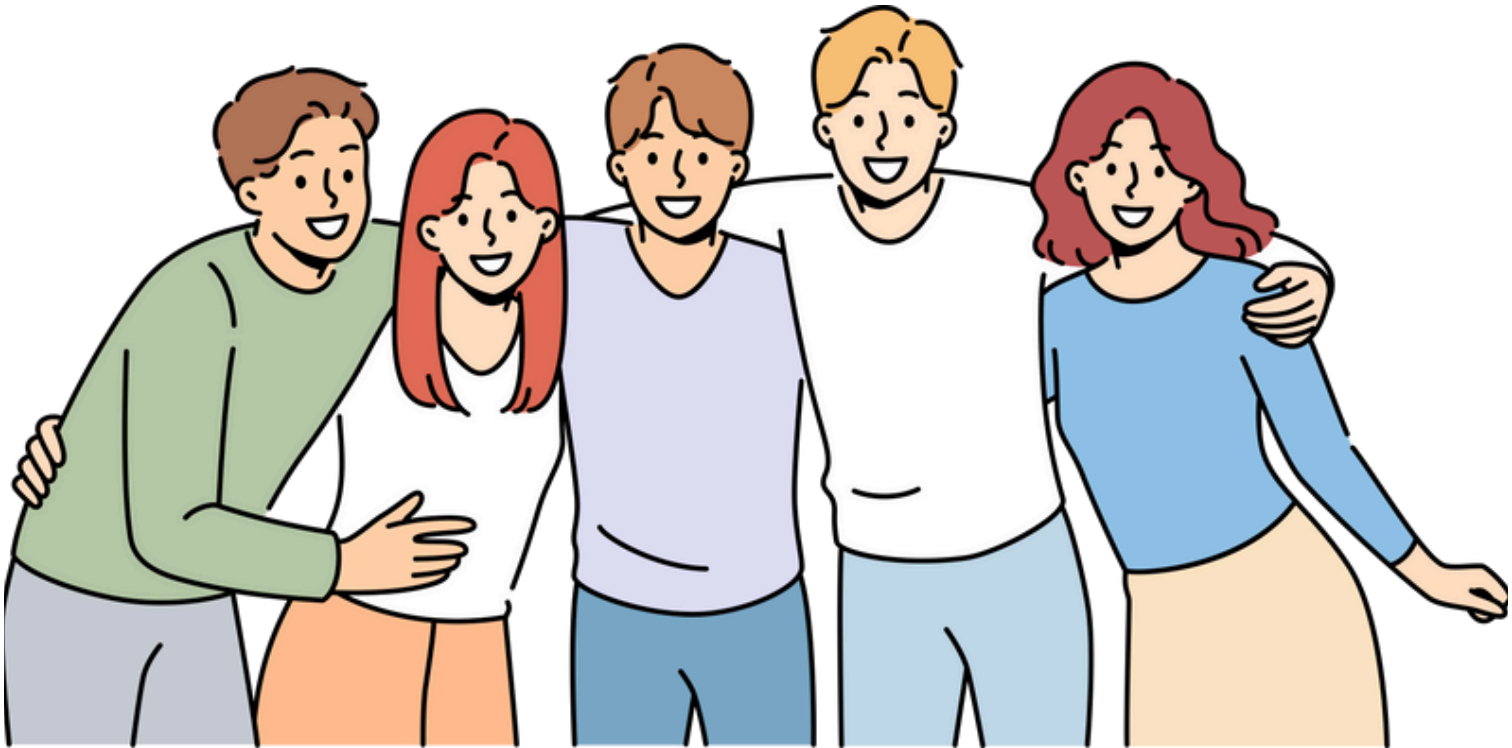
Kent and Medway
Mental Health
NHS Trust

Kent & Medway Adolescent Hospital

Information Booklet for Parents and Carers





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Four Key Essential Points



1 Your role

We know how important families and carers are and your support can make a real difference to young people's recovery. We will actively involve you in their care and treatment, and keep you updated throughout their stay.

2 Your experiences

We want to hear about your experience of looking after a young person with a mental illness, so we can help you find support. We can guide you to services and organisations that may help and, where appropriate, include family therapy in your child's care plan.

3 Contact us

Please talk to us if you are worried, have a problem, need more information or just want to talk about the person you care for. We are here to help.
Call us on **0300 300 1985**

4 Your voice

Your views matter to us. We will listen to you and involve you in your child's care and treatment. You will be invited to meetings where you can ask questions and share your preferences.

Information Page

Address:	Kent and Medway Adolescent Hospital Cranbrook Road Staplehurst Tonbridge Kent, TN12 0ER
Website:	https://www.kentmedwaymentalhealth.nhs.uk/about-us/children-young-peoples-mental-health-service-cypmhs/kent-and-medway-adolescent-hospital/
Telephone Numbers:	Reception: 0300 300 1985 The Rosewood School: 0300 300 1717
Your Young Persons: *To be completed when staffhavebeen allocated*	
Consultant:	Dr John Watts
Psychologist:	Ana Alvey
Occupational Therapist:	Tatjana Krizanovska
Care Team:	
Care Team Members:	Primary Nurse: Secondary Nurse:

Kent and Medway Adolescent Hospital (KMAH)

Our Service

We are an in-patient service caring for young people aged 12 to 17 who are experiencing mental health problems. We are a mixed unit (young people of different genders are cared for on the same ward) and can look after up to 14 young people at any one time.

On admission each young person is be allocated to either the **Red** or **Blue** 'care huddle', There are usually 3-5 nurses / support workers within each care huddle, and each huddle has a primary and secondary nurse.

You should be told about this during the admission process and can raise any concerns via the correct care huddle email. The email addresses for the care huddles are **nem-tr.redteamkmah@nhs.net** and **nem-tr.blueteamkmah@nhs.net**. The primary nurse or secondary nurse should meet with each young person once a week to review care plans.

We understand that young people may feel homesick or find things difficult when they first arrive. However, we have seen how their time here can help them work through personal challenges and feel more hopeful about the future.

Our Aims

At KMAH, we provide a safe and supportive place where young people can get help with their mental health. We work with them and their families to overcome challenges, make positive changes and prepare for the future.

We build on each young person's strengths, interests and goals and use different assessments and treatments depending on each young person's clinical needs.

Treatments Available

A wide range of treatments are used depending on each young person's symptoms and needs. These include:

- Medication
- Group therapies
- Family Therapy
- Occupational Therapies
- Social activities
- Creative activities
- Being part of the Kent & Medway Hospital community
- Eating disorder pathway

The clinical teams at KMAH will assess and evaluate how they respond to treatments, to help formulate the most appropriate care plans for them as indivduals.



A Day At Kent & Medway Adolescent Hospital (KMAH)

When a young person is admitted, they will be seen by a doctor and a nurse who will explain the admission process, and how the ward runs. They will try to get a picture of what has been happening for the young person, and what needs to change. A routine physical examination is usually part of the admission process, which includes blood tests and an ECG (tracing of the heart). After this the young person will be shown to their room. Property will be checked and valuable items noted down (it is advisable these are put in their locker for safe-keeping). The young person will then be shown around the ward and introduced to staff and other young people.

