

PinC in Action

The following documents are used in the operation of the PinC System of Recovery

PinC Process Records Outline

PinC Process Records

- Forms that are completed by the person (client) and the mental health worker. The mental health worker include mental health nurses/psychiatric nurses, and other disciplines including rehabilitation and support workers working in the mental health and related fields.

Users' Manual: Partnership in Coping System of Recovery

- Provides information on the working alliance with a step- by-step guidance through the stages of the PinC system. These stages include the development of core conditions of a helping relationship, assisting the person identify his/her concerns, negotiating the goals with the person, assisting him/her to identify and apply coping strategies, and evaluating the outcomes.

Range of Life Experiences

- Offers an aide memoir for the partners in PinC (client and mental health worker). It provides examples of other people's concerns, goals and actions.
The Range of Life Experiences document is useful for the partners in assisting in the identification of client concerns.

Summary of the Application of the PinC system

In all of the following stages the person using the service is the prime decision-maker. Communication between the person and the mental health worker is in language the person is comfortable with.

Creation of a working alliance

Core conditions of unconditional positive regard, empathy and genuineness constitute the basis for the other two dimensions of the working alliance, namely, agreement of the goals to be achieved and the means of achieving them.

Identification & prioritisation of concerns

Concerns related to mental health that the person stated they wished to address are identified and prioritised with assistance from the mental health worker. Prioritisation of concerns is recommended to be in terms of the degree of desirability and the level of feasibility of the action being considered likely to succeed by the person.

Establishment of goal

Goal setting (the formulation of a statement of expected or desired change) is made by the person with the help of the mental health worker.

The process of establishing goals involves discussion, negotiation and agreement on goals identified by the person. All goals are sincere aspirations of the person using the service and as with all other communications with person statements of goals are not reframed into professional language.

The person defines goals according to a number of criteria:

- Ability to fulfil
- Ownership (the goals belong to the client with the support of the mental health worker).
- Specific and able to be evaluated
- Clearly stated

Identification of coping strategies

Clients identify coping strategies by reflecting in a systematic way on the previous occasions when they dealt with the same or similar concerns.

The person using the service and the mental health worker undertakes the following:

- discuss the precursors to previous incident/episode/s, the episodes themselves and the consequences following them.
- talk about the ways used to cope with them in terms of their effectiveness.
- identify as many ways used to deal with the concern raised
- record the range of actions, i.e., coping strategies, taken by the person and examine each of these.

The application of coping strategies

The person is supported by the mental health worker to use the strategies previously identified as effective to cope with their concerns.

Evaluation of Outcome

Goals are evaluated and are an integral part of working with the client and providing feedback on the effects of the specific action taken. Evaluation of outcomes is determined by the person and the mental health worker.

When using this system there may be overlapping of activities and occasionally the partners may return to an earlier stage of the PinC process.