



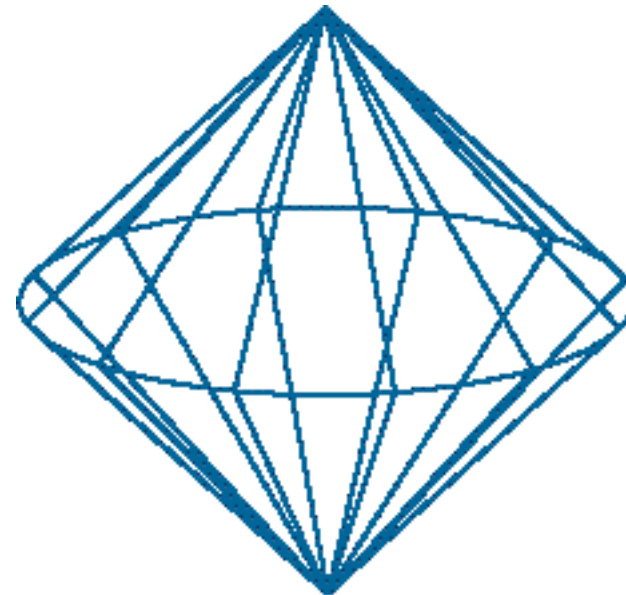
# CONTINUING PROFESSIONAL DEVELOPMENT PORTFOLIO



A Route to Enhanced Competence for Nurses working  
with people suffering from Severe/Enduring Mental Illness

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## Introduction

### A Route to Enhanced Competence for Nurses working with people suffering from Severe/Enduring Mental Illness (SEMI)

In response to the Framework for Mental Health Services in Scotland and the Lifelong Learning agenda, a growing need was identified by both practitioners and users of mental health services for an explicit framework of competencies for nurses and others working with individuals suffering from severe and/or enduring mental illness (SEMI). The National Board for Nursing Midwifery and Health Visiting for Scotland (NBS) undertook to facilitate a project with a range of stakeholders from across Scotland, to develop such a framework, (NBS 2001).

At the same time the UKCC Commission for Nursing and Midwifery Education (UKCC 2000) detailed the competencies to be achieved for entry to the Professional Register, and outlined the key competency domains for all registered nurses, which are:

- ◆ *Professional/Ethical Practice,*
- ◆ *Care Delivery*
- ◆ *Care Management and*
- ◆ *Personal and Professional Development.*

In order to facilitate Continuing Professional Development (CPD) these domains provide a framework for building subsequent post-registration competencies.

This framework of competencies is designed to support practitioners to have a clear idea of the parameters of practice, and to assist the public in relation to expectations of standards of care and treatment. It is also designed to inform curriculum development in relation to the different stages of competence required to progress towards specialist practice.

In addition, it reflects the significant shift towards multiprofessional multi-agency working, in the delivery of effective mental health care (NBS op.cit). The framework, while primarily designed for nurses, was developed from a multiprofessional perspective and has multi professional potential.

This increase in effective team working leads to the blurring of traditional professional boundaries so that the patient or client receives the care or treatment from the most appropriately trained or skilled clinician. Quality assurance standards have therefore been developed by the NHS Trusts in Scotland, to ensure that training, support and supervision are in place in relation to CPD and service delivery. (NBS 1999)

#### The features of the portfolio are that it:

- ◆ *Is designed to meet the needs of all registered mental health nurses, from those who are newly qualified and consolidating their knowledge, to those who are working as specialist practitioners with this client group.*
- ◆ *Is relevant to those working in both in-patient and community settings.*
- ◆ *Is designed to be undertaken in association with the NBS Portfolio Route to Enhanced Competence.*
- ◆ *Will have application to the preparation of in-house clinical courses as well as having a place in informing curricula developed by Higher Education providers either in partnership with NHS Trust/s or independently.*
- ◆ *Can be achieved as a work based programme through placements in identified, educationally audited practice placements.*
- ◆ *Will provide for the individual a bank of evidence of achievement in the core competencies which may have career development potential and could be presented for Accreditation of Prior Learning (AP(E)L).*
- ◆ *Can be delivered to meet the Standards of the Framework for Quality Assuring Continuing Professional Development in NHS Trusts in Scotland 'Strength Through Partnership', NBS April 2000.*
- ◆ *Will be facilitated by a designated experienced practitioner.*

## How to get started

This workbook is designed to be completed in association with the **NBS Portfolio Route to Enhanced Competence (2000)**. It continues to utilise the framework of reflecting on past experience and learning in order to record continuous professional development to enhance clinical competence for Nurses working with people suffering from Severe/Enduring Mental Illness (SEMI). It will help the individual nurse to identify sources of learning and evidence of good practice which relates to providing high quality SEMI care. It is essential to access the other workbooks within Unit 2 of the NBS portfolio; however, you do not necessarily need to complete these sections before commencing this workbook.