During the week there is a regular programme of activities, including education and psycho-therapy groups, as well as more leisure-based activities, such as sport or creative groups. The programme for the day can be found on timetables in each bedroom and on the notice board by the Nursing Station. Young people will attend groups divided into different teams (Aqua or Phoenix). At weekends and in the evenings, young people have more free time and can watch TV, listen to music, play the computer consoles, board games or table tennis. The staff may also organise trips. Many young people go home for weekend leave as part of their admission plan.

Besides group activities, young people will meet individually with nurses (especially members from their care huddle), other members of the Multi-Disciplinary Team (MDT) and doctors regularly. Young people will also be attending education, and may have psychology, family therapy and occupational therapy sessions, depending on their treatment plan. Soon after the admission a review meeting (CPA, Care Programme Approach) will be set, normally four to six weeks after the day of admission. This is a meeting in which the young person, their parents or carers, and the staff who work both on the unit and in the community, can meet and catch up on progress and agree on future plans. This is the young person's meeting, so they will be asked for their views and if there is anyone else needed to be at the meeting. Young people may request for an advocate or a specific family member to support them during the meeting.

Community support within admission
Whether you were previously known to children and young people's mental health services (CYPMHS), eating disorder services, or the intensive home treatment team, your community work will continue whilst you are an inpatient.
Your allocated health care professional will be invited to the weekly ward round, and will follow your progress throughout admission. They may do in-reach work with you during admission, and will help support you to be ready for discharge.



Who Are The Staff?

Medical Team

The medical team includes consultants who care for young people in hospital, in eating disorder services and in the community. It also includes adolescent psychiatrists and ward doctors.
The team gathers information to understand the difficulties each young person is facing. They regularly check their progress and make decisions about medication and the Mental Health Act.
The consultant psychiatrist is responsible for each young person's medical care while they are in hospital. They bring together information and advice from the different members of the care team. They work with each young person and family or carers to agree a treatment plan.
The consultant leads the ward and management rounds and will meet with each young person at least once a week.

Nursing Team

The nursing team includes qualified nurses and clinical support workers. They are responsible for the day-to-day care of the young people on the ward. The nursing team is also responsible for care plans and review meetings (CPA meetings).
The nursing team will often meet with young people to discuss their needs whilst on the ward. The young person, and their family or carers can also go to the nursing team to talk about any difficulties that may be experienced during the admission.
Our qualified nurses are responsible for giving medication. Young people can speak to any member of staff if they have questions or need help, and there will have a named support worker or nurse for each young person on every shift.

The nursing team also provide daily feedback to families and carers via telephone.

Ward Manager

Responsible for making sure the ward is a safe, welcoming and supportive environment for young people. They work with nurses, doctors, therapists and other professionals to make sure everyone gets the care and support they need.

Ward managers listen to the young people and their families, help solve any problems, and make sure the team is providing the best possible care. The role of the ward manager is to support both the young people on the ward and the staff who care for them, helping everyone work together towards revoery an wellbeing.

Modern Matron

The Modern Matron is responsible for the day-to-day running of the ward and the Health- Based Place of Safety. They support the team with clinical decision-making and help oversee the care of young people throughout their journey with us at KMAH, from referral and admission through to discharge.

Modern matrons also have overall responsibility for the ward environment and standards of care. If you have anu questions, concerns or feedback about your young person's care, the ward environment, or the staff supporting your family, please feel free to contact the Modern Matron. They are here to listen, support, and help resolve any concerns to ensure your young person recieves safe, high quality care.

Education Staff - The Rosewood School

The education staff on site are part of the team at KMAH, and their school is called The Rosewood School. The teachers in the hospital will help to plan school or college work for each young person's educational and training needs. Work is set to help each young person to acquire new skills or practice ones which have been found difficult in the past. The teachers will contact the school or college (with the young person's and your permission) to co-ordinate work and to plan the best way for them to get back to school/college. The re-integration coordinator may arrange visits with the school to help the young people return to school, or transition to college. The Rosewood School is part of the state education system in Kent, and is regularly inspected by Ofsted.



Who are the staff?

Clinical Psychologist

Young people are sometimes offered an assessment with a Clinical Psychologist. The assessment will usually include meeting with the Clinical Psychologist individually to talk about the young person's experiences, thoughts and feelings. Young people may also be asked to fill in some questionnaires. The aim is to help the young person, you as their parents/carers and the teams around them to make sense of their current challenges. The Clinical Psychologist will make recommendations about the types of talking therapies or interventions that might be helpful for the young person. There are also times when it is useful to start some therapy work during the time the young person is at KMAH. The Clinical Psychologists are also involved in running groups as part of the therapeutic programme.

Assistant Psychologists

An Assistant Psychologist works alongside the Clinical Psychologists and is involved in the assessments, formulations, and interventions. This may include supporting young people to complete standardised measures or collect other background information which is then fed into the formulation meeting and informs the care they receive. In addition, assistant psychologists work across the inpatient and community settings to contribute to psychological interventions, ensure patient-led care and aid communication between young people and professionals.

Occupational Therapists

Occupational Therapists and Occupational Therapy Assistants provide a therapeutic treatment programme for all young people and work individually with some young people, depending on their needs. Occupational Therapists use different techniques such as assessments which find out about young people's routines and habits, creative activities in individual and group settings to improve life skills. Occupational Therapists work to increase and maintain independence in these skills (i.e. in getting up and about, taking care of yourself, managing yourself at home and at school/college and thinking about future vocational plans). Occupational Therapists at KMAH facilitate daily therapeutic groups and arrange community based sessions.

Transitions Team

The role of the Transitions Team is to suport young peole and families with the move from hopsital to their discharge destination. They work closely with the young people and their families to ensure plans are safe, timely and centred around their needs. They aim to bring together professional, clarify pathways, address barriers to discharge, and ensure everyone understands what support will be in place for the next steps after discharge.

Together, they act as a bridge between hospital and community, helping young people build confidence, connections and successful lives beyond hospital.



Who Are The Staff?

Family Therapists

We appreciate that having a child admitted to hospital can be a highly stressful experience for all family members involved. Experience and research shows that including families in the care and treatment of young people strongly promotes their recovery, long term wellbeing and reduces the chance of a young person needing to be re-admitted to an in-patient unit in the future. For these reasons an important part of a young person's care and treatment involves having regular contact and meetings with parents and carers. Whilst your child is at KMAH family meetings will be facilitated by either a member of the nursing team or one of the family therapists at KMAH. Meetings are held to assist the team with assessing and understanding a young person's needs, thinking about the impact of the young person's difficulties on wider family functioning, to assist families in developing a good understanding of the young person's needs with regard to mental health difficulties and to provide support for families during the time your child is on the ward.

