



Consulting | Education | Interim | Resources

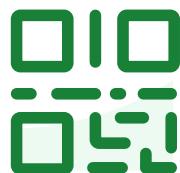


Assisted Living and Mental Illness

Colleen Toebe

1/26/2026

1



Join at slido.com
#34800014



Do not edit
How to change the design

① The Slido app must be installed on every computer you're presenting from

1/26/2026

slido

2

Do not edit
How to change the design



Is mental health prevalent in your organization

- ① The Slido app must be installed on every computer you're presenting from

1/26/2026

slido₃

3



Are your direct care providers knowledgeable in providing care for clients with mental health diagnosis

- ① The Slido app must be installed on every computer you're presenting from

1/26/2026

slido₄

4

2

Course Description

Caring for individuals in assisted living facilities is becoming increasingly challenging. It is estimated that approximately 35% of residents experience depression, anxiety, severe cognitive impairment, substance use disorder or serious mental illness. Supporting mental health in assisted living facilities requires training licensed nurses and care providers to recognize, manage, and understand mental health conditions.

1/26/2026

5



5

Objectives

1. Examine strategies to increase staff understanding of common mental health conditions affecting residents in assisted living facilities.
2. Discuss how relocation stress syndrome affects individuals dealing with mental health issues.
3. List three strategies for improving mental health clinical competency in assisted living.

1/26/2026

6

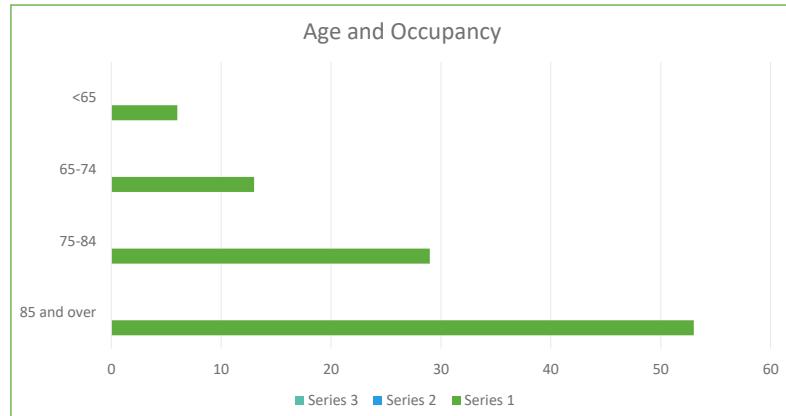


6

Assisted Living Wisconsin: Fast Facts

4,56 Total Communities

60,995 Beds



[Wisconsin-AL.pdf](#)

1/26/2026



7

Mental Health Across America

77.09 % adults with a substance use disorder did not receive treatment

9.2% of adults with any mental illness were uninsured

320 patients per 1 provider

1/26/2026



8

8

4

Mental Health concerns



1/26/2026

9



9

Risk Factors

- Ageism
- Death of a spouse
- Social isolation
- Loneliness
- Health condition
- Abuse
- Neglect



1/26/2026

10

Promotion and Prevention

- Reduce financial insecurity and income inequality;
- Accessible housing, public buildings and transport;
- Support for older adults and their carers;
- Access to food, physical activity, refrain from tobacco and alcohol.
- Access to health promotion in rural areas.

1/26/2026

11



11



Ageism

- Internalization
- Interpersonal Ageism
- Institutional Ageism
- Implicit Ageism

1/26/2026

12



12

Ageism and Mental Health

- Less likely to receive health care
- 1-year cost 63 billion or \$1 of every \$ 7
- Accept depression fatigue and pain as normal aging
- 1 in 17 health care discrimination.
- Older adults who experience ageism have poor mental health
- Increased stress and anxiety.



