

## **MENTAL HEALTH**

One in four people are affected by a mental illness each year in the UK. Whilst these can have devastating impacts on people's lives, they are also treatable, just like physical conditions.

- 75% of those with a mental health condition start developing it before the age of 18
- 7 in 10 young people with a mental health problem haven't had enough help at an early age
- 3 children in every class have a diagnosable mental health condition

### **What is anxiety disorders**

Anxiety is a normal emotion that we all experience, such as in the run up to exams or a job interview. But when anxiety becomes much more severe this feeling can take over and begin to interfere with everyday life.

Conditions under the anxiety disorder umbrella include social anxiety, generalised anxiety disorder (GAD), panic disorder, obsessive-compulsive disorder (OCD), phobias, and post-traumatic stress disorder (PTSD).

### **What are the signs and symptoms?**

For people with an anxiety disorder, feelings like stress, panic and worry are longer lasting, more extreme and far harder to control. Symptoms may also include feeling restless or agitated, panic attacks, having trouble concentrating or sleeping, sweating, shortness of breath, dizziness and heart palpitations.

Anxiety can feel like a spotlight in your mind shining on your deepest fears or always worries.

Dealing with anxiety can be very difficult and the impact can be debilitating. Anxiety can stop people living the life they want – whether that means not being able to work, see friends or, in the most severe cases, even leave the house.

### **What is ADHD?**

Attention deficit hyperactivity disorder (ADHD) is a developmental disorder that makes an individual more likely to have short attention spans, be impulsive and hyperactive.

Most cases are diagnosed when children are 6 to 12 years old and it can have a big impact on a child's ability to learn at school. ADHD often occurs alongside other problems, most commonly depression, but also anxiety or sleep disorders among others.

### **What are the signs and symptoms of ADHD?**

The symptoms of ADHD often persist from childhood into teenage and adult years. However, the symptoms of ADHD can be more subtle in adults and affect them in a different way to children.

### **What are the causes of ADHD?**

The causes of ADHD are not clear, but we know that people who have a parent or sibling with the condition are much more likely to be affected. It has also been suggested that low birthweight and premature birth may play a role too.

### **How do you treat ADHD?**

Both behaviour therapy and medication can be used to improve the symptoms of ADHD. Behaviour therapy focuses on helping a person to control their behaviour, while medication can help improve attention span and reduce impulsive behaviour.

### **What is autism spectrum disorder?**

Autism spectrum disorder (ASD) is a lifelong developmental disorder characterised by difficulty with social interaction and communication, and a narrow set of interests and repetitive behaviours.

Autism is a spectrum condition. This means that while all people with autism share the same difficulties, the condition affects everyone differently and so they will need different levels of support. Anxiety disorders are common alongside the condition, and people may also experience other mental health conditions like depression.

People with autism find it difficult to understand other people's emotions and feelings, often struggle to make eye contact, like a rigid routine, and may also be over or under-sensitive to sounds, touch, tastes, smells, light or colours. Many people with autism have learning disabilities although people with a type of autism called Asperger syndrome are of average or above average intelligence.

Children may play in a repetitive and unimaginative way, language development may be delayed, and they may repeat words or phrases spoken by others (either immediately or later).

We don't know what causes autism, but we do know that several factors, genetic and environmental, affect brain development and play a role in increasing the risk of autism.

Autism is not an 'illness' and cannot be 'cured'. There are however many interventions that can be helpful for people with autism to enable learning and development.

### **How we can support you (Autism Customers):**

We will work with other professionals who support you and your carers/family to ensure that you receive the support and care you need and prefer.

you can expect to be supported and cared for by trained, knowledgeable members of staff.

We will support you through referral for assessment, which would include referral to your GP, and for an assessment of need under the Care Act 2014.

We are aware of different local pathways for customers diagnosed with autism and will follow them to ensure your care meets local standards.

We will offer information in a format that is easily accessible and understandable to help you make your own decisions.

If we assess that you can benefit from access to a trained advocate, we will share information that helps you make a choice with you.

We may offer information on self-help or support groups or one-to-one support, and provide support to you where required, so that you can access this support.