We recognise that each family who comes to KMAH is unique, with this in mind during family meetings we give time to working with you to understand your concerns, hopes for what can be gained from the admission, to assess what support you might need and to then tailor our work to fit with your family's particular requirements. This could include: helping to build communication between family members, helping families gain a better understanding of their young person's mental health issues, exploring existing strengths and skills within the family and thinking with them about how these can be adapted to help you all cope with the current situation.
You will be contacted by one of the therapists or by the young person's care huddle within one week of your admission to set up an initial family meeting with you and your family with the purpose of:

- building good links between home and staff at the unit
- talking about how family work forms a part of treatment plans
- ensuring we are maintaining good communication with parents/ carers and young people

Dietitian

The Dietitian will meet with a young person if there are specific issues relating to eating and diet. If a young person is admitted because of an eating disorder, the Dietitian will meet with the young person to discuss meal planning. The Dietitian will encourage young people to maintain healthy eating patterns and a healthy weight. There is an expectation that young people with an eating disorder are weighed twice weekly, all other patients once weekly.



Domestic Staff

The domestic staff maintain the general cleanliness of the ward. They are responsible for cleaning the kitchen, bathrooms and the corridor areas. All young people are responsible for keeping the communal areas (lounge, games room, etc.) and their own bed spaces tidy. Each young person's bed space will need to be cleaned regularly by the domestic staff, although this will not involve tidying or moving any of the young person's belongings. Young people are also responsible for doing their own laundry, although staff can offer assistance with this if needed. Young people are encouraged to remove and change their bed linen on a Saturday. (If young people are on weekend leave they should remove their bed linen the day they go on leave)

Who Are The Staff?

Pharmacy Staff

The Pharmacy team look after the storage and dispensing of all medication on the ward. The pharmacists work closely together and give expert advice to the team on medication uses, side effects and interactions.

Estates Team

The Estates Team look after the building, and make sure it is functioning normally. They operate an on-call service for when emergencies happen out of hours.

Reception and Admin Team

The Reception team are often the first point of contact for all young people, their families or carers, and outside professionals. They answer the main telephones, welcome visitors, and perform administrative duties.

The Admin team complete administrative support, file and keep track of paperwork and communication with outside clinical teams.

Intensive Home Treatment Team

An agile team, made up of nurses, support workers and MDT, to support young people in the community providing a therapeutic program in person, individual, group, parent, and family sessions online, face to face or virtually.
IHT provides intensive community treatment and this includes young people needing community reintegration to support earlier discharges from inpatient care. Each young person has a personalised roadmap to recovery following from a comprehensive, multi-discipline assessment and formulation.
Nurse and Clinical Support Workers Operate 7 days a week between 08:00-21:30hrs.
MDT operates Mon-Fri between 09:00-17:00hrs.
If it is felt that your child would benefit from community reintegration, this will be discussed and agreed with you beforehand.

Patient Flow Pathway Lead

Within KMAH we have a Patient Flow Pathway lead who ensures a smooth patient flow throughout the whole pathway, ensuring patients' lengths of stay are no longer than clinically necessary, whilst ensuring quality of care and patient experience is upheld.



The Education Programme

The Rosewood School, Staplehurst, is situated within Kent and Medway Adolescent Hospital.

TRS Staplehurst aims to ensure that the YP are provided with high quality education to support them during their admission to hospital. Each lesson is bespoke, planned to provide the most appropriate form of education for each individual. Alongside core subjects, TRS Staplehurst is committed to providing a wider curriculum, enhancing cultural capital opportunities for all our young people.

TRS Staplehurst provides a continuum of education for pupils, whilst they are in hospital, and facilitates their return to their mainstream/alternative education placement.

The Rosewood School provide support with post 16 choices through progression and participation. Alongside GCSE's and A Levels, the Rosewood School supports functional skills, BTEC's and apprenticeships.

NEET YP (not in Education, Employment and Training) are encouraged to attend and are supported with finding an onward educational placement. We also have specialist support from our Participation and Progression Officers and our reintegration team.

The Rosewood School is well staffed and resourced, providing a broad and balanced curriculum, including practical workshops/visits from outside agencies. We have specialist teachers and TAs for core and non-core subjects and the small staff to pupil ratios enhance learning. The Rosewood School provides a calm and nurturing environment in class.

Re-integration to school/college is organised by experienced staff, on an individual basis, at an appropriate stage of recovery. Re-integration staff initially transport and accompany pupils to school/college, supporting in class as required. All plans are monitored and reviewed weekly. Timetables will include PE and Science topics related to nutrition as appropriate.

Exams can be facilitated at the Rosewood School, via transfer candidacy from mainstream schools. Applications are made to the exam boards for Special Consideration in the marking of exams, for all in- patients entered for external exams and moderated assessments. Special arrangements can be arranged including separate rooms, use of scribe or laptop and extra time.

Upon discharge from the hospital, reports are sent to the mainstream school/future placements and follow up liaison is conducted for up to a term.

The Group Programme

Therapeutic

The groups are therapeutic (part of treatment) and everyone is expected to attend, unless it is agreed otherwise by the treating team. Examples of groups are:

- Managing Relationships
- Managing Emotions
- Managing Anxiety
- Improving Self-Esteem
- Building Resilience

These groups focus on learning new skills to help young people feel better.

Activity

These groups are slightly more relaxed, and everyone is expected to attend unless they are in sessions with other staff members.

