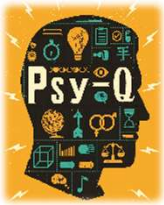
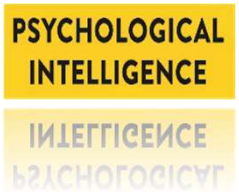
What is your Psy-Q?

- How much do you know about what makes you tick?
- How good are you at predicting other peoples behaviour?

  ... or even your own?
- How much of what you think about psychology is wrong**?**





2

Misconceptions about psychologists

- Psychologist can't **read your mind.**
- Psychologists can't **analyse you from just looking at you.**
- Psychologists don't **diagnose mental disorder.**
- Psychologists don't **prescribe medication.**

3

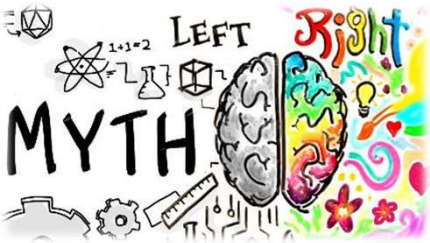
Myths about psychology

- **Learning styles (visual, auditory kinaesthetic/doing).**
  - This theory is not backed up by scientific evidence.
- **We only use 10% of our brain.**
  - Not true. More accurate to say that most of us don't use our brainpower quite as well as we could.

4

Myths about psychology continued...

- We can not detect a **liar from body language and verbal patterns.**
- **Left (logical) and right (creative) brain differences.**
  - nearly everything we do involves nearly all parts of our brain talking and working together.



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Interesting article ⓘreference

Misconceptions about Psychological Science: a review

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Misconception
1. People only use 10% of their total brain power (Della Sala, 1999; Higbee & Clay, 1998)
2. Playing classical music to infants increases their intelligence (Bangerter & Heath, 2004)
3. Responses on inkblot tests reveal a great deal about our personalities (Lenz et al., 2009)
4. People with schizophrenia have multiple personalities (Stuart & Arboleda-Florez, 2001)
5. Psychiatric hospital admissions and crimes increase during a full moon (Owens & McGowan, 2006)
6. The polygraph test can accurately detect dishonesty (Myers, Latter & Abdollahi-Arena, 2006)
7. Hypnosis can be used to reliably retrieve memories of forgotten events (Green, Page, Rasekhy, Johnson, & Bernhardt, 2006)
8. People can learn a new language while asleep (Brown, 1983)
9. Some people are left-brained, others are right-brained (Lyddy & Hughes, 2012)
10. Opposites attract: People are most romantically attracted to individuals who differ from them in their personality, interests, and attitudes (McCutcheon, 1991)

6

Psychology is not "a real science"

- **Some key characteristics of a science:**
  - ✓ Uses empirical methods
  - ✓ Researchers control and manipulate variables
  - ✓ Objectivity
  - ✓ Allows for hypothesis testing
  - ✓ Results can be replicated
  - ✓ Findings allow researchers to predict future occurrences

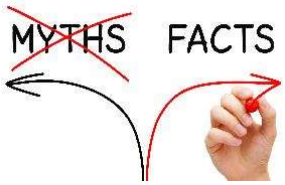
- **Psychology relies on all of these methods.**

Psychology is rooted in scientific methods and relies on empirical procedures to investigate the human mind and behaviour.

7

Psychology is just "common sense"

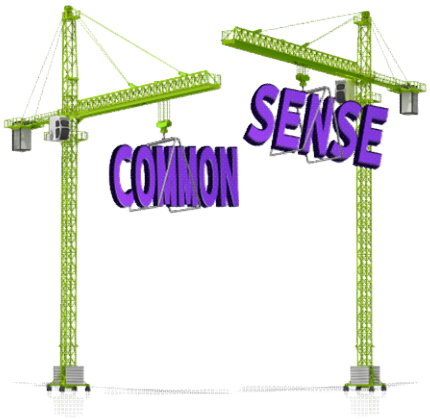
- Psychologists use scientific methods to conduct experiments, statistical analysis, and report the results of their studies.
- Psychology is not guess work!
  - ❖ **Just because something seems like it should be true doesn't necessarily mean that it is.**
  - ❖ **It is necessary to assess the truth or falsehood in some of our commonly held beliefs about ourselves.**



8

Psychology is just "common sense" continued...