**An electronic version of the NBS Portfolio Route to Enhanced Competence is provided within the CD on the back cover of this workbook.**

## QACPD Portfolio CD

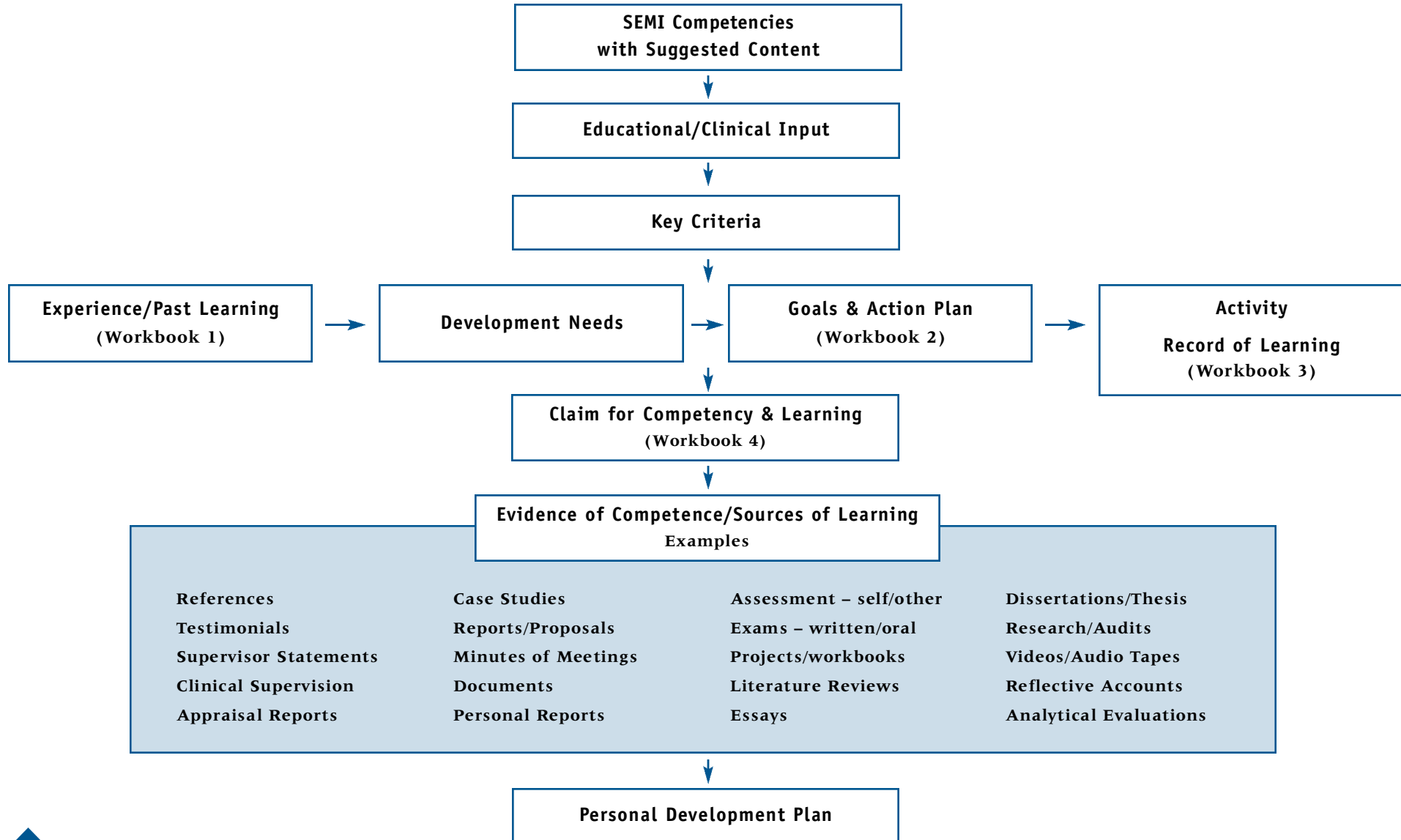
**A copy of the NBS Continuing Professional Development Portfolio, 'A Route to Enhanced Competence' and 'A Route to Enhanced Competence for Nurses working with people suffering from Severe/Enduring Mental Illness' documents are supplied on the enclosed CD in Acrobat PDF format, they may also be printed out for reference.**

## Steps to Building a Portfolio

You may already have a personal professional profile which you may wish to incorporate into this NBS portfolio, however, you should continue to use the following steps:

- Step 1 Review your experience and practice to date identifying any SEMI knowledge and skills that you have;*
- Step 2 Appraise your level of competence and identify strengths and any areas that need to be developed;*
- Step 3 Agree with your senior manager, in-house CPD staff and/or Higher Educational Institution a training programme which meets your learning needs;*
- Step 4 Set goals and devise an action plan to achieve the stated SEMI competencies in partnership with your named facilitator;*
- Step 5 Provide evidence of competence through your portfolio.*

