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| **Course Name:** | Mental Health / Psychiatric Nursing |
| **Course Number:** | NURS 204 |
| **Campus:** | Los Angeles |



**Section A:**

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| **Instructor’s Name** | Solomon Tan, MSN/Ed., RN-BC, PHN |
| **I. Instructor’s Contact Information, Course Pre and Co-Requisites** |
| **Phone Number:** | (818.299.5500 ext. 43502Direct: 818.299.5502 |
| **E-mail:** | Stan@westcoastuniversity.edu  |
| **Office location:** | North Hollywood Campus |
| **Office hours:** | Wednesdays 5:00 PM to 6:00 PM and Fridays 5:00 to 6:00 |
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| **Course Prerequisites** | NURS 100 and 101L |
| **Course Co-requisites** | NURS 214L |

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| **II. Mission and Outcomes** |
| **University Mission:** | At West Coast University, we embrace a student-centric learning partnership that leads to professional success. We deliver transformational education within a culture of integrity and personal accountability. We design market-responsive programs through collaboration between faculty and industry professionals. We continuously pursue more effective and innovative ways through which students develop the competencies and confidence required in a complex and changing world. |
| **Program Mission:** | The mission of the College of Nursing is to provide evidence-based and innovative nursing education to culturally diverse learners; preparing nurses to provide quality and compassionate care that is responsive to the needs of the community and the global society. |
| **Program Learning Outcomes:** | 1. Apply concepts or theories from biological, physical or natural sciences as basis for professional nursing practice.
2. Utilize nursing process in health promotion, restoration, and disease and illness prevention.
3. Apply evidence-based practice in providing therapeutic nursing interventions for patients and families in a wide variety of health care, and community setting.
4. Apply critical thinking skills in providing culturally sensitive and developmentally appropriate nursing care to patients who are experiencing simple and/or complex health problems in a variety of settings.
 |
|  | 1. Provide health care education to individuals, families, and aggregates.
2. Develop measurable goals that demonstrate the willingness to become a life-long learner in building expertise as a member of the nursing profession.
3. Utilize effective communication to interact with patients, families, and the interdisciplinary health team.
4. Assume responsibility for the delegation and supervision of the delivery of nursing care to subordinates based on the subordinate’s legal scope of practice and ability.
5. Demonstrate knowledge in applying client care technology skills such as computer and informatics skills when providing health care in a variety of settings.
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| **III. Course Information** |
| **Term:** | 11 |
| **Class Meeting Dates:** | November 11, 2011 through January 27, 2012 |
| **Class Meeting Times:** | Fridays 6:00 PM to 9:30 PM |
| **Class Meeting Location:** | Room 148 |
| **Class Credit Hours:** | 2 semester credits/3.34 contact hours per week/30 hours per term |
| **Class Credit Length:** | 9 weeks |
| **Class Required Texts, Learning Resources:** | Varcarolis, E. M., & Halter, M. J. (2010). *Foundations of psychiatric mental health nursing: a clinical approach* (6. ed.). St. Louis: Saunders/Elsevier.Wissmann, J. (Ed.). (2007). *Mental health nursing RN edition 7.0: Content mastery series review module*. Stilwell, KS: Assessment Technologies Institute, LLC. [www.atitesting.com](http://www.atitesting.com)  |
| **Class *Recommended* Texts, Learning Resources:** | Publication Manual of the American Psychological Association (Sixth Edition  2009). Washington DC: American Psychological Association.Antai-Otong, D. (2006). Anxiety disorders. *Nursing 2006, 36*(3), 48-49.Anxiety Disorders Association of America. (2010). January monthly feature:  Anxiety and Depression. Retrieved January 2010 from  <http://www.adaa.org>.Autism Society of America. (2010). About Autism. Retrieved  January 13, 2010 from [www.autism-society.org](http://www.autism-society.org).Beebe, L.H. (2007). Beyond the prescription pad: Psychosocial treatments for individuals with schizophrenia. *Journal of Psychosocial Nursing and Mental Health Services, 45*(3), 35-43. |
|  | Bhui, K., Shanahan, L., and Harding, G. (2006). Homelessness and mental illness: A literature review and a qualitative study of the perception of the adequacy of care. *International Journal of Social Psychiatry, 53*(2),152‑165.Cathy, C. M., Fegley, A. B., & Tuzo, C. N. (2009). *Psychiatric mental health nursing success: a course review applying critical thinking to test taking*. Philadelphia: F.A. Davis Company.Forchuk, C., Nelson, G., and Kingston-Macclure, S., Turner, K., and Dill, S. (2006). From psychiatric ward to the streets and shelters. *Journal of psychiatric Mental Health Nursing, 13*(3), 301-308.Hartford Institute for Geriatric Nursing (2010). Assessment Tools: Try this and how to try this resource. Issue 3 Mental Status Assessment of Older Adults: the Mini-Cog and video. Retrieved January 14, 2010, from <http://hartfordign.org/trythis>.Hickshorn, K.A. (2004). Reducing seclusion and restraints use in mental health settings: Core strategies for prevention. *Journal* *of psychosocialnursing and mental health services, 49(*9).22-33.Langley, G.C. and Klopper, H. (2005). Trust as foundation for the therapeutic intervention for patients with borderline personality disorder. *Journal of Psychiatric and Mental Health Nursing. 12*, 23-32.McGuinness, T. (2006).Methamphetamine abuse. *American Journal of Nursing, 106*(12), 54-59.Medina, K.L. Shear, Plk., and Schafer, J. (2006) Memory functioning in polysubstance dependent women. *Drug and Alcohol Dependence, 84*(3), 248‑255National Alliance of Mental Illness (2010). Mental Illnesses, Support and Programs. Retrieved January 14, 2010, from <http://www.nami.org>Varcarolis, E. M. (2011). *Manual of psychiatric nursing care planning assessment guides, diagnoses, psychopharmacology* (4th ed.). St. Louis: Saunders Elsevier. |
| **Course Catalog Description:** | This course provides knowledge for psychiatric nursing of adults and groups within a self-care framework. Related community experiences and pharmacology of psychotropic drugs are included. |
| **Course Learning Outcomes:** * Course outcomes are comprised of the knowledge, skills, values and/or behaviors that students should be able to demonstrate upon completion of the course.
* Course outcomes map to the Program Learning Outcomes
* Must be assessed in the course to determine if learning outcomes are met
 | Upon completion of the course, the student will be able to:1. Describe the ethical role of the nurse in the holistic care of the client who is mentally ill, including concepts of: client safety, confidentiality, advocacy, and education of legal rights, informed consent, patient’s rights and advanced directives.
2. Demonstrate the applications of theoretical concepts to the practice of psychiatric/mental health nursing that identifies biological, psychological, social science, nutrition, pharmacology and diagnostic findings.
3. Illustrate application of psychiatric nursing concepts to clients and their families utilizing the nursing process and Gordon' Functional Health Pattern and identify methods of promoting wellness.
4. Identify the etiology of growth and development across lifespan and methods of detection of developmental disabilities, mental illness, mental retardation, and child psychiatric disturbances.
5. Identify psychiatric nursing role functions and scope of practice of a psychiatric/mental health nurse with clients/families within the interdisciplinary psychiatric health team.
6. Analyze group and leadership dynamics and issues of multidisciplinary collaboration, and evaluate the effectiveness of group interactions.
7. Demonstrate knowledge of culturally sensitive management of clients with diverse psychiatric diagnoses, as related to continuity of care psychopharmacological, somatic treatments, and other therapies including milieu, electroconvulsive therapy, individual, group, etc.
8. Demonstrate the utilization of information technology resources and describe the use of evidence based nursing practice in the care of the mentally ill clients by defining reliability and validity of research information.
9. Identify professional characteristics and examine professional role of a psychiatric/ mental health nurse as a clinician, teacher, leader, and advocate.
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| **Teaching and Learning Strategies** | Teaching strategies: lectures, discussions, case studies, videos/DVD and Qwizdom. Students will be encouraged to participate in classroom discussions, so proper time devoted to course preparation will be necessary to actively participate.  |