13



1/26/2026

13

Psychological Effects

Lower self-worth

Reduced motivation

Increased depression and anxiety

Faster cognitive decline

Avoidance of medical and mental health

14

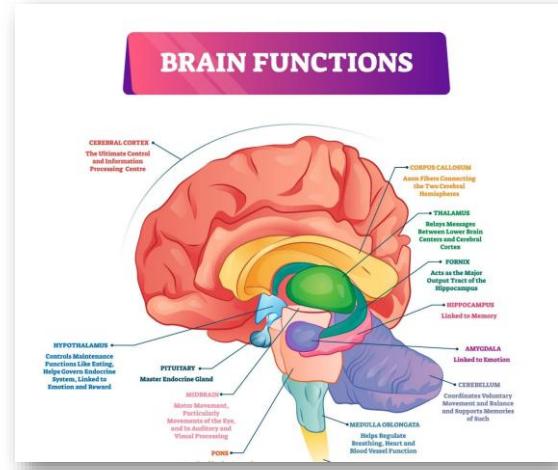


1/26/2026

14

Substance Use Disorder

- Reward System
- Tolerance and Dependence
- Decision Making Weakens
- Increase stress
- Decision Making is Impaired
- Withdraw Attempts to Rebalance the Brain



15



1/26/2026

15

Substance	Affects the Brain	Long –Term Risks
Cocaine-Methamphetamine	Massive dopamine release; speeds up CNS activity; constricts blood vessels	Stroke, seizures, neurotoxicity, sudden death
Alcohol and benzodiazepines	Slows CNS activity; impairs judgment, coordination, memory	Cognitive decline, movement disorders, stroke, long-term brain damage
Opioids	Blocks pain signals; floods reward system with dopamine	Respiratory depression, impaired decision-making, high addiction potential
Cannabis	Alters memory, coordination, and perception; affects dopamine indirectly	Cognitive impairment, altered motivation, anxiety in some users

16

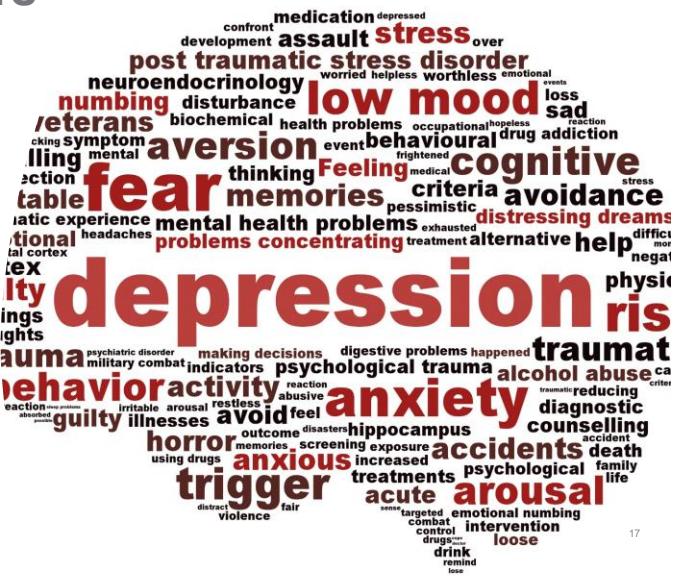


1/26/2026

16

Mental Health Disorders

- Depression
- Anxiety disorders
- Cognitive Disorders
- Serious Mental Illness
- Substance Use Disorders



1/26/2026

17

Depression: Signs and Symptoms

Giving away personal belongings

Change in eating habits

Memory loss

Increased irritability

Feeding more tired

Physical symptoms

1/26/2026



18

Anxiety

- Health status changes
- Financial stress
- Social isolation
- Loss of hearing and vision
- Medication side effects
- Falls



1/26/2026

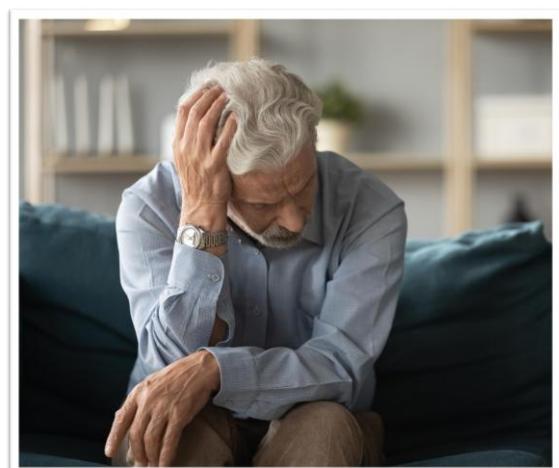
19



19

Late-onset bi-polar disorder

- Mood Swings
- Anger outbursts
- Impulsive
- Manic episodes
- Increased frequency of depression
- Memory problem
- Psychotic symptoms



