

Assessment of Client/Family (5 points)	Nursing Diagnosis & Goal of Teaching (5 points)	Interventions (5 points)	Methods/Teaching Tools (2 points)	Evaluation (3 points)
<p>Level of motivation for learning:</p> <p>The patient is well motivated to learn. He has even practiced his own methods of helping to minimize the voices in his head. The patient has previously expressed interest in learning new ways to cope with his mental illness.</p> <p>Barriers to effective learning:</p> <p>Some barriers to effective learning given this patients scenario would be a possible lack in resources at the long-term care facility. Having limitations that most people do not have by being confined mostly to his individual room with little privacy.</p> <p>Health beliefs/values:</p> <p>The patient has made it very clear that he has a very strong Christian religious faith. He stated that he reads the bible regularly and believes that his</p>	<p>Nursing Diagnosis:</p> <p>Risk for suicidal behavior and defense coping related to schizoaffective disorder and major depressive disorder as evidenced by the voices in his head telling him to hurt himself and not having an adequate support system present in his life.</p> <p>Goal of Teaching:</p> <p>The patient will have an overall improved mood and become more involved with activities or hobbies after 1 month of coping. This may be done by talking to others about his feelings, participating in activities more frequently, or by doing physical activity 30 minutes a day for at least 4 days a week.</p>	<p>Intervention 1:</p> <p>Help to provide patient education on how just 30 minutes of exercise a day can help boost overall mood and well-being. This includes something as simple as walking or ROM exercises.</p> <p>Intervention 2:</p> <p>Explain to patient the importance of reaching out to others for support when dealing with a mental illness. Trying to connect with people and talk about how you're feeling when you are hearing voices can help to diminish them and improve overall mood.</p>	<p>Method 1:</p> <p>Discussion with patient using pamphlet on depression. Will highlight key components in relation to patients' diagnosis of major depressive disorder.</p> <p>Method 2:</p> <p>Discussion with patient using handout on understanding psychosis. Will highlight key components that relate directly to the patients when they have moments of disconnecting from reality and distancing themselves from others.</p>	<p>Discuss how the client/family received the teaching:</p> <p>The patient is anticipated to receive the teaching very well. Given that they are willing to listen and improve their mental well-being, it is expected that they will greatly benefit from this teaching plan.</p> <p>Identify strengths/weaknesses of the client or family in receiving teaching:</p> <p>A major strength of the patient is that they are understanding of their mental illness and willing to improve their well-being. The patient's biggest weakness is having little to no family support. The patient states that the only person who supports them is a sister-in-law, and that even she has not shown up to see him since his admission.</p>

faith is the reason his health is not significantly worse than its current state.

Psychosocial development:

The patient has shown independence by attempting to cope with the voices he hears independently. The patient was well dressed, groomed, and appeared to keep his part of the room well kept.

Cognitive development:

The patient is cognitively developed at the expected level of his age. He states that he holds an associate degree, proving that he has had a willingness to learn beyond just a high school education level. The patient uses proper grammar and actively proves he understands conversation by responding appropriately. The patient has no signs of mental impairment.

Intervention 3:

Discuss the importance of maintaining a healthy balanced diet as well as sleep schedule.

Suggest modifications to improve the teaching plan (what would have improved the plan?):

A major improvement to this teaching plan could have been having the patient and supportive family sit down together to go about a plan that would be of the best interest to the patient's mental health. It is always easier to improve when you have a great support system behind you to drive you to meet your goals. Another improvement lies in the patient's unfortunate limitations on some of the food he eats. I have in his plan to maintain a healthy diet; however, being in a long-term care facility it can be a challenge to eat the variety of foods he may want.

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References (2) (APA): (5 points)

References

Hall, T., Kakuma, R., Palmer, L., Minas, H., Martins, J., & Kermode, M. (2019). Social inclusion and exclusion of people with mental illness in Timor-

Leste: a qualitative investigation with multiple stakeholders. *BMC public health*, 19, 1-13.

Learning, J. & B. (2022). 2023 Nurse's drug handbook. Jones & Bartlett Learning.