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| **IV. Evaluation Methods, Grading** |
| **Formative Assessment of Student Learning:*** Will not count more than 80% of final grade
* Examples -- *Evidenced-based Research, presentations, Case Studies, Specific class projects, Weekly quizzes, homework assignments, clinical or lab assignments/assessment, practice exams*

**Summative Assessment of Student Learning:*** Will not count more than 30% of final grade
* Examples – *Final Exam, Term Paper or Term Project*

**Participation:*** Student Participation will not account for more than 10% of the final grade.
 | **Assignment/Assessments** | **Due Date** | **Points** |
| **Formative Assessment:** |  |  |
| ATI Part A / B and HESI (unproctored) | See Addendum | 5 |
| Evolve Case Studies | See Addendum | 5 |
| Participation | See Addendum | 10 |
| Examinations | See Addendum | 60 |
| **Summative Assessment:** |  |  |
| Computerized Examination  | See Addendum | 20 |
| **Additional Information:** Student must attain a score of at least 76% out of the 80% examination-oriented part of the total course grade. In other words, if the total number of points available in a given class is 100, then a minimum of 80 of those points are earned by taking examinations, and a student must earn at least 61 points of the 80 points (76%) out of those exam questions in order to pass the course. Assuming the student attains the minimum 76% (61 points), then the 20% non-examination activities (20 points) are added to calculate the final course grade. *Note – A student can attain 76% of the combined examinations and still fail the course if not attaining enough points from non-examination assignments.*  |

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| **V. Policies and Procedures** |
| **West Coast University Grading Scale** (reflective of final course grade. See associated policy in Catalog) | **Grade** | **Points** | **WCU Numerical Scale for non-program specific courses** | **Nursing and Dental Hygiene Specific Numerical Score** |
| **A** | **4** | **90-100** | **91-100** |
| **B** | **3** | **80-89** | **84-90** |
| **C** | **2** | **70-79** | **76-83** |
| **D** | **1** | **60-69** | **64-75** |
| **F** | **0** | **59 and below** | **63 and below** |
| **TC** | **N/A** | **Transfer Credit** | **Transfer Credit** |
| **W** | **N/A** | **Withdrawal** | **Withdrawal** |
| **I** | **N/A** | **Incomplete** | **Incomplete** |
| **CR** | **N/A** | **Credit** | **Credit granted for 75% or higher on a challenge exam or Credit awarded for NURS 199** |
| **Attendance Policy** | West Coast University has a clear requirement for students to attend courses. Students should review the Attendance Policy in the “*Academic Policies and Procedures*” section of the [University Catalog](http://westcoastuniversity.edu/content.aspx?id=130&ekfrm=274).  |
| **Academic Integrity Policy** |  Students are expected to approach their academic endeavors with the highest academic integrity. They must cite sources, and submit original work. Academic honesty is central to the institution/student partnership towards student success. **Any assignment submitted for credit in one course cannot be submitted for any other course.**Students are accountable for adhering to the Academic Integrity and Academic Dishonesty policies in the “*Academic Policies and Procedures*” section of the [University Catalog](http://westcoastuniversity.edu/content.aspx?id=130&ekfrm=274).  |
| **Academic Dishonesty** | Students should review the Academic Dishonesty Policy in the “*Academic Policies and Procedures*” section of the [University Catalog](http://westcoastuniversity.edu/content.aspx?id=130&ekfrm=274).  |
| **Reasonable Accommodations** | West Coast University strives to provide reasonable accommodations to students who have a defined need and who follow the appropriate steps towards seeking the accommodation. The Reasonable Accommodations Policy is found in the “*Academic Policies and Procedures*” section of the [University Catalog.](http://westcoastuniversity.edu/content.aspx?id=130&ekfrm=274)   |
| **West Coast University Make-up Work Policy** | * In order to meet course objectives, students may be required to make up all assignments and work missed as a result of absences. The faculty may assign additional make-up work to be completed for each absence.
* Students are required to be present when an examination is given.  If unexpectedly absent for a documented emergency situation (i.e. death in the immediate family), it is the student’s responsibility to arrange for a make-up date by contacting the faculty member within 48 hours of the original assessment date. The make-up work must be completed within five (5) school days of the originally assigned date.  Students who do not take the exam on the scheduled make-up date or who do not contact the instructor within 48 hours will receive a zero score for that assessment activity.  The highest score possible on a nursing or dental hygiene make-up examination is passing grade (e.g., if a student obtained a perfect score (100%) in the make-up examination, the grade will still be recorded as a passing grade).
 |
| **Classroom Policies** | * Students are expected to dress professionally during class time.
* No children are allowed in classes or to be unattended on campus.
* Use of cell phones, Blackberries or any other electronic devises in the classroom during class time is strictly prohibited. Unauthorized use may lead to faculty member confiscation of the device for the remainder of the class.
* Behavior that persistently or grossly interferes with classroom activities is considered disruptive behavior and may be subject to disciplinary action. A student responsible for disruptive behavior may be required to leave the class.
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| **Testing and Examination Policy** | * The university testing policy stipulates that no phones or other electronic devices, food or drink, papers or backpacks can be taken into the examination area. In specific courses the faculty may have additional requirements. Talking during testing or sharing of information regarding the test questions is not allowed.
* Once the exam results are available, students may schedule reviews of their exams with their instructors. Once the exam results are available, the instructor may review the test with students. This review is intended to help students learn, and is not intended for further distribution to other students.
 |
| **Additional Program or Accreditation Requirements** | **Course Completion Requirements:*** Students are expected to participate in class. Participation includes being present in the class, participation in discussions, and active engagement in the lecture/learning activities.
* Students must achieve a passing grade of C or better, submit all required assignments, complete all required quizzes and examinations, and meet the standards of the University attendance policy.
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|  | * Unscheduled quizzes may be given periodically throughout the term. The quizzes may include previously covered content and/or content to be covered during the current day’s class session.
* Unless designated as a group project by the instructor, all student papers and assignments must be completed by the individual student and represent the student’s own original work. Group projects are designated as such so that all other assignments are individual assignments and are to be completed by the student and NOT as a group assignment.
* Each student is responsible for his or her own learning which includes all aspects of the work required for a class. In order to maintain security and confidentiality, student assignments must be submitted directly to the instructor via the method(s) approved by the instructor. Do not fax papers to the campus. Do not e-mail papers to instructors without **written permission** from the instructor.