- Psychologists are able to take "common sense" questions and presumptions about human behavior and test them scientifically.
- By using scientific methods, experimenters can investigate human issues objectively and fairly.
- Needs to be anchored in a robust framework that will hold up to scrutiny.



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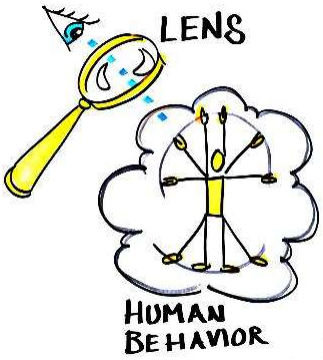
However...

- It is important to note that scientific psychology does have limitations.
- **Human behaviour, between and across individuals, can vary and change over time**.
- What is true in one particular time and place might not necessarily apply in different situations, settings, cultures and/or societies.



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So what is psychology?

- **Psychology is the scientific study of behaviour and mental processes.**
  - **Behaviour**
    What people do/how they act.
  - **Mental processes**
    What people think.
    (also referred to as cognition)

- **It is the study of WHY.**
  - Why do humans do the things they do?
- Psychology includes the study of both humans and animals.

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Psychology in forensic mental health settings

- Provide assessment and treatment for people with a mental disorder who pose (or have posed) risks to others, whereby said risk is usually related to their mental disorder.
- May or may not have a history of criminal offending, or be at risk of offending.

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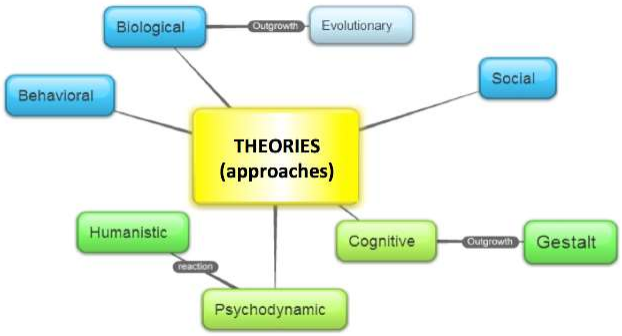
Types of psychological theories

- Theories are used to provide a model for understanding human thoughts, emotions and behaviours.
- Lenses through which to explain behaviour.



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Biopsychosocial model

- We can reasonably conclude that humans are made up of and influenced by **biological, psychological and environmental (social)** factors.

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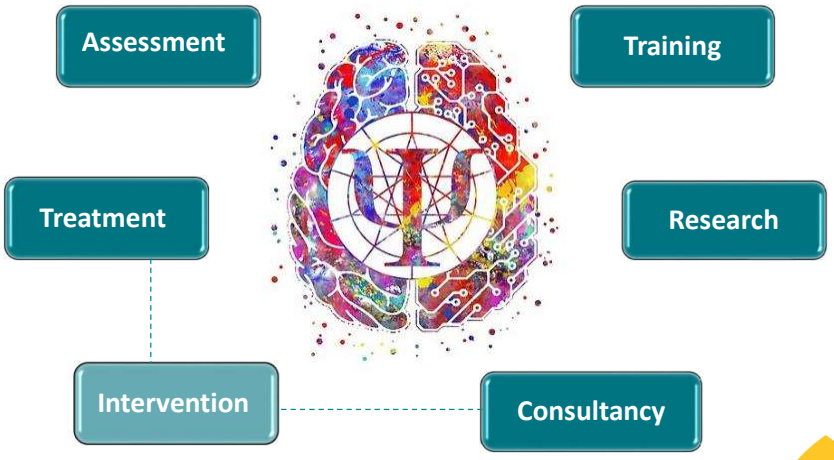
What psychology can offer in forensic hospital setting?



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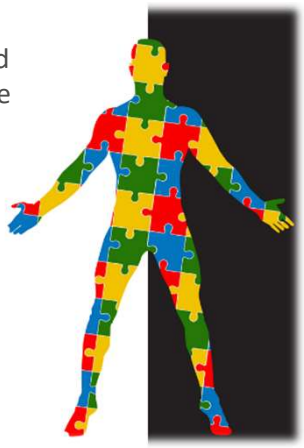
Assessment

- Psychologists seek to take the information gathered from psychological assessment and weave it into a comprehensive and complete picture of the person being tested.