We may assess the physical environment where you are cared for in terms of personal space, décor, lighting and noise in relation to any impact on you or your loved one and make appropriate changes where practicable.

We will be alert to any issues of physical health, lack of physical activity, or changes in eating and drinking and report these to your GP if there are concerns.

We will maintain awareness of difficulties regarding social interaction and offer support, where appropriate, in making or supporting friendships and relationships.

We will be respectful when offering care and support; We will take time to build trusting relationship with you and you loved ones; we will work at your own pace and understanding.

### **What is bipolar disorder?**

Bipolar disorder is a mental health condition that affects a person's mood, energy and ability to function.

### **What are the signs and symptoms?**

- Bipolar is characterised by extreme mood states, or episodes, described as:
- Manic or hypo-manic episodes (feeling high)
- Depressive episodes (feeling low)
- Potentially psychotic symptoms – where an individual experiences delusions or hallucinations

These episodes are much more severe than the normal 'highs and lows' of life that we all feel – they may last for several weeks or months and can leave those affected feeling out of control or ruled by their moods. Equally a person may not be aware they are during a manic episode. These extreme moods can make work and relationships very difficult, and people with bipolar disorder are at an increased risk of suicide.

There are several types of bipolar disorder: bipolar I, bipolar II, and cyclothymic disorder. These share symptoms but are different in terms of severity and intensity. Some people experience periods of 'normal' mood between episodes.

### **What is borderline personality disorder?**

Borderline personality disorder (BPD), also known as emotionally unstable personality disorder (EUPD), is the most commonly recognised personality disorder. It is characterised by a pattern of emotional instability and unstable relationships with other people.

### **What are the signs and symptoms of borderline personality disorder?**

In general, someone with BPD will differ from someone without the condition when it comes to how they perceive themselves and relate to other people. For example, they might find it difficult to maintain steady relationships or fear being abandoned by friends and family.

Intense emotions that shift quickly and acts of self-harm are common, as well as impulsive behaviour (for example, substance misuse or risky sexual behaviour) suicide attempts, hallucinations or voices. These symptoms will range from person to person.

### **What causes borderline personality disorders?**

BPD tends to develop when people are in their late teens or twenties, however it is not formally diagnosed until after the age of 18. It is thought that, like most mental health conditions, it results from a combination of genetics and the environment someone grew up in. Many people with BPD may have experienced parental neglect, bullying or physical, sexual or emotional abuse during their childhood.

### **Diagnosing borderline personality disorder**

BPD is a very broad diagnosis, given to lots of different people with different experiences. Some find it helpful to have a diagnosis, as they feel it explains their difficulties or gives them a sense of validation. Others feel that a diagnosis serves to deepen the stigma.

### **What is depression?**

We all experience low mood sometimes - it is a normal part of life especially after a loss or bereavement. Depression in the medical sense however can leave people feeling severely sad, empty, hopeless or guilty for weeks, months or even years.

It can affect every part of a person's life. Relationships. Work. Physical health. They all suffer. And, at its most severe, it can be life-threatening.

Depression can also have physical symptoms, such as fatigue, sleeping badly or much more than usual, poor appetite or overeating, and loss of sex drive.

Everyone experiences depression differently. But however, it affects people, it's definitely not the same as simply feeling low for a few days or something that people can 'snap out of'.

### **What are eating disorders?**

An eating disorder is when a person's eating habits and relationship with food becomes difficult. Eating problems can disrupt how a person eats food and absorbs nutrients, which affects physical health, but can also be detrimental both emotionally and socially.

### **The three most common eating disorders are:**

- Anorexia nervosa (restricted food intake and/or excessive exercise)
- Bulimia nervosa (binge eating followed by deliberate purging)
- Binge-eating disorder (BED) (episodes of overeating in a short space of time)

Eating disorders often occur alongside other mental health conditions, such as anxiety, depression, panic disorder, obsessive-compulsive disorder and substance misuse disorders.

### **What are the causes of eating disorders?**

There is no single reason why someone may develop an eating disorder - it can be the result of a combination of genetic, psychological, environmental, social and biological factors. While they can be very serious mental health conditions, they are also treatable and, although it may take a long time, full recovery is possible.

