

Forensic Mental Health Nursing Standards of Practice 2012



Forensicare

Victorian Institute of Forensic Mental Health (Forensicare)

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Acknowledgements

In April 2012 a draft of these standards was sent to nurses who practice or have published in the field of forensic mental health nursing. The nurses were invited to read the standards and identify whether they captured the core of what is forensic mental health nursing practice (understanding that there are differences in each jurisdiction), whether there were major gaps and to provide any other comments.

There was agreement that these standards captured the core of what is forensic mental health nursing practice. No major gaps were identified. Numerous suggestions were generously offered by the reviewers and most of these suggestions have been incorporated into this final draft of the document.

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Forensic Mental Health Nursing Standards of Practice 2012

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Introduction

Forensic mental health nursing

Forensic mental health nursing practice is the assessment and formulation, planning, implementation and evaluation of nursing care and treatment within a therapeutic alliance with people experiencing mental disorder who are involved in criminal justice processes.

Practice locations

Forensic mental health nurses practice in a range of settings that include:

- Courts
- Police custody centres
- Prisons
- Secure hospitals
- Community

These standards address the practice of nurses practicing in each of these locations, however not all standards are applicable in every location.

Why develop standards?

These standards can assist nurses to recognise what it is about forensic mental health nursing that is 'more' than simply mental health nursing in a forensic context and can identify the nursing contribution to the interdisciplinary assessment and treatment of forensic service patients. These standards are to be used to guide practice, education and research in forensic mental health nursing. Further development of these standards is needed to address advanced practice.

Forensic mental health nursing standards

Mental health nursing is a recognised specialty of nursing. We have chosen to identify forensic mental health nursing as a subspecialty of mental health nursing rather than a subspecialty of forensic nursing where the focus is more victim oriented. The term 'forensic' (pertaining to the court) provides a link between forensic nursing and forensic mental health nursing but in practice the only common features are the knowledge, skills and attitudes that are common to all nurses.

In writing these standards, difficulties were encountered in attempting to capture what was particular to 'forensic' mental health nursing without replicating common nursing and mental health nursing knowledge, skills and attitudes. For example specific reference to culture, gender, and stage of life of patients are to be found in the nursing and mental health nursing standards and not in these standards. The forensic mental health nursing standards must be considered as building on the nursing standards and codes of practice and ethics that are common to all nurses and further as building on mental health nursing standards, codes of practice and ethics. The reader must note that meeting recognised standards of nursing and psychiatric nursing is a necessary requirement before meeting these standards of forensic mental health nursing.

These standards were written by senior nurses at the Victorian Institute of Forensic Mental Health (Forensicare) and are based on their practice with adult forensic service patients (FSPs) and upon existing literature.

The authors approve the use of these standards (or components) including any adaptation of language with the condition that the use is properly referenced. Any feedback and recommendations for future versions are especially welcomed. All correspondence should be directed to jo.ryan@forensicare.vic.gov.au.

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Standard 1

The forensic mental health nurse will structure the treatment environment to integrate security with therapeutic goals

Rationale

In secure settings, the forensic mental health nurse maintains an attitude of vigilance and adheres to the security policies and procedures that are in place to prevent forensic service patients escaping from the facility or absconding from approved leave. The forensic mental health nurse can distinguish between the requisites for security and safety and can identify strategies and outcomes that are common to maintaining security and ensuring safety. Clinical intervention must be consistent with security requirements. Integrating therapeutic goals with security requirements needs constant appraisal of organisational processes and nurse-patient relationships to ensure that opportunities for therapeutic practice are maximised.

The forensic mental health nurse:

- accepts responsibility for security practices in a secure setting;
- practices with an attitude that reflects security consciousness and vigilance;
- demonstrates competence with physical, procedural and relational security requirements;
- structures therapeutic practice to integrate requirements for security and safety;
- explains the rationale for security practices to the FSP and engages the FSP in discussion about strategies to support FSP responsibility within the constraints of security;
- contributes to team decision making regarding appropriate application of security policies and procedures towards FSPs, contexts and programs; and
- understands inherent tensions in the integration of security and therapeutic goals, and actively seeks and utilises professional and organisational strategies to maintain professional integrity, through reflective practice, clinical supervision and life-long learning.

Standard 2

The forensic mental health nurse will apply knowledge of the legal framework to service delivery and individual care

Rationale

The forensic mental health nurse requires knowledge of legislation and the processes of the agencies within the criminal justice system to provide nursing assessment and treatment that is congruent with the forensic service patient's legal status.

