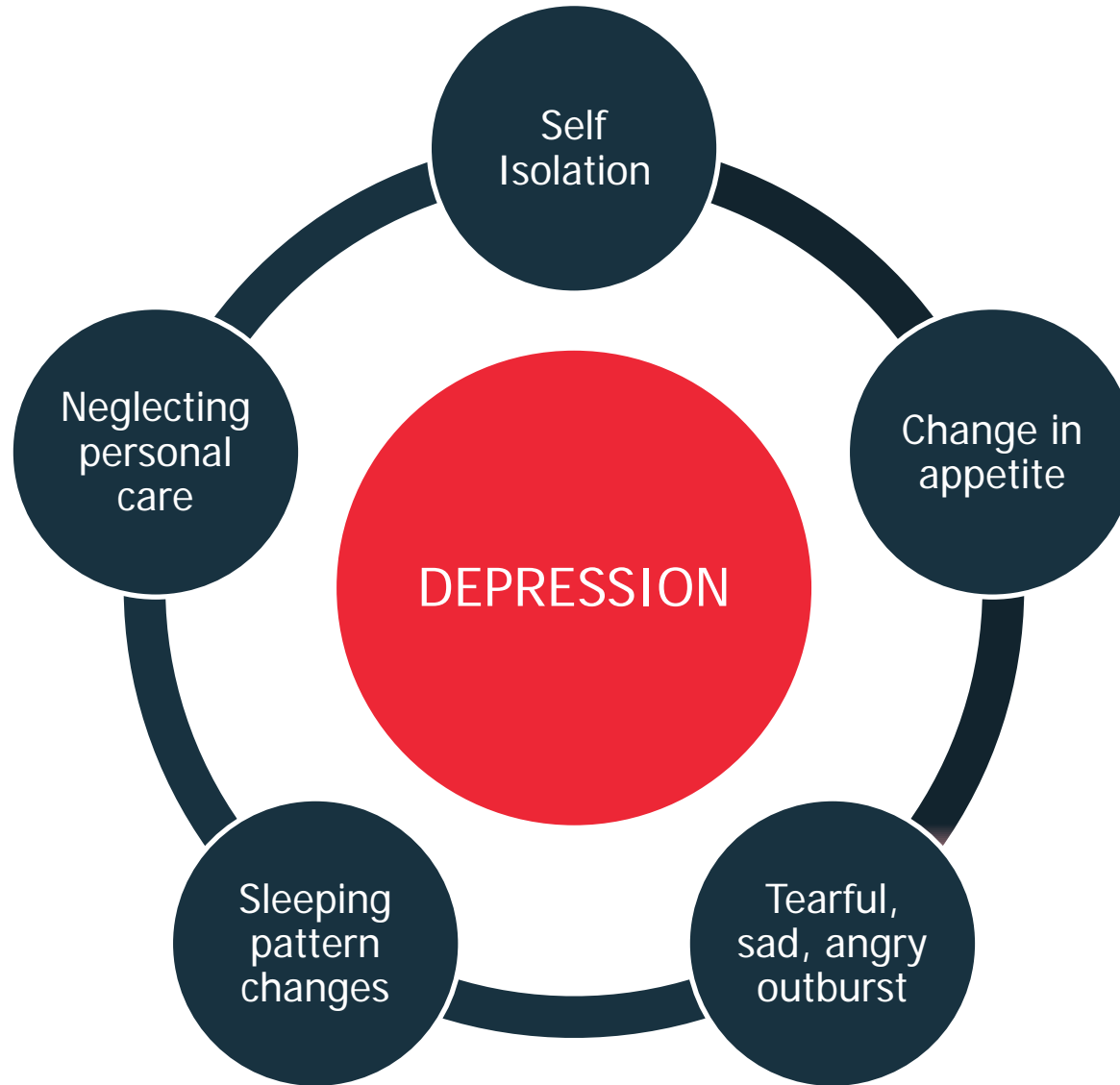
Having stomach aches or diarrhea

Having headaches and other pains

Loss of appetite or over eating

Sweating or having chills

Getting tremors or muscle twitches



Screening and Assessment Tools

PHQ-2: Patient Health Questionnaire

PHQ-9: Patient Health Questionnaire

GAD-7: General Anxiety Disorder

PTSD-5: Post Traumatic Stress Disorder

Columbia Suicide Severity Scale

Reference Based on Patient Health Questionnaire-9 (PHQ-9) Developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke, and colleagues, with an educational grant from Pfizer Inc. No permission required to reproduce, translate, display, or distribute.

