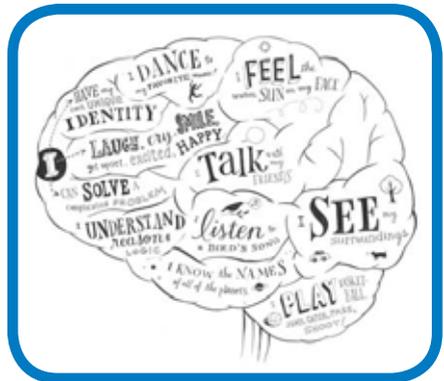


Service:  
**Neuropsychiatry**

# Neuropsychiatry Inpatient Treatment Programme



*Exceptional healthcare, personally delivered*

# Inpatient Treatment Programme

## The admission process and why you are being admitted

Patients are admitted to The Rosa Burden Centre for a variety of physical and psychological symptoms which require a holistic, person-centred programme to support their recovery. You will be guided and supported by our Multi-Disciplinary Team or “MDT”, which includes physiotherapists and occupational therapists, cognitive behaviour therapists, as well as doctors, nurses and healthcare assistants.

Most patients will have had an assessment prior to admission to establish your recovery goals, and your motivation for taking part in a programme of physical and psychological assessment and rehabilitation.

During your admission and on your letters you may notice your condition referred to as “Functional Neurological Disorder”, “Somatic Symptom Disorder”, “Somatoform Disorder” or other variations on this. Unfortunately there are several different names for very similar problems and the names keep changing. Don’t let it confuse you as the treatment principles are all the same! We’ll do our best to help you understand this.

You will have ample opportunity to discuss your expectations and concerns with the staff.

**The admission is for up to three weeks. During this time we will assess:**

- Your physical symptoms and the impact they have on you.
- Your ability with daily living skills
- Your mental health

We hope to develop, with you, a shared, individualised understanding of your symptoms. Trying to understand some of the complexities of you as an individual is a routine part of this process. Remember that anything you discuss with us is confidential medical information.

You make all the choices - we will encourage you, but will never make you do anything you don't feel comfortable with. If at any point you think our programme is not right for you, just let us know.

**If you remain in hospital for treatment:**

- We will encourage you to participate in the programme of activity on the ward from the outset.
- The first week of treatment will enable an assessment of your needs, and to identify the goals for admission. Many of these goals are patient-led, supported by the nursing staff.
- The first week will also help us identify which members of the MDT need to be involved in your assessment and therapy.
- The decision to continue inpatient treatment will be taken after the first week in consultation with you and the MDT.
- Your progress and treatment goals will be reviewed weekly in the MDT ward round held every Tuesday morning.
- The usual overall length of admission is up to 3 weeks followed by an outpatient follow up appointment with a member of the MDT.

It is expected that you will remain in hospital for the first weekend: thereafter weekend leave will be negotiated on a weekly basis as part of your programme. Please be aware that hospital transport cannot be provided for weekend leave.

If our treatment programme is not suitable for you we will refer you back to the referring consultant as an out-patient or to your GP.

# The Rosa Burden Centre

## General Ward & Patient Information

### Meal Times

Meals will be served in the dining room (Nursing staff will help and support you if needed).

You will be able to select your menu on a daily basis, choosing what you eat a few hours prior to the food arriving. Meals times are:

8.30am	Breakfast
12pm or 12.30pm	Lunch
5.30pm or 6pm	Dinner

### Appointments /Assessments

Appointments and assessments generally take place in office hours, though nursing staff provide 1:1 in the evenings and at weekends. Please check the appointments board prior to leaving the ward in case you have an appointment booked.

### Visiting Times

2.30 – 4.30pm and 6.30pm – 8:30 pm

Again, please ensure you are available for assessments or appointments which may fall into these times.

These times may be flexible for patients with carers – please discuss with senior nursing staff if alternative arrangements need to be made.

### Ward Etiquette

The Rosa Burden Centre is a mixed sex ward; due to this please ensure no night wear is worn in the communal areas. No patients, under any circumstances are to socialise in other patient's side rooms, please use the communal areas e.g. the lounge, recreation or dining room.

# The Nursing Role

## Assessment Process

The Rosa Burden Centre provides 24 hour specialist neuropsychiatric nursing care to patients on our ward.

The nurses assess, implement and evaluate care for all patients, defining problems with the patient and their care when appropriate.

