

PSYCHIATRIC NURSING COMPETENCIES

**The Registered Psychiatric Nurses'
Association of Manitoba
1993**

INTRODUCTION

The practice of psychiatric nursing, even for the new graduate, may occur in a variety of settings ranging from institutions to the community. These settings vary widely in purpose, location and administration. The level at which the psychiatric nurse functions and the types of activities in which the psychiatric nurse engages depend on the prescribed legal limits of practice, the qualifications of the individual psychiatric nurse (education, work experience, certification), and the practice setting as well as personal competence and initiative. Consequently, within these settings a variety of roles may be assumed. These activities are carried out within the framework of primary, secondary and tertiary prevention, utilizing the dependent, interdependent and independent functions of psychiatric nursing.

This competencies document has been developed to identify, for registered psychiatric nurses, educators and employers of R.P.N.s, realistic performance expectations for the average beginning practitioner.

The employing agency has a responsibility to provide the psychiatric nurse with a program of theory and practice for any skills which are over and above, or different from, those identified in this document and which are specifically required by the agency.

Basic course content and instruction received in the diploma program provides a basis for acquisition of post diploma competencies. Orientation, continuing education and staff development programs are appropriate vehicles for post diploma instruction. This list of competencies is not all-inclusive but it is valid for most graduates of the psychiatric nursing diploma program. As a result of changing curricula and differences in instructional program content between provinces, individual R.P.N.s may not have acquired every one of the skills listed in the document.

Competency in specific procedures may be enhanced or lost due to concentration in specific areas of practice. It is important for the employing agency to assess each R.P.N.'s skills during the orientation process.

Conceptual Model

The R.P.N. uses knowledge from psychology, the biophysical sciences, theories of personality and development, and human behaviour to derive a theoretical framework on which to base psychiatric nursing practice. A broad exposure to conceptual models allows the individual R.P.N. to draw from many theories and apply a model appropriate to individual client needs.

Framework of the Competencies Document

The framework for these competencies has been developed within the context of the Standards of Psychiatric Nursing Practice as set forth by the Psychiatric Nurses Association of Canada and the American Nurses' Association Division of Psychiatric and Mental Health Nursing Practice, as well as the curriculum of the Centre for Psychiatric Nursing Education in Manitoba.

1. **Psychiatric Nursing Interventions**

Psychiatric nursing, as a distinct profession, provides service to individuals whose primary care needs relate to mental and developmental health. The R.P.N. seeks to develop a unique client-centered therapeutic relationship through application of knowledge of psychiatric nursing, physical health, and psycho-social well being. The R.P.N.:

- 1.01 Maintains personal and professional integrity in a therapeutic, client-centered relationship to promote goal directed change.
- 1.02 Collects and analyses data relative to physical, psychological, cultural, spiritual and social aspects of the client's health and, using the data, assists the client to formulate an individualized health care plan.
- 1.03 Identifies problems and maladaptive behaviour patterns.
- 1.04 Collaborates with other members of the multidisciplinary team in the development and implementation of activities specific to the client's physical and mental health needs.
- 1.05 Employs psychiatric nursing interventions based on knowledge of behaviour patterns to assist the client to modify his/her thought, affect, behaviour and motivation (see Appendix A).
- 1.06 Evaluates, validates and, if necessary, modifies the dynamics of the therapeutic relationship and psychiatric nursing interventions against an established knowledge base.
- 1.07 Documents the results of evaluations of psychiatric nursing interventions.
- 1.08 Performs ongoing evaluation of care concurrently with revision.
- 1.09 Identifies data base, psychiatric nursing diagnoses, psychiatric nursing care plan objectives, and goals as part of each psychiatric nursing care plan.
- 1.10 Identifies health needs and strengths of client.
- 1.11 Demonstrates receptiveness to suggestions and new information.
- 1.12 Discusses observations, insights, and data with client and colleagues.
- 1.13 Demonstrates understanding of cause and effect.
- 1.14 Charts psychiatric nursing actions performed.

- 1.15 Charts evidence of changes in client's behaviour, skills and knowledge.
- 1.16 Assesses effectiveness of psychiatric nursing care by comparing *expected* outcome of psychiatric nursing care with *actual* outcome.

2. **Therapeutic Use of Self**

The R.P.N. is aware of his/her self and any positive or negative attitudes engendered towards the client and acts appropriately. The R.P.N. uses communication skills to establish and promote the therapeutic relationship, teach appropriate health care and promote maximum health with the client. The R.P.N.:

- 2.01 Encourages client and significant others to voice concerns and ventilate feelings regarding therapies and/or treatment.
- 2.02 Advocates needs of client regarding therapies when client is unable to do so.
- 2.03 Identifies effect of client on self.
- 2.04 Facilitates constructive problem solving.
- 2.05 Recognizes and describes interactions and transactions.
- 2.06 Explores alternative lifestyles, behaviour, etc. with client.

