



Nursing Service Guidelines Inpatient Behavioral Health

Title: CARE OF THE PATIENT WHO IS DEPRESSED

Purpose:

1. To begin to develop a realistic, positive perception of self.
2. To enhance feelings of self-esteem, acceptance by others, and belongings.
3. Establish therapeutic relationship with support therapist and use learned to begin to establish functional relationships with significant family members and friends.

Responsibility: Registered Nurse (RNs), Mental Health Technician (MHTs), and any other trained personnel with Kobacker.

Equipment: Group Materials – Picture Boards, Written Assignments, multi-media

<u>Procedure</u>	<u>Point of Emphasis</u>
<p>1. Identify situations, stresses, events, or changes that lead to depression.</p> <ul style="list-style-type: none">• Recent Losses• Changes in relations• Behavior Changes• Review Changes in Family Structure• Explore changes in concentration• Decreased lack of energy or fatigue.	<p>To identify events precipitating the depressive episode. To identify symptoms that can assist with diagnosis and treatment.</p>
<p>Complete assessment of symptoms</p> <ul style="list-style-type: none">• Irritability• Lack of sleep/increase in amount of sleeping• Changes in appetite• Feelings of worthlessness• Lack of interest and decreased activities.• Decreased concentration• Decreased lack of energy or heightened fatigue.	
<p>2. Assess self-care in relationship to the maintenance of personal hygiene, ADL's, nutritional status, medication compliance, bowel and bladder function and sleeping pattern. Address any problem areas and develop a plan of care to maintain the highest level of functioning.</p>	<p>To maintain physical health.</p>
<p>3. Assess suicidal risk and risk of harm to others.</p>	
<p>4. Assist to identify, accept, verbalize, and deal with feelings in a healthy way</p>	<p>To recognize and express feelings that accompany the depressive episode. To acknowledge pain or guilt may be associated with particular feelings.</p>
<p>5. Differentiate feelings:</p> <ol style="list-style-type: none">a. Identify thoughts that contribute to feelings.b. Identify past behaviors or events (real or imagined) that contribute to these feelings.c. Identify meaning of past behaviors and its consequences.d. Patient develops a crisis plan for post-discharge/reviews with parent(s).	<p>Need to explore feelings to gain sense of control.</p>

<u>Procedure</u>	<u>Point of Emphasis</u>
6. Explore feelings of hopelessness and helplessness: a. Identify statements, thoughts, feelings, expectations, actions that reflect a sense of hopelessness and helplessness and encourage a helpless, hopeless position. b. Identify personal needs. c. Help to problem-solve to find appropriate, ways to get needs met. d. Help identify relationship between helplessness and manipulation. e. Assist in practicing assuming control of own behaviors.	Need to decrease feelings of hopelessness and helplessness. Installation of hope is a key tool for recovery.
7. Explore ways to increase feelings of esteem and value: a. Attend groups re: self-esteem, values and assertiveness. b. Assist in making decisions related to themselves (such as their treatment, future, goals, rules and routines.) c. Provide activity that the patient can successfully complete. d. Help patient identify positives about self and others. e. Be able to accept compliments without qualifications.	Need to decrease unhealthy preoccupation with self and increase self-esteem and self worth.
8. Explore ways to increase and strengthen social relationships: a. Identifies problem areas in social relationships. b. Identifies situations that push people away and that pull people together. c. Encourage to initiate an activity with another person, or a small group of persons, listen to another person's problem sharing. d. Encourage to identify activities or interactions that bring enjoyment or pleasure. e. Attend relationship and or social skills group. f. Demonstrate appropriate social skills in the milieu (i.e., table manners, sportsmanship). g. Allow more time for completion of ADLS. h. Encourage patient to participate in family treatment meetings.	Patients require more time to think so slowing down may be necessary.
9. Assessments, nursing care, patient responses and patient teaching to be documented in the daily assessment checklist and in multidisciplinary progress notes.	"Each phase of treatment should include psychoeducation." (American Academy of Child and Adolescent Psychiatry)
10. Educate patient and family regarding indications, dosages and side effects of medications and document education given.	
11. Educate patient and family regarding diagnosis, treatment and follow-up treatment required for post-hospitalization.	

Reviewed by: Tammy Cerrone, BSN, RN, Nursing Director Kobacker

Approved: 7/05

Reviewed: 4/08, 8/31/2010, 5/14, 8/14, 7/17, 6/20, 7/17, 7/2020, 6/2023

Revised:

Reviewed by Policy & Standard Committee, 8/10, 8/14, 7/17, 7/2020, 6/2023

References:

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