### **How do you treat an eating disorder?**

Treatment normally consists of monitoring a person's physical health while addressing the underlying psychological problems with psychological therapy such as cognitive behavioural therapy (CBT) or family therapy. Medication such as a type of antidepressant called selective serotonin reuptake inhibitors (SSRIs) may be used to treat bulimia nervosa or binge eating.

### **What is obsessive compulsive disorder (OCD)?**

All of us obsess about things from time to time – whether we left the iron on, or if we shut the door – but obsessive-compulsive disorder (OCD) is much more serious.

### **What are the signs and symptoms?**

OCD is an anxiety disorder which causes people to experience obsessive thoughts followed by compulsive behaviours. Obsessions are frequent intrusive, unwanted thoughts which cause anxiety, disgust or unease. Compulsions are activities carried out repetitively in an attempt to temporarily relieve the distressing feelings of the obsessive thoughts.

For some people with OCD, obsessions and compulsions may occupy an hour a day, but for others it can become so severe that it takes over - preventing them from living a normal life, holding them captive, and potentially damaging their health, relationships, education or employment.

OCD treatments have improved and there is now a good chance of relieving and controlling obsessions or preventing the condition from getting worse. Treatments are generally either cognitive behavioural therapy (CBT), medication such as a type of antidepressant called selective serotonin reuptake inhibitors (SSRIs), or a mixture of the two.

### **What is post-traumatic stress disorder (PTSD)?**

Post-traumatic stress disorder (PTSD) is a type of anxiety disorder triggered by traumatic events in a person's life such as real or threatened death, severe injury or sexual assault.

PTSD can affect people of any age, and the symptoms normally begin within the first three months after the traumatic experience.

## **What is schizophrenia?**

Schizophrenia is a severe mental illness, which disrupts how someone thinks, their understanding and perception of the world around them, including what they see or hear.

Fairly often the condition will cause psychotic symptoms, which means the distinction between thoughts and reality become unclear - a person may experience delusions or hallucinations. This can make the condition disturbing and confusing for both the person affected, and their family and/or loved ones.

Schizophrenia can be devastating - but through support, you can live a fulfilling life in the community.

## **What is self-harm?**

Self-harm is when someone purposefully injures their body. Normally it is a way of coping with or expressing overwhelming emotional pain.

For some people self-harm can offer a kind of temporary relief from unbearable distress, or the intention might be to punish themselves or cry out for help. It is usually a combination of these things.

There are different types of self-harm, for example cutting, burning or substance misuse, and because of the shame and stigma surrounding self-harm people will often try to keep it a secret.

Self-harm is more common than many people realise, especially among younger people. However, it is linked to anxiety and depression which can affect people of any age.

Some people who self-harm are at risk of suicide; however, many people who self-harm do not want to die, it is a coping strategy to deal with the feelings inside.

## **What is suicide?**

Suicide is the act of intentionally ending your own life.

There are many different factors that can lead to suicidal feelings, but certain things can increase the risk. Mental health conditions such as depression, bipolar disorder or schizophrenia can make a person more likely to have suicidal thoughts. However other factors like loss, isolation, physical or sexual abuse, debt, poor job security, and misuse of alcohol or drugs also make a person more at risk.

Many people who experience suicidal thoughts describe being overwhelmed by negative emotions and feeling like ending their life is the only way out. However, by talking to someone and getting the support necessary it is possible to find a way forward and other options.

## **Need help?**

If you're having thoughts about taking your own life, it's important that you ask someone for help. It might be very hard for you to see at this time, but you're not

alone and you're not beyond help. You can find more information and advice on the NHS Choices website.

If you're having a mental health emergency or feeling suicidal visit our urgent advice resource, and contact a service organisation that will be able to help

### **About young people's mental health**

Childhood and teenage years pose all sorts of challenges and pressures that can be difficult to cope with. And young people can experience a range of mental health conditions, sometimes even before starting school.

This can be worrying for parents, and very distressing for the children affected. They may be left confused about what they are experiencing, or who they can turn to for help.

Many children whose symptoms are spotted early may get the help they need, learning new skills to manage and cope, and go on to live their life to its full potential.

However, those who don't get the right diagnosis or support are at a much higher risk of developing more severe problems later in life.

