Summer Examinations 2015

Module Title: Enhancing Service Delivery within Specialist Mental Health Care
Level: Six
Time Allowed: Three Hours

Instructions to students:
- Enter your student number **not** your name on all answer books.
- Answer **FIVE** of the seven questions.
- All questions are equally weighted; the weightings allocated each **part** of the question are indicated to the right.
- Neither books nor notes may be taken into the examination.

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Answer **FIVE** out of the seven questions all of which relate to a specialist presentation taught on this module.

1. Steven Jones is a 30 year old man who has just been discharged from hospital following 6 years detention in medium and low secure settings. Steven has a history of offending and his last index offence was for criminal damage and seriously assaulting a police officer. He was originally detained on a section 37/41 but this has now been lifted to allow for his rehabilitation into community living and therefore receive support with this from the community Forensic team.

   a. Critically examine the risks and challenges both Steven and the Community Forensic team will face following Steven’s discharge.  
   (50%)

   b. Provide a detailed plan of support and rehabilitation aimed at securing Steven’s safe return to community living.  
   (50%)

2. Jim Brown is a 25 year old man who has been admitted to the regional medium secure unit following a court appearance. His offence being assaulting a neighbour and then when the police arrived barricading himself in his home. He was subsequently arrested and found to be acutely psychotic and verbally threatening. It quickly became apparent that he had previously been diagnosed with a mental health condition and hadn’t been taking his medication. He has now been detained under section 37 of the MHA.

   a. Provide a detailed assessment of risk that would need to be carried out for Jim upon admission.  
   (50%)

   b. Detail a plan of care aimed at helping Jim to be more concordant with his medication as part of his overall programme of rehabilitation.  
   (50%)
3. You are currently working in a substance misuse service and have been asked to undertake a project regarding substance misuse training of the mental health workforce.

a. You decide to ascertain the training needs of the workforce in relation to substance misuse and carry out a training needs analysis. What considerations may you have when doing this? (20%)

b. From conducting the training needs analysis, you quickly establish that substance misuse and substance misuse clients are seen in a very negative light, with comments such as ‘they’ve brought this on themselves’; ‘this is nothing to do with me’ and ‘this is a specialist area and should remain that way’. Considering this information and the wider aspects of national and local policies, how would you go about setting up training? (40%)

c. How would you deliver sessions on substance misuse that are interesting and engaging, but also relay key messages? (40%)

4. You are working in a substance misuse service and have been asked to do a joint home visit to Kelly who is well known to the mental health service. It is reported that she has been using heroin, but is not known to the substance misuse service.

a. When you arrive at her flat, you discover Kelly on the floor with the contents of a sharps bin tipped out next to her. She is attempting to find a sharp needle out of all the used ones. What ethical, moral and legal aspects do you need to consider here? (30%)

b. Kelly has been using heroin IV for a few months and is supporting this habit however she can. How would you go about conducting an assessment with her? (30%)

c. Considering the evidence based treatments and interventions and national policies, what strategies may you implement to support Kelly? (40%)
5. You are working within a community mental health team and have been asked to assess John, a 78 year old man, newly diagnosed with Alzheimer’s disease. John lives with his wife, who is his main carer.

Recently John had been getting anxious and agitated and at times has become reluctant to be left alone in the house, but at other times he has wandered into the village alone and got lost.

a. As part of the assessment you are asked to complete a formal assessment of cognitive function using the mini mental state examination (MMSE). Identify the value of the MMSE as a measurement of cognitive impairment. Present evidence to discuss its strengths and weaknesses. (30%)

b. From the assessment, a score of 16 is obtained which includes deficits in short term memory recall, orientation, to time and place, but not person. Whilst conducting the test he became very anxious about his failure to remember his address. From the scenario, what individual factors could have a significant impact on the test result? (30%)

c. Following on from this assessment, what type of inventions could you begin to implement in order to support John and his wife? Use supporting evidence and policy to support you suggestions. (40%)
6. You are a mental health nurse working in tier 3 Child and Adolescent Mental Health Services (CAMHS). When carrying out an initial triage assessment you meet Ben, a 7 year boy, and his mother Debra.

At this assessment you learn from Debra that Ben has always been a lively, hard work child. The problem, however, is that his behaviour has now become difficult to handle at school and at home. School reports say he is disruptive in class, always acting silly, constantly fidgeting, and has a poor attention span. This has negatively impacted his learning and attainment. Ben’s mother reports, when at home, she and her new partner struggle with Ben’s defiant behaviour. She even reports Ben has hit her on occasions when he has not got his own way.

a. From the brief synopsis above hypothesise as to what mental health problems Ben may have and then outline the type of specialist assessments that should be carried out further to the initial triage assessment to confirm this hypothesis.

   (50%)

b. Considering your hypothesized formulation or diagnosis, detail a care package that may support Ben and his family, use evidence and theory to support your suggestions.

   (50%)

7. You are a staff nurse on a specialist in-patient tier 4 CAMHS unit. You are key worker to Zoe, a 15 year old girl, who has been admitted to the unit following a serious attempt to take her own life, by taking Paracetamol with vodka. Zoe also self injuries and has many scars and cuts on her arms. You know that Zoe’s history is complex; she was fostered from two years of age until the age of 13. At 13 she ended up in care because her foster parents found her self-harming behaviour too difficult to cope with.

a. Analytically describe why Zoe may be so vulnerable to mental health difficulty and why she may express her psychological distress by self harming. Draw from theory to support your formulations.

   (50%)

b. What type of supportive inventions could you and the multi-disciplinary team begin to implement whilst Zoe is on the ward? Draw from the evidence base to support your rationale for such intervention.

   (50%)

End of Paper