3. **Modification of the Environment**

The R.P.N., using a theoretical and experiential base, evaluates, plans, and modifies the client's environment to promote self responsibility and optimal health. The R.P.N.:

- 3.01 Creates and maintains a therapeutic environment.
- 3.02 Orients client to the therapeutic environment.
- 3.03 Indicates available activities operative within the environment.
- 3.04 Observes, analyzes, interprets, discusses with the client, and records the effects of the environment upon the client.
- 3.05 Assesses and develops the potential of the therapeutic environment through consideration of physical, social and cultural features of the setting.

4. **Self Care Activities**

The R.P.N. promotes client responsibility and independence to the maximum of his/her potential, while respecting the client's right to self determination, privacy and safety.

The R.P.N.:

- 4.01 Utilizes the activities of daily living in a goal-directed manner to foster physical and mental well-being of the client and enhance psychiatric nurse/client relationships.
- 4.02 Promotes independence in activities of daily living.
- 4.03 Collaborates with the client in the development of a self-care plan.
- 4.04 Performs necessary activities on client's behalf when the client is unable to do so on his/her own.

5. **Physiological Nursing Interventions**

The R.P.N. utilizes knowledge of physical and related sciences when assessing, planning, implementing and evaluating care relating to the client's physical needs. The R.P.N.:

- 5.01 Utilizes knowledge of somatic therapies and applies related clinical skills in working with the client (see Appendix B).
- 5.02 Observes and interprets pertinent responses to somatic therapies.
- 5.03 Recommends changes in somatic therapies as appropriate.
- 5.04 Provides basic physical care appropriate to the needs and capabilities of the client.
- 5.05 Maintains currency in knowledge of pharmacology (with an emphasis on psychopharmacology), the positive and negative effects of drugs on a person, and the administration of drugs.

- 5.06 Administers medications by a variety of routes including:
- oral
 - topical
 - rectal
 - ocular
 - intramuscular
 - otic
 - subcutaneous
 - vaginal
- 5.07 Assesses the effects of medication on the client and documents and reports same.

6. **Promotion of Health and Prevention of Illness**

The R.P.N. utilizes health teaching in all components of care for clients, families, and groups to build on existing strengths and to achieve productive patterns of living. The R.P.N.:

- 6.01 Understands principles of teaching and learning, and accompanying rationale.
- 6.02 Identifies appropriate teaching methods to prepare, implement and evaluate a teaching plan.
- 6.03 Implements appropriate teaching strategies.
- 6.04 Teaches coping mechanisms to deal with deviations from health and strengthen adaptation skills.
- 6.05 Assists the client to identify and access the appropriate community resources in order to maintain the client-focused goals achieved in the therapeutic setting.
- 6.06 Identifies resources to maintain gains achieved in the therapeutic setting (community, home, facility).
- 6.07 Evaluates the effectiveness of learning strategies with the client so that the client may modify activities to promote functional, productive, patterns of living.

7. **Utilization of Health Care Systems and Community Resources**

The R.P.N. participates in and provides leadership to establish community resources for the promotion of mental health. The R.P.N.:

- 7.01 Maintains current knowledge of community resources and interprets these resources to the client and his/her family as appropriate. When necessary the R.P.N. facilitates client access to these resources.
- 7.02 Demonstrates knowledge of the structure and function of community systems.
- 7.03 Demonstrates knowledge of available community resources.
- 7.04 Participates in assessing, planning, implementing and evaluating mental health services in the community system at the primary, secondary and tertiary levels.
- 7.05 Consults (participates) with community agencies to ensure continuity of services for clients.
- 7.06 Identifies client's need for assistance from community resources.
- 7.07 Initiates referrals to community resources.
- 7.08 Incorporates information from other resources in assessment and treatment planning.
- 7.09 Assists clients in planning treatment programs involving community resources where appropriate.
- 7.10 Encourages active client participation in assessing and planning programs to meet the identified mental health needs of the community.
- 7.11 Assesses strengths and coping skills of individuals, families and groups within the community to promote and improve mental health.
- 7.12 Identifies when the need for service requires consultation outside the community.

8. **Professional Practice**

The R.P.N. practices in accordance with the Standards of Practice and Code of Ethics of the R.P.N.A.M. and the legislation in effect in Canada. The R.P.N.:

- 8.01 Recognizes legal issues in the treatment of clients.
- 8.02 Demonstrates a working knowledge of the mental health care delivery system in Manitoba, relevant legislation and policies.
- 8.03 Practises within Psychiatric Nurses Association of Canada's Code of Ethics.
- 8.04 Practises within established legislation and standards of psychiatric nursing practice.
- 8.05 Demonstrates accountability to his/her client, his/her employer, his/her professional association and the public.
- 8.06 Functions within his/her existing knowledge and skills.
- 8.07 Assumes responsibility for the maintenance of currency in knowledge and practice through an ongoing program of self education and formal and informal learning programs related to his/her area of practice.
- 8.08 Assumes responsibility for care and service to clients.
- 8.09 Assumes responsibility for supervision of staff.
- 8.10 Demonstrates leadership ability by establishing priorities and organizing personal workload.
- 8.11 Assumes a leadership role for other health care providers in the development of effective health care plans.
- 8.12 Collaborates and coordinates with client and other health care providers to assess needs, plan, organize, implement and evaluate health care plans and the therapeutic milieu.
- 8.13 Maintains a cooperative and collaborative relationship with other health care providers to evaluate the care plan and standards of care provided to the client by the health care team.