- Sports
- Relaxation
- Art
- Cookery
- Gardening
- Music



The Group Programme

Example Timetable

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
07:30	Wake Up and Self-Care	Wake Up and Self-Care	Wake Up and Self-Care	Wake Up and Self-Care	Wake Up and Self-Care	Wake Up and Self-Care	Wake Up and Self-Care
8:15	Breakfast	Breakfast	Breakfast	Breakfast/ Individual OT Breakfast	Breakfast	9am Breakfast	9am Breakfast
9:00	Medication, room tidy and laundry	Medication, room tidy and laundry	Medication, room tidy and laundry	Medication, room tidy and laundry	Medication, room tidy and laundry	Medication, room tidy and laundry	Medication, room tidy and laundry
9:30	Community Meeting OT Led	Community Meeting OT Led	Community Meeting OT Led	Community Meeting OT Led	Community Meeting OT Led	Free Time	Free Time
9:45	Reading with Education	Education / OT Individual Sessions	Reading with Education	Education	Reading with Education	Ward Led Community Meeting	Ward Led Community Meeting
10:00	Aqua Education / Phoenix OT Group	Education / OT Individual Sessions	Education / Ward Led Activities	Education	OT Group	Ward Led Outdoor/indoor activities	Ward Led Outdoor/indoor activities
11:00	Snack	Snack	Snack	Snack	Snack	Snack	Snack
11:30	Aqua OT Group / Phoenix Education	Education / OT Individual Sessions	Education / OT Individual Sessions	Education / OT Individual Sessions	Education Pupil Voice	Ward led Board games	Ward led card games
12:30	Lunch	Lunch	Lunch	Lunch	Lunch	1pm Lunch	1pm Lunch
13:00	Education Lunch Time Group	Education Lunch Time Group	Doctor's Drop In Clinic / Education Lunch Time Group	Education Lunch Time Group	13:30 OT Group	Free time	Free time
13:45	Ward led Activities	Aqua Education / Phoenix Psychology	Dietician Group	Phoenix Education / Aqua Psychology		Ward led Art or patio time/grounds walk	Ward led Music room, patio time/grounds walk
14:45	Education	Phoenix Education / Ward Led Activities	Psychology Group	Aqua Education / Phoenix Psychology	14:30 Education		
15:45	Snack	Snack	Snack	Snack	Snack	Snack	Snack
16:00	Free Time	OT Dinner Group	Free Time	Free Time	Free Time	Free Time	Free Time
17:00	Laundry with Staff	Laundry with Staff	Laundry with Staff	Laundry with Staff	Laundry with Staff	Laundry with Staff	Laundry with Staff
17:30	Dinner	Dinner	Dinner	Dinner	Dinner	Dinner	Dinner
18:00	OT Individual Sessions	Free Time	Free Time	Free Time	OT Individual Sessions	Ward Led Reading or listening to music	Ward Led Journalling and relaxation
19:00	Ward Led Quiz night	Ward Led TV night	Ward Led Just dance	Ward Led Wii games	Ward Led Movie night		
20:30	Snack and Reflection on Day	Snack and Reflection on Day	Snack and Reflection on Day	Snack and Reflection on Day	Snack and Reflection on Day	Snack and Reflection on Day	Snack and Reflection on Day
21:00	Get ready for bed	Get ready for bed	Get ready for bed	Get ready for bed	Get ready for bed	Get ready for bed	Get ready for bed
22:00	Bed	Bed	Bed	Bed	Bed	Bed	Bed

Meetings at KMAH

During your young person's stay at KMAH you will hear of and be invited to a variety of meetings. We have meetings that take place weekly for the multidisciplinary team and meetings which are scheduled which your presence and input would be beneficial.

Ward Rounds

Ward Rounds are held each week. These are on a Thursday, or Tuesday is your young person is on the Eating Disorder Pathway. Ward Round is when the team get together, including the Consultant Psychiatrist, and discuss each young person's care and progress and plan for the next week. Recommendations for leave and decisions about all aspects of a young person's care are made here. The young people are invited to make requests to ward round, and they receive feedback on the same day. As a parent or carer, you will be able to contribute to ward round via the ward round feedback forms. These will be sent to you by the admin team. This will be on a Monday for the Eating Disorder ward round and Tuesday for general ward round.

All parents and carers receive ward round feedback on the day, usually by telephone.



Medical Reviews

In addition, your young person will be seen for a weekly review by the Consultant Psychiatrist or ward doctor. The team will also regularly discuss and review each young person according to their specific needs.

Care Programme Approach (CPA)

At KMAH we utilise a Care Programme Approach (CPA). This is a package of care implemented by the NHS to assess and treat individuals with mental health needs. A CPA meeting is a chance for the young person, families and healthcare professionals to get together to discuss and plan the young person's treatment and recovery plan.

This can result in an outcome of planning for discharge or further admission and treatment.



What Can Young People Bring & What Can't Young People Bring

Recommended Checklist

We have created a recommended checklist for young people to bring to the ward. We suggest packing for one - two weeks as more items can always be brought in if needed.

Clothing Items		Toiletries	
T- Shirt x 5		Toothbrush	
Bottoms x 5		Toothpaste	
PJs x 3		Body Wash	
Socks x 5		Shampoo & Conditioner	
Underwear x 5		Deodorant (roll on in plastic bottle preferred)	
Shoes/slippers		Makeup (will be kept in your locker)	
Extra Items			
Books		Photos	
Music Players (that do not have cameras)		Phone	
Blanket x 1 (must be taken home once a week to be washed)		Coat/jacket	



What Can Young People Bring & What Can't Young People Bring

What can't young people bring onto the ward?

- Alcohol and illicit substances
- Cigarettes / tobacco products - including E-Cigs and vapes
- Firearms or imitation firearms
- Aerosols
- Batteries
- Lighters & Matches
- Flowers & Potted Plants
- Metal Containers
- Detergents and chemical products
- Unsealed food and drink
- Medication
- CD'S, DVD'S, Discs
- Sharps (knives, tools, blades, ect)
- Plastic bags, cling film
- Chewing gum, blue tac or any adhesive substances
- Glass or bottles of any description (perfume, mirrors, makeup)
- Pornographic material
- Solvents or flammable liquids
- Recording or photo equipment
- Razor blades, disposable razors, scissors
- Ring binders
- Wires, strings, rope, cords. This includes clothes with draw strings or cords. We can gently remove these if needed.
- Magnets
- Keys

This list is not exhaustive and items that are not deemed appropriate will be removed from the ward and returned to yourselves. If you have any questions please do get in touch.

Forgotten to bring anything?

Don't worry! The nursing team have a cupboard with spares at the ready. There is shower gel, toothbrushes, toothpaste, sanitary items and more. Please just ask.

Please can young people bring only a hand luggage sized suitcases or bags with valuables as when going on leave, young people will be asked to remove all items from their bedrooms.



KMAH Ward Rules

Therearea set of rules for theward,sothatpositivebehaviour is encouraged, and mutual respect is promoted for all on the ward.

1. Violent or aggressive behaviour (both verbal and physical) towards staff, other young people and property will not be tolerated and will result in appropriate action being taken. If necessary, the police may be involved and will take appropriate steps.
2. There will be no drugs, alcohol or weapons brought onto the unit.
3. The team is committed to maintaining a high-quality physical environment. Damage to property will be charged for. Young people should respect others' personal space and property; borrowing is not advisable due to possible loss, or damage or theft.
4. The support and friendship of other young people may be helpful during the young person's stay. However physical, sexual and/or intimate relationships between young people on the ward may be harmful for their treatment and are therefore not permitted.
5. Young people will respect each other's opinions, views, and individuality. There will be no racism, bullying or prejudiced behaviour.
6. Young people are not permitted to enter other young people's bedrooms
7. Young people must be dressed appropriately at all times. If a young person is wearing clothing that is deemed inappropriate or provocative by staff, that young person will be asked to change.
8. No nightwear is allowed in the communal areas.
9. Bedroom corridors are often locked during group time but young people may ask staff for access to rooms
10. We ask that young people do not discuss their care and treatment with each other.



KMAH Ward Rules

11

All food brought onto the unit will be placed in the 'snack cupboard' in a separate plastic box with young person's name, and will be monitored by staff in the best interests of the young person. No food is allowed in bedrooms. Please note the following snacks/drinks are not permitted on the unit:

a.Energy drinks
b.Caffeinated drinks
c.Food containing excessive amounts of protein
d.Seasoning (salt, pepper)

Unreasonable amounts of snacks will not be taken onto the unit and will be asked to be taken away. Any home made meals brought in cannot be re-heated at KMAH.

