

PROTOCOL FOR: Family Coping, Impaired: Care of the Patient with

- POLICY:** 1. Family members and/or significant others are encouraged to participate in treatment planning through individual contact, family meetings and/or groups.

DESIRED PATIENT

- OUTCOMES:**
1. The patient and family will verbalize thoughts and feelings related to the illness and receive validation from professional staff and/or other patients and others' families.
 2. The patient and family will begin to accept and understand the diagnosis of mental illness as evidenced by their identification of distressing symptoms and showing or verbalizing effective coping.
 3. The patient will begin to verbalize understanding of how family dynamics impact on his behavior and will identify effective coping skills.

**CLINICAL
ASSESSMENT AND**

- CARE:**
1. Assess with the interdisciplinary team that family issues are appropriate for intervention during hospitalization.
 2. Assess the patient's ability to explore and work on family issues based on factors such as mental status, physical condition and/or proximity of family.
 3. Assist the patient to identify any triggers associated with family contact.
 4. Assess communication styles within the family, i.e. inappropriate use of defense mechanisms, ineffective communication, verbal or physical abuse, disturbed decision-making process, marital problems, role disturbance and unclear boundaries.
 5. Assess the patient's role in his/her family.
 6. Identify ineffective coping strategies utilized by patient in family interactions and utilize the milieu to engage in corrective interactions with others.
 7. Acknowledge and include in the plan of care, patient and family strengths, style of coping, problem solving patterns and how they function as a unit. Attend to cultural, ethnic, financial and any other personal or environmental influences as appropriate.
 8. Provide a safe environment for the patient and family to discuss issues related to mental illness and coping.
 9. Encourage patient and family to attend group and therapy sessions, especially weekly multi-family group.
 10. Refer any issues related to patient/family safety to the treatment team (i.e., abuse, homicidal ideation).
 11. Include family in discharge planning as appropriate.

PROTOCOL FOR: Family Coping, Impaired: Care of the Patient with

12. Encourage patient and family to utilize community resources (i.e., CAMI, Bipolar Support Group, AA, Al-Anon).

PATIENT/FAMILY

- TEACHING:**
1. Educate the patient and family regarding dynamics of family interactions.
 2. Educate the patient and family about medications and the importance of compliance.
 3. Educate the patient and family regarding follow-up care and the importance of maintaining outpatient treatment.
 4. Educate the patient and family regarding early recognition of target symptoms to prevent relapse.
 5. Educate the patient and family regarding appropriate use of professional resources.
 6. Educate the patient and family about community support resources.

APPROVAL: Nursing Standards Committee

EFFECTIVE DATE: 12/90

REVISION DATES: 8/93, 10/96, 7/99, 10/00, 10/03, 6/06, 7/08