

# [Therapeutic relationship](https://assignbuster.com/therapeutic-relationship/)

Some of the core personal and professional qualities expected of a good Health care professional can be interpreted as core conditions of care.

These core conditions provide a fundamental basis from which the therapeutic relationship can develop. They include human warmth, empathy and sincerity, evidence of trustworthiness and honesty, integrity, commitment and competence. They can promote trust and develop a safe environment in which the client can relax, explore and grow. Warmth sincerity, honesty and integrity may naturally exist as human qualities within many individuals.

Other qualities may need to be developed or enhanced. For example, many individuals are naturally empathetic, but may have difficulties supporting people through deeply emotional experiences. (OCarroll, M. And Park, A, R, J. 2007)Empathy is often misunderstood as sympathy or total understanding. Empathy as a responding skill provides a means of acknowledging and identifying with the emotions expressed by the client.

It can help facilitate understanding and can clarify issues for both client and health care professional. Trustworthiness is also assumed to be a natural human quality, the gradual development of it can provide an opportunity for trust ??“ building through the provision of mutual respect and a none judgmental atmosphere, the establishment of emotional boundaries, the maintenance of confidentiality and a overall person centred approach over time will establish a strong relationship with the client. (Watkins, P. 2003)When a client displays server challenging behaviours a safe and therapeutic approach would need to be adopted, Emerson et al (1987) suggests the following as a definition of severely challenging behaviour “ Severely challenging behavior refers to behavior of such an intensity, frequency or duration that the physical safety of the person or others is likely to be placed in serious jeopardy, or behavior which is likely to seriously limit or delay access to and use of ordinary community facilities” . Although behaviours may not always be life threatening, they can significantly interfere with the quality of life of the individuals concerned, and that of those who live with and care for them.

Challenging behaviours may include aggression, verbal and physical, self-injurious behaviour, non-injurious stereo-typed behaviours. Physical interventions may need to be used in some cases of violence and aggression but always in accordance with the, challenging behaviour policy for TEWV NHS (online 23. 3. 11). Addressing the consequences of stigma, discrimination and social inequality leads to the use of The Ten Shared Capabilities (Department of health 2004a), describes the capabilities necessary to achieve best practice for all staff who work in mental health services, treatment and assessment and learning disabilities.

The capabilities are geared towards the cultural changes in services, providing, choice being person centered and mental health promotion. (Creek, J, Lougher, L, Bruggan, H. 2008). To use the shared capabilities and ensure that the client benefit from , positive risk taking, working safely and the management of risk to service users, family members and cares are all taken into account . Engaging in risky behaviour to some degree as part of daily living will introduce some normal living into the lives of service users. It would be virtually impossible, to live a normal life without some form of risk taking. While some would argue positive risk taking is a relatively new concept in risk management, it is true to say that many practitioners and nurses have been working collaboratively with service users in this way for many years in their everyday working practice.

(Stickley, T. 2008) Therapeutic communication is used to establish understanding between client and carer, a distinguishing aspect of therapeutic communication is its application to long-term communication interactions. Therapeutic communication is defined as the face-to-face process of interacting that focuses ? ? on ? ? advancing ? ? the ? ? physical ? ? and emotional well-being of a patient.

To function effectively in the therapeutic communication process, you must be an informed and skilled practitioner. ? Your development of the required knowledge ? ? and ? ? skills ? ? is ? ? dependent ? ? upon ? ? your commitment ? ? to ? ? seeking ? ? out ? ? and ? ? participating ? ? in continuing education learning experiences across the entire spectrum of healthcare services.(Funnell, R, Koutoukidis, G.

2009, 4th ed). As well as therapeutic communication other therapeutic tools used, are activities designed to engage the client and develop the skills needed to move onto a variety of engaging activities, these may include drawing, listening to music and jigsaws. Working in a learning disability hospital in the north east of England, therapeutic interventions include, setting up a routine the client is comfortable with. This includes personal hygiene and assistance form the client??™s health care professional to meet their needs, planning the day??™s objectives with the client and agreeing this prior to commencing the activities.

Ensuring a healthy diet is offered to the client. Changing the activities in a small way will ensure the client is challenged when tasks become easy to complete, this will help them grow and encourage them to try new things, and this may lead to a more therapeutic environment. To enable staff to interact with clients resulting in a learning experience, staff needs to be trained to a very high standard, the NHS trust supply this training to its health care professionals partly through mandatory training and voluntary courses attended by its health care staff. All staff has a personal development plan (PDP) training can be included in the plan and requested at staff supervisions, staff update this plan throughout the year ensuring that the keys skills are met.. Creek, J, Lougher, L, Bruggen, H. (2008) Occupational therapy and mental health, Elsevier: ChinaEmerson E, Barrett S, Bell C, Cummings R, McCool C, Toogood A & Mansell J, (1987) Developing services for people with severe learning difficulties and challenging behaviour: Report of the early work of the Special Development Team in KentFunnell, R, Koutoukidis, G. (2009 p 454-457) 4th Ed, Tabbners Nursing Care: Theory and Practice.

Elsevier: AustraliaOCarroll, M. And Park, A, R, J. (2007, p17-19). Essential Mental Health Nursing Skills, Therapeutic relationships in mental health nursing, Elsevier ltd: chinaStickley, T. (2008 p34-37) Learning about mental health practice. West Sussex: England.

? Watkins, P. (2003 p145-151) Mental health nursing: the art of compassionate care. Butterworth-Heinemann: Edinburgh. http://www. tewv. nhs. uk/Global/Policies%20and%20Procedures/Clinical/CLIN-0019-v3(2)%20Challenging%20Behaviour%20Policy. pdf challenging behaviour policy (assessed online 23. 3. 11)