

**Table 3 Forensic Psychiatric Nursing**

Author(s)/ Pub date	Country	Purpose	Findings / Recommendations
Rask & Brunt (2006)	Sweden	Investigate patients' and nurses' perceptions of the frequency and importance of verbal and social nursing interactions in forensic psychiatric nursing care.	Patients perceived that interactions with nurses occurred less frequently than did the nurses. They further perceived 'supportive/encouraging' and 'reality orientation' interactions as occurring most frequently and 'supportive/encouraging' and 'social skills training' to be the most important interactions. The nurses perceived the 'supportive/encouraging' and the 'practical skills training' as the most frequent and the 'supportive/encouraging', 'interpretative', and the 'practical skills training' as the most important interactions.
Martin, Donley, Parkes, & Wilkins (2007)	Australia	Examine the adequacy of the Graduate Nurse Program at the Thomas Embling Hospital.	Participants reported that the environment was safe and supportive and that processes such as orientation, preceptorship and academic study were appreciated. They felt confident and prepared as psychiatric nurses and although limitations of undertaking a graduate nurse program in a forensic setting were identified, the participants from past program who had gone on to work in other services did not report that their nursing careers had been disadvantaged.
Cashin, Newman, Eason, Thorpe, & O'Discoll (2010)	Australia	Explore the nursing culture in an Australian prison hospital and the migration of the culture over a 12-month period.	Nursing culture was one of hope, although there was not a clearly articulated vision of nurse-hood or patient-hood and model within which to practice nursing. The authors conclude that the ability to articulate practice is central to the development of mental health nursing in any context.
Tenkanen, Tiihonen, Repo- Tiihonen, & Kinnunen (2011)	Finland	Assessed the importance of core interventions (CIs) and the mastery of the core competencies (CCs) of registered nurses (RNs) and practical mental nurses PMNs) and appraised how RNs and PMNs mastered that knowledge and those skills	There were statistical between group differences ( $p \leq 0.05$ ) in the importance of and ability to master the following CCs: (1) pharmacotherapy; (2) knowledge in forensic psychiatry and violent behavior; (3) treatment of violent patients; (4) processing patient's and own emotion; and (5) need adapted treatment of the patient. The authors conclude that RNs, rather than PMNs, should be recruited for work in forensic psychiatric nursing settings. All nurses working in this area need to receive further education in forensic psychiatry and in forensic psychiatric nursing