APT's Award for Excellence in DBT 2016

New Dawn (Cygnet Hospital Ealing, London)

New Dawn 'Year of Commitment' Interview Themes

Service users were interviewed by the lead clinical psychologist for the purpose of this initiative. Service users were asked what their experience has been like in the DBT program so far, the pre-treatment phase and the orientation video were then introduced, followed by asking the service users how they think this may have had a positive impact on their experience. A lot of rich information regarding the importance of a pre-treatment phase was gathered that was not entirely captured by the comments provided by the service users in the included attachments. Below is a summary of the themes that were identified during interviews.

- 1. **Adjustment:** Without pre-treatment, service users felt that the time it took to adjust may have been longer than normally expected. They felt distressed and unstable for longer, reducing their ability to engage sooner.
- 2. **Commitment:** They reported that their commitment to the program was quite weak; they didn't understand the importance of the therapy to helping them achieve their goals which made it difficult to understand why changing unhelpful behaviours was necessary.
- 3. **Symptoms being exacerbated:** A service user reported that she felt historical vulnerabilities were triggered and exacerbated as a result of not receiving a comprehensive commitment and orientation process. She highlighted issues with attachment, trust, unpredictability and invalidation were triggered, this impaired her ability to focus on and engage with the program and team.
- 4. **Predictability increases ability to cope:** Service users highlighted the importance of feeling like their experience of DBT could be somewhat predicted. Although feeling uncomfortable and overcoming anxieties related to the environment is encouraged, from the outset, a sense of predictability and consistency was very important to their ability to feel committed to and motivated about their therapy. Service users reported expecting the worst, which meant they experienced more intense and chronic emotional dysregulation.
- 5. **Feeling in control:** Service users reported the importance of feeling as though they have some level of control over their therapeutic process. Establishing a collaborative and equal therapeutic relationship and the importance of making an informed decision in this setting is compromised. Given it is a controlled environment, pre-treatment and orientation would have helped service users to feel more respected and confident in their treatment.
- 6. **Motivation and willingness:** Service users reported that not having the opportunity to learn about and discuss the expectations of therapy reduced their motivation and willingness to cooperate with their therapist. Some described being caught in a process of 'cutting off your nose to spite your face' because they did not feel that they entered the program in a collaborative and informed way. They reported that urges to drop out and attempts to drop out would have been reduced.

- 7. **Confidence in ability to get better:** Service users reported having doubts about their ability to get better because they were not informed about the importance of agreeing on goals with their therapist. These doubts made them feel more hopeless and disengaged.
- 8. **Confidence in the team to help them get better:** Service users reported had they had the opportunity to work with a DBT therapist before admission in to the program, they would have had increased confidence in their therapist's ability to help them, and increase their trust in the relationship.

In an inpatient setting it is difficult to provide a pre-treatment phase before admission in to the DBT the program because service users are already admitted. We are hoping to maximise the service user's ability to engage and commit to the program, reduce the impact of the themes reported above and measure intervention outcomes as a result of the initiative.

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We have a full DBT program at New Dawn, with three levels of support for the service users, including the intensively trained primary DBT team led by a clinical psychologist, the DBT skills coaching and support team consisting of multidisciplinary professionals, and the nursing team providing excellence in medical care. The psychological environment is one which is consistent with the DBT ethos and principles. At New Dawn Cygnet Hospital Ealing, we consider how service users enter into and stay engaged with our DBT program as an important factor for positive therapeutic progress.

With this in mind, we have developed an initiative to target service users' preparation for and commitment to their DBT journey. Our aim is to introduce a structured pretreatment phase to: Increase the service users' experience of collaboration and cooperation, improve adjustment to the ward and program, increase motivation and commitment, increase therapeutic progress, and increase likelihood of a successful transition back in to the community. In a climate where we have formal service users, improving cooperation, commitment, engagement and motivation is essential for positive treatment outcomes.

Our initiative is called 'a year of commitment' and we have interviewed service users to determine how a structured pre-treatment phase would have improved their engagement with the DBT program. Based on their own experiences, the service users will be responsible for creating an orientation video for New Dawn for new service users. The video aims to provide orientation to DBT, expectations of therapy, DBT principles, how the team will support them, and to validate and normalise the process of adjustment. We are hoping to increase the service users' informed decision, sense of control, collaboration and responsibility.

We also believe it is important for the service users to have a pre-admission viewing of the ward, either through physical visits or a virtual tour along with a DBT orientation package providing them with an outline of the DBT program. Once service users are on the ward, they will be seeing their DBT therapist on a weekly basis for a 6 week pre-treatment phase. These sessions focus on commitment, agreeing on goals, orienting to the treatment and establishing a relationship. Each new service user will have access to a service user 'buddy' that assists with orientation from a peer perspective. Our goal is to provide a pre-treatment phase that is a 360 degree commitment and orientation process.

This is an outline of our graded approach to pre-treatment on New Dawn:

- 1. Orientation package provided to service user before admission to the ward
- 2. Physical visit or virtual tour of the ward.
- 3. Each service user will be able to watch the orientation video on the ward
- 4. The service user will have access to a service user 'buddy' for peer orientation
- 5. A DBT therapist will be allocated for 6 weeks of pre-treatment

6. The service user will have a care pathway approach meeting with the New Dawn team and their home team after 6 weeks to discuss their commitment and readiness for the DBT program.

Winning this award will strengthen our commitment to working towards achieving excellence in DBT within our team and across our service, ultimately providing the service user with the best treatment possible.

N.B: Please see attachments with some of the service user's feedback about the benefits of having a DBT pre-treatment phase and a revised summary of interview feedback.