**AACN Essentials for Baccalaureate Education for Professional Nursing Practice**The purpose of this section of the syllabus is to guide the student in understanding how the AACN 9 Essentials are incorporated into their education and to provide guidance to them in developing their individual portfolios.The Essentials that are met in NURS 204 Psychiatric / Mental Health Nursing: Promoting Wellness in Mentally Ill Clients include the following:The Essentials that are met in NURS 204 Promoting Wellness in the Mentally Ill Client include the following:Essential I, Liberal Education for Baccalaureate Generalist Nursing Practice* Outcome 1 – Integrate theories and concepts from liberal education into nursing practice.
	+ Students will give a presentation on defense mechanisms

Essential III, Scholarship for Evidence-based Practice* Outcome 2 – Demonstrate an understanding of the basic elements of the research process and models for applying evidence to clinical practice.
	+ Utilize evidence-based practice in the care of the mentally ill client.

Essential V, Healthcare Policy, Finance, and Regulatory Environments* Outcome 12 – Advocate for consumers and the nursing profession.

Analyze the politics of mental health care in the current legal and healthcare environment, and discuss the role of the nurse as a client advocate in this environment. |

**Section B:** (Course Outline)

| **Date/Week** | **Class Objectives** | **Content Outline** | **Course Specific Activity** | **Student Assignments** |
| --- | --- | --- | --- | --- |
| **Week 1****11 / 11 / 2011**CLO #1, 2, 3, 4, 5, 6, 7, 8, 9 | **Mental Health and Mental Illness:*** 1. Describe the continuum of mental health and mental illness.
	2. Explore the role of resilience in the prevention of and recovery from mental illness, and consider your own resilience in response to stress.
	3. Summarize the social influence of mental health care in the United States.
	4. Indentify how the DSM-IV-TR multiaxial system can influence a clinician to consider a broad range of information before making a diagnosis.
	5. Compare and contrast a DSM-IV-TR medical diagnosis with a nursing diagnosis.
	6. Discuss future challenges and opportunities for mental health care in the United States.

**Relevant Theories and Therapies for Nursing Practice**:* 1. Evaluate the premises behind the various therapeutic models and the evolution of therapies for psychiatric disorders.
	2. Identify ways each theorist contributes to the nurse’s ability to assess a patient’s behaviors.
	3. Identify Peplau’s framework for the nurse-patient relationship.

**Serious Mental Illness:*** 1. Describe common problems and the effects of serious mental illness on daily functioning, interpersonal relationships, and quality of life.
	2. Discuss five evidence-based practices for the care of the person with serious mental illness.
	3. Explain the role of the nurse in the care of the person with serious mental illness.
	4. Discuss the causes of treatment non-adherence, and plan interventions to promote treatment adherence.

**Therapeutic Groups:*** 1. Identify basic concepts related to group work and phases of group development.
	2. Define task and maintenance roles of group members.
	3. Discuss the therapeutic factors that operate in all groups.
	4. Discuss four types of groups commonly led by basic level registered nurses.
	5. Describe a group intervention for (1) a member who is silent or (2) a member who is monopolizing the group.

**Legal and Ethical Guidelines for Safe Practice:** 1. Compare and contrast the terms *ethics* and *bioethics,* and identify five principles of bioethics.
2. Identify the steps nurses are advised to take if they suspect negligence or illegal activity on the part of a professional colleague or peer.
3. Apply legal considerations of patient privilege (a) after a patient has died, (b) if the patient tests positive for human immunodeficiency virus, or (c) if the patient’s employer states a “need to know.”
4. Provide explanations for situations in which health care professionals have a duty to break patient confidentiality.
5. Discuss a patient’s civil rights and how they pertain to restraint and seclusion.
6. Develop awareness of the balance between the patient’s rights and the rights of society with respect to the following legal concepts relevant in nursing and psychiatric mental health nursing: (a) duty to intervene, (b) documentation, and (c) confidentiality.
7. Identify legal terminology (e.g., torts, negligence, malpractice) applicable to psychiatric nursing, and explain the significance of each term.
8. Describe the 5150 process for involuntary clients in the state of California according to the Lanternman-Petris-Short Act.
9. Compare and contrast procedures for voluntary admission, 5150, 5250, Consecutive 14 day hold, 30 day hold, 180 day hold.
10. Describe criteria and powers for LPS conservatorship.
11. Identify purpose of Probable Cause Hearing (PCH), Riese Petition (Medication Capacity Hearing) and Writ of Habeas Corpus.

