

Psychiatric-Mental Health Nursing, 2e (Potter/Moller)

Chapter 1 Framework of Psychiatric-Mental Health Nursing

1) A staff member who is unlicensed assistive personnel (UAP) is overheard saying that a patient with a mental illness is not really "sick." Which response should the nurse make to the UAP?

1. "Patients with mental illness believe they are ill."
2. "A mental illness disrupts thinking and daily functioning."
3. "Mental illnesses are more debilitating than physical illnesses."
4. "Since so few people have mental illnesses, it really does not matter."

Answer: 2

Explanation: 2. A mental illness is a medical condition that disrupts a person's thinking, feeling, mood, ability to relate to others, and daily functioning. The response that patients with mental illness believe they are ill is not accurate or therapeutic. Mental illnesses are not always more debilitating than physical illnesses. Many individuals are affected by mental illness.

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Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.C.1. Value seeing health care situations "through patients' eyes." | AACN Essential Competencies: VI.2. Use inter-and intraprofessional communication and collaborative skills to deliver evidence-based, patient-centered care | NLN Competencies: Context and Environment: Ethical Comportment: Examine personal beliefs, values, and biases with regard to respect for persons, human dignity, equality, and justice; explore ideas of nurse caring and compassion | Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 1. Discuss the epidemiology of psychiatric and mental health disorders.

MNL LO: 1. Recognize the epidemiology and classification of psychiatric-mental health disorders.

2) A staff nurse states that adolescents are too young to develop a mental illness. Which information should the nurse manager include in response?

1. More than 12 million adolescents were treated for a mental illness in 2016.
2. Adolescents are not usually diagnosed with a mental illness until they are older.
3. Mental illness in adolescents is really an undiagnosed physical illness.
4. Mental illness develops in adolescents who live in toxic environments.

Answer: 1

Explanation: 1. In 2016, 12.5 million or 50% of the total population with mental illnesses are adolescents ages 12 to 17. Adolescents can be diagnosed with a mental illness at any age. Mental illness in adolescents is not really an undiagnosed physical illness. Mental illness can develop in any type of environment.

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Cognitive Level: Understanding

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: I.3. Use skills of inquiry, analysis, and information literacy to address practice issues | NLN Competencies: Context and Environment: Practice-Know-How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 1. Discuss the epidemiology of psychiatric and mental health disorders.

MNL LO: 1. Recognize the epidemiology and classification of psychiatric-mental health disorders.

3) The nurse is preparing a presentation on serious mental illness. Which health problem should be included? (Select all that apply.)

- 1. Major depressive disorder
- 2. Schizophrenia
- 3. Adjustment reaction
- 4. Bipolar disorder
- 5. Social phobia

Answer: 1, 2, 4

Explanation: 1. Serious mental illnesses create significant disability in the individual's ability to achieve life goals. Serious mental illnesses include major depressive disorder, schizophrenia, and bipolar disorder.

2. Serious mental illnesses create significant disability in the individual's ability to achieve life goals. Serious mental illnesses include major depressive disorders, schizophrenia, and bipolar disorder.

3. Although they can have distressing and disabling effects, adjustment reactions do not necessarily interfere with the achievement of life goals.

4. Serious mental illnesses create significant disability in the individual's ability to achieve life goals. Serious mental illnesses include major depressive disorder, schizophrenia, and bipolar disorder.

5. Although they can have distressing and disabling effects, social phobias do not necessarily interfere with the achievement of life goals.

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Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: I.3. Use skills of inquiry, analysis, and information literacy to address practice issues | NLN Competencies: Context and Environment: Practice-Know-How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts: Nursing Process: Planning/Teaching and Learning

Learning Outcome: 1. Discuss the epidemiology of psychiatric and mental health disorders.

MNL LO: 1. Recognize the epidemiology and classification of psychiatric-mental health disorders.

4) A nursing student is writing a research paper on ways to improve psychiatric nursing outcomes for serious mental illness. Which type of research would be most useful?

1. Nursing
2. Psychosocial
3. Educational
4. Improved functioning

Answer: 4

Explanation: 4. More emphasis needs to be placed on improved functioning, a hallmark of recovery in mental illness. A significant amount of research is focused on small goals or gains and minimization of medication side effects. Nursing, psychosocial, and educational research have not been identified as the most useful.