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Changes

BEHAVIORAL CHANGES

Blaming, Difficulty communicating, Inability to feel pleasure or fun, Increase use of alcohol, tobacco, or illegal drugs

EMOTIONAL CHANGES

Anxiety, depression, guilt, anger, sad, overwhelmed, non caring, insomnia, scared, unsafe

THINKING CHANGES

Loss of memory, Confusion, Poor concentration

Mitigate Suicide Risk

According to 2018 data from the Center for Disease Control and Prevention and reported by the American Foundation for Suicide Prevention, adults in the 75-84 and 85+ age groups are among those with the highest rates of suicide.

Clear care pathways for those who are suicidal

Staff training to support new ways of working

Providing easily accessible grief counseling for those who have lost a loved one to the virus

Dissemination of evidence-based online interventions

Use of mental health helplines

Support for Diagnosing and Treating Depression

1:1 time with staff everyday just to have residents talk about what they are feeling

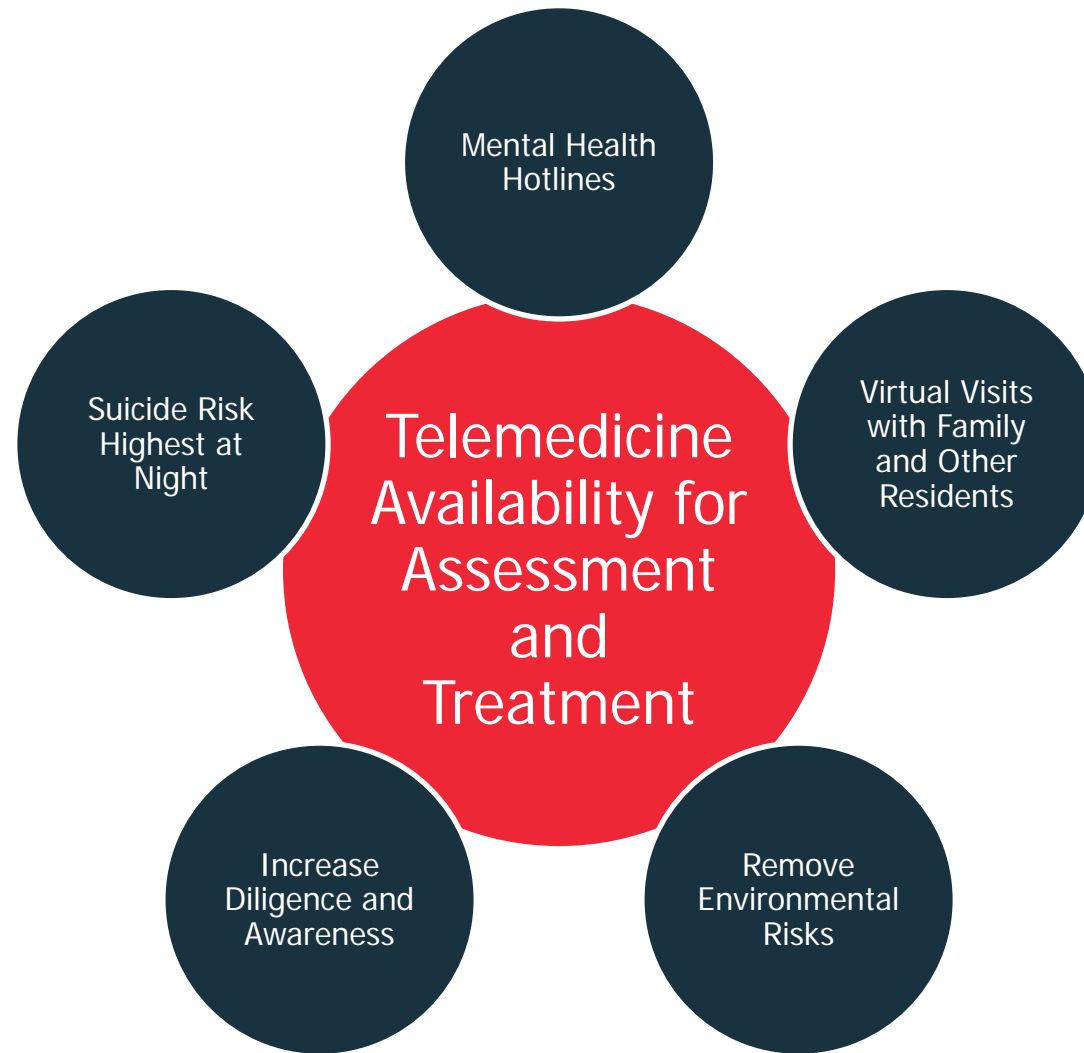
Technology and the availability of , will be key in reducing loneliness and depression

Provide staff with education on removing risks and making resident environment safe if they are feeling alone.