**Therapeutic Relationship:*** 1. Compare and contrast the three phases of the nurse-patient relationship.
	2. Compare and contrast a social relationship and a therapeutic relationship regarding purpose, focus, communications style, and goals.
	3. Explore qualities that foster a therapeutic nurse-patient relationship and qualities that contribute to a non-therapeutic nursing interactive process.
	4. Define and discuss the roles of empathy, genuineness, and positive regard on the part of the nurse in a nurse-patient relationship.
	5. Analyze what is meant by boundaries and the influence of transference and countertransference on boundary blurring.
	6. Understand the use of attending behaviors (eye contact, body language, vocal qualities, and verbal tracking).
	7. Discuss the influences of disparate values and cultural beliefs on the therapeutic relationship.

**Communication and Clinical Interview:**1. Identify personal and environmental factors that can impede communication.
2. Discuss the differences between verbal and nonverbal communication, and identify examples of nonverbal communication.
3. Identify attending behaviors the nurse might focus on to increase communication skills.
4. Relate problems that can arise when nurses are insensitive to cultural aspects of patients’ communication styles.
5. Demonstrate the use of techniques that can enhance communication, highlighting what makes them effective.
6. Demonstrate the use of techniques that can obstruct communication, highlighting what makes them ineffective.
 | Mental Health and Mental Illness (Ch. 1)* Perceptions of Mental Health and Mental Illness
* Epidemiology of Mental Disorder
* Classification of Mental Disorder
* Psychiatric Mental Health Nursing

Relevant Theories and Therapies for Nursing Practice (Ch. 2)* Psychoanalytic Theories and Therapies
* Interpersonal Theories
* Behavioral Theories
* Cognitive Theories
* Humanistic Theories
* Biological Theories
* Milieu Therapy

Serious Mental Illness (Ch. 30)* Mental Illness Across Lifespan
* Issues Confronting Those with Mental Illness
* Resources for Persons with Serious Mental Illness
* Evidence-Based Treatment Approaches
* Nursing Care of Patients with Serious Mental Illness
* Current Issues

Therapeutic Groups (Ch. 34)* Therapeutic Factors Common to all Groups
* Planning a Group
* Phases of Group Development
* Group Member Roles
* Nurse as a Group Leader

Legal and Ethical Guidelines for Safe Practice (Ch. 7) * Ethical Concepts
* Mental Health Laws
* Admission and Discharge Procedures
* Patients’ Rights Under the Law
* Determination of a Standard of Care
* Guidelines for Ensuring Adherence to Standards of Care
* Documentation of Care
* Violence in the Psychiatric Setting

Therapeutic Relationship (Ch. 9)* Concepts of the Nurse-Patient Relationship
* Values, Beliefs, and Self-awareness
* Peplau’s Model of the Nurse-Patient Relationship
* What Hinders and What Helps the Nurse-Patient Relationship
* Factors that Encourage and Promote Patients’ Growth

Communication and Clinical Interview (Ch. 10)* The Communication Process
* Factors That Affect Communication
* Verbal and Nonverbal Communication
* Communications skills for nurses
 | Lecture Video: “Mental Health Issues in the Acute Care Setting” Review Syllabus and Term AssignmentsVideo: "Famous People with Mental Illness | Varcarolis: Read Chapters: 1, 2, 7, 9, 10, 30 & 34 ATI: Review Chapters: 1, 2, 3, 7, 8 & 9Complete ATI Application ExerciseView ATI video: “Mental Status Examination” in Chapter 1 |
| **Week 2****11/18/ 11**CLO #1, 2, 3, 4, 5, 6, 7, 8, 9 | **The Nursing Process and Standards:*** 1. Compare the different approaches you would consider when performing an assessment with a child, an adolescent, and an older adult.
	2. Explain three principles a nurse follows in planning actions to reach agreed-upon
	3. Demonstrate basic nursing interventions and evaluation of care following the ANA’s *Standards of Practice*.
	4. Compare and contrast *Nursing Interventions Classification (NIC)*, *Nursing Outcomes Classification (NOC)*,and evidence-based practice (EBP).

**Schizophrenia Ch. 15**1. Describe the progression of symptoms, focus of care, and intervention needs for the prepsychotic through maintenance phases of schizophrenia.
2. Discuss the neurobiological-anatomical-genetic findings that indicate that schizophrenia is a brain disorder.
3. Differentiate among the positive and negative symptoms of schizophrenia in terms of psychopharmacological treatment and effect on quality of life.
4. Discuss how to deal with common reactions the nurse may experience while working with a patient with schizophrenia.
5. Compare and contrast the conventional antipsychotic medications with atypical antipsychotics.
6. Role-play intervening with a patient who is hallucinating, delusional, and exhibiting disorganized thinking.
7. Psychopharmacology (Anti-Psychotics)

**Biological Basis for Understanding Psychotropic Drugs:**1. Discuss functions of the brain and the way these functions can be altered by psychotropic drugs.
2. Describe how a neurotransmitter functions as a neuromessenger.
3. Identify how specific brain functions are altered in certain mental disorders (e.g., depression, anxiety, schizophrenia).
4. Describe how the use of imaging techniques can be helpful for understanding mental illness.
5. Describe the effects of dopamine blockage that may result in motor abnormalities.
6. Describe the result of blockage of the muscarinic receptors.
7. Identify the main neurotransmitters affected by the following psychotropic drugs and their subgroups:
	1. Antianxiety agents
	2. Sedative-hypnotic agents
	3. Antidepressants
	4. Mood stabilizers
	5. Antipsychotic agents
	6. Anticholinesterase drugs
8. Identify special dietary and drug restrictions in a teaching plan for a patient taking a monoamine oxidase inhibitor.
9. Identify specific cautions you might incorporate into your medication teaching plan with regard to:
	1. Herbal medicine
	2. Genetic pharmacology (i.e., variations in effects and therapeutic actions of medications among different ethnic groups)

**Cultural Implications for Psychiatric Mental Health Nursing:**1. Explain the importance of culturally relevant care in psychiatric mental health nursing practice.
2. Discuss potential problems in applying Western psychological theory to patients of other cultures.
3. Compare and contrast Western nursing beliefs, values, and practices with the beliefs, values, and practices of patients from diverse cultures.