1/26/2026

20



20

Schizophrenia

- Rare
- Often overlap with other conditions.
- Rarely occurs after the age of 40



21

1/26/2026



21

Substance use disorders

- Chronic Health Conditions
- Mixing of common prescription medications
- Increased use of dietary supplements
- 50% take 5 or more medications



22

1/26/2026



22

Substance Use Disorders

2021 - 1 out of every 370 deaths in person 65 are drug overdose

57% - Opioid

39% - Stimulant

18% - Opioid and Stimulant

Female 57% - Overdose

Males 71% - Overdose

23

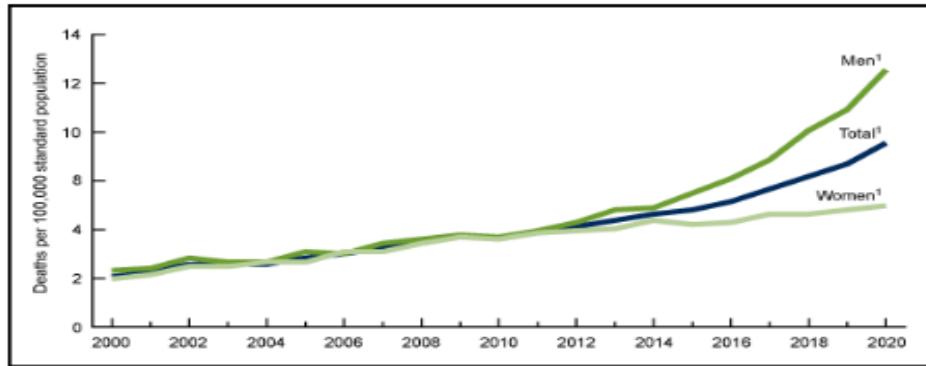
1/26/2026



23

Drug and Alcohol Deaths in Older Americans

Figure 1. Age-adjusted drug overdose death rate for adults aged 65 and over, by sex: United States, 2000–2020



24

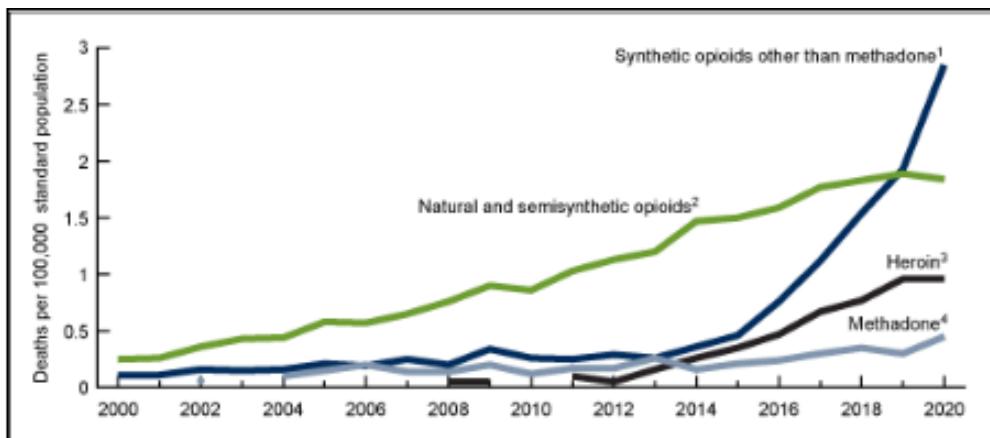
1/26/2026

[Products - Data Briefs - Number 455 - November 2022](#)



24

Opioid Deaths 2000-2020



1/26/2026

[Products - Data Briefs - Number 455 - November 2022](#)



