

# Your Guide to Spectrum Residential Treatment

## Living in the residential community

To be read in conjunction with  
Your Guide to Spectrum Treatment

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## INTRODUCTION

These guidelines are for clients of the Spectrum residential program specifically, who will be sharing a living space while part of the program. They are to be read in conjunction with 'Your Guide to Spectrum Treatment'.

Spectrum aims to create a non-institutional, safe and therapeutic environment where people diagnosed with personality disorder can receive treatment in an atmosphere that promotes autonomy, self-responsibility, care and connection. Spectrum staff and clients have developed these guidelines (in 'Your Guide to Spectrum Treatment' and in 'Your Guide to Spectrum Residential Treatment') over a number of years to assist with balancing self-responsibility and choice with care and connection to others. We hope these guidelines assist clients of Spectrum to be clear about expectations and to enable better communication and understanding between clients and staff.

Spectrum accepts people with personality disorders often feel overwhelmed. At times of severe stress these overwhelming feelings can lead to behaviours such as self harm, hard to control aggressive feelings and difficult interactions with others. At these times it can be difficult to stick to guidelines like those contained in this document. However Spectrum expects both staff and clients to make a commitment to learning healthier ways of coping, and to respect each other and the community as a whole. This is what makes treatment possible.

This document does not exist as a tool to judge or punish people, however persistent lack of respect for these guidelines may result in leave or discharge from Spectrum treatment, depending on the circumstances. If a person is unable to show a commitment to these guidelines, it usually means they are not ready to benefit from Spectrum's style of treatment at that time. That doesn't mean they can't try again in the future. The expectations Spectrum has of its staff and clients are outlined in the following pages.

## LIVING ARRANGEMENTS

The residential program is open from Monday afternoon until Thursday lunch time. Clients in the residential program live in a shared house staffed and managed by Spectrum. The residential program is closed between Thursday afternoon and Monday afternoon each week. It is also closed at other times such as holiday periods and staff planning days. It is therefore essential that clients have a home outside of Spectrum's residential program, and can transport themselves to and from Spectrum.

- Residents are expected to organise their own transport and living arrangements for times when the residential program is closed.
- If problems or instabilities arise in a client's transport or living arrangements, Spectrum staff will support the person to engage with their local treating team around the issues, so they can return home when Spectrum closes.
- If a client is in crisis at the time when Spectrum is closing, Spectrum staff will help them to engage with their local treating team to facilitate getting back home for treatment and support.

## CARE OF COMMUNAL AND PRIVATE SPACE

Spectrum staff and clients value consideration of others, which is particularly important when you share a living environment.

- Residents are asked to clean up after themselves in communal areas, and to contribute to general tidiness of the residences.
- Private areas are to be cleaned by the individuals who use them.
- When a client leaves the residential program, it is expected that they leave their bedroom and bathroom in a reasonable state of cleanliness.
- As a courtesy to those attempting to sleep, residents agree not to use noisy appliances, such as washing machines, dryers and vacuum cleaners, after 10pm.
- Under normal circumstances, Spectrum clients and staff only enter another resident's bedroom if they have permission from that person. However, there are a couple of reasons why a staff member might enter a bedroom without asking. If a residence is being closed for a period of time, staff may have to check security (such as to check power-points are off and windows are closed) or in an emergency staff may enter a bedroom without permission.

## FOOD

Self-responsibility is an important principle supporting all treatment at Spectrum. This is particularly relevant to living in the residential unit where, with support, clients manage their own needs regarding meals and shopping.

- Residents manage meal planning, food shopping, and cooking for themselves.
- Spectrum staff are available for support and coaching to develop these skills, if needed.

## VISITORS

The balancing of each client's social needs with the needs of others also guides the expectations placed on visitors to the residences. In addition, Spectrum is committed to providing clients with an environment which is as psychologically and physically safe as possible, and so there are boundaries concerning the behaviour of visitors to the program.

- Residents always check with other residents and staff before inviting visitors to Spectrum sites.
- Visiting hours are 7pm-10pm, but other times may be negotiated provided they do not affect participation in groups, and are made with consideration of the needs of other residents.
- Staff may deny access to a visitor or ask them to leave. If a visitor is asked to leave they must do so immediately.

**It is resident's responsibility to ensure that visitors are aware of the following expectations:**

- to be respectful of others in relation to noise, privacy, and personal space
- to remain in common areas and only enter a resident's room if given permission
- to be sober and non-drug affected (any visitor bringing alcohol or drugs to Spectrum will be asked to leave and banned from future visits)
- be committed to sorting issues out if a concern is identified.

## SELF-HARM

Please read the expectations below in conjunction with those outlined about self-harm in the main document, “Guide to Spectrum Treatment”.

Self-harm acts by their very nature can create troubling interpersonal situations, especially when sharing a living space. There is also the potential for difficult interactions to occur between clients and staff after self-harm behaviours. This is often because staff are asking the client to engage in self-care, and to consider the impact on others, at a time when the client is struggling with intense emotions.

In the interest of managing the issues surrounding self-harm, the following definitions and expectations are made clear.