12

Aerosols, hair straighteners and hair driers are not permitted on the ward. Lockers are provided for storage of items not allowed onto the ward, which also includes personal snacks.

13

The Trust has a no-smoking policy. Smoking products, including cigarettes, matches, lighters, and tobacco are not permitted on the ward. Staff are trained in smoking cessation counselling, and nicotine replacement therapy is available to help manage any nicotine withdrawal effects.

14

Mobile phones, gadgets with Wi-Fi or that can take photos (e.g. iPod Touch, music players, other tablets or e-readers) are to be within the remit of the phone policy.

15

In-line with our infection control rules, young people are limited to bringing in 1 blanket, 1 teddy and 1 set of bed linen from home if they wish to. These items must be taken home once a week to be washed. These items should remain in the young person's room.



Policies at KMAH

Phone Policy

• Mobile phones can be used between 4pm-10pm on weekdays and from morning until 11pm on the weekend
• Mobile phones are kept in each young person's allocated locker in the DVD room
• Mobile phones will be charged overnight in the locker
• If a mobile phone isn't handed in at 10pm it will not be charged and result in a 24hour phone ban as per policy
• If young people need to contact families outside these times they will be supported to do so by staff during free time, via the land line phones in the nursing station.
• Cameras must not be used on mobile phones – this is in breach of phone policy.

Young people may use the phones on the nursing station to contact family/carers or professionals only. No phone calls to friends will be permitted; young people must use their own mobile phone for this in the allocated time slots. Calls can be made between 9am and 9.30pm excluding during education, groups and meals. Incoming calls can be accepted up until 10pm.

Smoking Policy

The Trust operates a no-smoking policy for all Trust buildings and grounds. Smoking is not permitted in the unit or on the grounds.

Search Policy

If there is a concern regarding unsafe items on the ward, the nursing staff will conduct a thorough search. This search will include bedrooms, communal areas and individual boxes. Nursing staff may also be required to carry out personal searches. Please do not worry! This is to ensure that everyone is safe and the process will be explained to you and the young person by the nursing staff. Staff are all trained in this and it is to keep everyone safe. If you have any questions please just ask.



Locked Door Policy

The entrance doors to the unit are locked to prevent access from unauthorised members of the public, and to protect some young people due to a risk of absconding. If a young person is admitted informally, they have the right to come and go from the ward freely. If a young person wishes to go out, they need to ask a member of staff. At this time, a risk assessment will be completed. It the young person or the situation is deemed too high risk, the leave may not be allowed. The reason for this will be discussed with the young person and parents and would updated as part of their care plan.

If the leave is agreed, this will also be care planned and risk assessed. When a young person goes out, and with whom, will need to be agreed with the care huddle/consultant and with their family or carers. Young people may be asked to sign out and sign in when they return. Arrangements for leaving the ward may change during a young person's stay. If a young person leaves the unit without agreement, the police will often be notified to help locate where the young person is.

Policies at KMAH

Confidentiality

Information that young people, families and carers give to members of staff will always be shared within the team and relevant staff. We do this so that all staff involved in the young person's care can provide the best level of care appropriate for the young person's needs as they change during their stay at KMAH. We will ask you before sharing this information outside the team, but we will need to inform others if there are risks or child protection issues, even if you do not want us to tell anyone. This is because we cannot keep information secret if it concerns a young person's safety or the safety of others. We aim to share information with parents/carers, but depending on a young person's understanding, we may be prevented from doing this if the young person is the age of 16 or above and does not give us permission. Information is also shared with staff from the outpatient service, as we need to plan discharge in a safe way. The young person's school is often invited to the CPA meetings and information is shared about the young person.

If you have information you wish to share, and you do not want your child to be aware, please inform the staff member during the discussion. However, we would normally advise that this information is shared, even if it is sensitive or upsetting, as issues can arise from holding on to 'secrets'.

Aggression and Violence

Aggression and violence are not tolerated on the unit. Physical, verbal or racial abuse will not be tolerated and result in further action being taken. In the event of violent or aggressive acts, staff are trained in techniques to help calm young people verbally. As a last resort, staff may physically hold young people to maintain their safety or the safety of others. In more serious cases medication may be given to further calm young people. We will only hold a young person if the behaviour of a young person is dangerous to themselves or other people and we cannot keep things safe in any other way. In all cases, efforts will be made to maintain the dignity of young people. We appreciate that this may be worrying to think about, but we feel it is important for all young people, families and carers to be aware of this process. Please speak to the nursing team for more information or discussion.

It is important for you to be aware that with cases of repeated episodes of aggression and violence there will need to be considered as to whether it is safe and appropriate for the young person to remain at Kent and Medway Adolescent Hospital. If the outcome is that it is no longer safe, a referral may be made to a PICU (psychiatric intensive care unit).

You will be notified of this and involved in discussions,

Concerns & Complaints

The best way to make a complaint is to speak directly to a member of staff who is involved in the young person's care.

You may wish to speak to someone within management, and you can ask for your concerns to be brought to the attention of the ward manager, or ward matron.

If staff are unable to resolve your concerns and you wish to make a formal complaint you can:

Email:
kmmh.pals@nhs.net

Call:
East Kent: 0800 783 9972

West Kent and Medway: 0800 587 6757

Or write to:

PALS and Complaints
St Martins Hospital
Littlebourne Road
Canterbury
Kent CT1 1TD

You can also find a leaflet in reception (by the drinks machine) with advice.
Your child's care will not be affected if you make a complaint.

The Mental Health Act

When a young person is admitted to hospital, this is usually with their consent (agreement). For any consent to be valid a person should be given information so they can fully understand the treatment options and make an informed decision. This should include information on the possible risks and benefits of the treatment, and the likely effects. If they lack capacity or do not consent to treatment they can be brought to hospital under the mental health act. At KMAH we work with young people who are informal admissions or are sectioned under the mental health act. Below is a description of the different types of admissions we have.

Informal Admission
Young people who agree that they need to stay in hospital to receive treatment and are able to give consent for this are referred to as informal or voluntary patients. A young person who is aged 16 or 17, and who can consent to his or her treatment, is referred to as having 'capacity' (from the Mental Capacity Act 2007). A young person who is under 16, and can consent to his or her treatment, is referred to as having 'competence'. For a young person who cannot consent to his or her treatment, and therefore lacks capacity or competence, a parent may be able to agree to the treatment. Sometimes the treatment cannot be agreed to by a parent, so the Mental Health Act 1983 may need to be used. This is a very complex area, so please ask a member of staff if you do not understand.

Informal or voluntary patients who would like to leave the unit to be discharged will need to meet with a staff member before doing so. If you would like to see a copy of the informal patient policy, please ask a member of the nursing team.

It is important to know that if an informal patient is not engaging with treatment or is requesting to be discharged and it is our clinicl view that this would not be within their bed interest, there willbe conversations around whether a mental health act is required or is discharge is the most appropriate next step. Parents and carers will also be involved in these conversations.

