

**Advance Directives** - Sometimes known as an Advance Statement. This is a written statement, drawn up and signed when a person is well, which sets out how they would like to be treated if they were to become ill in the future. It must be witnessed and dated.

**Advocate** - An advocate is a person who can support a service user or carer through their contact with health services. Advocates will attend meetings with patients and help service users or carers to express concerns or wishes to health care professionals. Although many people can act as an advocate (friend, relative, member of staff) there are advocacy services available that can be accessed through the Trust. These advocates are trained and independent from NHS mental health services.

**Alternative Therapy** - These are treatments that are not part of current standard medical practice (for example acupuncture, reflexology or aromatherapy). Therapies are termed as complementary when used in addition to conventional treatments and as alternative when used instead of conventional treatment.

**Antidepressants** - Antidepressants aim to treat the symptoms of depression and can help people experiencing depression to feel more motivated and energetic. This group of medication may also be used to treat obsessive-compulsive disorder, anxiety and eating disorders. There are different types of antidepressants including tricyclic and selective serotonin reuptake inhibitors (SSRIs).

**Antipsychotics** - Antipsychotic medication is normally given to treat the symptoms of schizophrenia and, in some cases, manic depression and manias. The two main types of antipsychotics are called typical and atypical. The main difference between the two groups is in their side effects.

**Anxiety** - This is the term used to describe experiences such as chronic fear, tension and panic attacks. Some people have an overwhelming feeling of dread that prevents them getting on with everyday life. Sleepless nights and recurring thoughts are common, as well as nausea, palpitations, dizziness and difficulty in breathing. Anxiety is the most common mental health problem people experience.

**Anxiety Disorders** - These are disorders that involve a continuous state of anxiety or fear, lasting at least a month, marked by constant apprehension, difficulties in concentration and a pounding heart. Physical symptoms may also be present, such as headaches, sweating, irritability, and nausea. Anxiety disorders include panic disorder and obsessive-compulsive disorder. Depression is common in those with anxiety disorders.

**Approved Mental Health Professional (AMHP)** - Created in 2007, this role replaced the Approved Social Worker. Approved Mental Health Professionals can be a social worker, community psychiatric nurse, occupational therapist or psychologist who has received special training and is approved by a local authority social services department to carry out duties under the Mental Health Act. These duties involve assessing whether someone should be compulsorily treated under the Act.

**Art Therapy** - Art therapy aims to support people's recovery using art as a creative process and as a therapy to help people resolve emotional conflicts, be more aware about themselves, develop social skills, reduce anxiety and increase their self-esteem.

**Assertive Outreach Team** - Assertive outreach services aim to support people in the community who find it difficult keeping in contact with mental health services.

**Atypical Antipsychotics** - Atypical antipsychotic medication is a group of new antipsychotic drugs that have a different set of side effects from the older, typical, antipsychotics. In general they cause fewer movement disorders such as tremor, muscle stiffness and restlessness.

**Care Co-ordinator** - A care co-ordinator is the person responsible for making sure that a patient gets the care that they need. Patients and carers should be able to contact their care co-ordinator (or on-call service) at any reasonable time. Once a patient has been assessed as needing care under the Care Programme Approach they will be told who their care co-ordinator is. The care co-ordinator is likely to be community mental health nurse, social worker or occupational therapist.

**Care Plan** - A care plan is a written plan that describes the care and support staff will give a service user. Service users should be fully involved in developing and agreeing the care plan, sign it and keep a copy.

**Care Programme Approach (CPA)** - Mental health care is carried out according to the 'Individual Care Coordination' process which is often called CPA (Care Programme Approach). The 'Care Programme Approach' is the system that sets out the way treatment and care is given to people with serious mental illness. It includes an assessment of an individual's symptoms and needs so mental health professionals can work out what sort of treatment and social support they need. The treatment and support plans will then be written down in a care plan.

**Carer** - A carer is someone who looks after their relatives or friends on an unpaid, voluntary basis often in place of paid care workers.

**Carers' Assessment** - A carer's assessment means social services will look at your situation and see if you are entitled to any services that could make caring easier for you. The assessment is an opportunity for you to tell the social worker what impact caring has on you. The assessment can be carried out at your home or at the home of the person you are caring for. The assessment is about you, and the person you care for does not need to be present.