25

Alcohol Use Screening Tools

Tool	Description
Audit-C	3-item tool, modified from AUDIT tool
CAGE	4-item screening tool
CARET	Alcohol Related Problems Survey
MAST-G	24-item tools that may indicate need for further assessment

1/26/2026

26



26

Drug Use Screening Tool

Tool	Description
Assist	Screens for tobacco products, alcohol, cannabis, cocaine, amphetamine-type stimulants, opioids, and other drugs. Can identify acute intoxication and regular, dependent, high-risk use and injecting behavior
CAGE-AID	4 item tool, combines screening for alcohol and drug problems

27

1/26/2026



27



Consulting | Education | Interim | Resources

Relocation Stress Syndrome

1/26/2026

28

Do not edit
How to change the design



What do you believe is the biggest challenge related to relocation stress syndrome?

- ① The Slido app must be installed on every computer you're presenting from

1/26/2026



29



WISCONSIN DEPARTMENT
of HEALTH SERVICES

Resident Relocation Manual

For Nursing Homes, Community-Based Residential Facilities, and Intermediate Care Facilities for Individuals With Intellectual Disabilities

1/26/2026



30

Appendix F—Relocation Stress Syndrome—Sample Care Plan

Problem	Goal	Interventions
<p>Resident at risk for signs/symptoms of Resident Relocation Stress Syndrome (RSS) as evidenced by:</p> <ul style="list-style-type: none"> • Dependency • Confusion • Anger • Depression • Withdrawal • Behavioral changes 	<p>Resident will have any signs/symptoms of RSS prevented/mitigated.</p> <p>Resident will choose placement in an appropriate alternate setting.</p> <p>Resident will maintain current functional status.</p>	<ol style="list-style-type: none"> 1. Encourage presence of resident support persons when closure is announced (for example, family, legal representative, caseworker). 2. Identify the facility relocation coordinator for the relocation process for the resident and representatives. 3. As indicated, provide a list of potential contacts such as advocates, county staff, Aging and Disability Resource Center (ADRC). 4. Provide the opportunity for residents and family to verbalize fears and concerns. 5. Acknowledge the resident's right to choose their alternative living setting. 6. Ensure the resident is involved in all aspects of their relocation. 7. Assign a primary staff person for the resident to relate to during the relocation process. Provide for continuity of direct caregivers. 8. Update the interdisciplinary assessment/individual service plan to reflect the resident's desires and

Resident Relocation Manual

59

1/26/2026



31

Relocation Stress Syndrome



32

1/26/2026



32

Transfer Trauma



33

1/26/2026



33

Risk Factors

- Individuals with limitations getting around independently
- Individuals with impaired cognitive function (e.g., dementia)
- Individuals living alone, struggling with routine home maintenance, or feeling unsafe in the home environment
- Women
- Widows
- Residents in long-term care facilities at risk of closing down
- Natural disasters that require residents of long-term care facilities to relocate

34

1/26/2026

[Relocation Stress Syndrome \(sdstate.edu\)](http://Relocation Stress Syndrome (sdstate.edu))



34

Risks Factors

- Cognitive impairment
- Long-term care facilities
- Little to no failure support
- Diagnosis that includes dementia

35

1/26/2026



35

Health Effects



36

1/26/2026



36

18



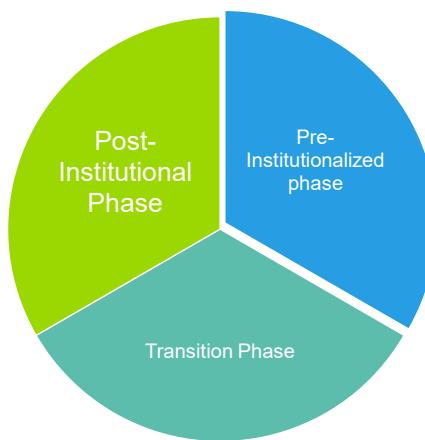
37

1/26/2026



37

Three Phases of Relocation



38

[Relocation stress in long term care: How staff can help – Sherri Melrose Publications: A Virtual Memory Box \(pressbooks.pub\)](#)

1/26/2026



38

Pre-Location Initiatives

- Informational meetings
- Encourage participation
- Create a sense of home
- Grant autonomy
- Address concerns
- Avoid ageism
- Seek professional assistance

39

1/26/2026



39

Pre-Relocation Interview Questions

- Could you describe the information that you would like to prepare for this move?
- Is your family assisting with the move?
- Were you provided with a list of items that you could bring to the new location?
- Was the staff able to answer questions on the upcoming move?