APPENDIX A

Psychiatric Nursing Interventions

Selects and implements psychiatric nursing interventions determined to be most effective in the management of behaviour patterns related to:

- anxiety
- negative self-concept
- anger
- dependence
- guilt
- denial
- manipulation/noncompliance
- confusion
- withdrawal
- self-destructiveness
- crisis
- grief
- manic behaviour
- depression
- loneliness
- suspiciousness
- delusions
- hallucinations
- avoidance
- obsessive-compulsive behaviour

Psychiatric nursing interventions may include:

1. crisis intervention techniques
2. facilitation of the grieving process
3. using the techniques of:
 - reality therapy
 - supportive therapy
 - behaviour modification
 - role playing
4. demonstrating knowledge of group interaction

5. participating in a variety of goal oriented group settings/activities such as:
 - psychotherapy
 - remotivation
 - social skills learning
 - role playing
 - relaxation
 - task groups
 - milieu groups
 - support groups related to health teaching, i.e. activities of daily living, etc.
 - psycho-educational groups, i.e. stress reduction
 - reminiscence
 - age related groups
 - sensory stimulation

6. participating in client/family centered counselling and therapy, i.e.
 - giving verbal support and guidance
 - assisting clients to arrive at workable solutions to their problems or conflicts.

APPENDIX B

Somatic Therapies and Clinical Skills

1. Meets the client's personal hygiene needs.
2. Uses principles of body mechanics when lifting, moving, turning client.
3. Uses protective devices for client health and safety, and maintains a safe environment.
4. Assists with the transfer of semi or non-ambulatory client, and assists the client with ambulation and exercise.
5. Measures vital signs, i.e. temperature, pulse, respiration, blood pressure, height and weight.
6. Assesses pupil reaction, LOC, coordination, hand grasp.
7. Assists with physical examination of client, diagnostic procedures and medical procedures as required.
8. Assesses and meets client's nutritional needs.
9. Prepares the client for, and cares for the client during diagnostic/medical procedures.
10. Collects specimens using accepted practices, tests urine.
11. Performs toileting procedures, administers peri care.
12. Performs catheterization, bladder irrigations, and cares for bladder drainage systems.
13. Performs bowel procedures such as enemata, disimpaction, to maintain functioning.
14. Applies heat/cold as appropriate.
15. Irrigates eyes.
16. Uses principles of medical asepsis in isolation technique.
17. Performance of sterile dressing technique.
18. Application of dressings.
19. Administers oxygen, humidifies air.

20. Performs pharyngeal suctioning.
21. Responds as a member of the team in the event of a medical emergency and in the fire emergency procedure.
22. Completes required procedures following death of a client, such as caring for the body.
23. Develops, implements and evaluates psychiatric nursing care plans using a problem solving process (i.e. nursing process, etc.).
24. Completes required admission, transfer and discharge procedure.

GLOSSARY

Advocacy:

Engaging in activities for the purpose of protecting the rights of others while supporting the client's responsibility for self-determination, involves informing, supporting and affirming a client's self-determination in health care decisions.

Competency:

The knowledge, abilities, skills, judgments, attitudes and values required for successful functioning of the practitioner.

Consultation:

Interactional or communication process between two or more persons; one is a consultant, the other is a consultee. The consultant seeks to help the consultee solve a problem or improve or broaden skills.

Coordination:

Conscious activity of assembling and directing the work efforts of a group of health providers so that they can function harmoniously in the sustainment of the objective of health care.

Evaluation:

The planned systematic comparison of the client's health status with the stated outcomes or objectives.

Health:

"Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity" (World Health Organization, 1988).

Health Promotion:

Behaviours designed to increase the health and well-being of individuals, families and communities.

Mental Health Problem:

A disruption in the interactions between the individual and the group or the environment.

Prevention:

Aims to reduce the incidence of disease or dysfunction in a population through modifying stressful environments and strengthening the ability of the individual to cope. Involves the promotion and maintenance of good health through education, attention to adequate standards for basic needs and specific protection against known risks.

Primary Care:

The entry point into the health care system; emphasizes health promotion, disease prevention and management of community-occurring disease or chronic disease.

Psychiatric Nursing:

Diagnosis

Statement of a present or potential health problem, plus its cause in the client's health status that a practitioner is licensed and competent to treat.

Role

One's task or function. That activity the incumbent would engage in were he to act solely in terms of the normative demands upon someone in his position.

Scope of Practice

The usual and customary practice of a profession taking into account how legislation defines the practice of a profession within a particular jurisdiction.