



# My 3- Case Study

Live - Learn - Grow

## Profile

This is a factual account of a young person that came into CQC transitional services, aged 16 years, from inpatient CAMHS service where she/he had been admitted due to deterioration in mental state. Having experienced significant intrusive thoughts leading to multiple incidents of self-harming, suicide ideation and overdoses and risk behaviours including lashing out at family members and property damage. Underlying causes had been identified as; difficulties with social communication, sensory sensitivity leading to sensory overload and anxiety and emotional regulation difficulties. He / she had struggled to engaged in formal and traditional therapy on the ward, but mood had stabilised to a point where risks could be safely managed in the community. He / she came in on 1:1 staffing with waking nights to maintain her/his safety and this was increased during a period of crisis to 2:2.

## Support and interventions provided

During assessment and settling in phase the therapy team engaged in a range of activities of interest to begin building therapeutic rapport and a safe space to begin talking about her/his perception of own difficulties.

The therapeutic practitioner provided opportunity for practical exploration of thoughts and feelings while the Occupational Therapist worked to understand her/his diagnosis and how this could impact on functional skills and thought processes.

He / she was supported to develop skills in:

- Practical Mindfulness
- Yoga and Meditation
- Safe physical expression of emotions- using a punchbag
- Emotional freedom technique for emotional release
- Recognising "I am not my thoughts" (therapeutic piece of work to understand mind/body unhealthy thought patterns and how to respond not react.)
- Primal scream therapy - cathartic vocalisation to help release emotions.
- Creating a Self Sooth Kit
- Interpersonal effectiveness- skills in navigating relationships and how to end those that are unhelpful.

He / she also received further therapeutic input in the form of:

- Massage for deep pressure touch and relaxation
- Reiki energy healing for emotional regulation and alignment
- How I view myself (therapeutic piece of work to reframe self-esteem)

He / she was given 1-1 home school education with a part-time timetable with My3 Wood Edge independent School

- ASDAN independent living skills
- English and Maths Functional skills
- Transition and support to FE virtual College Course

## Outcomes

As a result of the input provided He / she developed skills which allowed to better manage emotions, communicate and express emotional needs, reduce the frequency and intensity of

intrusive thoughts, resist acting on her intrusive thought (including self-harming). He / she also reported being better able to recognise and manage sensory overload, felt more balanced and able to maintain a baseline throughout the day and was using meditation on a regular basis. He / she linked this to having an improved understanding of how physical activity can be used to improve mental state and was experiencing improved self-esteem and confidence.

As a result of the progress, staffing levels were reduced and he / she was beginning to go out into the community independently. He / she began to do more for self and developed domestic and self-care skills to support being able to live more independently.

He / she has since successfully transitioned on to semi-independent living in a one flat and has been in contact to thank staff and report that she/ he is content with her/his new life and enjoying independence.