



The Nursing Council of Hong Kong

Core-competencies for Enrolled Nurses (Psychiatric)
and a Reference Guide to
the Syllabus of Subjects and Requirements
for the Preparation of Enrolled Nurse (Psychiatric)
in the Hong Kong Special Administrative Region

March 2009

I. PREAMBLE

Psychiatric nurses serve the community by meeting the needs of individuals suffering from mental disorders as well as promoting mental health of the community. Apart from the roles of a caregiver to psychiatric clients, the psychiatric nurse needs to develop competencies to take up extended and expanded roles in the delivery of primary, secondary and tertiary mental health care. The reference guide to the syllabus of training for Enrolled Nurse (Psychiatric) [EN(Psy)] is firstly to enable EN(Psy) to develop competencies in promotion, maintenance and restoration of mental health and prevention of mental illness. Secondly, it is to enable EN(Psy) to develop competencies in assisting the Registered Nurse (Psy) in fulfilling their nursing roles in different mental health care settings.

To ensure a regulated practice and to enhance the advancement of psychiatric nursing practice, it is essential that the responsibilities and roles of EN(Psy) and their competencies are clearly defined.

The reference guide to the syllabus of training is based on a set of objectives and areas of psychiatric nursing knowledge and practice that underpin the psychiatric nursing practice. It consists of the philosophy of psychiatric nursing, scope of practice of psychiatric nursing, and theoretical and clinical practice requirements under the core competencies of EN(Psy).

II. OBJECTIVES OF THE SYLLABUS

This syllabus has been developed by the Nursing Council of Hong Kong (NCHK) to serve the following purposes:

1. To state the philosophy of psychiatric nursing based on which such practice is developed in Hong Kong;
2. To outline the professional roles of psychiatric nurses and the core competencies required to fulfilling these roles;
3. To describe the scope and characteristics of the core competencies to guide the curriculum development of education programmes that prepare EN(Psy) who can practice psychiatric nursing safely, ethically and effectively;
4. To inform the public, the employers and the stakeholders locally and internationally of what they may expect from the EN(Psy) on entry to practice; and
5. To specify the major subjects and topics of education in psychiatric nursing required under the core competency of EN(Psy).

The core competencies should be possessed by the ENs(Psy) on entry to practice. In addition, the ENs(Psy) should practise according to the Code of Professional Conduct, the Scope of Professional Practice and other legal and ethical requirements defined by the NCHK as stipulated in the Nurses Registration Ordinance, Chapter 164. This document will be subject to constant review in order to ensure its appropriateness and usefulness to reflect the contemporary role and requirements of practising as an EN(Psy) in Hong Kong.

III. PHILOSOPHY OF PSYCHIATRIC NURSING

The philosophy of psychiatric nursing in this section summarises our beliefs in the nature and practice of professional psychiatric/mental health nursing as well as our views on the person, environment, health, and mental health. Such beliefs also provide basic information for the development of education programme and syllabus for psychiatric nursing registration in the NCHK.

Nursing is a caring, enabling, knowledge-based and competence-assessed profession, which is dynamic in meeting the changing health needs of the society. It is committed to promoting and maintaining health; as well as to caring for the sick and the disabled as individuals, or in families, groups, institutions, home settings and in the community.

The practice of nursing is client-focused and evidence-based. It is carried out at the primary, secondary and tertiary levels of health care. It functions through problem solving and collaboration with the client as well as other health care professionals to define and achieve mutually agreed health goals.

The provision of holistic, client-centred care requires research-based professional knowledge and skills through the implementation of the nursing process; the adoption of a caring and responsible attitude; effective communication and interpersonal skill as well as ethical principles. The quality of care is maintained through the enhancement of professional competencies via continuous nursing education.

Psychiatric nursing is a profession, possessing its unique history, ideology, knowledge, and skills. It provides services to individuals whose primary health needs are related to mental, emotional and developmental problems, especially serious disorders and persistent disabilities. It is committed to the maintenance, promotion and restoration of optimal mental health for individuals, families, community groups, and society, through the use of therapeutic relationships and interventions.

The person is a unique, holistic being with the potential to learn and develop through interacting with the changing environment. Each person has intrinsic worth and has the right to participate in the decision-making, which affects his/her own life and dignity, and must always be treated with respect.

The environment consists of internal and external components, which change constantly and generate both positive and negative stressors. The internal environment of a person, comprising biological, psychological, spiritual and intellectual components, interacts with the external environment that encompasses social, cultural and situational influences. This continual interaction affects the person's functioning as an individual, as well as in families, groups and community. The creation, preservation and conservation of a sustainable environment are crucial to the maintenance and promotion of human survival.