The forensic mental health nurse:

- demonstrates knowledge of relevant legislation;
- understands how criminal justice legislation interfaces with mental health legislation;
- applies knowledge of legislation to nursing assessments and treatment of FSPs;
- understands the roles of the various justice agencies;
- provides written and verbal reports that contribute to justice processes; and
- provides education and support to assist FSPs and families/carers to understand the impact of justice processes.



Standard 3

The forensic mental health nurse will conduct forensic mental health nursing practice ethically

Rationale

Practicing in custodial settings where the values and policies potentially conflict with the principles of mental health nursing practice and caring for forensic service patients in all settings can result in forensic mental health nurses experiencing ethical dilemmas and problems. The nurse refers to professional codes of conduct and ethics to solve ethical dilemmas and problems. A commitment to professionalism, transparency and team communication provides an important safeguard for accountability.

The forensic mental health nurse:

- manages personal moral judgements that conflict with professional nursing obligations to provide treatment and care to FSPs;
- understands and applies strategies that specifically address tension inherent in integrating obligations to care with custodial requirements;
- understands the socio-political context of forensic mental health care and utilises clinical decision making processes that are evidence based and professionally rational and not influenced by personal, group or community bias;
- critically examines nursing practice, clinical decision-making and communication with FSPs for signs of bias or prejudice;
- acknowledges the FSP's views of personal recovery especially when there is conflict with the wider ethical context;
- actively seeks and utilises interdisciplinary team processes and supports such as education, reflective practice, clinical supervision, consultation and critical incident stress management to examine ethical dilemmas or problems; and
- practices in accordance with professional standards, legislation, organisational policies and procedures to promote the health of the patient and the therapeutic potential of the setting.

Standard 4

The forensic mental health nurse will practice within an interdisciplinary team that may include criminal justice staff

Rationale

An interdisciplinary approach allows for a broad theoretical base that draws on the knowledge and skills of each discipline to enhance assessment, formulation, implementation and evaluation of treatment and care. The forensic mental health nurse practices as a member of an interdisciplinary team at the interface of the criminal justice system and mental health system to deliver nursing care that meets the needs of the forensic service patient. In a secure setting the interdisciplinary team can include custodial officers, community corrections officers, police officers, security officers and court staff.

The forensic mental health nurse:

- understands the roles and responsibilities of criminal justice staff to enable effective professional relationships for the benefit of the FSP;
- adheres to policies and legislation regarding verbal and written communication with criminal justice colleagues;
- promotes the role of the forensic mental health nurse within the interdisciplinary team and is accountable for nursing interventions;
- contributes nursing knowledge and skills to criminal justice processes including risk assessment, formulation and management, reducing recidivism and facilitating the transition between services;
- provides education and promotes an understanding of mental health for criminal justice colleagues; and
- acknowledges the potential for enculturation to criminal justice values and maintains professional resilience by actively seeking and engaging in a range of professional and organisational strategies including professional development, consultation, clinical supervision and reflective nursing practice.



Standard 5

The forensic mental health nurse will establish, maintain and terminate therapeutic relationships with forensic service patients using the nursing process

Rationale

The therapeutic relationship is the fundamental interpersonal process of assessment, collaborative goal setting, intervention and evaluation. There are inherent tensions in the therapeutic relationship with forensic service patients. The security requirements of custodial environments are grounded in distrust rather than trust, the legal status of forensic service patients challenges notions of voluntary treatment, and the experience of forensic service patients can result in attitudes of suspicion, hostility and subversion to treatment goals. The forensic mental health nurse recognises these tensions and makes prudent use of self and interpersonal therapeutic skills.

The forensic mental health nurse:

- applies knowledge of developmental, social, cultural and environmental influences on patterns of relating, including trust and power relations, to the therapeutic relationship;
- demonstrates self-awareness and maintains professional boundaries with FSPs who frequently experience difficulty building and maintaining appropriate relationships;
- adheres to, and informs the FSP of the legal, professional and service standards related to disclosure, confidentiality and reporting;
- provides opportunities for the FSP to identify care, treatment and personal goals aimed at clinical and personal recovery;
- practices in partnership with the FSP, applying skills in a range of therapeutic interventions and within possible environmental constraints, to achieve goals;
- articulates the role of hope in the therapeutic process and assists FSPs to find meaning and purpose in their lives;
- supports the FSP in the process of personal recovery;
- involves the FSP to evaluate effectiveness of interventions;
- involves the FSP in preparation for the termination of the relationship;
- balances therapeutic optimism with vigilant assessment of the FSP's risk potential;
- analyses transference and countertransference factors that are part of the therapeutic relationship with FSPs that often have experienced abuse and rejection;
- recognises that the absence of the therapeutic relationship (failure to engage) results in custodial nursing care; and
- actively seeks and utilises reflective practice, consultation, clinical supervision and professional development to explore concerns and successes related to the therapeutic relationship in forensic mental health nursing.