**Anger, Aggression, and Violence:*** 1. Compare and contrast three theories that explore the determinants for anger, aggression, and violence.
	2. Compare and contrast interventions for a patient with healthy coping skills with those for a patient with marginal coping behaviors.
	3. Apply principles of deescalation with a moderately angry patient.
	4. Describe criteria for the use of seclusion or restraint over verbal intervention.
1. Discuss types of assessment and their value in the nursing process.
 | The Nursing Process and Standards (Ch. 8)* Standard 1: Assessment
* Standard 2: Diagnosis
* Standard 3: Outcome Identification
* Standard 4: Planning
* Standard 5: Implementation
* Standard 6: Evaluation
* Documentation

Schizophrenia (Ch. 15)* Epidemiology
* Comorbidity
* Etiology:

a. Biological Factorb. Psychological Factorc. Environmental Factor* Course of the Disorder
* Phases of Schizophrenia
* Application of the Nursing Process
* Communication Techniques
* Health Teaching and Health Promotion
* Milieu Management
* Promotion of Self-Care Activities
* Pharmacological Interventions

Biological Basis for Understanding Psychotropic Drugs (Ch. 3)* Structure and Function of the brain
* Mechanism of Action of Psychotropic Drugs

Cultural Implications for Psychiatric Mental Health Nursing (Ch. 6)* Culture, Race, Ethnicity, and Minority Status
* Culture and Mental Health
* Populations at Risk for Mental Illness and Inadequate Care
* Culturally Competent Care

Anger, Aggression, and Violence (Ch. 25)* Managing aggression in the Clinical Setting
* Epidemiology
* Comorbidity
* Etiology (Biological and Psychological Factors)
 | Quiz #1LectureVideo: Schizophrenia – Understanding the Disorder | Quiz # 1Varcarolis: Read Chapters: 25, 8, 15, 6 & 3ATI: Review Chapters: 5, 29, 27, 14 & 22Complete ATI Application ExerciseView ATI video: “Restraint Use” in Chapter 2Nursing Skills Software: Clinical Simulation, Mental Health II “Paranoid Schizophrenia”Nursing Skills Software: Clinical Simulation, Mental Health II “Major Depressive Disorder” |
| **Week 3****12/2/11**CLO #1, 2 , 3 , 4, 5, 6, 7, 9 | **Depressive Disorders:*** 1. Compare and contrast major depressive disorder and dysthymic disorder.
	2. Discuss the links between the stress model of depression and the biological model of depression.
	3. Identify behaviors in patients with depression in regard to each of the following areas: (a) affect, (b) thought processes, (c) feelings, (d) physical behavior, and (e) communication.
	4. Identify nursing diagnoses for patients with depression, and include outcome criteria.
	5. Identify principles of communication useful in working with patients with depression.
	6. Compare the advantages of the selective serotonin reuptake inhibitors (SSRIs) over the tricyclic antidepressants (TCAs)..
	7. Describe the types of depression for which electroconvulsive therapy (ECT) is most helpful.

**Bipolar Disorders:*** 1. Identify nursing diagnoses appropriate for a patient with mania, and include supporting data.
	2. Identify methods of communication that may be used with a patient experiencing mania.
	3. Distinguish between signs of early and severe lithium toxicity.
	4. Compare and contrast basic clinical conditions that may respond better to anticonvulsant therapy with those that may respond better to lithium therapy.
	5. Evaluate specific indications for the use of seclusion for a patient experiencing mania.
	6. Review items presented in the patient and family teaching plan (see Box 14-2) with a patient with bipolar disorder.
	7. Distinguish the focus of treatment for a person in the acute manic phase from the focus of treatment for a person in the continuation or maintenance phase.

**Suicide Ch. 24*** 1. Describe the profile of suicide in the United States, noting psychosocial and cultural factors that affect risk.
	2. Identify three common precipitating events.
	3. Describe risk factors for suicide, including coexisting psychiatric disorders.
	4. Identify the most frequent coexisting psychiatric disorders.
	5. Identify the components of SAD PERSONS scale to assess suicide risk.
	6. Describe possible reactions a nurse may have when beginning work with suicidal patients.
	7. Discuss examples of primary, secondary, and tertiary (postvention) interventions.
	8. Describe basic-level interventions that take place in the hospital or community.
1. Identify key elements of suicide precautions and environmental safety factors in the hospital.
 | Depressive Disorders (Ch. 13)* Major Depressive Disorder
* Dysthymic Disorder
* Epidemiology
* Comorbidity
* Etiology (Biological and Psychological Factors)
* Application of the Nursing Process
* Communication Techniques
* Health Teaching and Health Promotion
* Milieu Management
* Promotion of Self-Care Activities
* Pharmacological Interventions
* Electroconvulsive Therapy
* Transcranial Magnetic Stimulation

Bipolar Disorders (Ch. 14)* Types of Bipolar Disorder
* Epidemiology
* Comorbidity
* Etiology (Biological, Environmental and Psychological Factors)
* Application of the Nursing Process
* Communication
* Milieu Management
* Promotion of Self-Care Activities
* Pharmacological Interventions
* Electroconvulsive Therapy
* Support Groups
* Health Teaching and Health Promotion

Suicide (Ch. 24)* Risk Factors
* Etiology (Biological, Psychosocial, Cultural and Societal Factors)
* Application of the Nursing Process
* Verbal and Nonverbal Clues
* Lethality of Suicide Plan
* Assessment Tools
* Self-Assessment
* Milieu Management
* Health Teaching and Health Promotion
* Case Management
* Pharmacological Intervention
 | Section 1 ExamLectureVideo: Mood Disorder – Depressive Disorder Part 1 Video: Understanding Electro-Convulsive Therapy (ECT)      | Section 1 ExamVarcarolis: Read Chapters: 13, 14, 24ATI: Review Chapters: 12, 20, 13, 10, 21, 28, 25, 32Complete ATI Application ExerciseNursing Skills Software: Clinical Simulation, Mental Health II “Dysthymic Disorder” |
| **Week 4****12 / 9 / 2011**CLO #1, 2 , 3 , 4, 5, 6, 7, 9 | **Care for the Dying and for Those Who Grieve Ch. 32*** 1. Compare and contrast the specific goals of end-of-life care inherent in the hospice model with those of the medical model.
	2. Analyze the effects of specific interventions nurses can implement when working with a dying person and his or her family and loved ones.
	3. Analyze how the Four Gifts of Resolving Relationships (forgiveness, love, gratitude, and farewell) can be used to help people respond to a dying loved one.
	4. Identify the relationship between the way a person responds to life and how the same person responds to death.
	5. Explain how the distinction between the terms *grief* and *mourning* can help enhance the effectiveness of a holistic approach.
	6. Differentiate among some of the characteristics of normal bereavement and dysfunctional grieving.
	7. Explain how the various models of understanding grieving (dual process, four tasks of mourning) can enhance your care of those who grieve.
	8. Discuss guidelines for dealing with catastrophic loss, and identify appropriate support for someone in acute grief.