**Case Manager** - See Care Co-ordinator.

**Child and Adolescent Mental Health Services (CAMHS)** - CAMHS is a term used to refer to mental health services for children and adolescents. CAMHS are usually multidisciplinary teams including psychiatrists, psychologists, nurses, social workers and others.

**Clinical Commissioning Groups (CCGs)** - CCGs are clinically led groups that operate in specific geographical areas and provide the avenue for GP's and clinicians to decide which health services will be commissioned.

**Clinical Psychologist** - This is someone who has a Psychology Degree together with clinical training in psychology. They are trained in research, assessment and the application of different psychological therapies.

**Cognitive Behavioural Therapy (CBT)** - This is an approach that involves working with people to help them change their emotions, thoughts and behaviour. A person's personal beliefs are explored in order to understand and change behaviour and reduce distress.

**Community Care** - Community Care aims to provide health and social care services in the community to enable people to live as independently as possible in their own homes or in other accommodation in the community.

**Community Mental Health Team (CMHT)** - A multidisciplinary team offering specialist assessment, treatment and care to people in their own homes and the community.

**Community Psychiatric Nurse (CPN)** - CPNs are registered nurses who work with people in the community. They work as part of a team and, like other members of the team, may see people in a variety of settings such as at a GP surgery, in a clinic or health centre or in a client's own home. They work closely with GPs and other health professionals. They provide practical advice, ongoing support with problems, supervise medication, give injections and help with counselling. They also work out care plans with other members of the team, service users and carers.

**Complementary Therapy** - These are therapeutic practices or techniques that are not currently considered an integral part of conventional medical practice. Therapies are termed as complementary when used in addition to conventional treatments and as alternative when used instead of conventional treatment.

**Consultant Psychiatrist** - A Consultant Psychiatrist is a trained mental health doctor with additional specialist training in psychiatry. The consultant is medically responsible for the care of people receiving mental health services and also supervises junior doctors.

**Counselling** - Counselling is a talking therapy that usually deals with a recent distressing event. The length of time that counselling is needed varies from person to person.

**Crisis Resolution and Home Treatment Team (CRHTT)** - A crisis resolution team aims to respond to people in crisis. It aims to provide an assessment and treatment service, 24 hours a day, wherever people are.

**Delusion** - A persistent false belief often held despite the presence of contradictory evidence.

**Depot Injection** - The injection of a drug in an oil suspension that results in a gradual release of the medication over several days.

**Depression** - Depression is one of the most common forms of mental health problem and can occur to people of all ages. Symptoms include feelings of despair, hopelessness and worthlessness, an inability to cope, sleep problems and sometimes thoughts of suicide. Often people with depression will complain of physical problems (e.g for example headaches, stomach problems) rather than depression when consulting their GP. Various treatments are available for depression including antidepressant medication, talking treatments such as CBT, or counselling.

**Direct Payments** - Direct payments are local council payments for people who have been assessed as needing help from social services, and who would like to arrange and pay for their own care and support services instead of receiving them directly from the local council. A person must be able to give their consent to receiving direct payments and be able to manage them even if they need help to do this on a day-to-day basis. Carers can manage direct payments on behalf of their relative. Direct Payments is currently being changed into schemes called 'personalisation' or 'self-directed support'.

**Distress** - Anxiety or mental suffering.

**Dopamine** - A chemical found in the brain that acts as a neurotransmitter. An imbalance in the levels of this neurotransmitter in the brain has been linked with various psychiatric disorders such as anxiety, psychosis, schizophrenia and depression.

**Drama Therapy** - Drama therapy aims to help a person use drama as part of their recovery process. It can give a person an opportunity for reflection and to tell their story to help solve a problem and achieve a relief of strong suppressed emotions.

**Duty Worker** - the person who is on-call to take all inquiries, either on a community team or at Social Services. This person usually has access to any records already held, and will pass on information to the appropriate person so that action can be taken.

**Early Intervention in Psychosis Service (EIPS) or Early Intervention Services (EIS)** - Early intervention services provide support and treatment in the community for young people with psychosis and their families. The aim is to reduce the period of untreated psychosis, which in turn, evidence shows, is likely to lessen future problems and improve the person's health and well being in the long term.

**Early Warning Signs** - Changes in someone's behaviour which may suggest they are becoming unwell again. Relatives are very often the first people to notice these. Signs of relapse, as they are called, are often written into the care plan so that workers can be on the watch for these.

