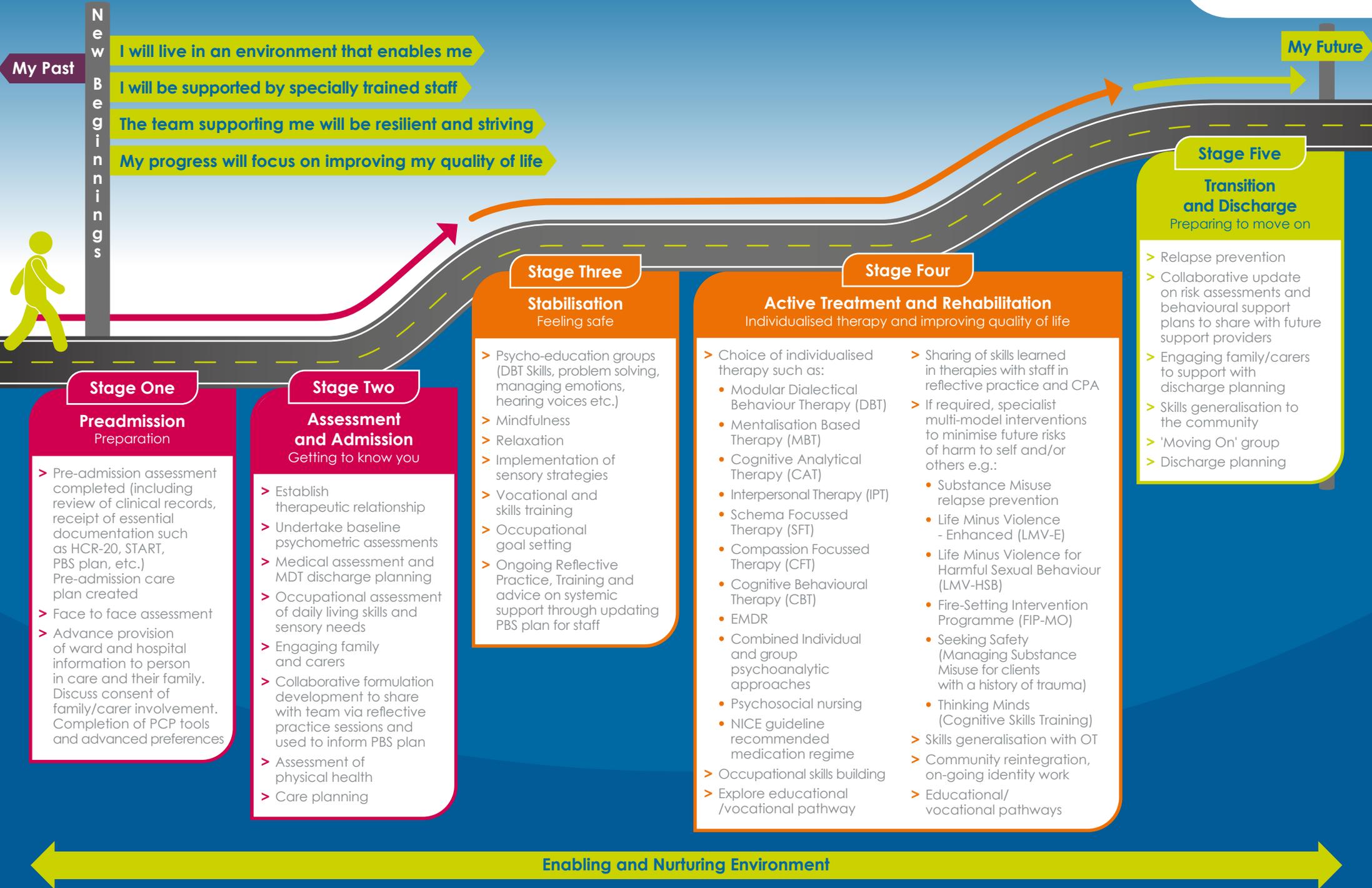


Model of Care for our Personality Disorder Services



My Past

New Beginnings

My Future

- I will live in an environment that enables me
- I will be supported by specially trained staff
- The team supporting me will be resilient and striving
- My progress will focus on improving my quality of life

Stage One Preadmission Preparation

- > Pre-admission assessment completed (including review of clinical records, receipt of essential documentation such as HCR-20, START, PBS plan, etc.) Pre-admission care plan created
- > Face to face assessment
- > Advance provision of ward and hospital information to person in care and their family. Discuss consent of family/carer involvement. Completion of PCP tools and advanced preferences

Stage Two Assessment and Admission Getting to know you

- > Establish therapeutic relationship
- > Undertake baseline psychometric assessments
- > Medical assessment and MDT discharge planning
- > Occupational assessment of daily living skills and sensory needs
- > Engaging family and carers
- > Collaborative formulation development to share with team via reflective practice sessions and used to inform PBS plan
- > Assessment of physical health
- > Care planning

Stage Three Stabilisation Feeling safe

- > Psycho-education groups (DBT Skills, problem solving, managing emotions, hearing voices etc.)
- > Mindfulness
- > Relaxation
- > Implementation of sensory strategies
- > Vocational and skills training
- > Occupational goal setting
- > Ongoing Reflective Practice, Training and advice on systemic support through updating PBS plan for staff

Stage Four

Active Treatment and Rehabilitation Individualised therapy and improving quality of life

- > Choice of individualised therapy such as:
 - Modular Dialectical Behaviour Therapy (DBT)
 - Mentalisation Based Therapy (MBT)
 - Cognitive Analytical Therapy (CAT)
 - Interpersonal Therapy (IPT)
 - Schema Focussed Therapy (SFT)
 - Compassion Focussed Therapy (CFT)
 - Cognitive Behavioural Therapy (CBT)
 - EMDR
 - Combined Individual and group psychoanalytic approaches
 - Psychosocial nursing
 - NICE guideline recommended medication regime
- > Occupational skills building
- > Explore educational /vocational pathway
- > Sharing of skills learned in therapies with staff in reflective practice and CPA
- > If required, specialist multi-model interventions to minimise future risks of harm to self and/or others e.g.:
 - Substance Misuse relapse prevention
 - Life Minus Violence - Enhanced (LMV-E)
 - Life Minus Violence for Harmful Sexual Behaviour (LMV-HSB)
 - Fire-Setting Intervention Programme (FIP-MO)
 - Seeking Safety (Managing Substance Misuse for clients with a history of trauma)
 - Thinking Minds (Cognitive Skills Training)
- > Skills generalisation with OT
- > Community reintegration, on-going identity work
- > Educational/ vocational pathways

Stage Five

Transition and Discharge Preparing to move on

- > Relapse prevention
- > Collaborative update on risk assessments and behavioural support plans to share with future support providers
- > Engaging family/carers to support with discharge planning
- > Skills generalisation to the community
- > 'Moving On' group
- > Discharge planning

Enabling and Nurturing Environment

Personality Disorder Model of Care

The Diamond Framework

The Knightstone Diamond Framework has been developed as a comprehensive and integrative strategy designed to enhance the effectiveness of treatment pathway for individuals who have received a diagnosis of personality disorder.



How do we achieve this?