**Child, Older Adult, and Intimate Partner Abuse** * 1. Identify indicators of (a) physical abuse, (b) sexual abuse, (c) neglect, and (d) emotional abuse.
	2. Discuss the epidemiological theory of abuse in terms of stresses on the perpetrator, vulnerable person, and environment that could escalate anxiety to the point at which abuse becomes the relief behavior.
	3. Compare and contrast characteristics of perpetrators with three characteristics of a vulnerable person.
	4. Describe areas to assess when interviewing a person who has experienced abuse.
	5. Identify common emotional responses the nurse might experience when faced with a person subjected to abuse.
	6. Identify nursing diagnoses for the survivor of abuse, and list supporting data from the assessment.
	7. Identify a safety plan with the essential elements for a victim of intimate partner abuse.
	8. Compare and contrast primary, secondary, and tertiary levels of intervention, giving examples of intervention for each level.
1. Describe possible referrals for an abusive family, including the telephone numbers of appropriate agencies in the community.
2. Discuss psychotherapeutic modalities useful in working with abusive families.

**Sexual Abuse Ch. 27*** 1. Define sexual assault, attempted rape, and rape.
	2. Discuss the underreporting of sexual assault.
	3. Describe the profile of the victim and the perpetrator of sexual assault.
	4. Distinguish between the acute and long-term phases of the rape-trauma syndrome, and identify some common reactions during each phase.
	5. Identify and give examples of areas to assess when working with a person who has been sexually assaulted.
	6. Formulate two long-term outcomes and two short-term goals for the nursing diagnosis *Rape-trauma syndrome.*
	7. Analyze one’s own thoughts and feelings regarding the myths about rape and its impact on survivors.
	8. Identify overall guidelines for nursing interventions related to sexual assault.
1. Discuss the long-term psychological effects of sexual assault that might lead to a survivor’s seeking psychotherapy.
2. Identify outcome criteria that would signify successful interventions for a person who has suffered a sexual assault.
 | Care for the Dying and for Those Who Grieve (Ch. 32)* Hospice and Palliative Care
* Nursing Care at the End of Life
* Styles of Confronting the Prospect of Dying
* Nursing Care for Those Who Grieve
* Grief Reactions, Bereavement, and Mourning

Child, Older Adult, and Intimate Partner Abuse Ch. 26* Types of Abuse
* Cycle of Abuse
* Epidemiology of Child, Intimate Partner and Older Adult Abuse
* Comorbidity
* Environmental Factors
* Application of the Nursing Process
* Reporting Abuse
* Counseling
* Case Management
* Milieu Management
* Promotion of Self-Care Activities
* Prevention of Abuse

Sexual Abuse (Ch. 27)* Profile of Sexual Perpetrators
* Relationships Between Victims and Perpetrators
* Psychological Effects of Sexual Assault
* Rape-Trauma Syndrome
* Application of the Nursing Process
 | Quiz 2LectureVideo: Domestic Violence “Portrait of Abuse Part 1      | Varcarolis: Read Chapters: 26, 29, 27 ATI: Review Chapters: 31Complete ATI Application ExerciseNursing Skills Software: Clinical Simulation, Mental Health III “Manic Phase” Nursing Skills Software: Clinical Simulation, Mental Health III “Acutely Suicidal” |
| **Week 5****12/16/11**CLO #1, 2 , 3 , 4, 5, 6, 7, 9 | **Understanding Response to Stress:*** 1. Recognize the short- and long-term physiological consequences of stress.
	2. Compare and contrast Cannon’s (fight-or-flight), Selye’s (general adaptation syndrome), and psychoneuroimmunological models of stress.
	3. Describe how responses to stress are mediated through perception, personality, social support, culture, and spirituality.
	4. Assess life change units using the classic Life-Changing Events Questionnaire.
	5. Identify and describe holistic approaches to stress management.
	6. Explain how cognitive techniques can help increase a person’s tolerance for stressful events.

**Anxiety and Anxiety Disorder Ch. 12*** 1. Compare and contrast the four levels of anxiety in relation to perceptual field, ability to learn, and physical and other defining characteristics.
	2. Identify defense mechanisms, and consider one adaptive and one maladaptive use of each.
	3. Identify genetic, biological, psychological, and cultural factors that may contribute to anxiety disorders.
	4. Describe clinical manifestations of each anxiety disorder.
	5. Formulate appropriate nursing diagnoses that can be used in treating a person with an anxiety disorder.
	6. Name defense mechanisms commonly found in patients with anxiety disorders.
	7. Describe feelings that may be experienced by nurses caring for patients with anxiety disorders.
	8. Identify nursing outcome criteria for patients with an anxiety disorder.
1. Describe basic nursing interventions used for patients with anxiety disorders.
2. Discuss classes of medications appropriate for anxiety disorders.

**Somatoform, Factitious, and Dissociative Disorder:*** 1. Compare and contrast essential characteristics of the somatoform, factitious, and dissociative disorders.
	2. Give a clinical example of what would be found in each of the somatoform disorders.
	3. Describe psychosocial interventions that would be appropriate for a patient with somatic complaints.
	4. Describe disorders that are conscious attempts to deceive health care professionals.
	5. Explain the key symptoms of the four dissociative disorders.
	6. Compare and contrast dissociative amnesia and dissociative fugue.
	7. Identify nursing interventions for patients with somatoform, conversion disorder and dissociative disorders.