40

1/26/2026



40



Consulting | Education | Interim | Resources

Mental Health and Clinical Competency

1/26/2026

41

Understanding Substance Use Disorders

- Develop a strong foundation
- Chronic, treatable condition
- Not a moral failing
- A condition influenced by biology, environment, trauma and mental health.

1/26/2026

42



Understanding Biases

- They did this to themselves
- If they really wanted to stop they would
- Bias makes it harder for clients to receive the empathy and support
- Some staff believe that people with SUD are unpredictable and violent
- Bias leads to fear-based interactions

43

1/26/2026



43

SUD Bias in Healthcare

- Dismissing pain as drug seeking
- Showing frustration or impatience
- Treating people as less trustworthy
- Undertreating mental health symptoms.
- Ignoring patient -reported symptoms.
- Not screening for mental health conditions.
- Use of terms: drug abuser, junkie, clean/dirty
- Avoiding eye contact
- Rushing through cares.

44

1/26/2026



44

Assess Bias in Care Givers

- Staff self-Assessment survey
- Implicit Associated Test
- Chart audits
- Observation checklists
- Resident feedback

45

1/26/2026



45

Mental Health

- Targeted training
- Trauma-informed care refreshers
- Communication workshops
- Reflective practice groups
- Case-based learning
- Training modules

46

1/26/2026



46

Case Based-Learning

CASE SCENARIO

Nora is 85 years old, living independently until a fall at home. The family notices that Nora is having increased difficulty managing household tasks, bills and mobility. Her daughter lives 3 hours from Nora's home and is not able to visit often.

The nursing assistants reported that Nora will not attend any activities, rarely eats in the dining room, and spends much of her time.

1/26/2026

47



47

Case Based-Learning

- What are the signs of depression that Nora displays?
- Did the move to the assisted living have any impact on Nora?
- How can you support Nora?
- What are some activities that might have her reconnect?
- What information should be reported to the nurse?



1/26/2026

48



48

24

Nora Admission Screening and Observation

Assessment and Screening

Depression

Substance use disorder

Recent changes in health, loss of a family member or friend

BPSD screening

PAS Agitation scale

Rage (rating scale for aggressive behavior)

[Screening and assessment tools for older people | Agency for Clinical Innovation](#)

49

1/26/2026



49

Screening Tools

ACE Alcohol and Drug
Cognitive Enhancement
Screening Tool (Free to use)



[Screening and assessment - ACE program | Agency for Clinical Innovation](#)

Question	Yes	No	Unsure
1 Have you ever lost consciousness following a blow to the head? Optional question: If yes, how many times?			
2 Did you ever have to go to hospital following a head injury? Optional question: If yes, how many times?			
3 Have you ever had an epileptic seizure? Optional question: If yes, how many times or how often?			
4 Have you ever had a drug or medication overdose? Optional question: If yes, how many times?			
5 Did you ever have to go to hospital following an overdose? Optional question: If yes, how many times?			
6 Did your mother use alcohol or other drugs when she was pregnant with you?			
7 Have you ever had a stroke or any other neurological conditions that might affect your thinking skills? Optional question: If yes, what was it and when did it occur?			
8 Did you ever have learning difficulties, or have to attend special education classes at school?			
9 Have you ever been diagnosed or suspected of having a developmental condition, such as ADHD, autism spectrum disorder (previously known as Asperger's syndrome) or a learning disability?			
10 Did you repeat any grades at school?			
11 Were you ever suspended or expelled from school?			
12 Do you experience memory or other thinking difficulties? Optional question: If yes, since when?			
Total number of 'Yes' responses 			
(don't include answers to the optional questions in the total)			

A score of three or higher indicates risk of cognitive impairment.

