

Tamica Ivey Lpn

AMSN Assignment Ch. 19

COVID-19 has placed a lot of people in unfortunate, frightening situations. But nothing is scarier than having to be confronted with the effects it has had on mental health. During COVID-19 pandemic I continued to work as an LPN. In the nursing facilities residents were having trouble coping with not being able to see their loved ones or having to stay confined to their rooms. Resident's holidays and special occasions were not the same during COVID-19 many residents were not able to see their loved ones because they were sick or hospitalized or vice versa. Therefore, residents' family members were restricted to come into facilities unless they had the proper PPE on and were tested at the doors. It saddened me to see the resident's because most of them appeared depressed and sad. The staff was the only "family" at the time the residents were able to see, however that just wasn't enough. The country had taken action to keep the residents safe but at what cost? I saw residents losing family and close friends left and right. I feel like the pandemic changed the ways residents and residents' families were able to grieve, because they couldn't be present at their loved one's bedside, thus religious practices and traditions were not performed. Some residents who passed away with COVID-19 weren't buried at their planned plots but at a plot designated for people who also had died from COVID-19. This raised the issue if we were violating the resident's rights to show compassion and respect for them and their unique attributes. The laws set in place made it impossible to maintain ANA code of ethics provision 1.

The overall effect of the pandemic has been linked with worsening psychiatric symptoms. However, the long-term effect from direct COVID-19 infection has been associated with no or mild symptoms. Studies exhibited the long-term prevalence of anxiety, depression, PTSD, and sleep disturbances to be comparable to general population levels. (Bourmistrova et al., 2022)

For residents who had dementia this was a nightmare. Dementia residents on the unit refused to stay in their rooms regardless of what was happening in the world. This became very difficult for me because it is the residents right to come and go as they please. However, by allowing the resident freedom to wander the halls, also puts the residents at risk. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care. As a nursing profession, standards should be outlined within and external to institutions of work that dictate ethical obligations of care and need to report any deviations from appropriateness. It's important to understand safety, quality and environmental considerations that are conducive to best patient care outcomes. (Haddad LM, et al., 2022). This became an ethical issue because I didn't want to violate the residents' rights however, it was also my duty to keep them safe. I believed that keeping them safe was key, but it really opened my eyes to other provisions we were not able to uphold.

Works Cited

Bourmistrova, N. W., Solomon, T., Braude, P., Strawbridge, R., & Carter, B. (2022). Long-term effects of COVID-19 on mental health: A systematic review. *Journal of Affective Disorders*, 299, 118–125.
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Haddad LM, Geiger RA. Nursing Ethical Considerations. [Updated 2022 Aug 22]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK526054/>