Health is a state of well-being, perceived differently by the individual at specific points in time along the health-illness continuum. It is affected by biological, psychological, socio-economical, developmental, political, cultural and religious factors. The level of well-being depends on the maintenance of equilibrium within the person, and between the person's interaction with the changing environment.

Mental health as suggested by the World Health Organisation (WHO) in 2001, is a state of well being in which the individual realises his/her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. Mental Health is as important as physical health to the overall well-being of individuals, societies and countries. The positive dimension of mental health is also stressed in WHO's definition of health as contained in its constitution in 1984: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."

IV. SCOPE OF PRACTICE OF PSYCHIATRIC NURSES

Psychiatric nursing practice is characterised by the following interventions:

- Promote and maintain mental health
- Conduct mental health education, crisis interventions, counselling and psychotherapy on individual and group base
- Provide therapeutic milieu conducive to promote, restore and maintain optimal health/adaptive behaviours of individuals
- Conduct comprehensive and focused assessment of individuals and community
- Plan, implement and evaluate psychiatric nursing interventions
- Administer and monitor psychiatric treatment regimes
- Co-ordinate case management and refer clients to other sources of expertise
- Plan, implement and evaluate psychiatric rehabilitation, community-based care and out-reaching activities with the collaboration of other health care professionals
- Act as an advocate to protect the rights of clients, speak for those who cannot speak for themselves in psychiatric clinical practice
- Develop and evaluate psychiatric nursing standards/measures and procedures
- Apply information technology, evidence-based nursing practice and nursing research in psychiatric nursing
- Evaluate current health care policy and initiate changes of policy in mental health services

In response to the advancement and development in health care services, treatment regimes and psychiatric nursing interventions, the scope of practice in psychiatric nursing will be modified continuously.

V. SCOPE OF CORE COMPETENCIES REQUIRED OF AN ENROLLED NURSE (PSYCHIATRIC)

Glossary

1. Enrolled Nurse (Psychiatric) [EN(Psy)]
A nurse who has completed a psychiatric/mental health nursing programme and has enrolled under the Professional Roll Part II of the NCHK.
2. Competence/Competency
The ability, knowledge, skills and attitudes required of a nurse in performing a range of expected roles in professional nursing practice.
3. Core Competencies
The essential competencies that an EN(Psy) is expected to possess at entry to practice as an outcome of their psychiatric nursing education in order to provide the local people with safe, effective and ethical care.
4. The Client
The focus of care provision by an EN(Psy) with whom the nurse is engaged in a professional helping relationship through which a mutually defined health goals in the process of mental illness prevention, and mental health promotion and restoration can be optimised or achieved.

Scope of core competencies required of an EN(Psy)

The scope of core competencies required of an EN (Psy) also comprises 4 key aspects:

- | | |
|---------------|--|
| Competency 1: | Professional, legal and ethical nursing practice |
| Competency 2: | Health promotion and education |
| Competency 3: | Quality improvement and team work |
| Competency 4: | Personal and professional attributes |

Please refer to the following details.

SCOPE OF CORE-COMPETENCIES OF AN ENROLLED NURSES (PSY)

Competence area 1: Professional, legal and ethical nursing practice

Ability to perform effective psychiatric nursing care safely, legally and ethically.

The Enrolled Nurse (Psy) should be able to assist Registered Nurse (Psy) to:

- perform nursing practice particularly for:
 - assessment of psychosocial health needs in line with physiological ones;
 - design, implementation and evaluation of care planning with the partnership of client;
 - restoration and promotion of mental health and enhancement of quality of life as client's desire;
 - collaboration with other mental health team members in the care provision.
- safeguard client from unsafe practice.
- ensure client's rights of dignity, autonomy, privacy, confidentiality and access to information.
- maintain a therapeutic environment conducive to mental health rehabilitation.

Competence area 2: Health promotion and education

Ability to work in partnership with health care team, clients, families and the community in preventing illness, promoting and protecting the health, in particular mental health, of an individual, family and the community.

The Enrolled Nurse (Psy) should be able to assist Registered Nurse (Psy) to:

- recognise the factors affecting mental health and the appropriate actions to take for mental health promotion.
- identify the health-related needs of clients in different health care settings.
- communicate health information and co-ordinate mental health education/promotion activities effectively.
- collect and utilise updated evidence and reliable information for planning and improving mental health promotion and education activities.
- intervene appropriately to safeguard the interests and well-being of clients.

Competence area 3: Quality improvement and team work

Ability to contribute to quality improvement and work harmoniously with all health care team members to achieve effective health care outcome.