### *What is self-harm?*

- At Spectrum, the term “self-harm” refers to both actions intended as suicide and those that are not. The first two behaviours listed below are always considered self-harm:
  - 1) any form of cutting, scratching, bruising or burning of the self;
  - 2) any quantity of medication taken above the prescribed amount (or recommended dose for over the counter medication) – that is, overdosing or overuse.
- The following behaviours may be defined as self-harm in a client’s Spectrum management plan, or as a problem behaviour that severely impacts on quality of life:
  - 3) neglect of medical issues or not engaging in medical treatment when needed
  - 4) unhealthy eating and/or sleeping patterns
  - 5) unprotected sex
  - 6) drug and/or alcohol use
  - 7) gambling
  - 8) reducing, ceasing and/or changing current prescription medication without professional advice.

### *When feeling at risk of self-harm*

- Residents feeling vulnerable to self-harm or suicidal urges agree to convey this to staff with the aim of receiving support.
- Residents aware of another resident's plans to self-harm agree to convey this to staff. (Please also read the section on Secrecy in the "Spectrum Treatment Agreement").
- Residents **are not** expected to intervene with or attempt to stop co-residents self-harming. In fact, this is discouraged because it impacts severely on your own progress in treatment as well as that of the person self-harming. You are not responsible for other client's safety. Let staff know instead.
- Residents feeling at risk of self-harming with medication may negotiate for staff to hold the key to their medication box for an agreed period. If a resident requests the return of their key whilst still feeling at risk, staff will attempt to discuss the wisdom of this. However, keys will be returned in a timely manner, in line with the notion of self-responsibility. If a resident repeatedly self-harms after their key (or other self-harm means) is returned to them by staff, discussion about the problem would be facilitated by staff, either individually or in a group session.

### *If a client self-harms*

- If a client who is a resident self-harms, they agree to:
  - do so in private – that is, not in any shared space or on public Spectrum sites.
  - not use communal objects to self-harm with, such as knives or scissors from the residences.
  - inform staff as soon as possible.
  - seek medical treatment and clearance as soon as possible after the self-harm (including whilst on leave).
- If a client's self-harm behaviour were continuous or escalating during their Spectrum admission, the question would be raised as to whether the residential program was appropriate to the person's current therapy needs at that time. A review of the treatment plan would then be conducted, with leave or discharge from the program a possible consequence. If this occurred, your Spectrum therapist or co-ordinator would continue to provide support or treatment in your community.
- The residential program community is always encouraged to celebrate times when a client is able to manage self-harm urges by choosing an alternative, more healthy, course of action.

### *Immediately after self-harm*

- Spectrum residents manage their own first aid when they do not require medical treatment (for example, cover a superficial wound).
- Spectrum staff do not apply first aid or physical treatment after self-harm, except in life threatening situations. Residents will have access to basic first aid materials to manage their own injury, which the person must replace afterwards.
- As outlined in the document “Spectrum Treatment Agreement”, Spectrum clients agree to obtain medical attention as soon as possible after the event, for any self-harm that requires treatment. In the residential program, this means attending a local GP or emergency department. It is the resident’s responsibility to get themselves there, however if necessary staff will assist by, for example, calling an ambulance.
- If a resident who is judged by staff to need medical attention does not co-operate with receiving this treatment, staff may call emergency services.
- If self-harm results in a mess, such as blood spill or broken glass, the resident agrees to clean this up as soon as appropriate.
- When a resident self-harms, support and debriefing is offered to the other residents.

### *Problem Behaviour Repair Forms*

Spectrum places a high priority on learning from all opportunities available. Many past clients have told us that one of the most helpful things they learned at Spectrum was that their self-harm impacted on other people. Sometimes it’s hard to believe others care enough to be affected by your self-harm, or you might feel so guilty that you push the issue out of your mind completely.

The Spectrum residential program staff will introduce you to a document called a Problem Behaviour Repair Form to help you learn more about your thoughts, feelings, and behaviours leading up to self-harm. The aim is to help you broaden your choices so you have alternative strategies to self-harm, and to also help you practise working on the impact of self-harm on your relationships.

- After a person has received medical treatment (or applied their own first aid if treatment is not required) a Problem Behaviour Repair Form is expected to be filled out as soon as possible.
- A resident who has self-harmed cannot attend residential program groups or individual sessions until the Problem Behaviour Repair Form has been completed and handed in to staff.
- Once the form is completed, the resident is supported in talking to staff and other residents about what they have discovered in the process and what they want to do differently next time they are faced with urges to self-harm.

### *Self-harm while on leave*

When a resident has self-harmed while on leave from Spectrum (on the weekend, or other times away from the program) they agree to:

- complete a Problem Behaviour Repair Form for each episode.
- hand all forms to staff on their return, before attending residential program groups or individual sessions.

If more than one episode of self-harm has occurred, residents choose which one they will talk about with staff and other residents (perhaps the one they might learn from the most), but also acknowledge with the group how many episodes actually occurred. It is usually expected that the remaining forms will be reviewed in an individual session with staff.

## COMPLETING RESIDENTIAL TREATMENT

- Whenever a person completes a period of residential treatment, Spectrum staff liaise with the client's local treating team and a Spectrum community clinician (co-ordinator or therapist), to ensure they will be supported on their return home and their community-based treatment plan is resumed.
- This occurs whether a client leaves according to plan, or leaves early or suddenly for some reason.
- Re-admissions to the residential program are possible and can be negotiated between the resident, their treating team and Spectrum.