# Portfolio Route To Achieving Competence for Nurses working with people suffering from Severe/Enduring Mental Illness



## Underpinning Principles (Millan 2000)

- i. **Non-discrimination** – People with mental disorder should whenever possible retain the same rights and entitlements as those with other health needs.
- ii. **Equality** – All powers under the Act should be exercised without any direct or indirect discrimination on the grounds of physical disability, age, gender, sexual orientation, language, religion or national or ethnic or social origin.
- iii. **Respect for diversity** – Service users should receive care, treatment and support in a manner that accords respect for their individual qualities, abilities and diverse backgrounds and properly takes into account their age, gender, sexual orientation, ethnic group and social, cultural and religious background.
- iv. **Reciprocity** – Where society imposes an obligation on an individual to comply with a programme of treatment or care, it should impose a parallel obligation on the health and social care authorities to provide safe and appropriate services, including ongoing care following discharge from compulsion.
- v. **Informal care** – Wherever possible, care, treatment and support should be provided to people with mental disorder without recourse to compulsion.
- vi. **Participation** – Service users should be fully involved, to the extent permitted by their individual capacity, in all aspects of their assessment, care, treatment and support. Account should be taken of their past and present wishes, so far as they can be ascertained. Service users should be provided with all the information and support necessary to enable them to participate fully. All such information should be provided in a way which renders it most likely to be understood.
- vii. **Respect for carers** – Those who provide care to service users on an informal basis should receive respect for their role and experience, receive appropriate information and advice, and have their views and needs taken into account.
- viii. **Least restrictive alternative** – Service users should be provided with any necessary care, treatment and support both in the least invasive manner and in the least restrictive manner and environment compatible with the delivery of safe and effective care, taking account where appropriate of the safety of others.
- ix. **Benefit** – Any intervention under the Act should be likely to produce for the service user a benefit that cannot reasonably be achieved other than by the intervention.
- x. **Child welfare** – The welfare of a child with mental disorder should be paramount in any interventions imposed on the child under the Act.

# Section 1

## Professional/Ethical Practice

### Stages

#### Stage 1

These competencies are aimed at those newly qualified practitioners who would normally be within their first post registration year. This year should be used to consolidate the knowledge and skills gained during training, and should be facilitated by an experienced practitioner i.e. a preceptor. These competencies are generic to all client groups.

#### Stage 2

These competencies are aimed at the more experienced practitioner, and the interventions are specific to this client group. The competencies at Stage 1 must be demonstrated prior to embarking on Stage 2.

#### Stage 3

These competencies are directed at those who are working at Specialist Practitioner level, and are specific to this client group.

PROFESSIONAL/ETHICAL PRACTICE

<b>Stage 1</b> <b>Consolidation of generic practice</b> (year 1 post qualifying)	<b>Stage 2</b> <b>Client specific practice</b>	<b>Stage 3</b> <b>Specialist Practice</b>	<b>Values/Attitudes</b>	<b>Skills/Knowledge</b>
<b>1.1</b> Develops and maintains therapeutic relationships with clients and families/carers	Effectively engages clients and their carers/families in intervention programmes	Effectively engages clients and their carers/families in intervention programmes	Demonstrates non-judgmental attitudes towards clients and carers. Demonstrates the ability to engage people in interventions facilitating choice and control	Effective Communication Giving users choices
<b>1.2</b> Participates in multi-professional/multi-agency work	Functions as an effective member of the multi professional/agency team	Leads and develops multi-professional/agency working	Respect for and understanding of others' roles and skills	Collaborative working with other practitioners at all levels; knowledge of other agencies; developing appropriate networks; facilitating a range of input from external agencies
<b>1.3</b> Creates an environment for clients and carers/families which promotes and enables empowerment	Enables clients and carers/families to exercise their rights and responsibilities. Maximises opportunities for therapeutic risk-taking.	Designs and implements appropriate risk assessment/risk management frameworks to support therapeutic risk taking.	Values the patient experience	Facilitation skills; giving users choices; rights and responsibilities; legal implications of ECHR/Human Rights legislation

PROFESSIONAL/ETHICAL PRACTICE

Stage 1 Consolidation of generic practice (year 1 post qualifying)	Stage 2 Client specific practice	Stage 3 Specialist Practice	Values/Attitudes	Skills/Knowledge
1.4 Bases practice on ethical principles	Bases practice on ethical principles	Bases practice on ethical principles	Professional values; integrity	Participate in ethically sound practices  Understanding of ethical issues, e.g. Confidentiality; informed consent
1.5 Practices within legal, professional and national/local policy frameworks	Practices within legal, professional and national/local policy frameworks	Influences and contributes to the development of appropriate policies/protocols	Openness, transparency  See forensic	Knowledge of legal aspects of care  Access to/understanding of local and national policies/papers Critical appraisal skills
1.6 Provides support for colleagues and participates in clinical supervision	Provides and participates in clinical supervision	Ensures systems for individual and peer supervision and reflection on practice are available and maintained	Self-awareness  Valuing the contribution of others  Reflective approach	Supervision models/processes  Team-working  Assertiveness, appraisal skills, Constructive feedback/guidance
1.7 Practices in an anti-discriminatory manner	Recognises and constructively challenges issues of discrimination. Actively promotes anti-discriminatory practice	Influences and contributes to the development of appropriate anti-discriminatory policies/protocols	Professional integrity; positive regard. Awareness of and respect for self and others	Understanding of/regard for cultural/ethical/religious/gender differences; the effects of stigmatisation/discrimination; Giving users choices

# Section 2

## Care Delivery

### Stages

- Stage 1** These competencies are aimed at those newly qualified practitioners who would normally be within their first post registration year. This year should be used to consolidate the knowledge and skills gained during training, and should be facilitated by an experienced practitioner i.e. a preceptor. These competencies are generic to all client groups.
- Stage 2** These competencies are aimed at the more experienced practitioner, and the interventions are specific to this client group. The competencies at Stage 1 must be demonstrated prior to embarking on Stage 2.
- Stage 3** These competencies are directed at those who are working at Specialist Practitioner level, and are specific to this client group.