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Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: I.3. Use skills of inquiry, analysis, and information literacy to address practice issues | NLN Competencies: Context and Environment: Practice-Know-How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts: Planning/Teaching and Learning

Learning Outcome: 2. Distinguish the unique contributions of psychiatric-mental health nursing to other areas of nursing.

MNL LO: 2. Relate the practice skills and domains of wellness to care of patients with psychiatric-mental health disorders.

5) The parents of a young adult patient who is hospitalized for depression asks what they should be doing to help. What is the most appropriate response the nurse should make?

1. Refuse to talk with family members because of confidentiality restrictions.
2. Provide the family with education, information, and referral resources.
3. Tell the family members that their son is too old for them to be involved in his care.
4. Inform the family that only the psychiatrist can discuss their son's care.

Answer: 2

Explanation: 2. Although confidentiality must be observed, there are many aspects of care in which a patient's family can help. An important role of the psychiatric-mental health nurse is to ensure that the family is involved in the provision of care. Work with the family includes crisis intervention, education about the illness, and referral to support groups. Family involvement in care is not limited by the patient's age. A psychiatric nurse is qualified to discuss mental health treatment.

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Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX.3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management, and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: Knowledge: family dynamics | Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 2. Distinguish the unique contributions of psychiatric-mental health nursing to other areas of nursing.

MNL LO: 2. Relate the practice skills and domains of wellness to care of patients with psychiatric-mental health disorders.

6) The nurse is asked to identify the most important skill in psychiatric-mental health nursing. Which response should the nurse make?

1. "Making correct nursing diagnoses."
2. "Supporting advocacy."
3. "Developing a therapeutic relationship and the corresponding therapeutic use of self."
4. "Involving the patient in treatment planning."

Answer: 3

Explanation: 3. The skill set for psychiatric nursing involves all the skills important in all nursing practice, such as making accurate nursing diagnoses, supporting advocacy, and involving the patient in treatment planning. However, the key skill is development of the therapeutic relationship and corresponding therapeutic use of self.

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Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: I.3. Use skills of inquiry, analysis, and information literacy to address practice issues | NLN Competencies: Context and Environment: Practice-Know-How: Apply professional standards; show accountability for nursing judgment and actions; develop advocacy skills | Nursing/Integrated Concepts: Nursing Process:

Implementation

Learning Outcome: 2. Distinguish the unique contributions of psychiatric-mental health nursing to other areas of nursing.

MNL LO: 2. Relate the practice skills and domains of wellness to care of patients with psychiatric-mental health disorders.

7) A patient is demonstrating manifestations of obsessive-compulsive disorder. Which action should the nurse take if unfamiliar with the assessment data and behaviors associated with this disorder?

1. Document all subjective and objective data provided by the patient.
2. Ask the primary health provider to identify needed subjective and objective assessment data.
3. Research obsessive-compulsive disorder in the medical dictionary.
4. Consult the *Diagnostic and Statistical Manual of Mental Disorders* for diagnostic criteria.

Answer: 4

Explanation: 4. The *Diagnostic and Statistical Manual of Mental Disorders* provides diagnostic criteria that all members of the health care team will use in the diagnosis process and that will serve as a resource for assessment and analysis of data. Asking the primary health provider to identify assessment data is not appropriate. A medical dictionary is not specific enough for this purpose. Documentation of all subjective and objective data is not the most appropriate action to determine the assessment and behaviors associated with obsessive-compulsive disorder.

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Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IV.6. Evaluate data from all relevant sources, including technology, to inform the delivery of care | NLN Competencies: Context and Environment: Practice-Know-How: Apply professional standards; show accountability for nursing judgment and actions; develop advocacy skills | Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 1. Discuss the epidemiology of psychiatric and mental health disorders.

MNL LO: 1. Recognize the epidemiology and classification of psychiatric-mental health disorders.

8) The nurse reviews the Murphy-Moller wellness model before assessing a patient. On which element should the nurse focus when assessing the sociological domain? (Select all that apply.)

1. Environment
2. Relationships with others
3. Religious faith
4. Moral development
5. Nutrition

Answer: 1, 2

Explanation: 1. According to the Murphy-Moller wellness model, five major wellness domains are used to approach the understanding and treatment of psychiatric illnesses: biological, psychological, sociological, cultural, and spiritual. Environmental factors, such as living conditions and relationships with others, occur within the sociological domain.

