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Title: Recognizing and Responding to Suicidal Ideation in a Nursing Home: A Nursing Educational Intervention

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ACCEPTED

Session Title: Meet the Poster Authors Session

Slot: PST: Friday, March 27, 2020: 2:30 PM-3:15 PM

Abstract Describes: Completed Work/Project

Applicable Category: Clinical

Keywords: Nursing Education, Nursing Home and Suicidal Ideation

Abstract Summary:

This quality improvement project involved developing and implementing a web-based educational module for nursing staff, including nurses and nursing assistants, with the purpose of improving knowledge about and confidence with recognizing and responding to suicidal ideation in a nursing home.

References:

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Abstract Text:

Background/Significance: Suicidal ideation is common and associated with distress and worsened quality of life for elderly individuals residing in nursing homes. Depression and hopelessness are strongly associated with suicidal ideation and completed suicide among residents of nursing homes. Despite having an important role in caring for nursing home residents expressing suicidal ideation, nurses and nursing assistants often receive limited training about detection of late-life depression and warning signs of suicide.

Purpose: The purpose of this project was to develop and implement an educational module for nursing staff, including nurses and nursing assistants, with the aim of improving knowledge about and confidence with recognizing and responding to suicidal ideation in a nursing home.

Methods: I utilized a quality improvement approach to develop and implement an online educational module for nurses and nursing assistants at a nursing home. The module incorporated evidence-based recommendations, a suicide prevention toolkit developed by the Substance Abuse and Mental Health Services Administration, results of a learner's needs assessment of nursing staff at the site, and specific considerations of a nursing home setting. I implemented the educational module, pre-test, post-test, and evaluation of confidence for volunteering nurses (n=10) and nursing assistants (n=16) at a nursing home. I measured three outcomes: 1) increased confidence with and knowledge about discussing suicidal ideation with residents, 2) increased confidence with and knowledge about recognizing depression and warning signs of suicide among residents, and 3) increased confidence with and knowledge about implementation of the site's suicidal ideation protocol.

Results: For participating nurses and nursing assistants (n=26), the pre-test score average was 85%, and the post-score average was 95%. For nursing assistants (n=16), average scores improved from 81% on the pre-test to 93% on the post-test. For nurses (n=10), average scores improved from 91% on the pre-test to 97% on the post-test. According to confidence evaluation responses, nursing assistants expressed lower confidence levels compared to nurses regarding the following topics: locating the site's suicidal ideation protocol and holding a conversation with a resident making a suicidal comment. Results from the initial pre-test, post-test, and evaluation of confidence included generally increased test scores and high confidence levels reported on evaluation survey responses. The results suggested that the confidence and knowledge levels of nursing staff improved overall after completing the educational module. Results from the evaluation questions suggested that nursing assistants could likely benefit from reinforcement of education about how to respond to suicidal ideation in nursing homes.

Conclusion: Development and implementation of evidence-based educational modules for nursing staff can help to improve confidence and knowledge levels of nurses and nursing assistants regarding recognizing and responding to suicidal ideation in nursing home settings. Educational interventions can support efforts to reduce morbidity and mortality associated with suicidal ideation experienced by older adults residing in nursing homes.