

ABILITY TO COLLABORATIVELY DELIVER AN INPATIENT CARE PLAN

The competences in this section relate to the collaborative delivery of an inpatient care plan. These competences are for those with a core profession and/or those with sufficient and appropriate training.

Knowledge

An ability to draw on knowledge that while patients are admitted to an inpatient ward the key priority of a care plan (treatment and intervention) is to reduce the intensity and frequency of the crisis including related harmful thoughts and behaviours, as well as increase the patient's safety and ability to cope

Delivering an inpatient care plan

An ability to work collaboratively working with the patient and their family and carers whilst delivering their care plan

An ability to be honest about the limitations that the Mental Health Act (MHA) may have on the ability for the patient and their family and carers to have full control and choice over the treatments and interventions they receive

An ability to promote informed choice regarding treatments or interventions, which comprise an inpatient care plan, by working collaboratively with patients and their family and carers

An ability to gauge motivation and preference for a particular treatment or intervention option, considering the impact of any treatment or intervention strategies that have already been tried

An ability to discuss any differences in treatment or intervention preferences with patients and their family and carers, and make clear, if required, the reasons why it may be important to focus on treatments or interventions which are less appealing

An ability to provide the patient and their family and carers with sufficient information about the treatment or intervention options, such that they are:

aware of the range of options available in the inpatient service

in a position to make an informed choice from the options available to them

An ability to ensure that the patient and their family and carers have a clear understanding of the treatments or interventions being offered (for example, their broad content and the way they usually progress)

While maintaining a positive stance, an ability to convey a realistic sense of:

the effectiveness and scope of each treatment or intervention

any challenges associated with each treatment or intervention

An ability to use clinical judgement to determine whether the patient's agreement to a treatment or intervention is based on a collaborative choice or appears to be a passive agreement resulting from the inherent power imbalance present in inpatient care, particularly when they are under section of the MHA (and if so, an ability to address this)

An ability to discuss issues empathically, but also to move the situation forward by working with the patient to develop a concrete care plan of appropriate treatments and interventions that aim to contain the current crisis and increase their safety

When a treatment or intervention has to be offered against the patient's will as part of their MHA section, an ability to ensure that the rationale for the treatment has been clearly explained, all options to collaboratively deliver the treatment or intervention are exhausted, and they have had several opportunities to ask questions

An ability to ensure that the treatments and interventions communicated with the appropriate parties and is collaboratively agreed, whenever possible

An ability to help the patient mobilise their social family and carers and promote the inclusion of their family and carers in the care plan whenever possible

An ability to ensure that the treatments and interventions offered as part of an inpatient care plan are documented in their clinical notes