Standard 6

The forensic mental health nurse will integrate assessment and management of offence issues into nursing care processes

Rationale

It is the alleged/offending behaviour that differentiates the patients of the forensic mental health nurse. Knowledge of the criminogenic needs of the forensic service patient and the circumstances, nature and consequences of the patient's offending is integrated within the comprehensive nursing process which promotes personal recovery. The forensic mental health nurse works in partnership with forensic service patients and their families/carers/significant supports to facilitate an understanding of offending behaviour and mental illness.

The forensic mental health nurse:

- demonstrates knowledge of the contribution of mental illness and other factors to offending behaviour;
- understands the impact of offender status and incarceration on the individual and the family/carers /significant supports and the implications for treatment and recovery;
- considers the type and seriousness of offence and the implications for ongoing risk management when planning nursing care;
- identifies any specific needs to be considered in the assessment and treatment of offence issues, for example gender or cultural issues;
- conducts offending risk assessments covering multiple areas of functioning, incorporating information from multiple sources, including static and dynamic risk factors as well as identifying protective factors;
- assesses the FSP's personal responses to offending behaviour;
- utilises structured professional judgement to assess risk and develop risk management plans based on a risk formulation;
- practices collaboratively with FSPs to analyse circumstances of offending behaviour in order to facilitate their understanding of the consequences, identify protective factors and to increase personal choice and responsibility;
- provides therapeutic programs that address offending behaviour and a range of FSP responses to offending:
 - o delivers intensive interventions to target those at greatest risk of re-offending;
 - o addresses criminogenic needs in care and treatment;
 - o structures the environment and ensures interventions are responsive to the FSP's learning style and characteristics, strengths and personal goals; and
- evaluates interventions that address consequences of offending behaviour and incarceration for the FSP and family/carers.



Standard 7

The forensic mental health nurse will assess for the impact of trauma and engage in strategies to minimise the effects of trauma

Rationale

Exposure to trauma is a common experience for forensic service patients and their families/carers. Exposure to trauma can have profound neurological, biological, psychological and social effects on the individual. The main areas related to forensic service patients and trauma are: 1) exposure to traumatic experience (such as being a victim of or witness to abuse or neglect); 2) trauma related to committing the index offence; 3) trauma related to detention (including isolation from supports, community role loss); 4) trauma related to experiencing coercion in secure settings; and 5) trauma related to the impact of the secure environment (such as locked doors and loss of privacy). Appreciating the high prevalence of trauma and understanding the impact that trauma and violence can have on an individual is necessary to be able to assess for impact of trauma, implement appropriate treatment and avoid inadvertently re-traumatising forensic service patients.

The forensic mental health nurse:

- demonstrates knowledge about trauma and is sensitive to trauma related issues;
- identifies traumatic events experienced by the FSP;
- assesses the FSP's/family's/carer's responses to these traumatic events including resilience;
- appreciates that FSPs with a history of trauma may display aggressive behaviours to self or others in response to perceived threat;
- explores, identifies and implements strategies with the FSP/family/carers to assist with working through trauma related responses;
- avoids inadvertently re-traumatising the FSP/family/carers through uninformed or unthoughtful action;
- demonstrates awareness of gender-sensitive concerns and maintains a safe and respectful environment;
- consults with and refers the FSP/family/carers to services or practitioners who specialise in trauma; and recognises that the traumatic experiences of the FSP/family/carers can be experienced vicariously by the nurse and that nurses can become desensitised to constant exposure to trauma and actively seeks and utilises a range of professional and organisational strategies to maintain professional integrity, including education, consultation, reflective practice, clinical supervision and critical incident stress management.

Standard 8

The forensic mental health nurse will assess and manage risk potential of forensic service patients

Rationale

The forensic service patient may be at personal risk or may be a risk to others based on a number of static and dynamic risk and protective factors. The forensic mental health nurse engages with mental health and criminal justice processes to manage risk at individual, interpersonal, organisational and community levels.

