

# Shared Decision Making in a Secure Forensic Mental Health Service for Young People

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# The “Shared Decision Making in CAMHS” project

## Collaboration between



## Funded by



# Aims of the project

- Quality improvement initiative
- Aim to promote best outcomes for children and young people in CAMHS.
- The focus is on making use of shared decision making in front-line practice.
- Aim is to transform the CAMHS experience from one of service user passivity to a situation in which treatment is genuinely agreed in collaboration between children and young people, and their practitioners.
- Piloted in 4 sites for 2 years, then further funding for dissemination across all CAMHS services



# What is Shared decision making?

A process in which **clinicians** and **service users** work **together** to make the **best decisions** about treatment, based on clinical evidence and the patient's informed preferences.



# Elements of Shared Decision Making in CAMHS

Agreeing key problems and setting goals



Supporting YP to understand the options available



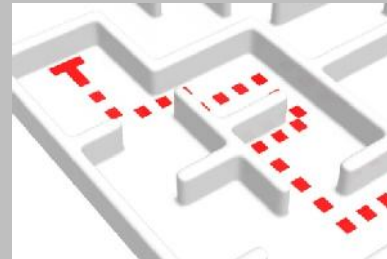
Agreeing which options for help will be tried



Reviewing progress



Making changes



# What decisions can be meaningfully shared in this environment?

Finding ways to meaningfully, yet safely, share decisions with young people who are residing in a setting where they have reduced opportunities for choice and control



# Shared decision making in action

- Portfolios
- Keeping myself and others safe risk management plans
- Involvement of young people in CPA meetings and ward rounds
- Shared report writing for ward rounds and CPAs
- Jointly written care plans
- Young person's participation in completion of SAVRY
- Goal setting
- Community meeting



# Tools for SDM





# VIG and VERP

Focus on SDM conversations and interactions:

Video Interactive Guidance

Video Interactive Reflective Practice

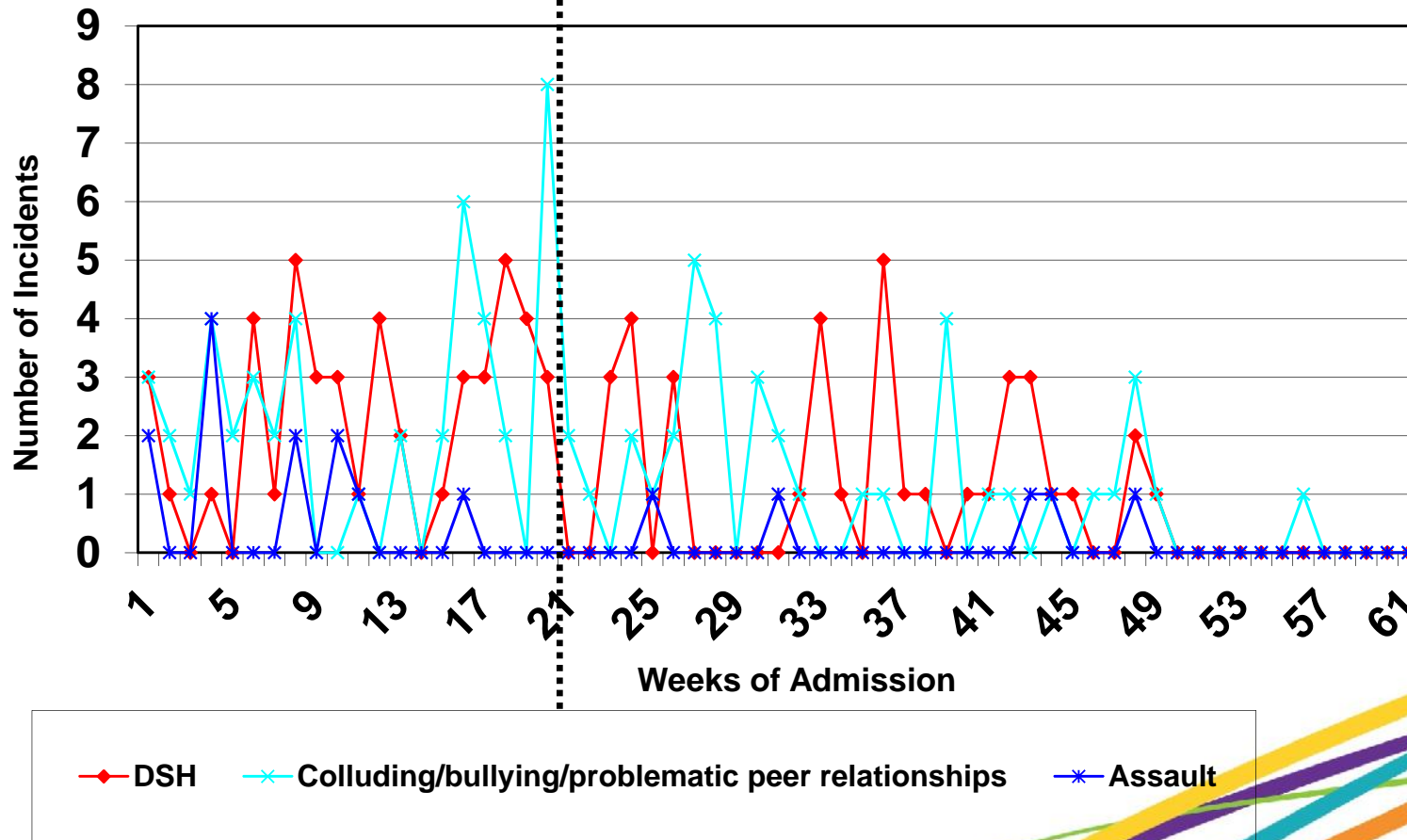


# Graphic Facilitation

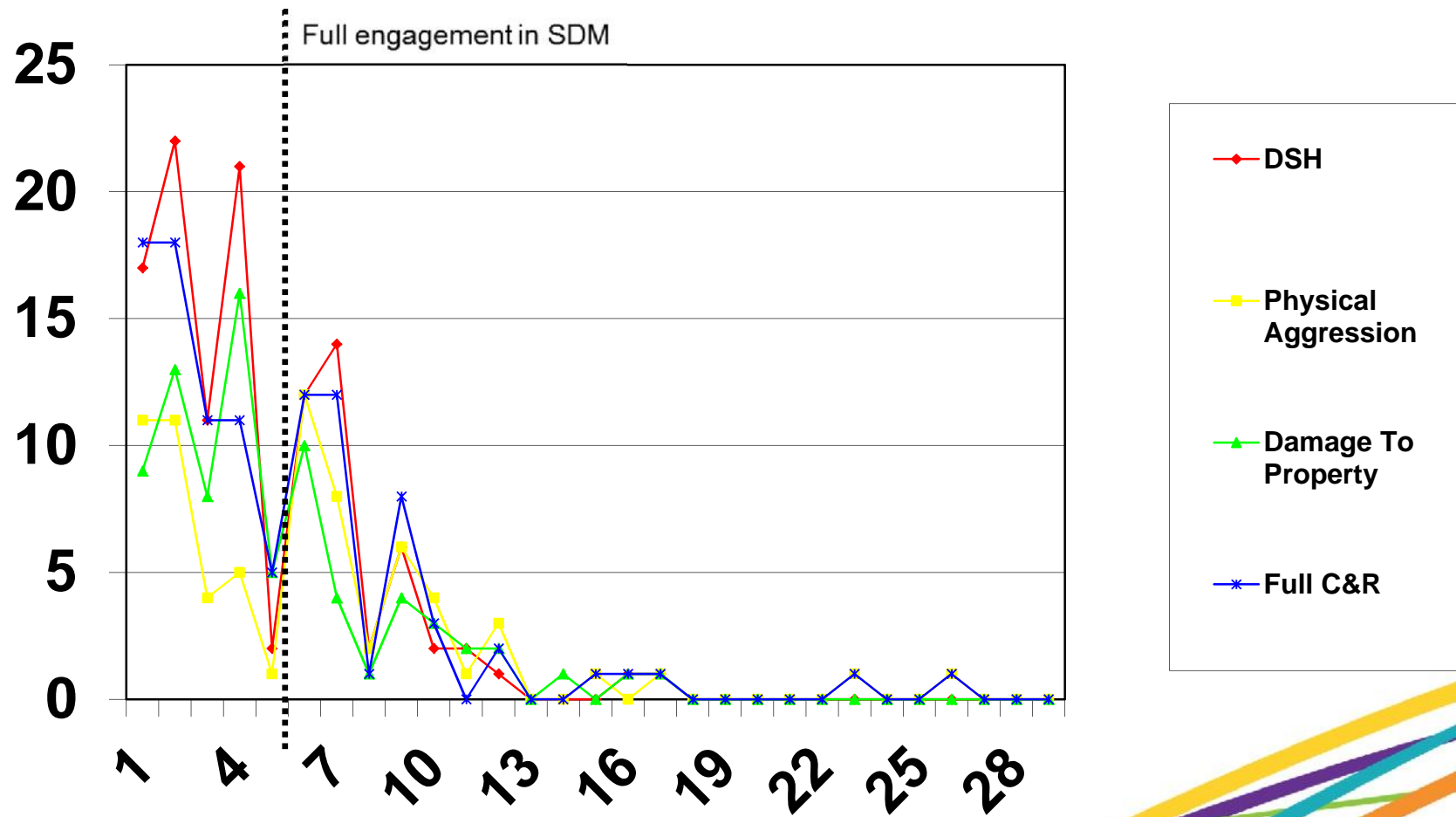


# Outcomes – YP T

Full engagement in SDM



# Outcomes – YP A



# Qualitative feedback - YP

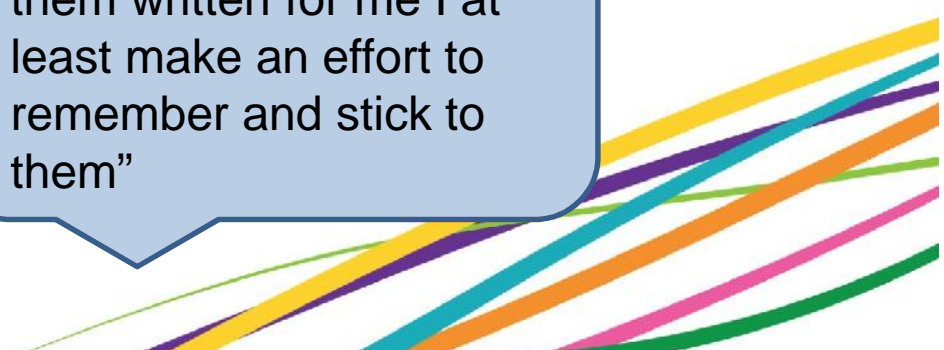
“Helping people work out my care along with me instead of just for me”

“It has made me understand why they do certain things to keep me safe”

“It helps me have my say”

“I like writing my own ward round report because ... the nursing report is someone else’s opinion”

“If I write care plans with staff instead of having them written for me I at least make an effort to remember and stick to them”



# Qualitative feedback - staff

“Young people appear to grow in confidence in making their views and opinions heard”

“Offers opportunities to work proactively rather than reactively”  
“Young people are more willing to discuss risks and management plans”

“I’m not sure if it has had an affect on their presentation or behaviours, but it has made them better at talking through this afterwards”

“SDM provides the yps with ownership of their care and a sense of empowerment, independence & responsibility”

“It may give some young people too much control of their care”

