

Self Harm NICE Guidelines

Published July 2004, these extracts lifted from the "Quick Reference Guide" (28 pages!)

Key Priorities:

Respect, understanding and choice

Staff training

Activated charcoal- "ensure that activated charcoal is immediately available to staff at all times"

Triage. Preliminary psychosocial assessment to determine capacity, willingness to undergo further assessment, level of distress and possible presence of mental illness. Consider Australian Mental Health Triage Scale. "If a person who has self harmed has to wait for treatment they should be offered an environment that is safe, supportive and minimises any distress. For many patients this may be a separate quiet room with supervision and regular contact with a named member of staff to ensure safety.

Treatment.

Assessment of needs. Full mental health and social needs assessment

Assessment of risk.

Referral. Based on a social, psychological and psychiatric assessment and not solely on the basis of self harm.

You get the idea...

What follows next are the individual titles of each section of the guidelines, and I've lifted out a few of the more controversial/ obtuse/interesting dictates for your education and edification

Advice for all healthcare professionals in any setting

Offer the choice of male or female staff for assessment and treatment. If a choice is not possible explain why and write it in the notes. They call the patient the "service user".

Primary care section.. seems to mention referral to A&E a lot!!

Ambulance service section. "Consider, wherever possible, the service user's preference if there is more than one Emergency Department nearby"

"Ignore service user's preference if this increases risk"

Emergency Department Australian Mental Health triage Scale

Psychological assessment at triage to determine capacity, willingness, level of distress and presence (or presumably absence) of mental illness

DON'T DELAY PSYCHOSOCIAL ASSESSMENT UNTIL AFTER MEDICAL TREATMENT except when life-saving treatment, service user is unconscious or incapable of assessment (e.g intoxicated)

Then sections on poisons and wound care

Referral and discharge

Paeds issues

Elderly issues-If over 65 treat DSH as attempted suicide until proven otherwise.