The forensic mental health nurse:

- shares knowledge with FSPs of the factors that place them at personal risk and at risk to others including an understanding of the possible antecedents;
- has knowledge of the relevant risk assessment tools;
- assists the FSP to identify protective factors when assessing risk;
- uses structured professional judgement processes to assess risk and protective factors and identify strategies to manage risk based on a risk formulation;
- works with FSPs to identify and implement educational, cognitive and supportive interventions to assist FSPs to manage their own risk behaviours;
- in consultation with the FSP adapts level of intervention, monitoring and supervision according to changing risk profile and needs of the FSP;
- demonstrates sensitivity when imposing controls or restrictions on FSP's behaviour;
- communicates and documents all matters related to the FSP's risk assessment, risk formulation and management;
- understands the risks posed by secure environments and recognises that such environments can also mask risk due to high levels of surveillance and support;
- contributes to the organisational processes that are needed to manage risk;
- comprehends the boundaries, limitations and ethical implications of the discourse of risk; and
- manages personal exposure to risk by actively seeking and utilising a range of professional and organisational strategies to maintain professional integrity, including education, consultation, reflective practice, clinical supervision and critical incident stress management.



Standard 9

The forensic mental health nurse will manage the containment and transition process of forensic service patients

Rationale

Transition between environments such as from the community, between higher and lower security environments, and returning to the community are potentially stressful events for the forensic service patient. This stress can result in decompensation of mental state which may lead to behaviours such as deliberate self-harm, harm to others or absconding, which can compromise the transition. Care and treatment planning for forensic service patients incorporates judgement about risks, protective factors, available resources and therapeutic objectives. The forensic mental health nurse has a duty of care to make recommendations that do not compromise the safety of the forensic service patient or others while having regard for human rights. Critical life events for forensic service patients such as arrest, incarceration, sentencing and release, all require nursing care that supports adaptation.

The forensic mental health nurse:

- assesses FSP for signs of stress and decompensation related to critical life events and transitional processes by examining mental and physical health state, history, function, risks, protective factors, supports, coping, stressors, relationships and situational factors;
- explores elements of the transition experience with the FSP in order to plan for successful transition;
- makes recommendations about appropriate levels of care and supervision;
- collaborates with the interdisciplinary team, family/carers and significant supports to plan and implement strategies to manage the transition;
- facilitates FSP's transition between programs and critical life changes by assessing responses, providing an appropriate level of nursing care and supervision, and supporting FSP coping;
- structures environmental supports for vulnerable FSPs, including issues of accommodation, living skills, recreation, leisure, ongoing justice processes, social support and access to mental health care; and
- intervenes promptly if there are indicators that the transition has been compromised.

Standard 10

The forensic mental health nurse will promote optimal physical health of forensic service patients.

Rationale

The community and custodial lifestyle of many forensic service patients renders them vulnerable to poor physical health. Incarceration imposes potential threats to physical health. These threats include mental state disturbance, substance use, unsafe sexual behaviour, victimisation and interpersonal violence. Access to physical health care may also be compromised in custodial settings and by itinerant lifestyles. The forensic mental health nurse must consider environmental risks and individual needs when planning any interventions promoting the health of the forensic service patient.

The forensic mental health nurse:

- creates a treatment environment that promotes a healthy lifestyle through health education and health enhancing activities, promoting personal growth and discovery;
- conducts a comprehensive health assessment that includes substance use, social circumstances, mental illness, sexual history and life management abilities;
- initiates regular health screens consistent with community norms;
- considers security requirements when initiating timely access to routine and emergency health care;
- acts to minimise the negative impacts of security and safety requirements on the FSP's self-esteem and dignity during performance of physical treatment;
- works with the FSP to identify potential side-effects of psychotropic medication and practical management strategies to minimize the impact of side-effects;
- assists the FSP to manage chronic health problems such as obesity, diabetes, cardiovascular disease, and chronic lung disease through the implementation of chronic health care plans;
- involves the FSP, family/carers and other members of the interdisciplinary team to develop and implement care and treatment plans for physical health intervention;
- supports health seeking initiatives of the FSP within constraints imposed by safety, security and treatment requirements; and
- plans for discharge/release/transfer by identifying potential risks to physical health and implements strategies to manage these risks.



Standard 11

The forensic mental health nurse will minimise potential harm from substance use by forensic service patients

Rationale

Substance use is common in society and in custodial settings. There is an association between substance use and offending behaviour especially violence for people with a mental illness. The forensic mental health nurse needs to address substance use by forensic service patients to reduce risk to health and minimise re-offending.