Mental Health Act Admissions
Occasionally a young person may not agree to admission to hospital or may not agree to take the treatment prescribed to them, and a parent may not be able to agree. In certain circumstances, if a young person is thought to be at risk and needs to receive treatment in hospital, they may be assessed for detention under the Mental Health Act 1983 (sometimes called 'sectioning'). If this is the case, the nearest relative (who is a close family member defined by the Mental Health Act) will be consulted as to whether they feel detention is in the young person's best interest.

If a young person is detained under the Mental Health Act 1983, they will be given further information about this and informed of their rights. These include access to an advocate (called an Independent Mental Health Advocate or IMHA), being able to ask for a Mental Health Tribunal to remove the section (appealing), and certain rights for the Nearest Relative. Young people will be supported in appealing against detention if they feel it is wrong.

The main sections of the Mental Health Act are:

Section 2
This section lasts for up to 28 days. Two doctors and an Approved Mental Health Professional decide when someone is put on Section 2. A senior doctor known as a Responsible Clinician will be in charge of their care and treatment.

The Mental Health Act

Section 3
This lastsfor up to 6 months. Again, two doctors and an Approved Mental Health Professional decide when someone is put on Section 3 and a responsible clinician will be in charge of their care and treatment. The main purpose of Section 3 is to allow more time to effectively treat someone for a mental health problem.

Section 5(2)
Ifsomeone comes to hospital without being on a section, they would be an 'informal' or 'voluntary' patient. If they wanted to leave and this was not considered appropriate, the decision could be made to assess them under Section 2 or Section 3.

These assessments take time to carry out so sometimes a person is placed under Section 5(2) to allow a full assessment to take place. Section 5(2) is done by one doctor and only lasts up to 72 hours. It is sometimes called a 'holding power'.

Section 5(4)
Ifadoctorwas not available to use Section 5(2) a nurse may stop a patient leaving by placing them under Section 5(4). This section only lasts up to six hours and ends when a doctor assesses the patient.

Section 136
Asmall number of people are brought to hospital under Section 136. This is a power which a police officer can use if they are concerned about the way someone was behaving in a public place.

Community Treatment Orders
Ifa youngperson is detained under the Mental Health Act 1983 they will be given further information about this and informed of their rights. They will be supported in appealing against this decision if they wish to do so.

Advocacy Service
There is anadvocacy service providing input to KMAH. NYAS provides an Independent Mental Health Advocacy (IMHA) service to those young people who are detained on a section of the Mental Health Act. It is a legal requirement that young people have this support available to them. They also provide general advocacy support to all young people staying at KMAU.

How to ask for a Second Opinion
Ifyou want to have asecondopinion about treatment, diagnosis or management of your child, please speak to the Consultant Psychiatrist or other staff member on the ward.

Privacy & Dignity
Youngpeople's privacy and dignity is very important to us and we want young people to feel safe and comfortable during their stay at KMAH. We feel it is important that girls and boys can mix as they would when at home/school/college or work, but at certain times. We therefore provide single sex bedrooms, each with their own private en suite bathroom, which other young people should not enter.

Young people will be cared for by a mixed-sex staff team, but if you have particular concerns or requests, please do speak to the nursing team or the Clinical Team Leader. During physical examinations or other physical contact young people will always have someone of the same sex to accompany them.



Visiting Hours & Leave

Visiting Hours	
Monday to Friday	4:00pm - 8:30pm
Saturday and Sunday	9:30am - 8:30pm

Visitors will be asked to meet with the young person in a private room and not on the main body of the ward. If a young person has leave then the parents may take them off the ward in the evenings/weekends.

Visits outside of the above hours is by prior arrangement only.

If someone under the age of 18 is visiting the family room in reception must be used.

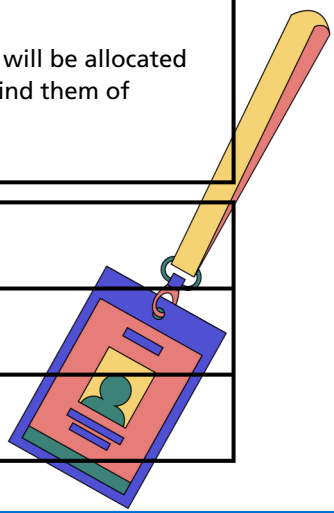
It advised for families to inform the ward ahead of a visit to allow us to ensure a visiting space is available.

Mealtimes	
Monday to Friday	Breakfast: 08:15 - 09:00am Lunch: 12:30pm - 01:15pm Dinner: 5:30pm - 6:15pm Snacks: 11:00am, 03:45pm, 08:30pm
Saturday and Sunday	Breakfast: 09:00am - 09:45am Lunch: 01:00pm - 01:45pm Dinner: 05:30pm - 06:15pm Snacks: 11:00am, 03:45pm, 08:30pm

Mealtimesare“protectedtimes”andduringthistimestaffareonlyavailableto young people on the ward. **Therefore, if you wish to contact the ward, please do so outside these times.**

For young people with an eating disorder, during meal and snack times the young person will be allocated a member of staff to support the young person in tackling the eating disorder and to remind them of boundaries in place around eating.

Bedtime	
Monday to Friday	10:30pm
Saturday and Sunday	11:00pm



Visiting Hours & Leave



Grounds Leave

Most young people, will at some point during their admission, be offered an opportunity to have some leave on the grounds of the unit. This is always subject to assessment of risk and nurses discretion. If young people are aged 16 or over they are usually deemed to be able to consent to this themselves. If they are under 16 you will be asked if you consent to them having short periods of time on the grounds. This can start at 5 minutes and build up to longer if it's appropriate. The young people will be out with a member of staff and then family. Groups of young people will not go out together unless accompanied by staff. If you have particular concerns about grounds leave please discuss them with a member of staff.

Home Leave

We hope and expect that young people will go home at weekends, as soon as they are well enough. This will be discussed and agreed with you and the young person. When leave is arranged we ask families to be prompt with the times arranged, as disruption can cause distress for the young person.

We understand being a carer for a young person with a mental health problem is not always easy. If you think a family member needs support please speak to a member of staff.

Whilst a young person is admitted the KMAH, the expectation is that the parent or carer arranges suitable transport to pick up and return their young person to the hospital. On some occasions, KMAH may be able to provide transport, however this is very limited, not always guaranteed and can lead to delays or leave being cancelled or rescheduled.

Pets at KMAH

Dogs (or any other pets) can visit by prior arrangement and only in the hospital grounds. Please check with us that it is ok to bring a pet before you leave home.

We have a Pets as Therapy dog that visits us weekly.





Your Views & Rights at KMAH

Your views

We want to hear what you think about the service we provide at KMAH so you can help us make useful improvements which matter to you. You can do this by talking to the nursing team, the Clinical Team Leader, Family ambassador or another member of staff, who will then pass on your feedback to the team. We will also ask you to help us by completing a feedback questionnaire. This covers a wide range of topics and the results will help the team identify specific areas of the service which need change or improvement. Feedback questionnaires are always available at the Parents/Carers Support Meeting.

