

FMH12 Manage hostility and risks with noncooperative individuals, families and carers

OVERVIEW

This standard covers the challenging task of influencing and persuading an individual (and perhaps family and carer) who is opposed to or unable to go along with the treatment proposed or unwilling to help shape that treatment. The therapeutic goal of practitioners is to work jointly and collaboratively with the individual through the Care Programme Approach; at times it may not be possible. It is also important to identify the best member of the multidisciplinary team to manage this lack of co-operation.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.Mental health disorders
- 2.Learning disability
- 3.Psychopathy and personality disorder
- 4.Self-harming behaviours, including ligation
- 5.Offending behaviours, especially violent behaviour not related to mental illness
- 6.Drug, alcohol or substance misuse
- 7.The range of treatments available at your own and other establishments
- 8.Strategies individuals can use to cope with events and situations
- 9.Inquiry reports on forensic mental health settings, including recommendations and analysis of practice in the treatment of non-cooperative individuals
- 10.Local admission criteria
- 11.Current mental health legislation and regulations
- 12.Codes of professional conduct
- 13.Negotiation
- 14.Theory and practice of managing aggression
- 15.Maintaining post-incident relationships
- 16.Theory and practice of de-escalating aggression
- 17.Local policy and procedures on managing aggression
- 18. The religious beliefs of different cultures
- 19. The effects of culture and religious beliefs on individual communication styles
- 20.The different features services must have to meet people's gender, culture, language or other needs
- 21. The effects of different cultures and religions on care management

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22.The principle of confidentiality and what information may be given to whom 23.How information obtained from individuals should be recorded and stored

PERFORMANCE CRITERIA

You must be able to do the following:

- 1.use the agreed clinical approach to managing hostility and risks as decided by the multidisciplinary team
- 2.show that you are willing to enter a discussion with the individual, carer or family member and promote working in partnership with them by initiating conversations (e.g. routinely, when distressing or sensitive issues need to be discussed)
- 3.remind the individual, carer or family member, respectfully, and as often as necessary, of the mechanism by which the individual has been admitted (e.g. under mental health legislation, the decision of the courts) and that the decisions have been made in the name of public safety, their health and their safety
- 4.respond respectfully to individuals, carers and families when they are distressed, angry or fearful
- 5.create opportunities to consider with all parties how their knowledge and experience of the individual can inform and contribute to the care package (e.g. encourage and invite involvement in CPA reviews)
- 6.communicate verbally and non-verbally with the individual, carer or family member in a professional and consistent manner
- 7.identify what formal, therapeutic intervention is needed to address the impact of the events

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: HWB3 Protection of health and wellbeing