**CARE DELIVERY**

<b>Stage 1</b> <b>Consolidation of generic practice</b> (year 1 post qualifying)	<b>Stage 2</b> <b>Client specific practice</b>	<b>Stage 3</b> <b>Specialist Practice</b>	<b>Values/Attitudes</b>	<b>Skills/Knowledge</b>
<p><b>2.1</b> Effectively functions as a Co-worker for allocated clients and their carers/families</p>	<p>Effectively functions as a key worker, care co-ordinator/named nurse</p>	<p>Supervises and supports others in their roles as a key worker, care co-ordinator/named nurse</p>	<p>Ability to take responsibility. Commitment to client group</p>	<p>Assessment/risk assessment Problem Solving skills Critical appraisal skills Clinical decision making/prioritisation; care planning/evaluation team-working</p>
<p><b>2.2</b> Participates in the process of comprehensive, collaborative assessment</p>	<p>Undertakes comprehensive, collaborative and person centred assessment</p>	<p>Undertakes comprehensive, collaborative assessment taking account of specific therapeutic models e.g. CBT</p>	<p>Valuing the client perspective; commitment to evidence based practice</p>	<p>Knowledge of range of assessment instruments and their rationale; use of therapeutic alliance; working knowledge of SEMI; cognitive/behavioural/emotional/psychological – link to diagnostic systems; family communication patterns; pharmacological impacts; observation; knowledge of theory and use of ABC analysis; interpretation of information from others</p>

## CARE DELIVERY

Stage 1 Consolidation of generic practice (year 1 post qualifying)	Stage 2 Client specific practice	Stage 3 Specialist Practice	Values/Attitudes	Skills/Knowledge
2.3 Participates with clients, carers/families and others in the prioritisation of clients needs	Works autonomously and collaboratively with clients and carers/families to prioritise needs	Demonstrates the ability to evaluate the effective prioritisation and meeting of clients' needs	Fairness, openness	Risk assessment schedules/rationale; advocacy. Models of conflict resolution; Time management
2.4 Supports people to develop or maintain a quality of life that is meaningful for them	Ensures and promotes an environment that supports a meaningful quality of life for clients and carers/families	Influences and contributes to the development of appropriate policies and protocols	Commitment to user choice	Facilitation/teaching skills; negotiation skills; informed consent; therapeutic risk-taking; knowledge of normalisation processes
2.5 Applies knowledge and demonstrates understanding of the issues and factors underpinning risk assessment and risk management  Contributes to risk management measures in terms of minimising risk and facilitating individual care delivery	Uses sound clinical judgement and collaborative working skills to undertake assessment and analysis of risk. Implements and evaluates effective, patient/client-centred risk management strategies	Develops and evaluates strategies for risk assessment/risk management	Flexibility and respect for persons, whilst retaining objectivity  Collaborative multidisciplinary working skills	Knowledge of tools, legal framework, health and safety legislation, risk factors, knowledge of local and national policy/protocols, and the service's attitudes to risk management in hospital and community settings
2.6 Participates in therapeutic group work	Leads and co-ordinates therapeutic groups	Designs and implements programmes of evidence based therapeutic groups	Honesty, awareness of and respect for self and others	Collaborative working with service users; enabling the sharing of ideas

# Section 3 Treatment Specific Competencies

## Stages

### Stage 1

These competencies are aimed at those newly qualified practitioners who would normally be within their first post registration year. This year should be used to consolidate the knowledge and skills gained during training, and should be facilitated by an experienced practitioner i.e. a preceptor. These competencies are generic to all client groups.

### Stage 2

These competencies are aimed at the more experienced practitioner, and the interventions are specific to this client group. The competencies at Stage 1 must be demonstrated prior to embarking on Stage 2.

### Stage 3

These competencies are directed at those who are working at Specialist Practitioner level, and are specific to this client group.

## TREATMENT SPECIFIC COMPETENCIES

Stage 1 Consolidation of generic practice (year 1 post qualifying)	Stage 2 Client specific practice	Stage 3 Specialist Practice	Values/Attitudes	Skills/Knowledge
<p><b>3.1</b> Participates with others in CBT informed approaches to care</p>	<p>Assesses for, plans and implements CBT informed interventions with clients and carers/families</p>	<p>Following specific training in CBT, develops, implements and evaluates CBT interventions specific to needs of client group</p> <p>Facilitates the input of other agencies as appropriate</p>	<p>Positive support for this therapeutic approach</p>	<p>Groupwork/group processes</p> <p>One-to-one intervention skills</p> <p>Treatment specific competencies</p> <p>Knowledge/awareness of other agencies with the potential to contribute directly to care</p>
<p><b>3.2</b> Develops collaborative working relationships with carers/families</p>	<p>Provides support to carers/families informed by family intervention strategies</p>	<p>Following specific training in family interventions and therapies, develops implements and evaluates interventions specific to needs of client group</p> <p>Facilitates the input of other agencies as appropriate</p>	<p>Positive support for these therapeutic approaches;</p> <p>Recognition of client's stage of knowledge</p>	<p>Negotiation, collaboration; knowledge of models;</p> <p>Treatment specific competencies;</p> <p>Knowledge/awareness of other agencies with the potential to contribute directly to care</p>