We welcome compliments so that good practice can be identified and shared across the trust. Compliments can also be sent to our Complaints Department or given directly to the ward.

Your Rights

Although we have certain expectations from families/carers and young people, you have the right to expect standards of care from us:

Parents and carers have the right to:

…have their needs and values respected regardless of race, religion, gender, colour, sexual orientation and/or any physical disability you may have.

…be consulted and asked for informed consent on every aspect of a young person's care and treatment if the young person cannot consent for his or herself. If the young person can give informed consent, we will normally try to include parents and carers in the decisions, unless the young person does not allow us to share information, and there is no reason to breach his or her confidentiality.

…be involved in their care and treatment through all stages, if the young person gives permission. To be offered regular meetings with staff and the family therapy team, and to have copies of care plans and relevant documentation relating to a young person's treatment.

…voice your opinions and comments on the service provided and to complain if you feel unhappy. We can provide you with information about the complaints procedure.

…contact and visit young people at any reasonable and negotiated time (except when restricted by a Court Order or if there are safety concerns).

....you will be invited to participate in your young person's formulation and attend meetings to discuss the young person's care plan



Questions To Ask

What if I'm not sure what to ask?

Here are some of the questions that you may find it helpful to ask the care team:

About The Diagnosis

- What illness (diagnosis) does my young person have?
- What does the diagnosis mean?
- What are the likely causes?
- Will the person recover?
- What symptoms and signs suggest this?
- What is known about the causes?
- What is likely to happen in the future?
- Where can I get written information about this condition?

About Care and Treatment

- What are the aims of the care and treatment?
- What is the role of the Care Team?
- Who else will be involved in treatment?
- How often will appointments be made to see a member of the care team and which member of the team will this involve?
- What is your plan for support and treatment?
- How long will this treatment last?
- What happens if my young person refuses treatment?
- What support is available for carers and families and how do I get them?

Hospital Treatment

- What will happen when they come into hospital?
- What will treatment be?
- Can my young person come home for weekend leave? How is this agreed?
- Can I contact my young person and their treatment team?
- What is expected of me while my young person is in hospital?
- Can I have copies of letters and reports?

About Medication

- What medication is being used and why?
- Is the lowest effective dose being prescribed?
- Can the dose be increased when necessary?
- How often will the medication be reviewed?
- What are the short and long term benefits?
- Are there any short or long term side effects?
- Can you provide written information about the medication?



Support for Families & Carers



During your young person's stay it is important to us that you feel supported as well as involved in their care. Below is some of the support you can access. If you have any concerns or questions please do talk to a member of staff who can assist further.

FamilyAmbassador - hayley.dawson13@nhs.net
My name is Hayley and I am the Family Ambassador at Kent & Medway Adolescent Hospital (KMAH). I am here to offer you any emotional and practical support that you might need now that your child has been admitted to the hospital. I will work with you to ensure that your voice is heard and that you feel empowered to become an equal partner in your child's care.

How to access a carer's assessment
Please speak with the family ambassador for further information about a carer's assessment and how this might be relevant for you.

Financial Support
If there are financial implications due to your young person being at Kent & Medway Adolescent Hospital, please discuss these with the family ambassador.

Help with Benefits
A Department for Work and Pensions (DWP) online guide offers information on a range of benefits including Disability Living allowance. See www.direct.gov.uk or call the DWP on: 0800 88 22 00

Disability Living Allowance and Attendance Allowance: 08457 123 456

The Citizens Advice Bureau (CAB) also offers a useful online advice guide. For more information see www.citizensadvice.org.uk or contact your local CAB office.

Can I alsogettherapy?
If you think that therapy may help you, a good first step is to talk to a doctor or nurse at your GP surgery as they may offer counselling services. If they do not offer counselling at the surgery, they will be able to refer you to somewhere that does.

IAPT (Improving Access to Psychological Therapies) – can also provide psychological assessment and advice for you. Your GP can refer you to the IAPT services or in some services you can contact them directly to refer yourself.

Support for Families & Carers



Ashford IAPT
ThinkAction (formerly KCA)
171 Beaver Road, Ashford, Kent, TN23 7SG
Tel: 0300 012 0012

Email: kca.ashford@nhs.net

Opening hours:
Mon: 9:00-17:00
Tue - Wed: 9:00-20:00
Thu: 9:00-17:00
Fri: 9:00-17:00

Referral: Through your GP or self-refer

Canterbury and Coastal IAPT
ThinkAction (formerlyKCA)
34 Simmonds Road, Canterbury, Kent CT1 3RA
Tel: 0300 012 0012

Email: kca.canterbury@nhs.net

Opening hours:
Mon - Wed: 9:00-20:00
Thu & Fri: 9:00-17:00

Referral: Through your GP or self-refer

ThinkAction also provide IAPT services for Thanet and South Kent, West Kent, Medway and Swale, Merton, and Surrey. You can find more information here: http://www.thinkaction.org.uk/get-help/addaction-mental-health-services/

Organisations Providing Support for Families & Carers

Mind
Provides information and advice, and campaigns to promote and protect good mental health for everyone.
Tel: 0300 123 3393
Email: info@mind.org.uk
Web: www.mind.org.uk

Rethink
Work tohelp everyone affected by severe mental illness recover a better quality of life.
Email: info@rethink.org
Web: www.rethink.org

YoungMinds
Acharity committed to improving the emotional well-being and mental health of children and young people and empowering their parents and carers.
Web: www.youngminds.org.uk

Mental Health Matters
Provide ahelpline which consists of a team of highly trained and experienced support workers who use counselling skills to provide you with emotional guidance and information.
Tel: 0800 107 0160

Samaritans
Provides confidential, non-judgemental emotional support, 24 hours a day for people who are experiencing feelings of distress or despair.
Tel: 116 123
Email: jo@samaritans.org

SANE
Provides emotional help and information to those experiencing mental health problems, their families and carers via SANEline.
Tel: 0300 304 7000
Textcare:
http://www.sane.org.uk/what_we_do/support/textcare/
Web: http://www.sane.org.uk/home

Domestic Abuse/Violence
Community SafetyUnit
1st Floor Invicta House
County Hall, Maidstone ME14 1XX
Tel: 03000 410234
communitysafetyunit@kent.gov.uk

Victim Support: 0808 1689 111
Women's Aid: 0808 2000 247
Men's advice line: 0808 801 0327
Mankind: 0808 800 5005

Mental Health Foundation
Helppeopleto thrivethrough understanding, protecting and sustaining their mental health.
https://www.mentalhealth.org.uk/

Kent Autistic Trust
Provide support forindividuals on the autism spectrum.
14 High Street, Brompton, Gillingham, Kent, ME7 5AE
Tel: 01634 405168
Email: office@kentautistic.com

Maidstone Bi-Polar Self-Help Group
Aself-help group forpeoplewithBi-Polar disorder and their families.
Maidstone Community Support Centre, 39-48 Marsham Street, Maidstone, ME14 1HH
Tel: 0333 323 3880