50

1/26/2026



50

Screening Tools

Tool	Substance type		Patient age		How tool is administered	
	Alcohol	Drugs	Adults	Adolescents	Self-administered	Clinician-administered
Screening to Brief Intervention (S2BI)	X	X		X	X	X
Brief Screener for Alcohol, Tobacco, and other Drugs (BSTAD)	X	X		X	X	X
Tobacco, Alcohol, Prescription medication, and other Substance use (TAPS)	X	X	X		X	X
Alcohol Screening and Brief Intervention for Youth: A Practitioner's Guide (NIAAA)	X			X		X
Opioid Risk Tool – OUD (ORT-OUD) Chart			X	X	X	

1/26/2026

51

Screening and Assessment Tools Chart | National Institute on Drug Abuse (NIDA)



51

NIDA Clinical Trials Network
The Tobacco, Alcohol, Prescription medications, and other Substance (TAPS) Tool

TAPS Tool Part 1 Web Version: 2.0; 4:00; 09-19-17

General Instructions:
 The TAPS Tool Part 1 is a 4-item screening for tobacco use, alcohol use, prescription medication misuse, and illicit substance use in the past year. Question 2 should be answered only by males and Question 3 only by females. Each of the four multiple-choice items has five possible responses to choose from. Check the box to select your answer.

Segment:
 Visit number:

1. In the PAST 12 MONTHS, how often have you used any tobacco product (for example, cigarettes, e-cigarettes, cigars, pipes, or smokeless tobacco)?

Daily or Almost Daily Weekly Monthly
 Less Than Monthly Never

2. In the PAST 12 MONTHS, how often have you had 5 or more drinks containing alcohol in one day? One standard drink is about 1 small glass of wine (5 oz), 1 beer (12 oz), or 1 single shot of liquor. (Note: This question should only be answered by males).

Daily or Almost Daily Weekly Monthly
 Less Than Monthly Never

3. In the PAST 12 MONTHS, how often have you had 4 or more drinks containing alcohol in one day? One standard drink is about 1 small glass of wine (5 oz), 1 beer (12 oz), or 1 single shot of liquor. (Note: This question should only be answered by females).

Daily or Almost Daily Weekly Monthly
 Less Than Monthly Never

4. In the PAST 12 MONTHS, how often have you used any drugs including marijuana, cocaine or crack, heroin, methamphetamine (crystal meth), hallucinogens, ecstasy/MDMA?

Daily or Almost Daily Weekly Monthly
 Less Than Monthly Never

1/26/2026

NIDA Clinical Trials Network
The Tobacco, Alcohol, Prescription medications, and other Substance (TAPS) Tool

TAPS Tool Part 2 Web Version: 2.0; 4:00; 09-19-17

General Instructions:
 The TAPS Tool Part 2 is a brief assessment for tobacco, alcohol, and illicit substance use and prescription medication misuse in the PAST 3 MONTHS ONLY. Each of the following questions and subquestions has two possible answer choices- either yes or no. Check the box to select your answer.

1. In the PAST 3 MONTHS, did you smoke a cigarette containing tobacco? Yes No
 If "Yes", answer the following questions:
 a. In the PAST 3 MONTHS, did you usually smoke more than 10 cigarettes each day? Yes No
 b. In the PAST 3 MONTHS, did you usually smoke within 30 minutes after waking? Yes No

2. In the PAST 3 MONTHS, did you have a drink containing alcohol? Yes No
 If "Yes", answer the following questions:
 a. In the PAST 3 MONTHS, did you have 4 or more drinks containing alcohol in a day? (Note: This question should only be answered by females). Yes No
 b. In the PAST 3 MONTHS, did you have 5 or more drinks containing alcohol in a day? (Note: This question should only be answered by males). Yes No
 *One standard drink is about 1 small glass of wine (5 oz), 1 beer (12 oz), or 1 single shot of liquor.
 c. In the PAST 3 MONTHS, have you tried and failed to control, cut down or stop drinking? Yes No
 d. In the PAST 3 MONTHS, has anyone expressed concern about your drinking? Yes No