2. According to the Murphy-Moller wellness model, five major wellness domains are used to approach the understanding and treatment of psychiatric illnesses: biological, psychological, sociological, cultural, and spiritual. Environmental factors, such as living conditions and relationships with others, occur within the sociological domain.

3. Religious faith falls within the spiritual domain.

4. Moral development is a part of the psychological domain.

5. Nutrition is a part of the biological domain.

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Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.8. Describe the limits and boundaries of therapeutic patient-centered care | AACN Essential Competencies: IX.1. Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic, and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches | NLN Competencies: Context and Environment: Practice-Know-How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts: Nursing Process: Assessment

Learning Outcome: 3. Evaluate a recovery-focused, wellness approach to patient care based on five domains: biological, psychological, sociological, cultural, and spiritual.

MNL LO: 2. Relate the practice skills and domains of wellness to care of patients with psychiatric-mental health disorders.

9) The nurse is planning care for a male patient who is homeless and diagnosed with bipolar disorder. Based on a wellness model, which service would support this patient's sociological domain?

1. Medication monitoring
2. Housing assistance
3. Nutrition counseling
4. Individual psychotherapy

Answer: 2

Explanation: 2. Medication monitoring and nutritional counseling address the biological domain in the wellness model. Housing assistance would support this patient's sociological domain.

Individual psychotherapy addresses the psychological domain.

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Cognitive Level: Applying

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX.3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: Practice-Know-How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: 3. Evaluate a recovery-focused, wellness approach to patient care based on five domains: biological, psychological, sociological, cultural, and spiritual.

MNL LO: 2. Relate the practice skills and domains of wellness to care of patients with psychiatric-mental health disorders.

10) The nurse develops a daily exercise program for patient in a mental health facility. Which wellness domain does this type of program address?

1. Psychological
2. Sociological
3. Biological
4. Cultural

Answer: 3

Explanation: 3. The psychological domain consists of understanding our attitudes and behaviors. The sociological domain focuses on all aspects of the environment, including interpersonal relationships. The biological domain refers to the ability of all body systems to function in a manner compatible with life and social function and includes exercise. The cultural domain includes customs and beliefs that are rooted in patients' cultural background.

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Cognitive Level: Understanding

Client Need/Sub: Health Promotion and Maintenance

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX.3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management, and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: Practice-Know-How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: 3. Evaluate a recovery-focused, wellness approach to patient care based on five domains: biological, psychological, sociological, cultural, and spiritual.

MNL LO: 2. Relate the practice skills and domains of wellness to care of patients with psychiatric-mental health disorders.

11) A patient with a history of depression intends to take sleeping pills and "just end it all." In which level of the Murphy-Moller wellness model is the patient demonstrating characteristics?

1. Recovery
2. Restoration
3. Rehabilitation
4. Relapse

Answer: 4

Explanation: 4. In level 1, the patient's return of symptoms or relapse can be life-threatening, as evidenced by the comment about taking sleeping pills to "end it all." In level 2, recovery, symptoms have stabilized. In level 3, rehabilitation, symptoms no longer interfere with normal activities of daily living or regular conversation. Restoration is not an identified part of the wellness model.

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Cognitive Level: Analyzing

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX.1. Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic, and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches | NLN Competencies: Context and Environment: Practice-Know-How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts: Nursing Process: Assessment

Learning Outcome: 4. Identify patient care needs within three levels of wellness: initial onset/relapse, recovery, and rehabilitation.

MNL LO: 3. Examine the levels of wellness and factors that affect health and recovery for patients with psychiatric-mental health disorders.

12) A patient recently diagnosed with schizophrenia is taking antipsychotic medication to control hallucinations. Which is an appropriate activity for level 2 of wellness that could be included in this patient's treatment? (Select all that apply.)

1. Referral to a job training program
2. Medication management education
3. Group therapy
4. Inpatient admission
5. Family support group

Answer: 2, 3, 5

Explanation: 1. Referral to a job training program would be appropriate in the level 3 phase.