The Enrolled Nurse (Psy) should be able to:

- assist the implementation of change conducive to quality improvements and risk management.
- provide assistance to supervise the supporting staff for provision of quality client care.
- demonstrate an understanding of the role of the enrolled nurse (Psy) as a member of the health care team.
- recognise the differences in accountability and responsibility between registered nurse (Psy) and enrolled nurse (Psy).
- establish and maintain collaborative relationships with members of health care team.
- facilitate team members to achieve work targets.

Competence area 4: Personal and professional attributes

Ability to be a role model in health promotion and professional development.

The Enrolled Nurse (Psy) should be able to:

- maintain and promote health of self, particularly mental health and emotional well-being.
- recognise the need for and participates in continuing professional development.

VI. EDUCATION PREPARATION

An enrolled psychiatric nurse is professionally prepared personnel who has successfully completed an education programme in psychiatric nursing at an approved institute of nursing and included the following requirements for application of enrolment with the NCHK:

(a) Duration of the programme

An education programme in psychiatric nursing should include theoretical instruction and clinical practice experience. Duration of the study or contact hours should meet the requirements as prescribed by the NCHK. Successful completion of the programme will lead to the admission to Part II of the Roll maintained by the NCHK.

(b) Theoretical instruction

A minimum of 750 hours of theoretical instruction should be organised by the approved institute of nursing. Subject outline and minimum number of class contact hours for each subject are included in Section VII.

The programme should provide learners with opportunities to examine a range of perspectives through which to experience and understand nursing and psychiatric nursing. Students should also be provided with conditions and opportunities to explore and clarify values, to enhance problem-solving skills and critical thinking, to reflect upon and to act to challenge norms and practice, and to develop a critical awareness about the taken-for-granted world.

Educational/field visits should be arranged in the programme with a view to broadening learners' views and providing them with useful and relevant information for discussion so as to enhance their understanding in the relevant areas of psychiatric work.

(c) Clinical practice

A minimum of 1,000 hours of clinical experience is required. The minimum requirement of clinical experience on different nature of experience is included in Section VIII.

Students should be placed to a variety of psychiatric care settings to provide them with opportunities to learn basic psychiatric nursing skills, specific psychiatric nursing procedures and to develop their sense of belonging as a health care provider within a health care team.

The clinical experience should reflect the uniqueness of psychiatric nursing which is not only concerned with attending to the client's psychosocial and physiological needs but also includes health education, rehabilitation, and care of their families in the hospital setting and in the community.

Each placement unit should have clear statements of learning objectives pertinent to its nature. These will help the learners identify specific learning objectives during their clinical placement. Learning will take place through practical instructions and supervised practice, seminars, ward meetings and multidisciplinary conferences.

VII. THEORETICAL REQUIREMENTS

Overview of major subjects and topics under the core competencies of EN(Psy)

Theoretical instruction

The total amount of time for teaching and learning activities should not be less than 750 contact hours.

| Competence area 1: Professional, legal and ethical nursing practice | | |
|--|---|------------------------------|
| Section | Subjects/Topics | Minimum contact hours |
| 1A. | Medical, behavioural and social sciences | 220 |
| 1A.1 | Psychology and human development | |
| 1A.2 | Sociology and health care | |
| 1A.3 | Anatomy and physiology of human body | |
| 1A.4 | Microbiology in nursing | |
| 1A.5 | Psychiatry and psychotherapeutic interventions | |
| 1A.6 | Pharmacology | |
| 1B. | Therapeutic communication | 70 |
| 1B.1 | Theories of communication and counselling | |
| 1B.2 | Interpersonal relationships and team building | |
| 1B.3 | Concept of therapeutic communication | |
| 1C. | Professional nursing practice | 190 |
| 1C.1 | Principles and practice of basic general nursing | |
| 1C.2 | Principles and practice of psychiatric nursing | |
| 1C.3 | General medical and surgical conditions | |
| 1C.4 | First aid and emergency nursing | |
| 1D. | Legal and ethical aspects (Code of professional conduct of nurses in Hong Kong) | 30 |
| 1D.1 | Professional conduct and nursing ethics | |
| 1D.2 | Legal aspects related to psychiatric nursing | |
| 1D.3 | <ul style="list-style-type: none"> ✧ Duty of care ✧ Confidentiality ✧ Informed consent ✧ Patient's rights and responsibility ✧ Mental Health Ordinance | |

| Competence area 1: Professional, legal and ethical nursing practice (cont'd) | | |
|---|---|------------------------------|
| Section | Subjects/Topics | Minimum contact hours |
| 1E. | Professional studies | 20 |
| 1E.1 | Nursing profession | |
| 1E.2 | Introduction to nursing models and nursing process | |
| 1E.3 | Modern trends in nursing | |
| 1E.4 | Historical development of psychiatric nursing | |
| 1E.5 | Personal qualities of the psychiatric nurse | |
| 1E.6 | Role of an enrolled psychiatric nurse in the therapeutic team | |

