

FMH11 Support an individual in forensic mental health care to participate in treatment

OVERVIEW

This standard covers the work of staff in encouraging individuals in the care of forensic mental health services to play a part in planning and implementing their assessment and treatment. It is intrinsic to the Care Programme Approach. It is a significant component of engagement with individuals. It recognises that individuals can make engagement and treatment difficult. The competence describes how staff can help individuals to identify and work through their difficulties, thus providing a positive experience that can be linked in with the process of recovery. Users of this standard will need to ensure that practice reflects up to date information and policies. Version No 1

KNOWLEDGE AND UNDERSTANDING

You will need to know and understand:

1. interview techniques and how to use them
2. mental health disorders
3. psychopathy and personality disorder
4. self-harming behaviours, including ligation
5. offending behaviours, especially violent behaviour not related to mental illness
6. substance misuse
7. anger management
8. psycho education techniques
9. the range of medical, psychological, nursing and psychosocial interventions available at your own establishment and elsewhere
10. evidence of the effectiveness of different treatments, singly and in combination
11. inquiry reports on forensic mental health settings, including recommendations and analysis of practice in the treatment of individuals
12. impact of legislation and different offending modes on recovery and recidivism
13. a range of therapeutic intervention techniques
14. a range of communication styles and methods, including those of interviewing
15. the effect on risk when an individual is either non-compliant and/or disengages from their treatment plan
16. assessing the immediacy and gravity of present and potential risk
17. the assessing impact of the physical environment and structures on present and potential risk behaviours
18. gathering relevant and contemporary information and methodologies for doing so (eg

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19. techniques for monitoring and evaluating the immediacy and gravity of risk behaviours and previous offending
20. identifying benefits to individuals from different treatments
21. the religious beliefs of different cultures
22. the effects of culture and religious beliefs on individual communication styles
23. the different features services must have to meet people's gender, culture, language or other needs
24. the effects of different cultures and religions on care management
25. the principle of confidentiality and what information may be given to whom
26. how information obtained from individuals should be recorded and stored
27. relevant clinical audit
28. the evidence base and research on the participation of individuals in their treatment.

PERFORMANCE CRITERIA

You must be able to do the following:

1. engage the individual proactively (eg by going and talking to them rather than waiting for them to come to you)
2. develop an open and honest dialogue with the individual about their treatment which also respects their experience
3. determine the level of the individual's awareness of their symptoms when they are psychotic or suffering from an acute stage of their mental disorder
4. determine how far the individual is aware of how others experience them and how their own thoughts, feelings and behaviour are different when they are unwell
5. engage the individual in a way that is sensitive to their cognitive functioning and ability
6. assess how far the individual is ready for change (eg 'stage of change' in Motivational Interviewing) and willing to comply with the whole, or parts, of their care, treatment and management plans
7. help the individual draw up or review a realistic Advance Statement consistent with their care plan for how they wish to be treated if they become unwell, disturbed or violent (eg what interventions are available and should be used)
8. support the individual in identifying triggers or patterns that can lead to any disturbed or violent behaviour or emotional distress
9. encourage the individual to identify treatments of choice among the available medical, psychological, nursing and psychosocial interventions
10. encourage the individual to recognise the negative aspects of not participating upon their health, criminality and length of stay
11. evaluate the benefits of positive risk taking and adjust the management plans accordingly.

ADDITIONAL INFORMATION

This National Occupational Standard was developed by Skills for Health. 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