Reach out to local Senior Services for virtual volunteer visits

Provide hotline numbers in each resident room for easy access

Telemedicine



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Tips for Easing Loneliness Through Connection

CONNECTION TO FAMILY AND FRIENDS

Virtual visits with technology

Telephone calls

Letters

CONNECTION TO OUTSIDE COMMUNITY

Access museums, nature parks and other entertainment

Virtual religious services

CONNECTION TO COMMUNITY

Resident to Resident visits

Virtual Volunteer visit

Staff visits

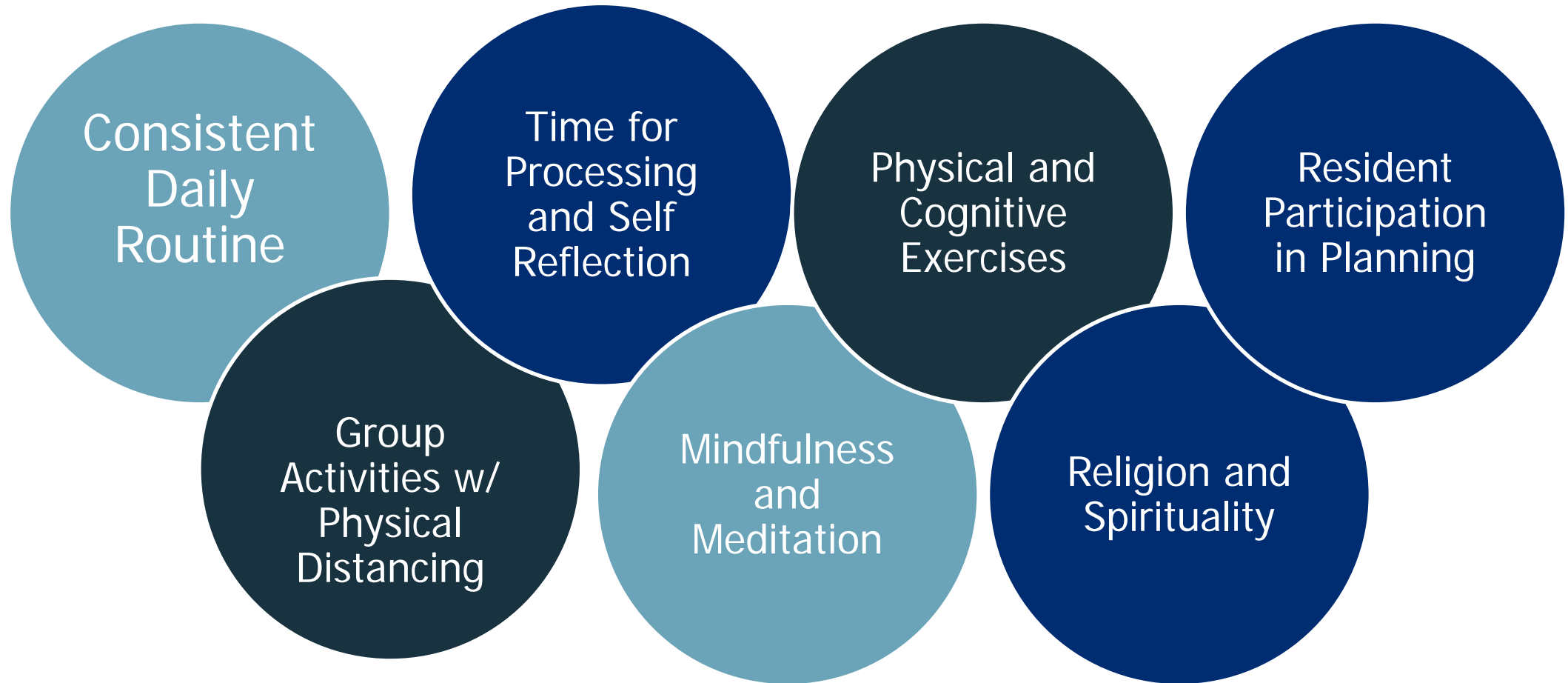
EXERCISE

Physical

Breathing

Visualization/Mindfulness

Alterations to New Norm



Chat Question

What are some other creative practices you are using to connect with residents?