**Efficacy** - How well something works. This term is used to refer to treatments in particular.

**Family Intervention (FI)** - This form of therapy involves all relevant members of a family. It acknowledges the impact of mental health problems on all family members and helps the family to work together towards achieving common goals.

**Focus Group** - A small group of representative people who are questioned about their opinions as part of research.

**Formal Patient** - This is a person who has been detained in hospital under the Mental Health Act (1983).

**Hallucinations** - These are experiences individuals have of things which don't really exist. There are various different types of hallucinations including: auditory (hearing sounds or voices), olfactory (smells), tactile (sensation), visual (seeing things) or gustatory (taste). The most common are hearing voices or seeing things that don't really exist. Hallucinations are common psychotic disorders. Hallucinations may also occur after illegal drug use and some prescribed drugs (e.g. steroids).

**Information Sharing** - The responsibility of professionals across agencies to share relevant information to ensure that everyone involved in a person's care is informed. Whether to share information with relatives is often quite tricky for professionals, but there are many instances where they must do this. If a patient is ill or distressed they may say they do not want you to be involved in their care. If this happens you can request a private meeting with any of the relevant professionals, including the Consultant. You may also find it easier to discuss matters on the phone or by letter before the meeting takes place. Staff cannot always tell you everything because of rules about patient confidentiality, but they must listen to your concerns. You can expect staff not to pass on information you have given about yourself. In addition, staff will not disclose your opinions to the patient if this will cause problems for you.

**Integrated Care Pathway** - Integrated Care Pathways are a multi-disciplinary and multi-agency approach to setting out how care should work from admission through to discharge and afterwards. The aim is pull together all the information into one file that will make it easier for the clinicians involved to give the best care for the patient.

**Interdisciplinary** - This refers to work or care that links across professional boundaries. For example, when doctors, social workers and occupational therapists work together to provide care.

**The Mental Health Act 2007** - (formerly 1983, but amended in 2007) is the law that allows people with a 'mental disorder' to be admitted and treated in hospital without their consent – either for their own health and safety, or for the protection of other people. People can be admitted and treated under different sections of the Act, depending on the circumstances, which is why the term 'sectioned' is used to describe a compulsory admission to hospital.

**Multidisciplinary** - Multidisciplinary denotes an approach to care that involves specialists from more than one field working together. Typically this will mean that doctors, nurses, psychologists and occupational therapists are involved.

**Music Therapy** - This form of therapy uses music and therapeutic approaches to help people attain goals. These goals can be mental, physical, emotional, social and/or spiritual.

**National Institute for Health and Care Excellence (NICE)** - It provides clinical staff and the public in England and Wales with guidance on current treatments. It coordinates the National Collaborating Centres from whom it commissions the development of clinical practice guidelines.

**Negative Symptoms** - These are psychotic symptoms characterised by a lack of expected behaviour, such as lack of energy, emotion, movement or motivation.

**Neurotransmitter** - These are chemicals which relay signals between nerve cells in the brain.

**Next of Kin** - The term next of kin is widely used, but there is no statutory definition. In practice the general rule has been to recognise spouses and blood relatives as next of kin. Next of kin has no legal rights under the Mental Health Act 1983, whereas the nearest relative does. The Mental Health Act 1983 defines a list of certain people who can be treated as the 'nearest relative' of a patient.

A 'nearest relative' has a number of important powers and functions, including the right to discharge a patient who has been formally detained in hospital, make an application for a person to be admitted for assessment, treatment or guardianship and also to object to applications for treatment or guardianship being made by a social worker. Only certain categories of people can become a 'nearest relative'. First in the list are spouses and civil partners, then children, then parents, then siblings. Further details can be found at:

<http://www.rethink.org/carers-family-friends/what-you-need-to-know/nearest-relative-rights-information>

**Neurolinguistic Programming** - This is a discipline that explores the relationships between how we think, how we communicate, and our patterns of behaviour and emotion. Under this approach the brain is seen as a computer that can be reprogrammed, transforming the way we think and act. This process is sometimes referred to as "modelling".

**Nominated Person** - A person who is appointed to represent a patient in discussions in matters related to their care.

**Occupational Therapist** - Occupational therapists use purposeful activities to treat people with physical and/or mental health problems. They work as part of a team to identify problems caused by people's conditions and find ways of coping with these to encourage independence and a better quality of life.