## TREATMENT SPECIFIC COMPETENCIES

Stage 1 Consolidation of generic practice (year 1 post qualifying)	Stage 2 Client specific practice	Stage 3 Specialist Practice	Values/Attitudes	Skills/Knowledge
<p><b>3.3</b> Participates in individual information giving and education for clients and carers/families</p>	<p>Demonstrates specific skills in information provision and educational interventions with clients and carers/families</p>	<p>Designs, implements and evaluates individual and group educational programmes for clients and carers/families; ensures appropriate systems for the effective dissemination of general information; facilitates the input of other agencies as appropriate</p>	<p>Positive support for these therapeutic approaches and recognition of client's level of knowledge</p>	<p>Teaching and learning strategies; patient information/multi-media; communication options; stress management and problem-solving; family dynamics; relationship between communication styles and effect on individuals; working with families</p>
<p><b>3.4</b> Participates in helping people with negative symptoms through interventions such as life skills training, social skills training and motivational interviewing</p>	<p>Undertakes therapy programmes to help people deal with negative symptoms utilising a range of treatment approaches</p>	<p>Designs, implements and evaluates evidence based treatment approaches to help people deal with negative symptoms; facilitates the input of other agencies as appropriate</p>	<p>Positive support for these therapeutic approaches and recognition of client's level of knowledge</p>	<p>Assessment; knowledge of models; clinical decision making; facilitation/teaching skills; risk management; anger management; anxiety management; knowledge/awareness of other agencies with the potential to contribute directly to care</p>

## TREATMENT SPECIFIC COMPETENCIES

<b>Stage 1</b> <b>Consolidation of generic practice</b> (year 1 post qualifying)	<b>Stage 2</b> <b>Client specific practice</b>	<b>Stage 3</b> <b>Specialist Practice</b>	<b>Values/Attitudes</b>	<b>Skills/Knowledge</b>
3.5 Participates in programmes of care that help people develop coping strategies	Incorporates the principles of coping strategy enhancement within care plans	Designs, implements and evaluates specific therapeutic interventions for coping strategy enhancement	Positive support for these therapeutic approaches Recognition of client's level of knowledge	Schedules, mastery, pleasure theories of affective disorders; treatment options; therapeutic risk taking; risk assessment/management
3.6 Participates in supporting clients and carers/families to manage medication via information giving, education and side effects monitoring	Demonstrates specific skills in educating clients, carers/families about their medication and monitoring/managing side effects	Uses specialist skills e.g. motivational interviewing, to help clients make choices about medication	Valuing the client perspective, whilst retaining objectivity	Listening skills Client/Carer/family education re medication; effects, side-effects, compliance, knowledge of limitations, how to seek help; treatment specific skills

# Section 4 Care Management

## Stages

### Stage 1

These competencies are aimed at those newly qualified practitioners who would normally be within their first post registration year. This year should be used to consolidate the knowledge and skills gained during training, and should be facilitated by an experienced practitioner i.e. a preceptor. These competencies are generic to all client groups.

### Stage 2

These competencies are aimed at the more experienced practitioner, and the interventions are specific to this client group. The competencies at Stage 1 must be demonstrated prior to embarking on Stage 2.

### Stage 3

These competencies are directed at those who are working at Specialist Practitioner level, and are specific to this client group.

## CARE MANAGEMENT

Stage 1 Consolidation of generic practice (year 1 post qualifying)	Stage 2 Client specific practice	Stage 3 Specialist Practice	Values/Attitudes	Skills/Knowledge
4.1 Demonstrates an understanding of and participation in systems and processes such as care planning, reporting and recording systems and inputting and accessing patient information	Develops and enhances organisational systems and processes, such as clinical audit, and those necessary for clinical governance	Ensures the effectiveness of organisational systems and processes.	<p>Creativity, and a constructive, objective, imaginative approach</p> <p>Flexibility whilst maintaining a belief in one's professional contribution</p> <p>Commitment to evidence based practice and a systematic approach to the delivery of quality care/treatment</p>	<p>Reporting and recording systems (internal/external)</p> <p>Data analysis; clinical audit</p>
4.2 Demonstrates understanding of and participation in a range of approaches to case management	Develops and applies appropriate approaches to case management, for example Care Pathways, CPA. Applies knowledge of leadership and risk assessment	Ensures the delivery of specific interventions within the appropriate case management approach	<p>Respect for one's self and others</p> <p>Valuing the client carer/family experience</p> <p><i>(Applies to sections 4.1-4.6)</i></p>	<p>Knowledge of models; roles and functions within the multidisciplinary team; range of 'traditional' and alternative treatment options, monitoring processes including e.g. risk assessment, admission/discharge procedures</p> <p>Identifying strengths and resources; leadership skills</p> <p>Knowledge/understanding of approaches</p>

## CARE MANAGEMENT

Stage 1 Consolidation of generic practice (year 1 post qualifying)	Stage 2 Client specific practice	Stage 3 Specialist Practice	Values/Attitudes	Skills/Knowledge
<p><b>4.3</b> Contributes to the therapeutic milieu</p>	<p>Ensures the maintenance and development of the therapeutic milieu, in response to patient/client need. Ensures effective monitoring systems are in place</p>	<p>Influences and challenges the strategic thinking around the maintenance of an effective therapeutic milieu</p>	<p>Creativity, and a constructive, objective, imaginative approach</p> <p>Flexibility whilst maintaining a belief in one's professional contribution</p> <p>Commitment to evidence based practice and a systematic approach to the delivery of quality care/treatment</p>	<p>Therapeutic milieu; effects of the environment on mental health;</p> <p>Giving users choices</p> <p>Commitment to independent advocacy</p>
<p><b>4.4</b> Participates in policy and protocol development</p>	<p>Enhances and contributes to the ongoing development and implementation of policies and protocols</p>	<p>Leads the development and implementation of policies and protocols to ensure that the individual client is at the centre of care planning/delivery</p>	<p>Respect for one's self and others</p> <p>Valuing the client carer/family experience</p> <p><i>(Applies to sections 4.1-4.6)</i></p>	<p>Leadership skills; clinical audit, evaluation of practice</p> <p>National strategies re anti-discriminatory practice; working/communicating effectively with families; ECHR</p>
<p><b>4.5</b> Participates in systems to promote reflection on and evaluation of practice</p> <p>Demonstrates effective use of data collection and analysis systems</p>	<p>Develops and monitors systems to ensure that all practitioners participate in reflection on and evaluation of practice</p>	<p>Monitors, critically appraises and applies findings gathered from systems to evaluate practice</p>		