**Family Interventions Ch. 35*** 1. Differentiate between functional and dysfunctional family patterns of behavior as they relate to family functions.
	2. Compare and contrast insight-oriented family therapy and behavioral family therapy.
	3. Identify family theorists and their contributions to the family therapy movement.
	4. Analyze the meaning and value of the family’s sociocultural context when assessing and planning intervention strategies..
	5. Distinguish between the nursing intervention strategies of a basic level nurse and those of an advanced practice nurse with regard to counseling and psychotherapy and psychobiological issues.
 | Understanding Response to Stress (Ch. 11)* Responses to and Effects of Stress
* Neurotoransmitter Stress Response
* Immune Stress Response
* Mediators of the Stress Response
* Nursing Management of stress Response: Measuring Stress, Assessing Coping Styles, and Managing Stress Through Relaxation Techniques

Anxiety and Anxiety Disorder (Ch. 12)* Levels of Anxiety
* Defenses Against Anxiety
* Panic Disorder
* Phobias
* Obsessive-Compulsive Disorder
* Generalized Anxiety Disorder Posttraumatic Stress Disorder
* Acute Stress Disorder
* Substance-Induced Anxiety Disorder
* Anxiety Due to Medical Conditions
* Epidemiology
* Comorbidity
* Etiology (Biological and Psychological Factors)

Somatoform, Factitious, and Dissociative Disorder (Ch. 22)* Somatization Disorder
* Hypochondriasis
* Pain Disorder
* Body Dysmorphic Disorder
* Coversion Disorder
* Factitious Disorder with Physical Symptoms
* Factitious Disorder with Psychological Symptoms
* Malingering
* Depersonalization Disorder
* Dissociative Amnesia
* Dissociative Fugue
* Dissociative Identity Disorder
* Epidemiology
* Etiology (Biological and Psychological Factors)

Family Interventions (Ch. 35)* Family Functions
* Family Cycle
* Working with the Family
* Communication Techniques
* Family Therapy
* Case Management
 | Section 2 ExamLectureVideo: Anxiety Disorder – Obsessive-Compulsive Disorder | Quiz #2Varcarolis: Read Chapters: 11, 12, 22 & 35ATI: Review Chapters: 11, 19, 4Complete ATI Application Exercise |
| **Week 6****1/6/12**CLO #1, 2 , 3 , 4, 5, 6, 7, 9 | **Addictive Disorders Ch. 18*** 1. Compare and contrast the terms *substance abuse* and *substance dependence*, as defined by the *DSM-IV-TR*.
	2. Discuss components of the assessment process to be used with a person who is chemically dependent.
	3. Discuss the symptoms of alcohol withdrawal and alcohol delirium and the recommended treatments for each.
	4. Describe the signs of alcohol poisoning and the appropriate treatment based on the individual’s presentation.
	5. Identify appropriate steps to take if one observes an impaired co-worker.
	6. Describe aspects of enabling behaviors.
	7. Compare and contrast the signs and symptoms of intoxication, overdose, and withdrawal for cocaine and amphetamines.
1. Distinguish between the symptoms of narcotic intoxication and those of narcotic withdrawal.
2. Identify goals for a person who abuses alcohol in terms of (a) withdrawal, (b) active treatment, and (c) health maintenance.
3. Analyze the pros and cons of the following treatments for narcotic addictions: (a) methadone or *l*-α-acetylmethadol (LAAM), (b) therapeutic communities, and (c) abstinence-oriented self-help programs.
4. Recognize the phenomenon of relapse as it affects people who abuse substances during different phases of treatment.
5. Evaluate four indications that a person is successfully recovering from substance abuse.

**Cognitive Disorders Ch.17*** 1. Compare and contrast the clinical picture of delirium with that of dementia.
	2. Discuss three critical needs of a person with delirium, stated in terms of nursing diagnoses.
	3. Identify outcomes criteria for patients with delirium.
	4. Summarize the essential nursing interventions for a patient with delirium.
	5. Recognize the signs and symptoms occurring in the four stages of Alzheimer’s disease.
	6. Give an example of the following symptoms assessed during the progression of Alzheimer’s disease: (a) amnesia, (b) apraxia, (c) agnosia, and (d) aphasia.
	7. Identify nursing diagnoses suitable for patients with Alzheimer’s disease, and define outcomes.
1. Identify appropriate referrals in the community—including a support group, hotline for information, and respite services—for persons with dementia and their caregivers.
 | Addictive Disorders (Ch. 18)* Tolerance and Withdrawal
* Flashbacks
* Synergistic Effects
* Antagonistic Effects
* Codependency
* Epidemiology
* Comorbidity (Psychiatric and Medical)
* Etiology

a. Biologicalb. Psychological c. Sociocultural Factors* Application of the Nursing Process
* Chemically Impaired Nurse
* Initial and Active Drug Treatment
* Health Maintenance
* Pharmacological Interventions

Cognitive Disorders (Ch.17)* Delirium
* Dementia
* Epidemiology
* Comorbidity
* Etiology

a. Biological Factorsb. Environmental Factors* Health Teaching and Health Promotion
* Pharmacological Interventions
* Integrative Therapy
 | Quiz 3LectureVideo: Substance Abuse | Section 2 ExamVarcarolis: Read Chapters: 18 and 17ATI: Review Chapters: 17, 24, 16Complete ATI Application ExerciseNursing Skills Software: Clinical Simulation, Mental Health III “Alcohol Dependence” |
| **Week 7****1/13/12**CLO #1, 2 , 3 , 4, 5, 6, 7, 9 | **Personality Disorders:*** 1. Analyze the interaction of biological determinants and psychosocial stress factors in the etiology of personality disorders.
	2. Identify the three clusters of personality disorders as currently defined.
	3. Describe majorcharacteristics from each cluster.
	4. Identify nursing diagnoses for cluster B personality disorders.
	5. Describe the emotional and clinical needs of nurses and other staff when working with patients who meet criteria for personality disorders.
	6. Discuss nursing outcomes for patients with borderline personality disorder.
	7. Identify basic interventions for a patient with impulsive, aggressive, or manipulative behaviors.

**Eating Disorders Ch. 16*** 1. Discuss theories of eating disorders.
	2. Compare and contrast the signs and symptoms (clinical picture) of anorexia nervosa and bulimia nervosa.
	3. Identify life-threatening conditions, stated in terms of nursing diagnoses, for a patient with an eating disorder.
	4. Identify outcome criteria for (a) a patient with anorexia nervosa and (b) a patient with bulimia nervosa.
	5. Describe therapeutic interventions appropriate for anorexia nervosa and bulimia nervosa in the acute phase and long-term phase of treatment.
	6. Explain the basic premise of cognitive-behavioral therapy in the treatment of eating disorders.
	7. Differentiate between the long-term prognoses of anorexia nervosa, bulimia nervosa, and binge eating disorder.