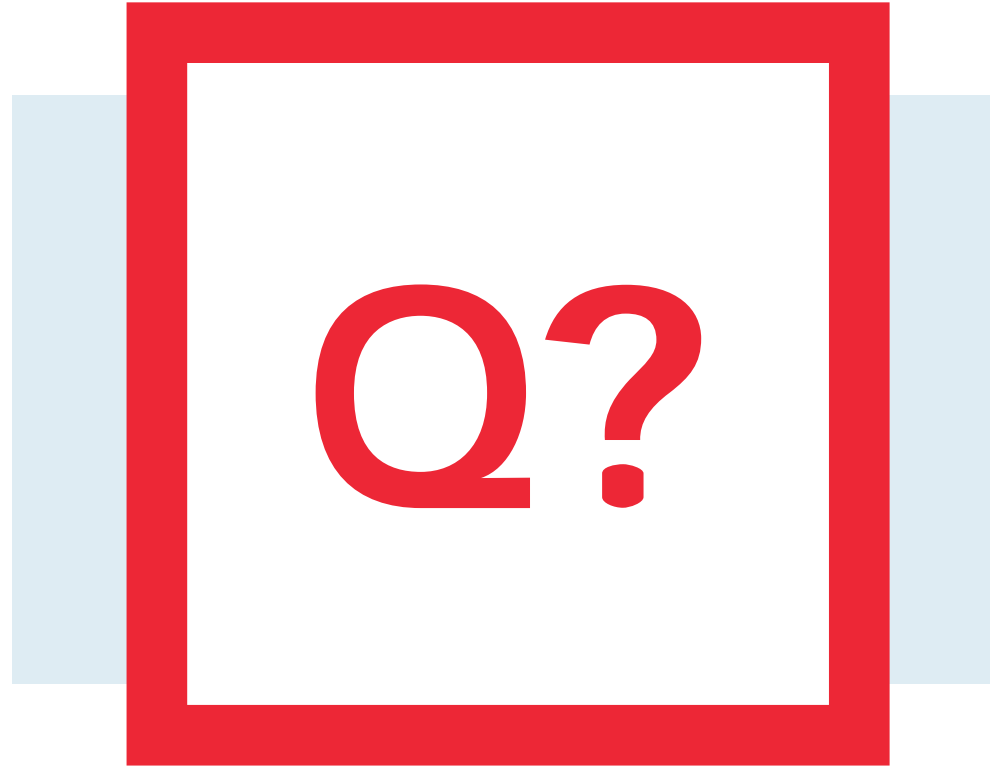
Promoting Well-being for Self

- Self-monitoring and pacing
 - Regular check-ins with colleagues, family, and friends
 - Limiting news outlet contact
 - Brief relaxation/stress management breaks
 - Regular peer consultation and supervision
 - Acceptance of situations they cannot change
- Regularly seeking out accurate information and mentoring to assist in making decisions
 - Keeping anxieties conscribed to actual threats
 - Practice helpful self-talk and avoid overgeneralizing fears
 - Focusing their efforts on what is within their power
 - Fostering a spirit of fortitude, patience, tolerance, and hope

Leadership's Role in Staff Well-Being

- Offer assistance programs (EAP) resources (if available) and community resources that may help staff navigate emotional and financial stressors
 - Implement flexible sick leave and support policies and practices
 - Any communication should balance optimism and compassion with the real facts and data that helps inform decision making
- Leaders should create 1:1 check-ins with each team member
 - Operate with higher levels of compassion, kindness and space for listening
 - Include ALL levels of employee status in communication, compassion and safety
 - Be available

Questions



Available Resources

- [Psychological First Aid](#)
- Friendship Line (Institute on Aging): 1-800-971-0016
- [WHO: Depression Older Adults](#)
- [Museums From Around the World That You Can Visit Virtually | Travel + Leisure | Travel + Leisure](#)
- [Shelter In Place Resources for Seniors | Comfort Keepers](#)

More Information on COVID-19 Responses

- [ACL Resources](#) for older adults, providers, communities, and states
- [SAMHSA Resources](#) to assist individuals, providers, communities, and states
- [VA Resources](#), including [What Veterans Need to Know](#) and [Maintaining Your Mental Health and Well-Being](#)

References

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