Nursing interventions include focus on health promotion, assessment of abilities and maintaining safety for individual patients. We assess patients to regain, improve or acquire coping abilities and hope to prevent a further decline. If required, patients are assisted or supervised with personal care whilst aiming for independence.

Nursing staff are also here to facilitate you with your daily goals set by the therapists.

We will administer your prescribed medications and ensure any necessary monitoring is undertaken if changes are made to your medications. **Please note there is no self-medication policy for this ward and all drugs must be handed into nursing staff on admission and on return from periods of weekend leave from the hospital.**

All patients admitted with Functional Neurological Disorder will have the opportunity to receive 1:1 time with an assigned nurse who will help manage your expectations and manage your goals during your admission. This may involve liaison with your careers or professionals in your community team. It is essential for us to have contact details or relevant individuals from the beginning of your admission.

A member of the nursing team will attend weekly ward rounds. If you have any concerns which you find difficult to address in these meetings they will always advocate on your behalf or you may request 1:1 ward round with your consultant.

Your assigned nurse will meet with you weekly during your admission. However all of the nursing team are available to talk and support to you about any of your needs or concerns.

# Cognitive Behaviour Therapy

## The Assessment Process

Cognitive Behaviour Therapy (CBT) is a way of talking about:

- How you think about yourself, the world and other people
- How what you do affects your thoughts and feelings

CBT is essentially a talking therapy; it is also a collaboration approach where you will work with your therapist to engage in action. CBT can help you with the way you think about things (“cognitive”) and what you do (“behaviour”). These changes can help you feel better. Unlike some other talking treatments it focuses on the “here and now” problems and difficulties. However, to have a full understanding of your problems you may be asked about your past and how it might influence your life now.

CBT has been found to be helpful in treating Functional Neurological Disorder as well as the following conditions; anxiety, depression, panic, agoraphobia, other phobias, post-traumatic stress disorder and medically unexplained symptoms.

CBT can help you make sense of seemingly overwhelming situations by identifying individual contributing factors. This makes it easier to see how the factors are connected and how they affect you. These factors are:

- A situation, a problem, event or difficult experience which brings about;
  - Thoughts
  - Emotions
  - Physical Feelings
  - Actions

Each of these factors can affect the others. How you think about a problem will affect how you feel physically and emotionally; it can also alter what you do about it.

The first session will be an assessment session and will include a detailed interview and an opportunity to explore whether the therapy can be beneficial to you. It can take a further two weeks or three sessions to identify the nature of the problem(s) because it is sometimes difficult to discuss upsetting issues or things that you may never have talked about before. At the end of these introductory sessions you can decide if CBT is the right therapy for you and we will then identify goals. Therapy will start in hospital and you may be able to continue as an outpatient if necessary.

Sessions are generally 30-50 minutes long and you will see your therapist for one or two sessions a week dependant on your individual needs. During each session an agenda will be set and you may well be asked to carry out tasks between sessions, such as completing a thought diary, practising breathing techniques, experiments with different ways of doing things/doing different things, reading some self-help literature that is available on the unit.

## Occupational Therapy

### The Assessment Process

Occupational Therapy (OT) is concerned with the impact of your condition on your everyday life – including self-care activities, social and leisure activities and work. It is also concerned with the impact of life stresses on your condition. Its general aims are to promote health and well-being, to achieve a balanced lifestyle and to maximise independence.

What you do in occupational therapy will depend very much on your condition, your circumstances and any specific requests from your doctor. For example, it may be practical assessment of how you manage particular activities (such as shopping or cooking a simple meal) or it may be discussion of the ways that stress affect performance of activities and the way to manage stress better.

The first session with an occupational therapist will usually involve a detailed discussion about the way you manage everyday activities and how your condition affects your abilities. Some questions might seem irrelevant but your therapist, like others in the team, has to make sure nothing is overlooked. At the end of your assessment process (which might last more than one session) you and your therapist should agree on any areas that need working on and set specific goals.

What happens in therapy sessions and how often they take place depends on your needs and on the goals that are set. Most people can normally expect to see their occupational therapist twice in the week but sometimes once a week is enough and sometimes more frequent meetings are needed. Sessions will nearly always be one-to-one. Between sessions you may be asked to practice something, you might be offered outpatient sessions with the hospital to help continue to put in practice things that you have started in hospital.

