

King Saud University

Nursing collage

Limit setting as a therapeutic
tool



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Out line :

- 1- introduction
- 2- definition
- 3- purpose
- 4- type of behavior needing limits
- 5- step in setting limits
- 6- by other way



Objective:

By the end of the session the student will be able to:

- define limits.
- Identify purpose.
- Identify type of behavior needing limit.
- Identify step in setting limits.





Introduction

Setting and maintainig limits are integral to a trust relationship and to therapeutic milieu Effective limits can provide a structure and a sens of caring at can words alone cannot provide.

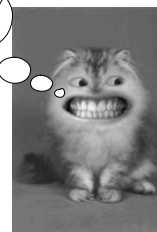


* Why there is a need for limits ?

The need for limits is closely related to the feeing of security and trust. everyone has the basic need to feel secure, to have a sense of assurance. When this feeling does not exist, much of his behavior is motivated by the patient for security.



why





Definition

- 1 - Limit setting is a process through which some one in authority determines temporary and artificial ego boundaries for another person.
- 2- Limit setting is one aspect of the nurse patient relationship which helps the patient to reduce his anxiety enabling him to reestablish himself and to function in a more acceptable level. This new level of function will bring new responses from those around him.

Purpose of limit setting :

~ provide security

~ decrease patient anxiety

~ provide a reality contact between person and the environment.

~ the limit form a framework.

~ to learn a new behavior.

~ to raise his self esteem.

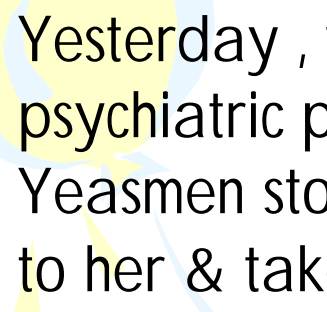
~ to develop the ego function.



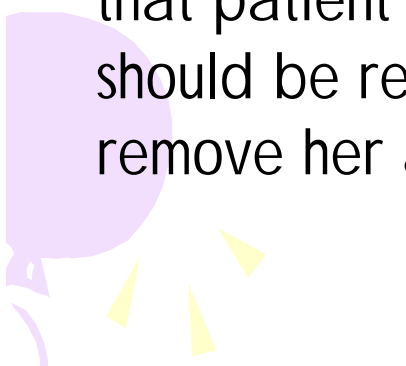


Case study

Yesmen is psychiatric patient ,age:30 years ago, data admission 1 | 5 | 1427H, she had depression & Obsession .she like eat egg sandwich and chips & pepsi & koctalile juice.



Yesterday , when she was eattng she got a fight with other psychiatric patient because (that pt speak loudly & mention Yeasmen story) then nursing took Yeasmen out side the room. I went to her & taker to Relax then ask her to go with me to draw a picture ,when we are drawing a talk with her & ask her to be a way from that patient & I told her in this circumstance she should not fight she should be relax & tray to do some thing she like likes (drawing) . To remove her anger .





Types of behavior needing and put in priority:

1-destructive behavior:

It is perfectly apparent that homicidal, suicidal and all forms of physically destructive behaviors.



2-disorganized behavior:

This category includes all those examples of incoherent, autistic regressed and bizarre thinking and acting are hallmarks of psychotic disorganization

3-deviant behavior:

This category refers generally to rule breaking behavior loosely termed acting out. Indirect expression of feelings through behavior, usually non verbal that attracts the attention of others.



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4-withdrawn behavior.

When patient has sever guilt feeling, helplessness individuals.



5-manipulative behavior.

Is a process by one person influence another to function according to his needs without regarding to other person need.



*Steps and techniques in setting :



1 - Identify the need for the limit:

Limit setting by nurse is based on knowledge & understanding of the problem & situation which should be realistic & meaningful . nurses should be able to evaluate the situation & recognize the need so that effective limits could be established.

2 - Communicate expected behavior:.

Always communicate with the patient wither based on good communicational skills or nonverbal motion to make the patients realize their expected behavior limit.