YoungMinds Parent Helpline
Providesinformation,advice and support to all – mums, dads, grandparents, carers and other adults with caring responsibility.
Tel: 0808 802 5544
Web: https://youngminds.org.uk/find-help/for-parents/parents-helpline/

Canterbury Coastal Rethink Carers Support Group
Aim to help carers of relatives,partnersor friends with a wide range of mental health problems to access help and information and to provide comfort and support on a regular basis
Web: https://www.rethink.org/services-groups/groups/canterbury-coastal-rethink-carers-support-group
For information on other groups, you can email: groups@rethink.org

The Princess Royal Trust for Carers
Providesinformation,advice andsupport services to over 400,000 carers, including approximately 25,000 young carers.
Email: info@carers.org
Web: www.carers.org

Partners in Care
Provide information for anyone interested in spirituality and mental health, anyone with mental health problems, carers and relatives.
Tel: 0113 265 3340
Web: http://partners-in-care.co.uk/

Other Useful Contacts



Social Services

Kent:
Kent County Council
County Hall
Maidstone
Kent
ME14 1XQ

Email: social.services@kent.gov.uk (for general, non-confidential enquiries)
Tel:03000 41 11 11
Out of hours: 03000 41 91 91

Medway:
Medway Council
Gun Wharf
Dock Road
Chatham
Kent
ME4 4TR

Email: ss.accessandinfo@medway.gov.uk (for general, non-confidential enquiries)
Tel: 01634 334466
Out of hours: 03000 41 91 91

Jargon Buster

During your young person's stay at KMAH you will hear terminology you may not be familiar with. Below we have listed the most common, however if there is any you are unsure about please ask a member of staff.

General Adolescent Unit (GAU): A Specialist mental health inpatient ward that provides short-term assessment, treatment, and intensive support for young people age 12-17 experiencing a mental health crisis.

Anti-psychotic Medications: A type of medication that is primarily used to treat psychosis but can sometimes be used within other treatment plans.

Anti-depressnat medication: Medication that is used to treat depression and some anxiety disorders by helping to balance chemicals in the brain that affect mood.

Mood stabilisers: Medication that is used to help control significant changes in mood.

Art therapy: A way of expressing difficult feelings through a creative process rather than thinking and talking.

CYPMHS: The acronym for Children and Young People's Mental Health Services. Formerly known as CAMHS.

Care-Coordinator: The member of the care team who will coordinate the Care Programme Approach and act as a key contact point for service users and their carers.

Care Plan: A personalised document that outlines a patient's mental health needs, treatment goals, interventions, risk management strategies, and the support required to promote recovery and wellbeing. It also guides staff in providing consistent, safe and effective care while involving the patient and parents in decisions about their treatment.

Clinical Support Worker: Members of the nursing team who support qualified nursing staff to care for patients

Health Care Professional (HCP): An umbrella term referring to the qualified clinician that has been allocated to oversee the young person's care and clinical treatment.

Early Intervention Service (EIS): A mental health team working with adults of working age who are experiencing their first episode of psychosis or are in the early. This is also referred to as EIP.

Care Programme Approach (CPA): A meeting in which the professional network, young person and parents come together to review care and treatment. This meeting can result in planning for discharge or further admission and treatment.

Clinician: Someone who provides care and treatment to patients, such as a nurse, psychiatrist or psychologist.

Cognitive Behavioural Therapy (CBT): A talking therapy that helps understand how thoughts, feelings, and behaviours are connected, and teaches practical skills to manage challenges and improve their emotional wellbeing.

Consultant Psychiatrist: A senior medical doctor specialised in mental health. they are responsible for assessing patients, diagnosis, overseeing treatment and prescribing medication.

Forensic services: The service within mental health that support people who commit offences while being mentally ill.

Family/Systemic therapy: Systemic Family Therapy focuses on relationships. Sometimes family relationships but also relationships with institutions (school for example), with friends and other people. Systemic Family Therapy doesn't just have to focus on relationships with people but also things and concepts. Sometimes we think about our relationship with emotions (do you try to avoid them or do you express yours freely), food or how we might disagree well.

Formal patient: A person who is admitted to hospital under a section of the Mental Health Act 1983 (often referred to as "under section").

General Practitioner (GP): Local doctors based in the community.

Group therapy: A form of psychotherapy completed in a group setting.

Jargon Buster

Inpatient: someone who has been admitted to hospital.

Mental Health Act 1983 (MHA): A legal framework governing the treatment of people with mental illness in England and Wales.

MDT: The Multi-disciplinary Team.

Nearest relatives: The spouse, co-habitee, child or parent (in that order) that has certain rights in relation to having their relative detained under the Mental Health Act.

KMMH: Kent and Medway Mental Health Trust

Next of kin: The person nominated by the service user as their contact in case of emergency.

Occupational Therapist (OT): Person working to develop skills and confidence in everyday life, such as work, social and leisure activities and personal care.

Occupational Therapy Assistant (OTA): Support the OTs to lead groups and activities.

Outpatient: Someone who comes to hospital for an appointment to see a doctor, nurse, therapist or psychologist, but is not admitted.

Patient Advice and Liaison Service (PALS): Offers confidential advice, support and information on health-related matters.

Pharmacist: Someone with expert knowledge of medicines.

Pharmacology: The study of drugs and medicines, and their uses and effects.

EMDR therapy (Eye Movement Desensitization Reprocessing): A psychotherapytreatmentthatis designed tohelp people healfrom the symptoms and emotional distress or trauma, using side-to-side eye movements or bilateral stimulation.

DBT (Dialectical Behaviour Therapy: An evidence based psychoterapy that is designedto help people manage intense emotions, self-harm, nd relationship distress.

Psychological therapies: Also known as "talking therapies", is a way of helping people by talking through emotional problems with a trained psychological therapist.

Psychologist: Someone with a psychology degree and expertise in psychological therapies to help people with emotional or psychological problems

Psychosis: disorders involving distorted perceptions of reality – often with symptoms of hallucinations and delusions

Psychotherapist: A mental health professional who assesses and supports patients' emotional, behavioural, and psychological wellbeing. They use evidence-based therapies and psychological interventions to help individuals understand and manage their difficulties, promote recovery, and improve coping skills.

Psychotherapy: "Talking treatment" to help people to understand their mental or emotional difficulties and change behaviour, thoughts or emotions.

Social Workers: Supports patients with their social, family and safeguardign needs. They help individuals access appropriate services, advocate for their rights, assess risks, and work with families and agencies to promote wellbeing, recovery and safe discharge planning.

Talking therapy/treatment: General term for treatments that involve talking in individual or group sessions with a trained mental health professional.

Ward doctor: A trained doctor who is responsible for patients' daily medical care and for prescribing medication. They may stand in for a Consultant.

Informal patient: A person who is receiving assessment or treatment voluntarily and is not detained under the Mental Health Act.