**CARE MANAGEMENT**

<b>Stage 1</b> <b>Consolidation of generic practice</b> (year 1 post qualifying)	<b>Stage 2</b> <b>Client specific practice</b>	<b>Stage 3</b> <b>Specialist Practice</b>	<b>Values/Attitudes</b>	<b>Skills/Knowledge</b>
<b>4.6</b> Actively supports clients carers/families to participate in the treatment evaluation process	Critically appraises and uses the evidence base to inform the evaluation of treatment	Designs and integrates treatment evaluation as part of all treatment programmes		Partnership skills/facilitation of user involvement; Listening to users; awareness of alternative treatments; critical appraisal; literature review/appraisal; understanding of the breadth of issues in relation to client confidentiality
<b>4.7</b> Demonstrates an understanding of the value of/contributes to effective partnership working	Ensures/facilitates effective partnership working. Contributes to the development of systems to monitor and evaluate partnership working(PW)	Develops networks which help to establish partnership-working practices. Leads in the development of partnership agreements, and contribute to the development of systems for monitoring/evaluating PW	Recognition of primacy of client need Respect for the functions and contributions of other agencies Respect for self and others Sense of humour, objectivity, decisiveness  <i>(Applies to sections 4.7-4.11)</i>	Networking; Knowledge of the statutory responsibilities of Local Authority/RMO;  Awareness of the role, functions and contribution of non-statutory sector

## CARE MANAGEMENT

Stage 1 Consolidation of generic practice (year 1 post qualifying)	Stage 2 Client specific practice	Stage 3 Specialist Practice	Values/Attitudes	Skills/Knowledge
<p><b>4.8</b> Demonstrates an awareness of policies and protocols for dealing with a range of difficult situations.</p> <p>Actively participates in dealing effectively with difficult clinical situations</p>	<p>Ensures and facilitates the safe and effective implementation and evaluation of risk management and incident management measures.</p>	<p>Conducts and facilitates critical incident and other reviews.</p> <p>Contributes to the critical analysis of data and ensures appropriate strategic and operational actions.</p>	<p>Recognition of primacy of client need</p> <p>Respect for the functions and contributions of other agencies</p> <p>Respect for self and others</p> <p>Sense of humour, objectivity, decisiveness</p> <p><i>(Applies to sections 4.7-4.11)</i></p>	<p>Challenging behaviour; negotiation/de-escalation; prevention and management of aggression; conflict resolution; critical incident review procedures;</p> <p>Contingency planning; handling/recognising potential/actual areas of conflict; knowledge of team dynamics; personnel management skills; knowledge of team building; management of patient's/carer's complaints</p>
<p><b>4.9</b> Demonstrates an awareness of policies and protocols for dealing with difficult organisational/management issues</p>	<p>Ensures and facilitates the effective implementation and evaluation of organisational management processes.</p>	<p>Conducts and facilitates critical incident and other reviews.</p> <p>Contributes to strategic evaluation of issues and ensures appropriate action</p>		<p>Education/awareness raising for all staff; clinical supervision;</p> <p>leadership skills – Complaints Grievances Performance issues</p>

## CARE MANAGEMENT

Stage 1 Consolidation of generic practice (year 1 post qualifying)	Stage 2 Client specific practice	Stage 3 Specialist Practice	Values/Attitudes	Skills/Knowledge
<p><b>4.10</b> Manages time effectively. Participates in priority setting in the clinical arena</p>	<p>Helps other staff to manage their time effectively</p> <p>Effectively manages caseload.</p> <p>Contributes to operational evaluation/planning of care in response to needs assessment and available resources</p>	<p>Effectively manages caseload.</p> <p>Contributes to strategic evaluation/planning of service in response to needs assessment</p>	<p>Recognition of primacy of client need</p> <p>Respect for the functions and contributions of other agencies</p> <p>Respect for self and others</p> <p>Sense of humour, objectivity, decisiveness</p>	<p>Knowledge of commitments, prioritising systems; available resources; delegation</p>
<p><b>4.11</b> Demonstrates an awareness of effective resource management within the clinical area</p>	<p>Contributes to service planning/delivery making best use of available resources.</p>	<p>Contributes to service planning in response to needs assessment and resource allocation</p>	<p><i>(Applies to sections 4.7-4.11)</i></p>	<p>Knowledge of available resources and how to utilise them, budgetary constraints, lobbying/creating new resources, evaluating effectiveness</p>

# Section 5 Personal/Professional Development

## Stages

### Stage 1

These competencies are aimed at those newly qualified practitioners who would normally be within their first post registration year. This year should be used to consolidate the knowledge and skills gained during training, and should be facilitated by an experienced practitioner i.e. a preceptor. These competencies are generic to all client groups.

