

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

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# 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

## Nursing assessments of violence risk -

- \* 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

## Case study - Scott

- \* 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

# Conclusion

- \* 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

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**Thank you!**

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

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