

SFHFMH13

Help an individual to feel more psychologically secure



Overview

This standard covers the way in which multidisciplinary teams deal with an individual's sense of psychological insecurity and distress. The more insecure an individual feels, the more likely they are to feel fearful, paranoid and potentially violent. Sudden feelings of insecurity may be triggered by events or the environment, changes in the team and relationships with other individuals. Whatever the cause, these insecurities need to be moderated, in collaboration with the individual, to decrease the risk of violence and improve the individual's capacity to manage themselves safely. Safe and effective management of psychological distress provides a secure foundation for more profound psychologically based treatments and therapies. Such management needs to be clear and consistent throughout the multidisciplinary team; the Care Programme Approach and partnership working contributes to this clarity and consistency.

Users of this standard will need to ensure that practice reflects up to date information and policies.

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Performance criteria

- You must be able to:*
- P1 formulate with the individual why they feel psychologically vulnerable, insecure or distressed and how to try to deal with this (e.g. factors in the physical environment, relationships with staff or other individuals, choice of treatment, traumatic memories of childhood fear)
 - P2 ensure that staff understand each individual's formulation and individual trigger factors and discuss with the team the range of responses and interventions that could decrease their anxiety and insecurity
 - P3 provide regular opportunities to enable the individual to question, clarify and understand:
 - P3.1 which staff member has been assigned to them (e.g. primary nurse) and how and when they can be contacted
 - P3.2 their care package
 - P3.3 why they have been admitted, and if detained, the reason for detention, the powers used and their extent, and rights of appeal
 - P3.4 what their rights are with regard to consent to treatments, complaints procedures, and access to independent help and advocacy
 - P3.5 what may happen if they become disturbed or violent (eg as in the individualised care plan)
 - P4 help the individual draw up or review an Advance Statement consistent with their care plan for how they wish to be treated if they become disturbed or violent (e.g. what interventions should be used)
 - P5 encourage and support the individual in developing insight and taking responsibility for recognising his/her early warning signs of disturbed/violent behaviour and other risk behaviours (eg relapse signature linked to the risk assessment, self harm)
 - P6 encourage and support positive changes in the individual's behaviour
 - P7 review regularly the effectiveness of interventions and the formulation of the individual's vulnerability, insecurity or distress
 - P8 contribute to the modifications of an individual's care package in the light of the reviewed and new information

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Knowledge and understanding

You need to know and understand:

- K1 the character and origins of distress, insecurity and vulnerability in individuals
- K2 mental health disorders
- K3 offending behaviours, especially violent behaviour not related to mental illness
- K4 psychopathy and personality disorder
- K5 self-harming behaviours, including ligation
- K6 drug, alcohol or substance misuse
- K7 the impact of the physical environment and the changing dynamics within the ward/unit/community environment on the individuals as individuals and as a group
- K8 the range of treatments available at your own establishment
- K9 the effectiveness of different treatments, singly and in combination
- K10 inquiry reports on forensic mental health settings, including recommendations and analysis of practice in the treatment of individuals
- K11 psychological therapies used in your establishment
- K12 strategies individuals can use to cope with events and situations
- K13 requirements of current mental health legislation and regulations
- K14 techniques of questioning, discussion and conversation
- K15 professional boundaries to be maintained
- K16 the religious beliefs of different cultures
- K17 the effects of culture and religious beliefs on individual communication styles
- K18 the different features services must have to meet people's gender, culture, language or other needs
- K19 the effects of different cultures and religions on care management
- K20 the principle of confidentiality and what information may be given to whom
- K21 how information obtained from individuals should be recorded and stored

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Additional Information

External Links

This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: HWB4 Enablement to address health and wellbeing needs

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