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## Improving systems and approaches that underpin the care planning processes: An exploration of how health professionals engaged with the medium that inform care plans within a specialist and forensic mental health setting

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Developments in use of electronic based care plans has been welcomed by many contributors due to its noted strengths of providing a single point of access for delivering health care services within the United Kingdom (UK). Despite the noted strengths, for some, electronic care plans have been viewed with a level of scepticism about how they shape the healthcare landscape. Assertions and counter-assertions are presented on how best to establish safe, cost effective methods of delivering healthcare services. This is a key priority across the globe. As a result, health professionals are required to have the skills and knowledge in order for them to utilise an appropriate medium that promote safe delivery of health care services. A qualitative study was carried out to explore and establish the care planning processes that occurred within a specialist and forensic mental health setting in the UK. The study was conducted during a period of transition from paper based care plans to electronic based care plans. Notably, competing debates had been presented about how the transition phase would occur. With an acknowledgement of the above, some contributors note that, during times of transition, in most cases staff have to re-learn or at least alter their mental templates, systems and approaches. For this reason, opportunities and threats are identified as markers of this phase. In order to explore opportunities and threats that occur when transitioning from paper based care plans to electronic care plans, a comparison was made in how the two approaches were utilised by the staff groups. This process of exploring differences in approaches utilised, was informing in many ways for example, noted risks were identified and also this provided an avenue to establish some aspects of practices that required improvement. Importantly, areas of good practice were highlighted too. Notably, a range of data collection methods were utilised to elicit how the care planning processes within a National Health Service (NHS) Specialist and Forensic services happened. Engaging with these processes illuminated how the staff group engaged with the care planning processes within a Forensic mental health context. In order to maintain safety, there is need to identify blind spots and once identified, risk mitigation plans are required to be established in order to operationalize them.

### Biography

Farai Makoni is currently in the process of completing his PhD at University of Southampton. He worked in a range of healthcare services including, Men's, Women's and Child and Adolescent mental healthcare settings. His area of specialty is Forensic Mental Health. He spent his clinical career working within a specialist and Forensic Mental Health setting within the UK. Prior to moving into a lectureship role, he was a Team Manager for a Secure Forensic Mental Health for Young people Unit. Currently, he is a Senior Lecturer at Bucks New University and researcher at University of Southampton, UK. He has published work across the globe in reputable conferences for example, the Royal College of Psychiatrists, Shanghai International Nursing Conference II. His work has also been published in other conferences within the UK and USA. Research interests include interprofessional education, reflective practice, collaboration, risk mitigation and widening participation within higher education.

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