**Sleep Disorders Ch. 20*** 1. Discuss the impact of inadequate sleep on overall health and well-being.
	2. Describe the social and economic impact of sleep disturbance and chronic sleep deprivation.
	3. Recognize the risks to personal and community safety imposed by sleep disturbance and chronic sleep deprivation.
	4. Describe normal sleep physiology, and explain the variations in normal sleep.
	5. Differentiate between dyssomnias and parasomnias.
	6. Identify the predisposing, precipitating, and perpetuating factors for patients with insomnia.
	7. Identify and describe the use of two assessment tools in the evaluation of patients experiencing sleep disturbance.
1. Identify nursing diagnoses for patients experiencing sleep disturbance.

**Disorders of Children and Adolescents Ch. 28*** 1. Explore factors and influences contributing to child and adolescent mental disorders, and develop intervention strategies for these young patients.
	2. Explain how characteristics associated with resiliency can mitigate ecological influences.
	3. Identify characteristics of mental health and positive youth development in children and adolescents.
	4. Discuss holistic assessment of a child or adolescent.
	5. Explore areas in the assessment of suicide that may be unique to children or adolescents.
	6. Compare and contrast at least six treatment modalities for children and adolescents.
	7. Describe clinical features and behaviors of at least three child and adolescent psychiatric disorders.
1. Formulate three nursing diagnoses, stating patient outcomes and interventions for each.
 | Personality Disorders (Ch. 19)* Cluster A Personality Disorder
* Cluster B Personality Disorder
* Cluster C Personality Disorder
* Personality Disorder Not Otherwise Specified
* Epidemiology
* Comorbidity
* Etiology:

a. Biological Factorsb. Psychological Factorsc. Environmental FactorsEating Disorders (Ch. 16)* Anorexia Nervosa
* Bulimia Nervosa
* Epidemiology
* Comorbidity (Psychiatric and Medical)
* Etiology (Biological, Psychological, Environmental and Sociocultural Factors)
* Acute Care
* Psychological Interventions
* Pharmacological Interventions
* Health Teaching and Health Promotion
* Milieu Management

Sleep Disorders (Ch. 20)* Consequences of Sleep Loss
* Normal Sleep Cycle
* Regulation of Sleep
* Functions of Sleep
* Sleep Requirements
* Sleep Patterns
* Epdemiology
* Comorbidity
* Pharmacological Interventions
* Health Teaching and Health Promotion

Disorders of Children and Adolescents (Ch. 28)* Epidemiology
* Comorbidity
* Risk Factors
* Etiology (Biological and Environmental Factors)
* Child and adolescent Psychiatric Mental Health Nursing
* Autistic Disorder
* Asperger’s Disorder
* Rhett’s Disorder
* Attention Deficit Hyperactivity Disorder
* Oppositional Defiant Disorder
* Conduct Disorder
* Separation Anxiety Disorder
* Posttraumatic Stress Disorder
 | Section 3 ExamLectureVideo: Personality Disorder Cluster A, B and C | Quiz #3Varcarolis: Read Chapters: 19, 16, 20 and 28ATI: Review Chapters: 17, 18, 23 and 26Complete ATI Application ExerciseNursing Skills Software: Clinical Simulation, Mental Health III “Anorexia Nervosa”Nursing Skills Software: Clinical Simulation, Mental Health II “Personality Disorder” |
| **Week 8****1/20/12**CLO #1, 2 , 3 , 4, 5, 6, 7, 9 | **Psychosocial Needs of the Older Adults Ch. 29*** 1. Discuss facts and myths about aging.
	2. Describe mental health disorders that may occur in older adults.
	3. Analyze how ageism may affect attitudes and willingness to care for older adults.
	4. Explain the importance of a comprehensive geriatric assessment.
	5. Describe the role of the nurse in different settings of care.
	6. Identify the requirements for the use of physical and chemical restraints.
	7. Discuss the importance of pain assessment, and identify three tools used to assess pain in older adults.
1. Identify legislation and legal documents that protect the rights of older patients, and describe their impact on nursing care.
2. Recognize the significance of health care costs for older adults.

**Psychological Needs of Patients with Medical Conditions Ch. 31*** 1. Describe the influence of stress on general medical conditions.
	2. Identify nursing diagnosis for individuals who has HIV and depression.
	3. Explain the importance of nurses teaching relaxation techniques and coping skills to patients with medical illness.
	4. Identify client’s coping skills in the (a) areas for psychoeducation and (b) areas of strength.
	5. Identify instances in which a consultation with a psychiatric liaison nurse might have been useful for one of your medical-surgical patients.

**Integrative Care Ch. 36*** 1. Define the terms *integrative medicine*, *integrative care*, and *complementary and alternative medicine*.
	2. Identify trends in the use of nonconventional health treatments and practices.
	3. Explore the category of alternative medical systems, along with the four domains of integrative care: mind-body approaches, biologically based interventions, manipulative approaches, and energy therapies.
	4. Discuss the techniques used in major complementary therapies and potential applications to psychiatric mental health nursing practice.
1. Discuss how to educate the public in the safe use of integrative modalities.
 | Psychosocial Needs of the Older Adults (Ch. 29)* Mental Health Issues Related to Aging: Depression, Anxiety Disorder, Delirium, Dementia, Alcohol Abuse, Pain and Late-Onset Mental Illness.
* Health Care Concerns of Oder Adults
* Health Care Decision Making
* Nursing Care of Older Adults

Psychological Needs of Patients with Medical Conditions (Ch. 31)* Psychological Factors Affecting Medical Conditions
* Psychological Responses to Serious Medical Conditions: Depression, Anxiety, Substance abuse, Grief and Loss, Denial and Fear of Dependency
* Nursing Care of Patients with Medical Conditions

Integrative Care (Ch. 36)* Integretive Care In the United States
* Consumers and Integrative Care
* Integrative Nursing Care
* Classification of Integrative Care: alternative Medical Systems, Mind and Body Approaches, Biological Based Therapies, Manipulative Practices, Energy Therapies
 | ATI proctored ExamLectureVideo: Autism      | Section 3 ExamVarcarolis: Read Chapters: 29, 31, 36ATI Practice Exams Part A & B |
| **Week 9****1/27/11** | Course Evaluation |  | Lecture Final Exam | Comprehensive Computerized Final Exam |