The forensic mental health nurse:

- understands the relationship between mental illness and substance use, and the increased level of risk to health and offending behaviour;
- uses validated tools and clinical judgement to undertake a comprehensive substance use assessment of the FSP;
- incorporates FSP's substance use assessment data in care planning to provide individualised interventions based upon stages of change;
- assesses and manages the signs and symptoms of substance use, withdrawal and overdose;
- adheres to policies related to the reporting of substance use by the FSP;
- ensures FSPs who have substance use problems have access to appropriate specialist dual diagnosis education, counselling and health promotion programs; and
- assists FSPs with the transition back to situations where substance use is common.

Standard 12

The forensic mental health nurse will practice respectfully with families/carers of forensic service patients

Rationale

Family/carers can provide an important link to the community and promote the wellbeing of forensic service patients through supportive relationships. Mental illness and the nature of the offence and its consequences have an impact on family members/carers and their relationships with the forensic service patient. The forensic mental health nurse needs to demonstrate skill and sensitivity in working with the family/carers around these significant issues.

The forensic mental health nurse:

- appreciates the family's/carers' perception of their relationship with the FSP;
- understands the experience of the family/carers as victims, or potential victims, and undertakes assessment and formulation to manage and evaluate ongoing risk of the FSP to family members/carers;
- respects the family's/carers choice about their preferred level of engagement with the FSP;
- involves the engaged family/carers in assessment, planning and delivery of care;
- applies principles of family sensitive practice to support the FSP's relationship with the family/carers including support, counselling and education;
- identifies relevant agencies and makes appropriate referrals for families/carers when specialist support is required;
- practices within the confines of court orders that govern family/carer contact and communication with the FSP;
- engages with the family/carers to address concerns and also the consequences related to the custody of the FSP that impact on family/carer function; and
- engages with the family/carers to explore and manage responses to FSP's mental illness and offending behaviour.



Standard 13

The forensic mental health nurse will advocate for the mental health needs of forensic service patients in a prison or police custodial setting

Rationale

A significant proportion of prisoners and detainees have pre-existing mental health or substance use problems. Detention can impact on the forensic service patient's mental health and access to treatment. Provision of health care is not the primary focus in a prison or police custodial setting and forensic mental health nurses are uniquely positioned to advocate for the mental health needs of forensic service patients. The forensic mental health nurse must negotiate for appropriate and timely health care for the forensic service patient, advocating for systemic processes that promote humane and effective approaches to prisoner and detainee health care.

The forensic mental health nurse:

- understands the impact of substance use, incarceration and the custodial environment on mental health;
- maintains professional and therapeutic nursing values whilst practicing in a custodial environment;
- provides choice of treatment for FSPs within contextual and procedural limits;
- collaborates with custodial services to develop mental health programs;
- provides mental health education for custodial staff, prisoners / detainees and families/carers;
- advocates for FSPs' access to appropriate levels of mental health care;
- provides criminal justice staff with appropriate information concerning FSP's risk of harm to self or others;
- actively seeks and engages in professional development activities, consultation, and reflective practice to improve nursing care and prevent professional isolation, and
- critically appraises custodial mental health care against contemporary standards of health and mental health care.

Standard 14

The forensic mental health nurse will support and encourage optimal functioning of forensic service patients in long term care

Rationale

Legal status and enduring mental illness can result in long term care of forensic service patients in secure settings and the community. Special needs of forensic service patients in long term care arise from a range of factors including loss of hope and institutionalisation. The forensic mental health nurse maintains therapeutic optimism and promotes 'a life worth living' using an open, flexible and transparent approach.

The forensic mental health nurse:

- has knowledge of the legal framework that determines conditions of long term containment in a secure setting or supervision in the community;
- recognises and collaborates with the FSP to manage the potential impact on the FSP's life and developmental stages associated with long term containment;
- works in partnership with the FSP to maximise responsibility, individual choice and purpose in achieving personal goals and recovery;
- ensures the FSP has access to a range of services to meet standards of optimum health care and individual goals;
- recognises that connectedness is important for wellbeing and assists the FSP to develop/maintain relationships within the local environment and the broader community;
- discourages dependency through managed risk-taking and providing opportunities for FSP control; and
- engages the FSP and interdisciplinary team in the development of a clearly articulated care pathway plan that ensures that therapeutic needs are addressed in a timely manner and provides a mechanism for measuring progress.