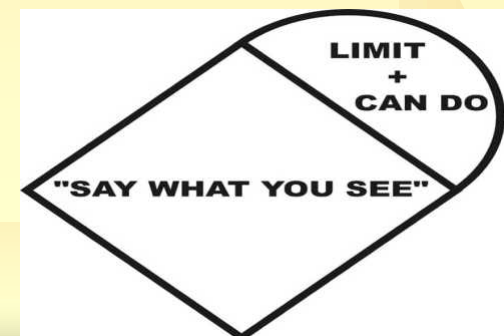


3 - S t a t e l i m i t:

The limit is stated clearly as a statement of fact and is not presented as advice bribery or punishment, the nurse needs to also offer a substitute behavior that is acceptable the best limit is total not partial the limit should be firmly with the nurses conviction and belief in the value of the limit reflected in knowing .

4 - H e l p t h e p a t i e n t u n d e r s t a n d t h e r e a s o n f o r l i m i t:

Tells Clear simple & concrete understanding to the patients of the situation needs & the ability . patient will be less likely to misinterpret the nurses motives & understanding.



5 - Enforce the limit:

Realistically the limit must be enforced on put into practice feeling to follow the limit another action to be initiated .

6 - Help the patient verbalize his feeling about the limit.

Patients must be allowed to express his/her feelings about the limit so that the patient will better evaluate reality & judge rational control.

7 - Evaluate the limit:

Effective limit should be in place for better & secure behavior ,communication and rationale thinking ,and should be continuous but not indefinite.



8 - Consistency:

this consistency must be present in the individual authority figure. If the nurse has put a limit on a particular behavior. she must enforce it each time, not overlook it because she is tired or because it is easier than causing a (scene) when there are visitors on the ward.

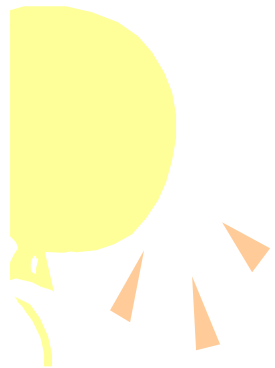
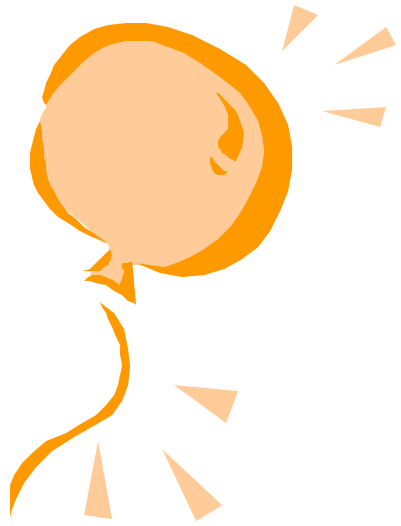
if there is not consistency on the part of all staff members, the patient will usually respond with increased anxiety.



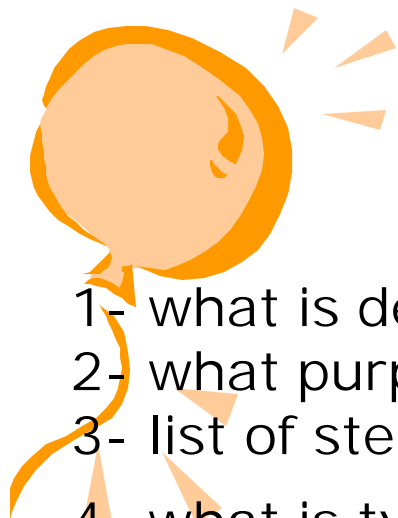


By other way....

- 1- explain exactly which behavior is inappropriate do not assume the individual knows which behavior is inappropriate.
- 2- explain why the behavior is inappropriate do not assume the individual knows why the behavior is inappropriate.
- 3- give the individual reasonable choices or consequences present them as choices and always present the positive first.
- 4- allow time if you do not allow time it may be perceived as ultimatum.
- 5- enforce consequence limits do not work unless you follow through with the consequences.



Thank you



Test

- 1- what is definition of limit setting?
- 2- what purpose of limit setting?
- 3- list of step in limit setting?
- 4- what is type of behavior need limits ?



Reference

Pollack ,S.E, and duffy ,M.E.(1990)the health retated hardines scale development and psychometric analysis.

Leach mcmahon prich-hoskins sideleau(1992) psychiatric Nursing fourth edition.