<https://www.mqmentalhealth.org/articles/mental-health-conditions>

### **Dementia Care**

Dementia describes a set of symptoms that may include memory loss and difficulties with thinking, problem solving or language. These changes are often small to start with, but for someone with dementia they have become severe enough to affect daily life. A person with dementia may also experience changes in their mood or behaviour

Dementia is caused when the brain is damaged by diseases, such as Alzheimer's disease or a series of strokes. Alzheimer's disease is the most common cause of dementia, but not the only one. The specific symptoms that someone with dementia experiences will depend on the parts of the brain that are damaged and the disease that is causing the dementia

#### **How we can support you (Dementia Customers):**

##### **Our objectives:**

Our Dementia care package is aimed at:

- Delivering care and support to Customers by trained, competent, compassionate and knowledgeable staff.
- Support the national agenda to improve awareness, support earlier diagnosis and intervention and provide a higher quality of Care for people with dementia.
- Improve the Customer's dementia journey and providing a dementia-friendly environment.
- Ensuring that Willboag Ltd supports Customers and their families, friends and carers.
- Raising the standards of Care and promote meaningful activity provision.

##### **Principles:**

We will work in line with national guidelines to ensure that all staff deliver their roles with the following principles in mind:

- Maintaining the human value of people with dementia, regardless of condition, age or cognitive ability
- Treating Customers as individuals
- Seeing the Customer's perspective
- Sustaining and promoting relationships and interactions in order to enhance wellbeing
- Supporting carers and families and enhancing their relationships with the Customer

### **Our Model:**

#### **Relationship Based Care:**

Relationship-Based Care (RBC) is a model of delivering healthcare that has transformed the practice of nursing by returning to basic purpose: caring for and connecting with all other human beings. Therefore, this is not just about meeting the holistic needs of the Customer but taking into account their families, loved ones and friends.

Support provided will be holistic and cover physical, emotional, spiritual and cultural care.

- A full life history will be completed to ensure that staff can:
- Build a better understanding of who you are
- Identify what and who is important to you
- Have a foundation to build meaningful conversations and social stimulation from
- Empower you in relation to health and wellbeing
- We will involve you as much as possible in building your life history and this can be captured over a period of time as we get to know you better. Families and loved ones also play a valuable part in the production of the life history and we will ensure that they are involved.

#### **Advanced Care Planning and Legal Powers**

Where possible, we will support you to consider completing:

- An advance Care Plan in readiness for when your dementia journey progresses and you may be unable to share your views, wishes and beliefs about the future.
- A Lasting Power of Attorney (a legal document that allows people to state in writing who they want to make certain decisions for them if they cannot make them for themselves, including decisions about personal health and welfare).
- A Preferred Place of Care (which allows people to record decisions about future care choices and the place where the person would like to die).
- For Customers who do not have any of the above in place and who do not have the capacity to be involved, a multidisciplinary approach may be taken to complete a version in their best interest. Consideration will be given to the use of an advocate.

#### **Medication**

We will work with you and your GP in relation to ensuring that medications are reviewed at least every 6 months or sooner if new medications are introduced.

We will monitor for any side effects of new medication introduced to help manage the dementia and act upon any concerns in a timely manner by discussing with your GP.

Where antipsychotics are prescribed, we will work with your GP to aim to keep them in use for short periods only.

## **Transfers and Discharges**

We recognise that any change in environment is known to disrupt Customers with dementia and can escalate symptoms. Here at Willboag, we make every effort to meet the changing needs of our dementia Customers.

We will provide timely, appropriate access to existing and new support services and healthcare professionals will be provided as a means of managing changes to health for as long as possible.

Where it is deemed that a hospital transfer is necessary, we will provide the following:

Details of the current Care Plan

A copy of the medication administration records

Where applicable, copies of any high-risk behaviour assessments and management plans, etc..

## **Support for Carers**

Our staff are trained to support you and your caregivers, family and friend in the following ways:

- Taking the time to listen to concerns and fears
- Providing information and support
- Signposting to other professionals, so that carers can be offered an assessment of their own needs
- Ensuring that they feel involved in the ongoing care and support of the Customer