| Competency area 2: Health promotion and education | | |
|--|---|------------------------------|
| Section | Subjects/Topics | Minimum contact hours |
| 2A. | Concepts of health and mental health; health education and mental health promotion | 50 |
| 2A.1 | Concept of health | |
| 2A.2 | Concept of mental health | |
| 2A.3 | Mental health assessment | |
| 2A.4 | Mental health promotion | |
| 2A.5 | Promotion of health of the individual and the community <ul style="list-style-type: none"> ✧ Personal health ✧ Community health ✧ Health education | |
| 2A.6 | Concept of institutionalization | |
| 2A.7 | Rehabilitation and resocialization of the patient | |
| 2A.8 | Community resources in the care of the patient | |

| Competence area 3: Quality improvement and team work | | |
|---|---|------------------------------|
| Section | Subjects/Topics | Minimum contact hours |
| 3A. | Basic knowledge on | 40 |
| 3A.1 | Continuous quality improvement | |
| 3A.2 | Environmental screening | |
| 3A.3 | Clinical risk identification | |
| 3A.4 | Patient safety | |
| 3A.5 | Incidents reporting | |
| 3A.6 | Occupational safety and health | |
| 3B. | General management of the ward | 40 |
| 3B.1 | Ward routines | |
| 3B.2 | General cleanliness of the ward | |
| 3B.3 | Ventilation, lighting, heating and noise control in the ward | |
| 3B.4 | Cleansing and storing of linen, equipment and articles used in the ward | |
| 3B.5 | Economical use of supplies and equipment | |
| 3B.6 | Fire prevention, fire fighting, and evacuation of patients | |
| 3C. | Introduction to health care system | 10 |
| 3C.1 | Health care system <ul style="list-style-type: none"> ✧ Primary health care ✧ Secondary health care ✧ Tertiary health care | |
| 3C.2 | Health care settings and health care teams | |
| 3C.3 | Mental health services in Hong Kong | |
| 3D. | Introduction to information technology in health care | 10 |
| 3D.1 | Basic understanding on information technology (IT) | |
| 3D.2 | Application of IT in nursing and health care | |
| 3E. | Basic principles of team building | 10 |
| 3F. | Basic principles of coaching and mentoring | 10 |

| Competence area 4: Personal and professional attributes | | |
|--|---|------------------------------|
| Section | Subjects/Topics | Minimum contact hours |
| 4A. | Personal attributes | 30 |
| 4A.1 | Knowledge of self, environment, stress coping, healthy lifestyle, responsibility and accountability, and adaptation to change | |
| 4 B. | Professional attributes | 20 |
| 4B.1 | Knowledge of professional development and continuing learning opportunities | |
| 4B.2 | Knowledge of professional organizations and strategies in achieving professionalism. | |
| 4B.3 | Fundamental principles on evidence-based practice and nursing research | |
| | Total : | 750 |

VIII. CLINICAL PRACTICE REQUIREMENTS

| Clinical experiences | Minimum requirements (Hours) |
|---|--|
| Nursing management for acute/subacute clients | 230 |
| Nursing management for psychiatric rehabilitation/ long-stay clients | 230 |
| Community psychiatric nursing and mental health outreaching services | 200 |
| Nursing management for psychogeriatric clients | 100 |
| Nursing management for clients with medical and surgical problems | 100 |
| Nursing management for child and adolescent clients | 50 |
| Nursing management for clients with learning disability | 50 |
| Nursing management for clients with substance-related disorders | 40 |
| Total : | 1,000 (No minimum requirement of night duty) |

Note 1: The above should include a period of continuous clinical practice of not less than 3 months.

Note 2: Clinical training for local nursing students can be conducted in the following health care institutions:

Category A: *Hospitals or medical institutions under the management of the Hospital Authority or private hospitals registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance (Cap. 165, Laws of Hong Kong), where in-patient care is provided (60%-70% of the total hours of clinical education).*

Category B: *Community settings where the provision of first level care is evident (30%-40% of the total hours of clinical education). Not more than one-tenth of this part of training may be conducted outside Hong Kong.*

Note 3: During the clinical practicum, there must be a system in place to assess students' clinical knowledge, skills, problem solving ability and professional attitudes. Evidences must be produced on the assessment of administration of medications, aseptic techniques, mental status assessment skills, and communication and counselling skills.

IX. ASSESSMENT AND EXAMINATION

(a) Written part

Upon completion of the education programme, local trained candidates can apply for enrolment with the NCHK.

Non-local trained candidates who have successfully passed the Licensing Examination (Part II), both written and practical parts, can apply for enrolment with the NCHK.

