Implementation of an Evidence Based Self-Injury Prevention Protocol

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Outline of Presentation

- The issue and prevalence of non-suicidal self-injury
- The challenges faced by nursing staff in dealing with patients who self-injure
- Review of Evidence Based Self-Injury Prevention Protocol
- Lessons Learned from implementing the evidence based self-injury protocol
Objectives

- Understand the challenges that nurses face while caring for a patient who self-injures
- Identify an innovative evidence based approach for caring for a patient who self-injures
- Be familiar with the lessons learned throughout the implementation of the self-injury prevention protocol

Self-Injury

- What is self-injury?
- Who self-injures?
- Why do patients self-injure?
Sensory Integration

- Sensory Processing (sometimes called "sensory integration") is a term that refers to the way the nervous system receives messages from the senses and turns them into appropriate motor and behavioral responses. Whether you are biting into a hamburger, riding a bicycle, or reading a book, your successful completion of the activity requires processing sensation or "sensory integration."

Versus

- Sensory Processing Dysfunction to a neurological "traffic jam" that prevents certain parts of the brain from receiving the information needed to interpret sensory information correctly. A person with SPD finds it difficult to process and act upon information received through the senses, which creates challenges in performing countless everyday tasks. Motor clumsiness, behavioral problems, anxiety, depression, school failure, and other impacts may result if the disorder is not treated effectively.

Challenges

- Patient placed on 1:1 precautions
- Increased cost to the organization
- Staff frustrations (antipathy scale results)
- Limited patient insight
- Difficulty implementing the protocol
Dialectical Behavior Therapy

- Dialectics is a way of thinking that considers that everything is connected, that change is inevitable and that opposites can be integrated to form a closer approximation to the truth.

- Example: People must accept themselves, flaws and all, and yet recognize that by changing their destructive coping methods and learning other skills, they can have a better life – in part because they are always impacting others and when they change, others will change in response.

Dialectical Behavior Therapy

Made up of four modules:

- Mindfulness
- Distress Tolerance
- Emotional Regulation
- Interpersonal Effectiveness
Mindfulness

- Core Mindfulness was derived from techniques developed and used in Buddhist meditation
- Asks that people step back and observe the moment – what is happening inside and around them and to live and breathe in that moment
- Helps to focus on the present moment as opposed to worrying about the past or future
- DBT mindfulness – The ability to be in control of your mind and not your mind being in control of you

Interpersonal Effectiveness

- To effectively communicate your thoughts and feelings in a manner that gets your needs met
- To learn to communicate your needs without losing the relationship
- To maintain your self-respect
- Can help both passive and aggressive communicators
Emotional Regulation

- To help you identify your current emotional state
- To decrease negative emotions and to increase positive emotions
- To reduce emotional vulnerabilities through pro-active plans and strategies

Distress Tolerance

- Allows one to tolerate and “survive” an emotion or situation that they cannot change
- Helps to identify the difference between situations they can change and situations they cannot change and learn to accept the situation they are currently in
LESSONS LEARNED
Self-Injury Prevention Protocol

- Patients who have a history of self-injuring behavior are identified and placed on the Self-Injury Prevention Protocol

- Meet with patient and review Self-Injury Prevention Protocol packet

The Sensory Tools

- What is a Sensory Tool?
- Why have them in the clinical setting?
- What can people gain from use of the sensory tools?
**SKILLS CARD**

Name: ______________________________________

Note: This card should be used when you begin to have urges, to prevent yourself from self-injuring.

| Date/Time | Location | Vulnerabilities | Trigger | Automatic Thoughts | Feelings | Self Injury | Action | My impulsive behavior is trying to say...
|-----------|----------|-----------------|---------|--------------------|----------|-------------|--------|-------------------------------------
| Example:  |          |                 |         |                    |          |             |        | Tuesday 1/5/2010 3:30pm Bedroom No sleep last night  
A ton of homework. Argument with my mom this morning. My boyfriend called me and yelled at me, then threatened to break up with me. I can never do anything right. No one cares about me. I have so many problems. Worthless Hopeless Angry Depressed 4 No I am afraid of being alone and having no one care for me. |

*Scale:*

<table>
<thead>
<tr>
<th>0 = None</th>
<th>1 = Minimal</th>
<th>2 = Some</th>
<th>3 = Moderate</th>
<th>4 = Significant</th>
<th>5 = Severe</th>
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**DBT Five Skills**

- Four Square Breathing
- Half Smile
- Riding the Wave
- Opposite Action to Emotion
- Self Soothe
Patient Education Cont'd

- Sensory Tool Kit

- Interventions
  1. Empower patient who are struggling with their urges to contact staff
  2. Staff Responsibilities:
     - Establish a Therapeutic Rapport
     - Documentation
     - Intervention when self-injury occurs

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Self Injury Prevention Plan

Name: ___________________ Date:______________

What triggered your relapse?
What warning signs were present before you self injured that could be helpful in the future?
What feelings were you trying to relieve by self injuring?
Did you use your skills card? YES_______ NO_______ If no, why not?_______
What specific skills did you attempt to use to prevent yourself from self injuring?
In the future what is your plan to prevent yourself from self-injuring?
Is there something staff can do to help you avoid self injuring in the future?

Patient Signature __________________
Staff Signature______________________________
Lessons Learned

- Simplified the program
- Empowered Staff and Patients
- Increased Patient / Employee Satisfaction
- Decreased in Restraint Episodes
- Decreased 1:1’s by 80%

Self Injury Lessons Learned

- Questions?
- Thank you !!