Protective factors; Bridging the gap between recovery and violence risk assessment in Mental Health Nursing

Jodie Alder

University of Manchester – PhD Student
South Staffordshire and Shropshire Foundation Mental health Trust – Forensic Mental health nurse
Introduction -

* A disclaimer and an apology...

* Literature review as part of on-going PhD

* Nursing experience of assessing risk
Objectives -

* The assessment of Violence risk in mental health
* The recovery model
* Protective factors
* How the three can be combined
* Practical implementation
Mental health nurses are key agents in the assessment of risk of violence.

Safety planning forms a significant part of everyday practice (Downes et al 2016)

It is concerned with the prediction and prevention of different adverse outcomes.
Why do Mental Health Nurses have to focus on risk?

* Focus on risk of violence in mental health services began in the 1990s following a series of high profile cases.
* Defensive culture – Prediction, control, elimination (Barker 2012)
* The past predicts the future? But...
* Ignores the complexity of human behaviour and mental illness
The problem with violence risk assessment?

- Comprehensive risk assessment tools are designed to assist in the development of intervention strategies but this can only happen with a consideration of strengths and positive factors.
- Risk only evaluations are statistically inaccurate and implicitly biased resulting in negative outcomes.
- Costly implications for society and for individuals
Where does recovery fit in?

* It is a process of change – fulfilling potential
* The direction of nursing care should be towards meaning, purpose and positivity.
* This is at odds with the traditional purpose of risk assessment which focused upon historical events and held scepticism about a persons ability to change.
* With recovery oriented care – positive risk taking is desirable
What are protective factors?

- Personal or situational

- Any characteristic of a person, their environment or situation which reduces the risk of violence (De Vries Robbe et al 2012)
How are Protective factors used in Risk assessment?

* Best practice guidance for risk assessment (DOH 2007)
* SAVRY
* START
* Saprof
* Dash-13
SAPROF – De Vries Robbe et al 2012

- Internal factors – Intelligence, secure attachment in childhood, empathy, coping, self control.
- Motivational factors – Work, leisure activities, financial management, motivation for treatment, attitudes towards authority, life goals, medication.
- External factors – Social networks, intimate relationships, professional care, living circumstances, external control.
How can protective factors bridge the gap?

* Reduces pessimism among nursing staff
* Reduced likelihood of bias resulting in the over prediction of risk
* Aids therapeutic rapport
* Improves collaborative working
* Reduces revisiting past trauma
However...

* Cost and time implications of training! But...
* Easier ways of incorporating protective factors into the nursing assessment of risk
* Self education
* Access free resources on [www.saprof.com](http://www.saprof.com)
* CPA and care planning
* Adopt a positive and goal oriented approach
* Remember the past BUT focus on the future
Index offence of assaulting nursing staff with a hammer resulting in serious head injuries.

Numerous other assaults in inpatient settings

Transferred to medium secure services

Paranoid Schizophrenia – deceitfulness

Resulted in repeated transfers back to ICU

Scored extremely high on HCR-20

Introduced protective factors in CPA

Clear treatment goals

Successful discharge into community
Recovery and risk are familiar concepts to all mental health nurses.

At first glance they appear at odds with each other.

Nurses are expected to promote hope, while constantly revisiting past behaviours and delivering defensible practice.

Including protective factors in the assessment of risk, whether formally or informally, there is hope that nurses can provide recovery oriented care in a risk averse society.
References

If you have any questions, or want any further information please contact me!

Jodie Alder RMN

jodiealder2@sssft.nhs.uk