The written part of the Licensing Examination (Part II) consists of two papers:

- Paper A (50%): Proficiency Test in Medical English (1 hour) and Multiple Choice Questions (1.5 hours)
- Paper B (50%): short answer and objective-type questions (2.5 hours)

(b) Practical part

Continuing clinical assessment is used for local-trained candidates (Please refer to Appendix II for details).

The rationale of this type of assessment is to test the learners' clinical competencies in real day-to-day clinical settings, in which the learners are undergoing their clinical placement.

Each clinical placement unit should have a clear guideline for assessment pertinent to its nature upon which the clinical assessment is based.

The clinical placement for the learners should be carefully planned and the learners will be assessed in each unit of clinical experience.

Criteria for each clinical assessment shall be devised aiming at measuring the learners' knowledge and skills in psychiatric nursing.

Non-local trained candidates are required to attend an 1½-hour practical examination to ascertain if they possess the core competencies and clinical skills required for local nursing practice. Please refer to Appendix III for the practical examination guidelines.

X. CURRICULUM PLANNING, RESEARCH AND EVALUATION

(a) Curriculum planning

The planning of the curriculum should be based on this syllabus.

It is recommended that a Curriculum Development Committee be formed within each institution comprising teaching staff, clinical staff, learners and any other expertise the institution may wish to include.

A well-planned curriculum should reflect the learning opportunities available within the total learning environment. It is important to construct an educational curriculum, which relates theories and practice leading ultimately to integrate learning. To achieve this, it is recommended that the students are provided with relevant theory prior to a planned clinical placement. This will enhance the correlation between theory and practice.

Periods of evaluation should also be planned according to the structured education program and each unit of clinical experience.

(b) Research

Research-mindedness and research studies are to be encouraged in curriculum planning, as these are important in helping the learners to understand the concepts of analysis and synthesis as well as the application of evidence-based practice and problem-solving skills in psychiatric nursing.

(c) Evaluation

The development of a curriculum must include an on-going process of evaluation. Approved institutions of nursing are advised to evaluate their curriculum carefully and regularly.

BIBLIOGRAPHY

- Alberta Health and Wellness. (2002). *Registered psychiatric nurses: competency profile for the profession in Canada*. Edmonton, Alberta: Arthur in partnership with Registered Psychiatric Nurses of Canada.
- American Nurses Association. (1998). *Standards of clinical nursing practice* (2nd edition). Washington, DC: Author.
- American Nurses Association & American Psychiatric Nurses Association. (2000). *Draft 4 – Scope and standards of psychiatric- mental health clinical nursing practice*. Washington, DC: Authors.
- American Nurses Association, American Psychiatric Nurses Association, Association of Child and Adolescent Psychiatric Nurses, & Society for Education and Research in Psychiatric-Mental Health Nursing. (1994). *A statement on psychiatric-mental health clinical nursing practice*. Washington, DC: American Nurses Publishing, 12.
- Australian Nursing & Midwifery Council (2000). ANMC National Competency standards for the enrolled nurse. Canberra: Author
- College of Licensed Practical Nurses of Alberta. (1998). *Competency profile for licensed practice nurses*. Edmonton: Author.
- College of Nursing, Hong Kong. (1997). *Standards for psychiatric nursing practice*. Hong Kong SAR: Author.
- Hospital Authority, Hong Kong. (2001). *Guidelines for specialty nursing services – Mental health care*. Hong Kong SAR: Author.
- Hospital Authority of Hong Kong (2002). *Core-Competency Sets for Nursing Staff* (internal official document). Hong Kong SAR: Author
- Kozier, B., Erb, G., Blais, K., & Wilkinson, J.M. (2004). *Fundamentals of nursing: Concepts, process, and practice* (7th ed.). Upper Saddle River, NJ: Pearson/Prentice Hall.
- National Board for Nursing, Midwifery and Health Visiting for Scotland. (2004). *A route to enhanced competence for primary care mental health workers in relation to people with mild to moderate mental health needs*. Scotland: Author.
- National Board for Nursing, Midwifery and Health Visiting for Scotland (NBS). (2001) *Core skills and competencies for adult nursing*. Scotland: Author.
- Nursing Council of Hong Kong (2005). *Core competencies for Enrolled Nurse (General) & a Reference Guide to the syllabus of Subjects and Requirements for the Preparation of Enrolled Nurse (General)*. Hong Kong SAR: Author
- Public Health Nursing Division, Department of Health, Hong Kong SAR (2002). *Core-Competencies for Registered Nurse Grade*. (internal official document). Hong Kong SAR: Author.
- Registered Psychiatric Nurses Association of British Columbia (1995). *Competencies expected of the beginning practitioner of psychiatric nursing*. Vancouver, BC: Author.
- United Kingdom Central Council for Nursing, Midwifery and Health Visiting (UKCC). (2000). *Competencies for entry to the Professional Register*. London: Author
- World Health Organisation. (2001). *Fact sheet - Mental health: strengthening mental health promotion (N 220)*. Geneva: WHO Media Centre.