2. At level 2 of wellness, the patient is stable but is not yet ready to focus on activities related to the future. Psychoeducational activities, such as providing medication education, are important at this stage.

3. Mutual support groups, including the sharing of experiential knowledge and skills, play an invaluable role in recovery.

4. Inpatient admission might be appropriate in the level 1 phase.

5. Family members, peers, providers, faith groups, community members, and other allies form vital support networks in the level 2 phase.

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Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX.3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management, and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: Practice-Know-How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: 4. Identify patient care needs within three levels of wellness: initial onset/relapse, recovery, and rehabilitation.

MNL LO: 3. Examine the levels of wellness and factors that affect health and recovery for patients with psychiatric-mental health disorders.

13) The nurse is preparing a teaching tool on the treatment of mental health disorders. Which fundamental principle of mental health recovery should the nurse include?

1. Recovery is culturally unrelated.
2. Recovery is holistic.
3. Recovery begins with despair.
4. Recovery is solitary.

Answer: 2

Explanation: 2. Recovery is culturally based and influenced. Recovery encompasses an individual's whole life, including mind, body, spirit, and community. Recovery emerges from hope. Recovery is supported through relationship and social networks.

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Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: IX.7. Provide appropriate patient teaching that reflects developmental stage, age, culture, spirituality, patient preferences, and health literacy considerations to foster patient engagement in their care | NLN Competencies: Context and Environment: Practice-Know-How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts: Planning/Teaching and Learning

Learning Outcome: 4. Identify patient care needs within three levels of wellness: initial onset/relapse, recovery, and rehabilitation.

MNL LO: 3. Examine the levels of wellness and factors that affect health and recovery for patients with psychiatric-mental health disorders.

14) It is reported during an interprofessional conference that a patient being treated for a mental health disorder refuses to continue group therapy. Which response should the nurse make?

1. "Recovery is probably unlikely for this patient."
2. "The patient is experiencing a setback, not an end to recovery."
3. "The patient should be told that group therapy is the only route to recovery."
4. "The patient should be punished for refusing to participate."

Answer: 2

Explanation: 2. Individuals optimize their autonomy and independence to the greatest extent possible by leading, controlling, and exercising choice over the services and supports that assist in recovery and resilience. Setbacks are a natural, though not inevitable, part of the recovery process. Recovery pathways are highly personalized. Recovery is based on respect; punishment is not appropriate.

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Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.B.3. Provide patient-centered care with sensitivity and respect for the diversity of human experience | AACN Essential Competencies: IX.3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management, and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: Practice-Know-How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts: Nursing Process: Implementation/Communication and Documentation

Learning Outcome: 4. Identify patient care needs within three levels of wellness: initial onset/relapse, recovery, and rehabilitation.

MNL LO: 3. Examine the levels of wellness and factors that affect health and recovery for patients with psychiatric-mental health disorders.

15) The nurse is caring for patients who have experienced traumatic events. Which should the nurse identify as a goal of care for these patients? (Select all that apply.)

1. Understand symptoms as attempts to cope.
2. Provide regular medication education and monitoring.
3. Collaborate between provider and consumer at all phases of service delivery.
4. Protect patients with a history of trauma from physical harm and re-traumatization.
5. Focus on what has happened to the person rather than what is wrong with the person.

Answer: 1, 3, 4, 5

Explanation: 1. Trauma-informed care (TIC) is designed to inform caregivers about and sensitize them to trauma-related issues present in trauma survivors. One goal of TIC is to understand that the patient's symptoms are an attempt at coping.

2. Medication management is not an essential part of TIC.

3. TIC is designed to inform caregivers about and sensitize them to trauma-related issues present in trauma survivors. One goal of TIC is to collaborate between provider and consumer at all phases of service delivery.

4. TIC is designed to inform caregivers about and sensitize them to trauma-related issues present in trauma survivors. One goal of TIC is to protect patients with a history of trauma from physical harm and re-traumatization.

5. TIC is designed to inform caregivers about and sensitize them to trauma-related issues present in trauma survivors. One goal of TIC is to focus on what has happened to the person rather than what is wrong with the person.

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Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.B.4. Assess presence and extent of pain and suffering |

AACN Essential Competencies: IX.3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management, and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment: Practice-Know-How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: 6. Examine significant concepts related to providing psychiatric and mental health.

