THE WORK OF NURSES IN THE CHILD AND ADOLESCENT PSYCHIATRY

Therapeutic goals of children and adolescents in the Day Hospital are, above all, better socialization, which means gaining the various skills, knowledge, motives and attitudes needed to carry out the present and future roles in the family, school and society. A child is primarily taught and directed towards behaviors that are acceptable to the society to which he belongs. Attention is focused on adapting the child to the environment, and changing attitudes that most often lead to conflicts. Conflicts are often the cause of bad socialization among peers, but also disrupted dynamics in family relationships. It often slows down a good therapeutic effect and hampers the baby's recovery faster. Children are encouraged to initiate, spontaneity and intense communication. Creative programs define the needs of each individual in order to improve the quality of everyday life, which contributes significantly to the prevention of isolation and stigmatization. The day hospital offers an alternative 24hour hospitalization. The structured daily hospital program provides diagnostics, treatment and rehabilitation. Our experience suggests that most parents are happy to accept this type of treatment. First of all because the so-called trauma of separating children, but also the trauma of separating a child from a parent. It is important that the family first and foremost support both the child and the team in the team with the aim of speeding up the recovery of the child. We encourage family to cooperate and often through conversations with them, we notice certain behaviors that can slow or accelerate the healing of small patients. Psychiatric treatment at the Dental Hospital does not only imply medical treatment but includes a number of programs aimed at improving the health status and quality of life of children.



It enables early integration of the child into his family and school environment. Treatment is, therefore, multidisciplinary (individual and group psychotherapy, somatic treatment, medical care, psychological evaluation, occupational and occupational therapy, etc.). The job of nurses working with children with mental disabilities is very demanding and responsible. Nurses use all their expertise and skills to provide quality and professional care to every child. A sister learns children about socialization, social behavior, changing attitudes that lead to conflicts, encourages children to take the initiative to constantly perceive and solve problems, work on their self-confidence and self-esteem, learn how to control anger and aggression, nonviolent problem solving, learn how to recognize negative behaviors and seek help. All this and many other nursing skills are carried out through health education, occupational and occupational therapy, social games, through creative skills acquisition teams and through workshops.

The workshop is, primarily, a matter of learning. Different authors define the workshop differently. However, most agree that there are some basic features of the workshop that can be defined at the same time: • personal engagement • work in small groups • active participation of all • diversity of communication patterns • support atmosphere • right to diversity and respect for the needs, emotions and ways of functioning of each participants • work on a common theme • reliance on personal experiences. Types of Workshops: They are usually classified according to the content, purpose and age of the participants. The objective is to: • Creative workshops - the main goal is to encourage and develop creative thinking and expression (drama, poetry, art workshops) • Educational Workshops - the main goal of acquiring knowledge in the widest sense Workshops enable the child



to: develop and exercise the necessary social skills, learns the lessons, teaches new ideas, sees and solves the problem, learns to ask the right questions, learn goals, teach mutual teaching and help, learn original solutions, teach mutual respect, accept criticism, accept "NO" as answers, tracking instructions, expressing emotions, presenting, showing respect, queuing, controlling anger, accepting consequences, adhering to rules, accepting defeat, going in time, using an acceptable vocabulary and tone, seeking help, ignoring what is hindering, respecting diversity, accepting and giving complimenting, committing to success, helping others, expressing disagreement with respect, listening attentively, showing sympathy, sharing responsibilities, maintaining friendship, responding to provocation, and generally frustrating factors from the outside. When creating a workshop group it is important to take care of: age group, diagnosis, possibilities, child interests etc. Difficulties encountered during the workshops: • Failure to comply with agreed rules, • Dominance of individual children, • Low motivation, • No participation in work, • Do not understand the instructions, • Some are overwhelming, • They interfere with the work... Most important roles of honey. nurses in the workshop conducting • Meet the behavioral group • Represents the theme of the workshop • Explains the work principle of the workshop • Explains the workshop goal • Monitors and intervenes during the workshops • Evaluates the workshop results-Asking the following questions: • What did each child especially like during work? • How did children feel solving problems and finding solutions? • Have they learned anything? • How did they like the ideas of other children? - How did the group respond to differences in opinions?



REFERENCES

Riedford, K. B. (2011). Bridging the gap between clinical experience and client access: community engagement. Journal of Nursing Education. 50 (6), 337-40.

Funakoshi, A., Tanaka, A., Hattori, A., et al. (2016). Process of Building Patient Nurse Relationships in Child and Adolescent Psychiatric Inpatient Care: A Grounded Theory Approach in Japan. Journal of Nursing & Patient Care. 1 (2).

Lowe, L., & Campbell, A. (2014). Evaluation of a study day on child and adolescent mental health services. Mental Health Practice. 17 (5): 19-24.