OUTLINE OF KNOWLEDGE, SKILLS AND ATTITUDE REQUIRED UNDER COMPETENCE AREAS

| Competency 1: Professional, legal and ethical nursing practice | | | |
|--|--|--|--|
| Ability | Knowledge | Skills | Attitude |
| <p>Ability to perform effective psychiatric nursing care safely, legally and ethically</p> <p>The Enrolled Nurse (Psy) should be able to assist Registered Nurse (Psy) to:</p> <ul style="list-style-type: none"> ● perform nursing practice particularly for: <ul style="list-style-type: none"> – assessment of psychosocial health needs in line with physiological ones – design, implementation and evaluation of care planning with the partnership of client – restoration and promotion of mental health and enhancement of quality of life as client’s desire – collaboration with other mental health team members in the care provision ● safeguard client from unsafe practice ● ensure client’s rights of dignity, autonomy, privacy, confidentiality and access to information ● maintain a therapeutic environment conducive to mental health rehabilitation | <p>A. Medical, behavioural and social sciences</p> <ul style="list-style-type: none"> ● biological, pharmacological, social and behavioural sciences relevant to psychiatric nursing <p>B. Therapeutic communication</p> <ul style="list-style-type: none"> ● theories of communication ● interpersonal relationships and team building ● interviewing and counselling ● therapeutic communication and relationships <p>C. Professional nursing practice</p> <ul style="list-style-type: none"> ● concepts and theories of professional nursing and caring ● evidence-based nursing ● principles and practice of psychiatric nursing <p>D. Legal and ethical aspects</p> <ul style="list-style-type: none"> ● legal aspects pertinent to psychiatric nursing ● principles of professional conduct and nursing ethics ● patient’s right and responsibility | <p>A. Cognitive skills</p> <ul style="list-style-type: none"> ● reflective learning ● assertiveness ● critical and analytical thinking ● discovery learning <p>B. Psycho-motor skills</p> <ul style="list-style-type: none"> ● health assessment ● psychiatric nursing and basic general nursing techniques <p>C. Psychosocial skills</p> <ul style="list-style-type: none"> ● communication and interpersonal skills ● counselling skills ● psychoeducation and psychotherapeutic interventions | <ul style="list-style-type: none"> ● respect for life, dignity, rights, beliefs, and culture of an individual ● taking initiative for professional actions and be accountable for the care provided within the scope of practice of an enrolled nurse ● supportive and collaborative with the Registered Nurse (Psy) and members of the health care team to provide systematic and holistic care for individuals, family and groups as needed ● non-judgemental and accepting clients with mental problems under care ● continuous/life-long learning |

| Competency 2: Health promotion and education | | | |
|--|--|---|---|
| Ability | Knowledge | Skills | Attitude |
| <p>Ability to work in partnership with health care team, clients, families and the community in preventing illness, promoting and protecting the health, in particular mental health, of an individual, family and the community</p> <p>The Enrolled Nurse (Psy) should be able to assist Registered Nurse (Psy) to:</p> <ul style="list-style-type: none"> ● recognise the factors affecting mental health and the appropriate actions to take for mental health promotion ● identify the health-related needs of clients in different health care settings ● communicate health information and co-ordinate mental health education/promotion activities effectively ● collect and utilise updated evidence and reliable information for planning and improving mental health promotion and education activities ● intervene appropriately to safeguard the interests and well-being of clients | <p>A. Educational theories</p> <ul style="list-style-type: none"> ● teaching and learning methods, motivation theories <p>B. Concepts of health and mental health; health education and mental health promotion</p> <ul style="list-style-type: none"> ● concepts of health, mental health, mental illness and public health ● health care delivery system ● theories and practice of mental health education and promotion for <ul style="list-style-type: none"> – individual – family – group – the community ● contemporary issues in mental health education and promotion <p>C. Rights of an individual</p> <ul style="list-style-type: none"> ● human rights ● ethical principles applied to mental health promotion and education | <p>A. Skills of health education and promotion</p> <ul style="list-style-type: none"> ● modelling and role playing ● teaching, facilitating and motivating ● reflecting ● reinforcing and shaping <p>B. Problem solving</p> <ul style="list-style-type: none"> ● community health assessment ● psychosocial and mental health assessment ● educational needs assessment ● problem identification, planning, implementing and evaluating health education activities for individuals, groups and the community | <ul style="list-style-type: none"> ● proactive in identifying the clients' mental health needs and in meeting these needs ● committed in continuing education and updating of contemporary issues about mental health ● committed in participating in activities for mental health education and promotion ● showing respect and understanding of clients' rights and mental health needs |