### Stage 2

These competencies are aimed at the more experienced practitioner, and the interventions are specific to this client group. The competencies at Stage 1 must be demonstrated prior to embarking on Stage 2.

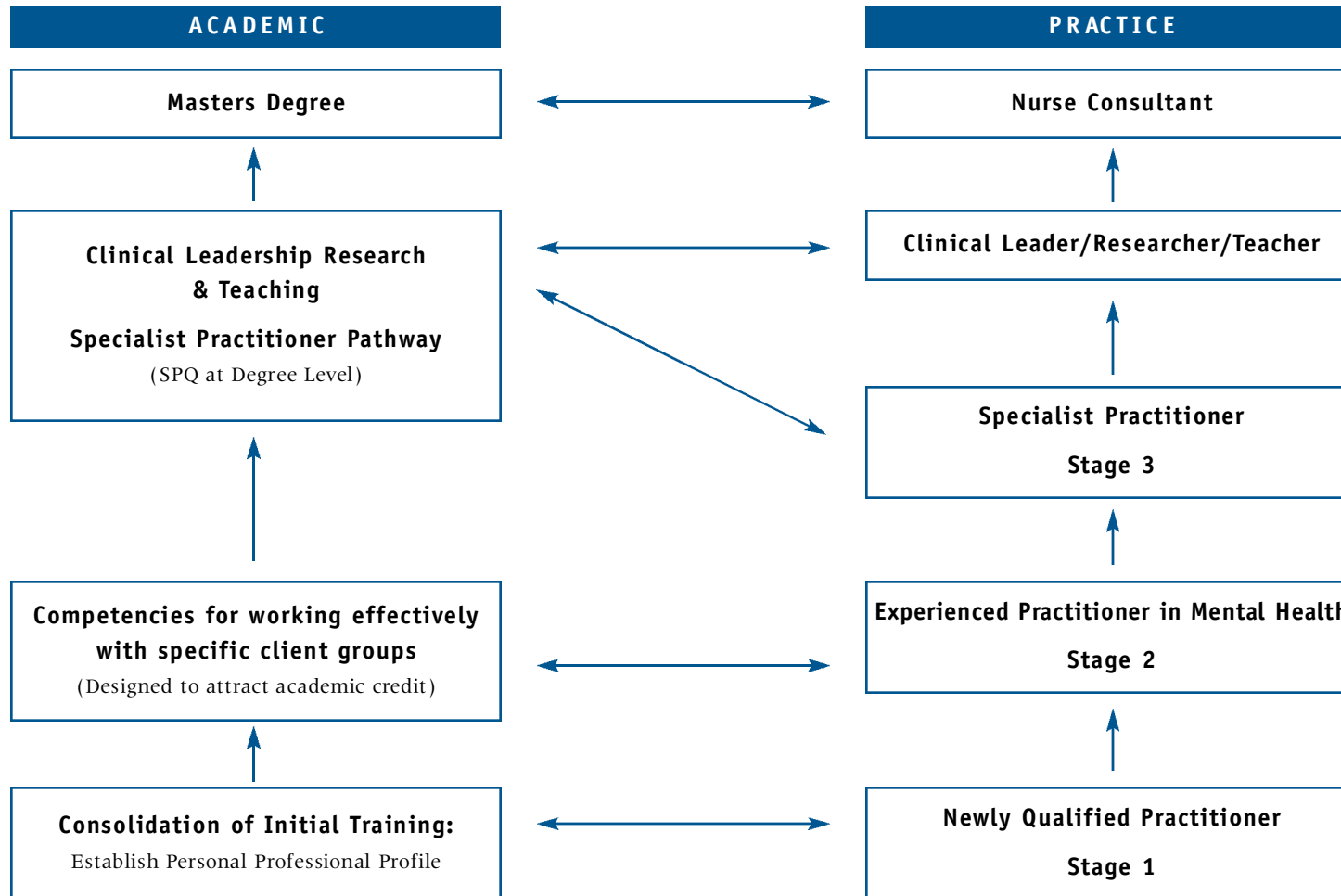
### Stage 3

These competencies are directed at those who are working at Specialist Practitioner level, and are specific to this client group.

**PERSONAL/PROFESSIONAL DEVELOPMENT**

<b>Stage 1</b> <b>Consolidation of generic practice</b> (year 1 post qualifying)	<b>Stage 2</b> <b>Client specific practice</b>	<b>Stage 3</b> <b>Specialist Practice</b>	<b>Values/Attitudes</b>	<b>Skills/Knowledge</b>
<b>5.1</b> Maintains/enhances competence to meet needs of client group	Maintains/enhances competence to meet needs of client group	Maintains/enhances competence to meet needs of client group	Commitment to CPD; awareness of limitations; accountability	Awareness of developments and changes in practice; stress management; self-awareness; self-appraisal; self/peer assessment
<b>5.2</b> Demonstrates commitment to Inter-Professional Education and collaborative working	Demonstrates commitment to Inter-Professional Education and collaborative working	Demonstrates commitment to Inter-Professional Education and collaborative working	Positive attitude; openness; awareness of own and others' worth	Developing networks; participating in supervision; identifying training needs of self and others
<b>5.3</b> Demonstrates commitment to enhancing the quality of care	Demonstrates commitment to enhancing the quality of care	Demonstrates commitment to enhancing the quality of care	Creativity; willingness to change/try new ideas	Leadership/appraisal skills; assertiveness; challenging bad practice
<b>5.4</b> Demonstrates sound clinical judgement and accountability	Demonstrates sound clinical judgement and accountability	Demonstrates sound clinical judgement and accountability	Professional integrity	Utilise reflection; relate practice to evidence base; contribute effectively to multiprofessional decision making
<b>5.5</b> Demonstrates motivation to work with client group over a long period of time; sustaining appropriate interpersonal relationships	Demonstrates motivation to work with client group over a long period of time; sustaining appropriate interpersonal relationships	Demonstrates motivation to work with client group over a long period of time; sustaining appropriate interpersonal relationships		