MNL LO: 4. Apply the significant concepts related to providing nursing care to patients with psychiatric-mental disorders.

16) A patient being discharged from a substance abuse rehabilitation facility plans to join Nar-Anon to find new connections and avoid former associates. Which stage of hope is this patient demonstrating?

1. Bracing for negative outcomes
2. Continuously evaluating signs to reinforce selected goals and the revision of these goals
3. Developing a realistic appraisal of personal resources and external conditions and resources
4. Making a realistic appraisal of an event and the threat to self

Answer: 3

Explanation: 3. The patient's stated plan does not include bracing for negative consequences. Although it may be part of the plan, this statement does not indicate continuous evaluation. The patient is making a realistic appraisal of needs and resources by deciding to join a support group to find new connections and avoid those that negatively impact recovery. A realistic appraisal of events has already occurred.

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Cognitive Level: Analyzing

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.B.4. Assess presence and extent of pain and suffering |

AACN Essential Competencies: IX.9. Monitor client outcomes to evaluate the effectiveness of psychobiological interventions | NLN Competencies: Context and Environment: Practice-Know-

How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts:

Nursing Process: Assessment

Learning Outcome: 6. Examine significant concepts related to providing psychiatric and mental health.

MNL LO: 4. Apply the significant concepts related to providing nursing care to patients with psychiatric-mental disorders.

17) The nurse is attending a city council meeting where zoning issues are being discussed. Which should the nurse identify is occurring when community members voice concerns over the placement of a group home for patients with mental health disorders?

1. Violation of the Patient Self-Determination Act (PSDA)
2. Concern about the cost of having a group home in the community
3. Vocalization of a stigma against people with mental health disorders
4. Refusal to adhere to the Health Insurance Portability and Accountability Act (HIPAA)

Answer: 3

Explanation: 3. The community members voicing concerns over the placement of group home for patients with mental health disorders demonstrates a stigma surrounding mental illness. The community members may have attitudes, misconceptions, fears, and biases that need to be overcome toward mental illness and individuals with these health problems. The community members' concerns are not a violation of PSDA. The concern is not about the cost or refusal to adhere to HIPAA.

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Cognitive Level: Analyzing

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.10. Describe basic principles of consensus building and conflict resolution | AACN Essential Competencies: IX.10. Facilitate patient-centered transitions of care, including discharge planning and ensuring the caregiver's knowledge of care requirements to promote safe care | NLN Competencies: Context and Environment: Practice-Know-How: apply health promotion/disease prevention strategies | Nursing/Integrated Concepts: Nursing Process: Assessment

Learning Outcome: 5. Examine factors that affect patient health and recovery.

MNL LO: 3. Examine the levels of wellness and factors that affect health and recovery for patients with psychiatric-mental health disorders.

18) A patient with a mental health disorder refuses to comply with treatment expectations because the payment by the health insurance plan for the services is low and the patient has limited financial resources. Which federal law should the nurse investigate that would be helpful for this patient?

1. Mental Health Bill of Rights
2. Patient Self-Determination Act (PSDA)
3. Mental Health Parity and Addiction Equity Act (MHPAE)
4. Protection and Advocacy for Mentally Ill Individuals Act of 1986

Answer: 3

Explanation: 3. The MHPAE requires health plans that cover mental health and substance abuse treatment to offer benefits on par with the treatment of nonpsychiatric medical conditions. The Mental Health Bill of Rights does not address health insurance coverage. The PSDA gives patients the right to refuse treatment; however, the patient is refusing treatment because of health insurance coverage. The Protection and Advocacy for Mentally Ill Individuals Act provides funding for agencies to investigate abuse and neglect of individuals with mental illnesses.

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Cognitive Level: Applying

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: I.B.9. Assess level of patient's decisional conflict and provide access to resources | AACN Essential Competencies: V.8. Discuss the implications of healthcare policy on issues of access, equity, affordability and social justice in healthcare delivery | NLN Competencies: Context and Environment: Ethical Comportment: Act in accordance with policies and procedures that guide economic behavior in the practice environment | Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: 5. Examine factors that affect patient health and recovery.

MNL LO: 3. Examine the levels of wellness and factors that affect health and recovery for patients with psychiatric-mental health disorders.