| Competency 3: Quality improvement and team work | | | |
|---|---|---|---|
| Ability | Knowledge | Skills | Attitude |
| <p>Ability to contribute to quality improvement and work harmoniously with all health care team members to achieve effective health care outcome</p> <p>The Enrolled Nurse (Psy) should be able to:</p> <ul style="list-style-type: none"> ● assist the implementation of change conducive to quality improvements and risk management ● provide assistance to supervise the supporting staff for provision of quality nursing care ● demonstrate an understanding of the role of the enrolled nurse (Psy) as a member of the health care team ● recognise the differences in accountability and responsibility between registered nurse (Psy) and enrolled nurse (Psy) ● establish and maintain collaborative relationships with members of health care team ● facilitate team members to achieve work targets | <p>A. Management of ward unit</p> <ul style="list-style-type: none"> ● management of time, risk, crises, services, and resource <p>B. Health care system and policies</p> <ul style="list-style-type: none"> ● health care and mental health care systems and policies ● contemporary mental health care issues ● factors influencing mental health and health care <p>C. Information technology applied to nursing and health care</p> <ul style="list-style-type: none"> ● contemporary concepts of information technology (IT) ● application of IT in nursing and health care <p>D. Basic principles of team building</p> <p>E. Basic principles of coaching and mentoring</p> <p>F. Scope of practice for an enrolled nurse</p> | <p>A. Managerial skills</p> <ul style="list-style-type: none"> ● establishing working relationships with clients, health care professionals and the public ● participate and support continuous quality improvement and risk management programs ● conflict resolution <p>B. Skills in information technology</p> <ul style="list-style-type: none"> ● computer use ● electronic communication, data entry and retrieval in computer <p>D. Interpersonal skill</p> <p>E. Team building skill</p> <p>F. Coaching and mentoring skill</p> | <ul style="list-style-type: none"> ● co-operative and supportive of changes to improve mental health services and quality nursing care ● open and accommodating ● respect individual difference in beliefs, value and cultural practices ● collaborative and corporative ● supportive ● participative |

| Competency 4: Personal and professional attributes | | | |
|---|---|--|--|
| Ability | Knowledge | Skill | Attitude |
| <p>Ability to be a role model in health promotion and professional development.</p> <p>The Enrolled Nurse (Psy) should be able to:</p> <ul style="list-style-type: none"> ● maintain and promote health of self, particularly mental health and emotional well-being ● recognise the need for and participates in continuing professional development | <p>A. Individual mental health and well-being</p> <ul style="list-style-type: none"> ● positive self concept ● harmonious relationship with people and environment ● coping with stress and adaptation to change <p>B. Professional development</p> <ul style="list-style-type: none"> ● professional organisations and opportunities for professional development ● update on mental health nursing knowledge | <p>A. Personal health promotion</p> <ul style="list-style-type: none"> ● healthy lifestyles and health promotion practices ● adaptation and management of changes ● coping of stress <p>B. Participate in professional activities</p> <p>C. Continuing development in contemporary mental health nursing</p> <ul style="list-style-type: none"> ● ability to appreciate evidence-based practice | <ul style="list-style-type: none"> ● enthusiastic and positive towards life, human being, society and health ● committed in continuous life-long learning ● supportive and committed to professional organisations and professional nursing development |

CONTINUING CLINICAL ASSESSMENT

Contemporary and professional nursing emphasizes the integration of theory and practice. In view of this, it would be more valid and important to conduct the clinical assessment in real situations over a prescribed period of time of clinical practice. Continuing Clinical Assessment (CCA) is an ongoing process consisting of 5 components: teaching, demonstration, practice, feedback and evaluation. Each assessment will take place **IN A CONTINUOUS BASIS / NOT ONLY AT ONE POINT OF TIME** at different clinical venues within an Assessment Period and will base on some items specified in the assessment form. Upon successful completion of all the prescribed clinical assessments, the learner will have acquired essential clinical skills necessary for psychiatric nursing practice.

I. Aim

The aim of CCA is to assess the learner's level of competence in clinical practice on a continuing basis.

II. Objectives

- to teach and demonstrate clinical skills to learner;
- to provide opportunities for learner to practise the learnt skills;
- to identify learner's strengths and weaknesses in learning and clinical practice;
- to coach and give feedback to learner; and
- to evaluate learner's level of competence.

III. Clinical experience and clinical placement

The period of different types of clinical experience should meet the requirement stipulated by the NCHK.

