Standards and Norms in Psychiatric Nursing

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THE SPACE AGE, popularly termed as the age of technology, with the array of drugs, computers and the most modern gadgets as well as the highly specialized health professionals, has all but eliminated the human process for a bed-side Nurse. To provide quality Nursing care to individuals and families, especially in the era where Psychiatric illnesses are fast multiplying, requires standards of Nursing care. This can be established as a guide for nurses working in various Psychiatric units, in different hospitals in India.

Standards are desirable sets of conditions and the performance, considered in ensuring the quality of Nursing care or service, which are acceptable to those instrumental or responsible in setting or maintaining them.

In the present paper, a format of standards is prepared for a Psychiatric unit with special reference to patient category of Schizophrenia.

The standard form is designed under three criteria, namely: (1) Structure, (2) Process, (3) Outcome, which are basic support components, decisions and actions, and results of care provided.

Structure

Criteria and Standards.

Criteria	Standards	Criteria met	Criteria unmet
1. Professional qualification	- Registered Nurse had undergone a short course in Psychiatric Nursing - B.Sc. Nursing Degree - M.Sc. Nursing Degree		
2. Qualities & Competence of Psychiatric Nurse	- Well adjusted personality Patient while dealing with people - Flexible in dealings - Maintaining ethical standards - Possessing knowledge of * human relations * psychology * psychopathology * mental health * treatment strategies * therapeutic use of self * therapeutic communication * therapeutic interventions		
3. Physical Facilities	- Nursing station centrally located - Rooms/Wards provide easy mobility of ECT machines & other gadgets - Space between beds are enough to provide privacy in need -Adequate lighting with provision for plugging in of ECG and other electronic machines - Provision of oxygen & suction machine; adequate water supply - Telephone facilities in the case of emergency like violent cases, help, or other alarm system		
4. Patient Bed Area	This includes: - complete bed set - bedside locker - chair, stool		
5. Nurse-Patient Ratio	1:3		
6. Physical Environmental Requirements	- Therapeutic climate - Clients' physical safety - Dining room - Reception room - Group therapy room - ECT room with recovery beds - Recreational room - Treatment room - Space for outdoor games - Day centre - Conference room - Store room		
7. Staff Development & Research	- Provision of orientation programme to the new entrant - Initiation of Research studies utility of research findings to improve Nursing practice		
8. Drugs	Availability of all - emergency drugs - psychotropic drugs - anti-depressants - anti-Parkinson agents - anti-epileptic - Hallucinogens, etc.		

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Process

Criteria and Standards.

Criteria		*Standards expected*	*Compliance achieved*
1. Assessment			
(a) Identification Data	- Collects pertinent data to identify * name, age * marital status * address - Physical behaviour mental status - Psychosocial data - Psychiatric history		
(b) Recognition of symptoms, e.g., in Schizophrenia	- Perceptual disorders - Cognitive disorders, delusions/thought disturbance - Verbal disorders * incoherence * Neologism * Mutism * Echolalia * Stuporous state * Stereotype behaviour - Affective disorders		
(c) Recording	- Each observation - Interview with client & significant others - Physical Examination - Mental status examination - Client interaction with others - Any untoward observation of action		
2. Planning			
(a) Determining Appropriate Intervention	- Establishes therapeutic relationship with client - Holds regular interview - Holds regular group therapy (excepting paranoid cases) - Assists client to set goals which are realistic - Work & occupational therapy daily - ECT if prescribed		
(b) Communication	- Written - Maintains records which are complete/concise, legible, completed in timely fashion - Verbal - Communicates with client in concise, tactful and considerate manner		
(c) Interpersonal Relationship	- Identifies own feeling - Identifies clients' feeling - Listens objectively - Responds appropriately		
3. Implementation			
Assessment outcome of Process	- Assesses clients' progress towards normal, or level of functioning - Assesses if client is free of symptoms - Assesses clients' comprehension of particular care required - Modifies care plan and makes alternative course of action		

Outcome

Criteria and Standards

Criteria	*Standard*	*Expected Improvement*	*Achieved Improvement*
1. Short-term Care	- The client's participation in the therapy - Client keeps up regular appointments - Develops trust in Nurse - Client recognizes his needs, abilities, strengths, limitations - Capable of self care - Gets along with others - Resumes activities		
2. Long-term Care	- Client maintains IPR - Follows daily routing - Acceptance by family - Self dependent - Resumes normal job - Goes back to community - Client engages in therapeutic activities		

It may be emphasized that no modern gadgets and machineries can be a substitute for the Psychiatric Nurse. Psychotherapy through interpersonal relations is a thoroughly human process. A Psychiatric Nurse needs to have a thorough knowledge of the human being as a whole, to be able to give care to a client with minimum standard. 'Self' as a 'Therapeutic Tool' should be the watchword of a Psychiatric Nurse.

Bibliography

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