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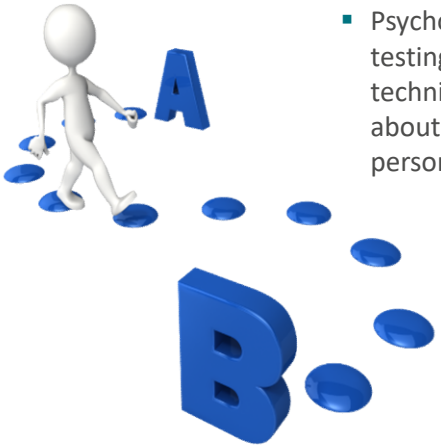
Assessment continued...



- Psychological assessment is a process of testing that uses a combination of techniques to help arrive at a hypotheses about a person, their behaviour, personality and capabilities.

Ultimately leading to more accurate and appropriate clinical conclusions.

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Assessment continued...

- Sources of information gathering may include:
  - Review of records.
  - Structured clinical interviews.
  - Semi-structured interviews.
  - Behavioural observations and monitoring.
  - Surveys.
  - Questionnaires.
  - Formal testing (psychometrics)

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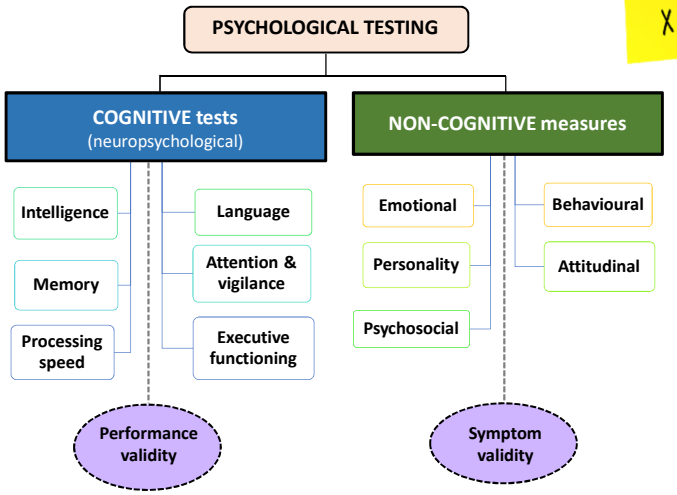
Assessment continued...

SIMPLIFIED ILLUSTRATION
X all-inclusive



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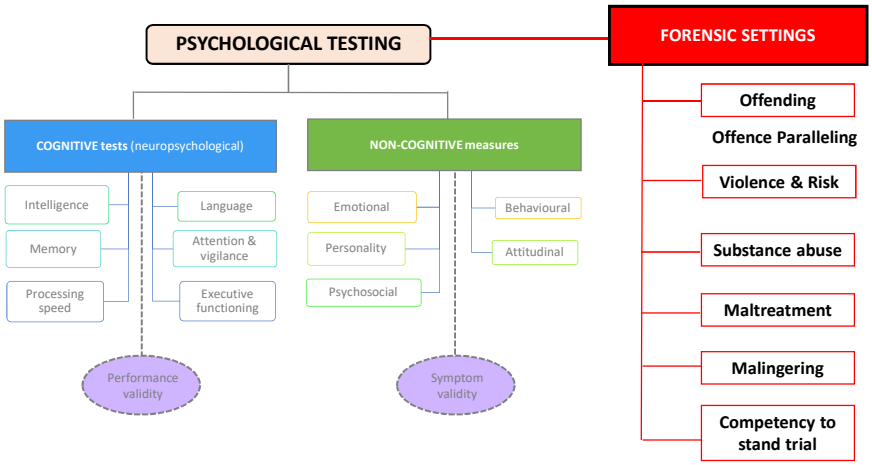
Assessment continued...



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Assessment

- Psychologists use formulations to develop working hypotheses about factors which may influence a person's well-being or behaviour.
- This is a way of synthesising the assessment data, using psychological theory and published research, to try and understand what might be causing and maintaining distress.
- Group and/or individual therapy (treatment) will be driven by the formulation.