The period of clinical placement is the entire period during which the learner is allocated to any clinical unit(s) (hospital ward/unit, out-patient department, occupational therapy department, community psychiatric nursing service and general hospital) for applying his/her knowledge learned in the theoretical courses and practising the psychiatric nursing skills and the assessment period.

Each learner must gain clinical experience in the management and care of:

- Psychiatric clients in acute/subacute phase
- Psychiatric clients requiring psychiatric rehabilitation/long-stay services
- Psychiatric clients requiring community psychiatric nursing services/out-reaching services
- Psychogeriatric clients
- Psychiatric clients with medical and surgical problems
- Child & adolescent clients with mental health problems
- Clients with learning disabilities
- Client with substance-related disorders

IV. Assessment areas

The natures of clinical placement where the CCA would be conducted including:

- Psychiatric Acute/subacute unit;
- Psychiatric Rehabilitation/long-stay unit; and
- Community psychiatric nursing/out-reach services.

The areas to be assessed in each CCA placement unit include:

1. Basic knowledge and skills which are essential for the student to perform his/her nursing duties and common in all clinical placements :

- Provision of therapeutic milieu;
- Communication and observation skills;
- Nurse-patient relationship;
- Planning, implementation and evaluation of psychiatric nursing interventions; and
- Professional and ethical practice.

2. Specific knowledge and skills which are required for the student to perform his/her nursing duties in a particular nature of ward/unit/department.

- Mental health promotion and education;
- Assessing clients' needs;
- Therapeutic communication and counselling skills;
- Pharmaceutical treatments;
- Administering and monitoring of treatment regimes and nursing care; and
- Management of clinical areas.

V. Period(s) of assessment

During the period(s) a learner is assessed in specific clinical setting(s) for placement/learning, excluding the night duty.

The learner is assessed continually on the areas specified in the assessment form(s) starting immediately from the time stipulated for assessment to the end of the clinical placement.

Clinical assessor should monitor the learner's performance and make himself/herself available to the learner during his/her period of supervision. Clinical assessor should give feedback to the learner regarding his/her knowledge and skills **on a continuing basis**. Regular feedback will allow the learner to be aware of his/her achievements or weaknesses and will allow an opportunity for the learner to improve knowledge and skills required in the clinical practice as well as better arrangement for supervised practice in areas of nursing skills that required.

The assessment period includes the:

- First attempt period;
- Second attempt period (applicable to the learner who has failed in the first attempt);
and
- Third attempt period (applicable to the learner who has failed in the first attempt
and second attempt).

VI. Continuing Clinical Assessment Committee

Each approved institute of nursing is recommended to form a Continuing Clinical Assessment Committee aiming at formulating and updating the following items:

- Guidelines for assessment;
- Assessment forms;
- Assessment schedule and clinical placement of students; and
- Appointment of clinical assessors.

PRACTICAL EXAMINATION GUIDELINES

A. Content of practical examination

I. Administration of medications, knowledge of psychotropic drugs & aseptic techniques

(a) Administration of medications

- i. Administer three types of drugs to one client (one type of drugs would be in liquid form).
- ii. Demonstrate the three checks and five rights in drug administration.
- iii. Record the drug administration accurately.

(b) Knowledge of psychotropic drugs

Demonstrate knowledge of a psychotropic drug from the following categories:

- i. Anti-psychotics
- ii. Antidepressants
- iii. Others, e.g. mood stabilizers, anxiolytics and anticonvulsants

(c) Aseptic techniques

Demonstrate aseptic techniques in either one of the following procedures:

- i. Dressing a simple wound
- ii. Others, e.g. wound packing and pressure sore dressing

II. Mental status assessment skills

(a) Demonstrate skills in assessing a client with clinical manifestations of one of the following conditions:

- i. Positive symptoms of schizophrenia
- ii. Negative symptoms of schizophrenia
- iii. Paranoid schizophrenia
- iv. Depression
- v. Depression with suicide ideas
- vi. Mania
- vii. Anxiety disorder
- viii. Other major mental illnesses

(b) Assess the following aspects of the client: attitude, affect, speech, thought, perception, memory, orientation, behaviour, and insight.

(c) Document the findings of the assessment accurately.

III. Communication and counselling skills

- (a) The examiner will give a scenario to the candidate before the commencement of the communication assessment.
- (b) Communication or counselling with the client with a view to meeting his/her immediate needs.
- (c) Documentation of the data gathered appropriately.

B. Assessors

- I.** The role of an assessor is to act as an agent for the NCHK who is responsible to examine and certify whether the candidate is safe and efficient to practise in the areas selected for assessment.
- II.** Recognised educational institutes will be responsible for the nomination of qualified assessors for the practical examination. The NCHK will appoint these qualified assessors for this part of the Licensing Examination.