There are two Occupational Therapists at The Rosa Burden Centre and although you may see one of them because of their particular experiences or skills, most people could be seen by either of them. They have both worked at The Rosa Burden Centre for a long time and have developed interests and experience which might not usually be thought of as part of occupational therapy. For example, the use of psychological approaches and working with sleep disorders.

## Physiotherapist's Role

### The Assessment Process

Physiotherapy looks at an individual's physical ability and function. The main aim of physiotherapy is to maximise function and ability and to enable patients to manage to the best of their ability within their everyday activities. Physiotherapy assesses a patient holistically, taking into account their physical, psychological and social wellbeing. The physiotherapist then assists the patient to set realistic goals.

Physiotherapy is science-based, committed to extending, applying,

evaluating and reviewing evidence that underpins and informs its practice and delivery.

## **Assessment**

If a Functional Neurological Disorder patient is referred to physiotherapy they will receive an assessment. This assessment includes discussion and a physical assessment regarding current abilities and difficulties. The physiotherapist looks at your movement, strength, balance and function as appropriate. It may be completed in one session or spread over a couple of therapy sessions.

## **Treatment Plan**

The therapist will discuss with you the goals that you wish to achieve, and if appropriate for that admission, plan with you a programme of treatment that you need to work on to move towards achieving those goals.

The treatment plan will include treatment led by the therapist as well as the activities you should complete independently or with assistance from the nursing staff.

There is an expectation that patients will take responsibility for their treatment programme (with the therapist providing the knowledge and skills) to enable the patient to continue their own care (with support as necessary) on discharge.

## **Staff**

The senior Physiotherapist is an experienced Physiotherapist who has specialised in neurological and neuropsychiatric conditions. The inpatient physiotherapist service is on the ward; you will be informed if you will be seen and patients are provided with programmes of therapy that they can complete independently or with support of the nursing staff based on their need/assessment.

# Mindfulness Programme

## Ward taster sessions

It can be easy to rush through life without stopping to notice much. Paying more attention to the present moment, to your own thoughts and feelings, and to the world around you can improve your mental wellbeing. Some people call this awareness “mindfulness”, and you can take steps to develop it in your own life.

Good mental wellbeing means feeling good about life and yourself, and being able to get on with life in the way you want. You may think about wellbeing in terms of what you have; your income, home or car, or your job. But evidence shows that what we do and the way we think have the biggest impact on wellbeing. Becoming more aware of the present moment means noticing the sights, smells, sounds and tastes that you experience. As well as all the thoughts and feelings that occurs from one moment to the next.

Studies have found that mindfulness programs, where participants are taught mindfulness practices across a series of weeks, can bring about reductions in stress and improvements in mood. Reminding yourself to take notice of your thoughts, feelings, body sensations and the world around you is the first step to mindfulness.

At the Rosa Burden Centre we offer mindfulness taster session. These sessions are for inpatients only and are to establish if this is a beneficial tool you may want to pursue independently in the community.

# Doctor's Role

Most of the doctors looking after you at the Rosa Burden Centre are trained psychiatrists – but don't worry, no couches or bow ties! The two inpatient consultants are neuropsychiatrists – which means they specialize in treatment of mental disorders that arise in the context of neurological disease, and there are junior doctors who you will meet on arrival. We also have a neurologist working with us in the outpatient clinic

Many people with functional neurological disorder do not have a mental health problem requiring medical treatment (such as antidepressant medication), but some do and it is our role to assess this and provide guidance on treatment.

Assessing a person's mental health involves taking a thorough history. This will help us put your symptoms into context and understand the impact they have on you.

If you are being admitted for assessment and treatment of functional neurological disorder, we will not be investigating these with brain scans or other technical tests looking for a "physical cause". We might do routine blood tests when you arrive onto the ward as a standard check-up.

However we are medically trained so will be discussing any current or historical physical health problems. If you become unwell during your admission we will ensure you get any appropriate physical treatment.

The consultants provide clinical leadership to the team in case of any tricky problems or difficult decisions.

We look forward to meeting you and doing our best to help you recover.

**PATIENT  
APPROVED** 

### How to contact us:



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Southmead  
Bristol  
BS10 5NB



0117 414 0470 or 0117 414 0472



[www.nbt.nhs.uk](http://www.nbt.nhs.uk)

If you or the individual you are caring for need support reading this leaflet please ask a member of staff for advice.

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take part...  
be involved...  
in research

While in our care, you may be invited to take part in a research study.

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