3. In the PAST 3 MONTHS, did you use marijuana (hash, weed)? Yes No
 If "Yes", answer the following questions:
 a. In the PAST 3 MONTHS, have you had a strong desire or urge to use marijuana at least once a week or more often? Yes No
 b. In the PAST 3 MONTHS, has anyone expressed concern about your use of marijuana? Yes No

4. In the PAST 3 MONTHS, did you use cocaine, crack, or methamphetamine (crystal meth)? Yes No
 If "Yes", answer the following questions:
 a. In the PAST 3 MONTHS, did you use cocaine, crack, or methamphetamine (crystal meth) at least once a week or more often? Yes No
 b. In the PAST 3 MONTHS, has anyone expressed concern about your use of cocaine, crack, or methamphetamine (crystal meth)? Yes No

52



52

Nora Individual Service Plan (ISP)

- Communication preferences
- Observing for changes in behavior
- Triggers and steps to avoid the triggers.
- Provide consistent emotional support
- Monitor and report changes in mood or behavior
- Offer gentle reminders for meals
- Provide companionship
- Encourage activities



53



1/26/2026

53



Consulting | Education | Interim | Resources

Next Steps

1/26/2026

54

Behavioral Health Needs Assessment

Facility Characteristics and Needs

Identify needs based on the current prevalence of behavioral health diagnoses of the resident population. This can include looking at mental illness and substance use diagnoses, psychiatric medication use, incidents related to behavioral health, and more.

01

Facility Behavioral Health Capacity

Review and assess what is currently in place to address residents' behavioral health needs. A facility can determine what staff training has been completed and current staff training needs. It can also identify any specialized behavioral health staff and medication management available.

02

Identify Gaps Between Needs and Capacity

Examine the facility needs and its current capacity. This includes education and knowledge barriers and availability of culturally appropriate behavioral health service providers.

03

Develop and Implement Your Plan

Implement quality improvement plans to address any identified gaps.

04

1/26/2026

55



55

Bipolar Disorder Inservice Tool Kit

Hypomania

Hypomania is less intense than mania

- Person often feels very good
- Able to get things done
- Less need for sleep
- Feels (and can be) more creative
- Faster thinking
- Pressured Speech
- Often does not recognize anything is wrong

Hypomania feels good to the person.

[An Overview of Bipolar Disorder for Nursing Facility Staff](#)



CENTER OF EXCELLENCE
FOR BEHAVIORAL HEALTH IN NURSING FACILITIES

Bipolar Disorder In-Service Toolkit

1/26/2026

56



56

On-line Learning vs In-Person Learning

Engagement	With Interaction	Without Interaction
Motivation	High	Low
Learning outcomes	Strong	Weak
Retention	Comparable to in-person	Significantly reduced
Support for struggling learners	Strong	Minimal
Cognitive depth	High	Surface-Level

[Is online learning as effective as in person learning? - California Learning Resource Network](#)

1/26/2026



57

Questions?



1/26/2026

58



29

Disclaimer

“This presentation provided is copyrighted information of Pathway Health. Please note the presentation date on the title page in relation to the need to verify any new updates and resources that were listed in this presentation. This presentation is intended to be informational. The information does not constitute either legal or professional consultation. This presentation is not to be sold or reused without written authorization of Pathway Health.”

59

1/26/2026



59

Reference List

- [Mental health of older adults](#)
- [Screening and Assessment Tools Chart | SAMHSA](#)
- [Ageism-Fact-Sheet-Ageism-Awareness-Day.pdf](#)
- [Is online learning as effective as in person learning? - California Learning Resource Network](#)
- [Psychological Disorders Affecting Older Adults — Talkspace](#)
- [Substance Use in Older Adults DrugFacts | National Institute on Drug Abuse \(NIDA\)](#)
- [Screening and assessment tools for older people | Agency for Clinical Innovation](#)

60

1/26/2026



60