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Types of psychological therapies

- On the whole, therapies map onto psychological models in their orientation.
- The main goal is to take action that will make a positive change in the way the service user
  - thinks or behaves
  - to modify or prevent self-destructive behaviours
  - promote recovery
  - improve self-esteem/self-worth
  - enable reintegration into society in a meaningful manner

22

Types of psychological therapy continued...

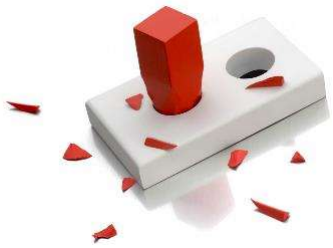
- Many different, sometimes interrelated, types of therapies.
  ⓘrefer to booklet/handout

23

Types of psychological therapy continued...

- Therapy should be individually tailored taking into consideration the service user's specific and unique:
  - characteristics
  - preferences
  - needs
  - physical/cognitive abilities
  - spiritual beliefs
  - risks
  - levels of motivation
  - readiness to change
  - treatment priorities

'One size does not fit all'



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Types of psychological therapy continued...

Utilising an integrative style
to psychological treatment rather than identifying with one particular therapeutic modality is more likely to
increase responsivity and improve efficacy.

25

Consultancy

- Specialised assistance to individuals or organisations in regard to the psychological aspects of their work.

Such assistance is advisory in nature.

ORGANISATIONAL
- Culture & climate
- Agents of change
- Values ◄►practice

PROCESS
- Policy - development, implementation & review
- Strategic planning

PEOPLE
- Staff ◄►patient dynamics
- Team cohesion
- Supervision/ reflective practice
- Containment (emotional resilience)

OTHER
- Post incident debriefing
- Conflict resolution/mediation

26

Interventions

- **SUPPORTIG INTITIATIVES**

Safewards
Positive Behaviour Support (PBS)
Psychologically Informed Environments (PIE)
Enabling Environments (EE)

- **ENABLING/EMPOWERING**

Behaviour modification strategies
De-escalation/negotiation tactics
Motivational approaches

- **PROMOTING**

Psychological mindedness
Psychologically informed ways of working

27

Training

- Training other professionals in psychological skills and knowledge.

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Training continued...

Some examples include:

- ✓ Managing Boundaries
- ✓ Understanding Clinical Risk
- ✓ Practicalities of Least Restrictive Practice
- ✓ Motivational Interviewing
- ✓ Interpersonal Skills
- ✓ Pro-Social Modeling
- ✓ Developing Professional Practice
- ✓ Stress Management

29

Research

- In essence psychological research ensures evidence based practice.
- Infinite variety of research areas.

Descriptive — Gathers information and provides detailed description. **Qualitative** (thematic)

Experimental, **Correlational** — Investigates specific variables (attributes). **Quantitative** (measurable)

30

Why Aberbeeg Hospital?

- Involving service users and ensuring that they are at the **centre of care delivery**.
- Proactively **promoting progress** to less secure setting and/or community reintegration.
- Outcome focussed.
- Flexibility and creativity in meeting service user needs.

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Why Aberbeeg Hospital continued...

- New purposefully & thoughtfully refurbished - safe and therapeutic environment.
- Highly experienced, diverse and functional MDT.
- Collaborative and integrated team approach – including community care team and external agency involvement.
- High quality leadership.
- Positive links with local community.

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Why Aberbeeg hospital is unique...

- **Maximising on specialist areas of interest and expertise from within the team (↑ quality of life and wellbeing)**
  - HD - Arts and Health
  - HCW - Complimentary Therapies
  - TSW - Radio Station / Mission Fit
- **Opportunity to capitalise on current themes mental health from the outset.**
  Time to Change campaign)
  - Embed forward ways of working with and thinking about mental health.
  - Nurture a positive, recovery focused, proactive, preventative, client centred, individually tailored approach and culture.

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Reminder of our objectives

❖ **Dr. Huckle's presentation earlier**

Our objectives

- Our objective is to make a difference in all that we do and encourage hope and optimism for the future of our staff and those in our care.
- We will provide specialist services to individuals which encompass the complete pathway creating continuity of care
- Our focus will always be that each and every person is unique and this will be reflected in the individualised care people receive
- We will focus on harnessing the digital age of putting services at the cutting edge of electronic systems which can support better evidence of care and safety
- We will create a safe, enabling environment in which those in our care can thrive

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