Psychiatric Nurses’ Attitudes when caring for persons with Borderline Personality Disorder: Focus on Clinical Practice, Education and Best Practices - A Follow Up

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Objectives

1. Identify the importance of the nurse-client relationship, attitudes and issues when working with persons with BPD.
2. Describe specific educational strategies and best practices, within resources, that will improve nursing care to persons with BPD.
3. Identify specific steps the nurse or institution can plan, within their resources, that will enhance the nursing care and patient outcomes to persons with BPD.

Disclosure Statement: This speaker has no conflict of interest to disclose.

Summary of Borderline Personality Disorder

- Borderline Personality Disorder (BPD)
  - Complex, Multidimensional, Pervasive
  - Prevalence and Healthcare Service Demand
  - Axis II of DSM IV – Criteria: Behaviors
- Stigma: Compromised Quality of Life
- Behaviors Challenging to Nurses:
Literature Review: Summary and Trends

- Persons with BPD diagnosis:
  - Nurses perceptions of patients: considered difficult to handle.
  - Attitudes: cautious or negative
  - Education: changes attitudes
  - Nurses’ Perspectives: education and treatment
  - Trends: Domestic (USA) and International
    (James & Cowman, 2007; Krawitz, 2004; Woollaston & Hixenbaugh, 2008; Black et al, 2011)

Summary of Research

- Overview of Research
- Update of Specific Findings
  - Attitudes
  - Practices
  - Education
    (James & Cowman, 2007; Krawitz, 2004; Trealor & James, 2008; Woollaston & Hixenbaugh, 2008; Black et al, 2011)

Further Continuing Education

- Nurses 88% (n=72) reported further education would help to enhance care.
- Identified educational needs:
  - Information to educate patients (74%)
  - Education received regularly (69%)
  - Skills training workshop (69%)
  - Standard clinical protocols (64%)
  - Evidence Based Practices (55%)
  - Information on where to refer (54%)
    (Hauck, Harrison & Montecalvo, 2010)
Attitudes and Factors

- Attitudes were indicated as …
- Influencing Issues:
  - Positive Attitude and Relationship:
- Therapeutic Stance:
  - Effective Nurse Characteristics
- Self Awareness:
- Recovery Concepts: Hope, and …

Educational Strategies

- Educational Program:
  - Format
  - Duration
  - Frequency
  - Nurse/Staff and Patient
- Positive nurse-patient relationship:
  - Key to a collaborative connection between clinician and client.

Practice Strategies

- Evidence Based Practices:
  - Dialectical Behavior Therapy (DBT):
  - Systems Training for Emotional Predictability and Problem Solving (STEPPS)
  - Schema-focused therapy
  - Transference-focused psychotherapy
  - Others:
- Evidence Based Practices (EBP) vs. Therapy as Usual (TAU):
Assessment: Program and Education

- Program Needs and Resources
  - Number of persons with BPD
  - Type of setting: Hospital vs. Community
  - Acute vs. Long term
  - Resources available – staff, time, budget and …

- Education for Patients and Staff
  - Format – Frequency, methods, duration, and ….
  - Content - Self assessment tool, BPD theory, Patient case reviews

Implementation: DBT Modification

- Program Modules
  - Mindfulness: Experiential exercise
  - Distress Tolerance:
- DBT tools/components:
  - Diary Card, Skills Groups, Individual Therapy, Coaches, Milieu and …
- Education:

Comparison: Hospital and Community

- Similarities and Differences of DBT program components
  - Hospital and Community:
  - Hospital – DBT Program with most components
  - Community – Blended/Modified DBT Program
Steps and Strategies
Toward Enhanced Care

- Assessment of current attitudes:
- Current CE programs: evaluation
- Assessment of administration support:
- Staff meetings: at all levels to …
- Debriefing/team meetings to help promote consistency and…

Steps and Strategies (continued)

- Develop educational program
  - Staff
  - Patients
- Adopt Evidence Based Practices
  - Specialized training and program (depending on resources available)
  - Blend or modify via…meetings, education, support
- Promote self awareness with staff and attitudes
- Use enhanced attitude to cultivate relationship

Steps and Strategies (continued)

- Identify key educational topics:
  - BPD education including biosocial theory
  - Mindfulness
  - Skill Building – Distress tolerance
  - Diary Card of emotions
  - Daily interactions (coaching)
  - Others…..
Summary of Strategies

- Assessment
  - Staff and administration “attitude”
  - Resources — Budget, Staff, Time, Patient Census
  - Evidence Based Practices
    - Specialization vs. Blended Program
  - Current education programs
  - Nurse and staff commitment

Summary of Strategies

- Plan:
  - Point person
  - Staff and team participation in planning
  - Educational format within resources
  - Clinical Practice Format: Essential tools

- Implementation:
- Evaluation:
  - On going with revisions

Additional Thoughts

- Modifications from a “pure” DBT program is not a DBT program per se.
- Training for Evidence Based Practices - Expensive and time consuming
- Patients and staff response
- Any education and practice offered consistently with a nonjudgmental approach is better than none.
  ➢ Thanks for coming... Any questions?
References


Complex, M., Russo, I., Snowden, M., Slurkus, D., Ries, R., & Roy-Bryan, P. Factors associated with high use of public mental health services by persons with borderline personality disorder. Psychiatric Services 54, 1149-1154.


*Additional references, websites and information available in the handouts*