## Potential Career Progression Framework for Mental Health Nurses



## Bibliography

Coleman, R (1999) Recovery An Alien Concept. Gloucester. Handsell Publications

Forrest S. An education initiative in psychosocial interventions for nurses caring for individuals with severe and/or enduring mental health problems. 2001. Edinburgh. NBS

Gamble, C and Brennan, G (2000) Working with Serious Mental Illness: A Manual of Clinical Practice. London. Balliere Tindall.

Millan Committee Review of the Mental Health (Scotland) Act. 1984: Consultation Paper 2. 2000. Edinburgh. The Scottish Executive.

National Schizophrenia Fellowship (Scotland) 2001 Give Us a Break: exploring harassment of people with mental health problems. Edinburgh

NBS The Network Project: Quality Assuring Continuing Professional Development. NBS Gazette 6, Spring 1999.

NBS 2001 Competencies for nurses working with people suffering from severe/enduring mental illness – a consensus conference, NBS Edinburgh.

Perkins, R and Repper, J (1996) Working Alongside People with Long Term Mental Health Problems. London, Chapman and Hall.

Risk I, Masters H, Forrest S, Brown N Involving mental health service users and carers in curriculum design and delivery: A Strategy for Involvement. 2000. Edinburgh. NBS

Romme, E, and Escher, S (2000) Making Sense of Voices: A Guide for Professionals who work with Voice Hearers. London. MIND Publications.

Scottish Executive Health Department Caring for Scotland. The Strategy for Nursing Midwifery and Health Visiting in Scotland. 2001 Edinburgh.

Scottish Office Department of Health. The Framework for Mental Health Services. 1998. Edinburgh.

Scottish Office Department of Health ME Learning Together: A strategy for education, training and lifelong learning for all staff in the NHS in Scotland. 1999 Edinburgh.

SIGN (1998) Psychosocial Interventions in the Management of Schizophrenia. Edinburgh. SIGN Secretariat

UKCC Fitness for Practice: The UKCC Commission for Nursing and Midwifery Education. 1999. London. UKCC

UKCC Code of Professional Conduct. 1992 London. UKCC

Weldon, P.J, Scheifler, P.L, Diamond, R, Ross R (1999) Breakthroughs in Antipsychotic Medications : A Guide for Consumers, Families and Clinicians. London, Norton

## Glossary of Terms & Abbreviations

<b>Competence</b>	The UKCC uses the term competence to describe the “skills and ability to practise safely and effectively without the need for direct supervision” (Fitness for Practice 1999: 35). This paper further clarifies this as <b>the knowledge skills and attitudes necessary to practise safely and effectively</b> .
<b>Organisations</b>	Care providers including NHS Trusts, private and voluntary sector care providers, Health Boards.
<b>CPD</b>	Continuing Professional Development
<b>ECHR</b>	European Convention on Human Rights
<b>HEI</b>	Higher Education Institution, i.e. University or College
<b>NBS</b>	National Board for Nursing Midwifery and Health Visiting for Scotland
<b>NSF (S)</b>	National Schizophrenia Fellowship (Scotland)
<b>PSI</b>	Psychosocial Interventions
<b>RMO</b>	Responsible Medical Officer
<b>SEMI</b>	Severe and/or Enduring Mental Illness
<b>SIGN</b>	Scottish Intercollegiate Guidelines Network
<b>SHAS</b>	Scottish Health Advisory Service
<b>UKCC</b>	United Kingdom Central Council for Nursing Midwifery and Health Visiting

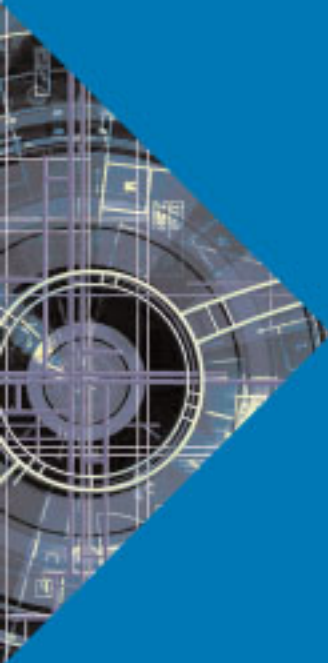
### QACPD Website

For more information on QACPD and access to all previous CPD Portfolios and related documents visit [www.qacpd.org.uk](http://www.qacpd.org.uk)

### Useful Websites

Early Psychosis Prevention and Intervention Centre – <http://home.vicnet.net.au/-eppic>

National Schizophrenia Fellowship – [www.nsfscot.org.uk](http://www.nsfscot.org.uk)



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