Standard 15

The forensic mental health nurse will demonstrate professional integrity in response to challenging behaviours

Rationale

Forensic service patients can demonstrate maladaptive styles of relating and behaving that threaten the physical and emotional safety of themselves and others. The forensic mental health nurse will encounter adverse incidents, some extreme in their consequences, including deliberate self-harm, violence and other offending behaviour. Theoretical understanding of causative factors, empathic and flexible limit setting, consistent care and treatment planning, and monitoring of emotional responses to forensic service patients with challenging behaviours are necessary to maintain therapeutic effectiveness.

The forensic mental health nurse:

- demonstrates knowledge of traumatic experiences and contributing factors associated with challenging behaviours;
- understands the impact of a secure environment and culture on the behaviour of FSPs;
- uses a problem solving approach to identify contributing factors related to specific challenging behaviours and incidents;
- uses clinical review, consultation and an evidence based approach in selecting care, treatment and rehabilitation goals and strategies;
- implements and evaluates strategies to address challenging behaviour;
- works in partnership with the FSP, family/carers and significant others at all stages of the problem solving process;
- maintains a consistent caring presence to maximise adaptation by the FSP and support effort in the slow and difficult process of change;
- collaborates with the interdisciplinary team to limit negative impacts of challenging behaviour;
- critically reflects on own personal responses to FSPs who present a therapeutic challenge;
- supports other staff who are exposed to challenging behaviour to ensure positive ongoing interactions with FSPs; and
- actively seeks and utilises a range of professional and organisational strategies to maintain professional integrity, including education, consultation, reflective practice, clinical supervision and critical incident stress management.

Standard 16

The forensic mental health nurse will engage in strategies that minimise the experience of stigma and discrimination for forensic service patients

Rationale

Community attitudes towards mental illness and offending behaviour are influenced by misinformation, ignorance, fear and sensationalist representation in the media. Forensic service patients are disadvantaged through the negative appraisal by others and by internalised impacts on identity, self-concept and personal recovery related to forensic status and mental illness. The forensic mental health nurse is aware and demonstrates that understanding, support, education and advocacy are necessary to combat stigma and discrimination.

The forensic mental health nurse:

- demonstrates knowledge of legislation that protects the rights of FSPs and applies knowledge to practice when needed;
- recognises and reflects the impact of the offence on the FSP and the interdisciplinary team members and manages these emotional responses in a professional manner;
- understands community bias exists against FSPs;
- supports the FSP through the experience of public scrutiny that can occur through media reporting;
- assesses the FSP's response to forensic status, mental illness and public scrutiny with attention to stigmatising effects on self-esteem, identity and role performance;
- explores strategies with the FSP for appropriate disclosure of forensic service patient status;
- makes recommendations or implements strategies to protect FSPs from potential risk of harm arising from condemnation by others, including victims, the community, fellow FSPs or prisoners;
- acts as an advocate for FSPs through education of other agencies, health care professionals, criminal justice personnel and the wider community; and
- consults and negotiates with agencies such as health, legal services, housing, education and employment to ensure the FSP has fair and equitable access to services.



Glossary

Many terms appear in these standards that are not strictly accurate but have been used for the sake of brevity.

Family/carer

'Family/carer' is used throughout these standards to refer to relatives, partners and others who are identified as carers (but not professional carers). At times, the family of a forensic service patient are not carers and may be estranged from the forensic service patient but may still be receiving support from nurses.

Forensic mental health nurse (FMHN)

Throughout these standards, the term 'forensic mental health nurse' is used to describe a mental health nurse who is employed to provide assessment and formulation, planning, implementation and evaluation of care and treatment with forensic service patients. This is not a credentialed title in Australia.

Forensic service patient (FSP)

Finding a term to capture the range of patients who receive care from forensic mental health nurses was a challenging task. Patient is the term used at Forensicare and the Consumer Advisory Group at the Forensicare hospital supported the use of this term.

Forensic service patients include:

- people who have appeared before the courts and have been found unfit to plead or are not guilty on the ground of mental impairment;
- other alleged/offenders referred by the courts for psychiatric assessment and treatment;
- mentally ill prisoners requiring transfer to a hospital for treatment;
- prisoners requiring psychiatric assessment and treatment in prison;
- high-risk offenders with a mental disorder referred by releasing authorities; and
- patients in mainstream mental health services who are a high risk to others.

Secure setting

The term 'secure setting' is used generally to identify secure hospitals, prisons and police custody centres. When the reference is only to prisons and police custody centres then the term 'custodial setting' is applied.

Significant supports

'Significant supports' is the term used to describe friends and the others who provide significant support (e.g., welfare agency workers, cultural and religious workers).

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