**Occupational Therapy** - Occupational therapy uses goal-directed activities, appropriate to a person's age and social role, to restore, develop or maintain the ability for independent living.

**Patient Advice and Liaison Service (PALS)** - All NHS trusts are required to have a Patient Advice and Liaison Service. The service offers patients information, advice, quick solutions to problems or access to the complaints procedure.

**Patient Administration System (PAS)** - A computer system used to record information about the care provided to service users. The data can only be accessed by authorised users. PAS will soon be replaced by a newer system.

**Positive Symptoms** - Positive symptoms refer to psychotic symptoms such as false beliefs and hallucinations.

**Primary Care** - Primary care is the care that you will receive when you first come into contact with health services about a problem. These include family health services provided by GPs, dentists, pharmacists, opticians, and others such as community nurses, physiotherapists and some social workers.

**Primary Care Liaison Team (PCLT)** - A service working closely with GPs for clients who cannot be effectively managed in an ordinary primary care setting. The team takes a key role in the organisation and delivery of service working closely with statutory and non-statutory agencies and transferring patients between services as required. The team offers risk assessment of clients, advice and short to medium term psychological therapies.

**Primary Care Trust (PCT)** - These were abolished in March 2013 as part of the Health and Social Care Act (2012). PCTs have now been replaced by Clinical Commissioning Groups (CCGs).

**Prognosis** - A medical opinion as to the likely course and outcome of a disease.

**Psychiatrist** - A doctor who specialises in the diagnosis and treatment of people who are mentally ill. Psychiatrists have undergone specialist training and may diagnose illness, prescribe medication and other forms of appropriate treatment. They also decide whether to admit people to and discharge from hospital.

**Psychoanalysis** - This is a type of talking therapy that focuses on unconscious motives and conflicts.

**Psychologist** - Psychologists have skills in the assessment and treatment of mental illness and psychological problems. Unlike psychiatrists they are not medical doctors, their skills include assessing cognitive functions (for example, speech and thought) and providing talking interventions including CBT and family interventions.

**Psychosis** - Psychosis, or psychotic disorders, involves distorted perceptions of reality and irrational behaviour, often accompanied by hallucinations and delusions.

**Psychotherapy** - The treatment of mental health, emotional and personality problems through talking with a therapist. There are many different types of psychotherapy.

**Psychotherapist** - Psychotherapists help people to be in more control of their own lives by exploring emotional difficulties and helping them understand themselves and their relationships with others. They provide consultation and intervention on a one to one basis and in groups.

**Relapse** - This is when a person is affected by an illness that has previously affected them.

**Relapse Prevention Plan** - A scheme made with the aim of reducing the risk of a person developing an illness that has affected them in the past.

**Relatives** - See Next of Kin.

**Schizoaffective Disorder** - This condition displays symptoms of both schizophrenia and bipolar disorder.

**Schizophrenia** - This is a psychotic disorder marked by delusions, hallucinations, disordered thinking and speech inappropriate emotions and/or lack of emotions. It is characterised by serious disturbances of thought and perception which cannot be attributed to brain damage.

**Secondary Care** - Secondary care is specialist care, usually provided in hospital, after a referral from a GP or health professional. Mental Health Services are included in secondary care.

**Section** - This is used to refer to one of the sections of any Act of Parliament. A person who is detained in hospital under the Mental Health Act (1983) is commonly referred to as 'sectioned'.

**Selective Serotonin Reuptake Inhibitor (SSRI)** - This is a type of antidepressant medication.

**Service User** - This is someone who uses health services. Other common terms are patient and client. Different people prefer different terms.

**Stakeholder** - A person or group that has a direct interest, involvement or investment in something.

**Substance Abuse** - This refers to the abuse or misuse of non-medical or 'recreational' drugs and/or alcohol. As well as physical problems, some substance abuse can lead to psychological problems, such as depression, anxiety and, in some cases, psychosis.

**Support Time and Recovery Workers (STR)** - See Support Worker

**Support Worker** - Support workers, under the supervision of a care coordinator, provide support for clients and their carers which has been negotiated under the care programme approach. They can help people regain lost skills and develop new interests to help regain confidence and self esteem.

**Talking Therapies** - These are psychological treatments in which improvement in a person's symptoms or wellbeing is achieved by talking with a therapist or counsellor rather than, or as well as, taking medication.