

# **The Nursing Council of Hong Kong**

A Reference Guide to the Syllabus of Subjects and Requirements for the Preparation of Registered Nurse (Psychiatric) in the Hong Kong Special Administrative Region

(September 2021)

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#### I. PREAMBLE

Psychiatric nurses are one of the health professionals who serve the community by meeting individual mental health needs, particularly those suffering from mental disorders, as well as promoting mental health of the community. With the initiation of moving psychiatric nursing education to tertiary education institutions since 2002, and new developments of the health care system in Hong Kong, it is essential to equip the new generation of registered psychiatric nurses with enhanced professional competencies in order to meet the contemporary mental health care needs. This syllabus is intended to provide an update and clear guideline for the formulation of a curriculum/programme which prepares nursing students for registration in the Nursing Council of Hong Kong (NCHK) as a Registered Nurse (Psychiatric)[RN(Psy)]. Persons who have successfully completed a local training programme built on this syllabus at an approved institute of nursing will be eligible for registration. RN(Psy)s are expected to have acquired the basic level of knowledge and skills for safe, efficient and ethical practice of psychiatric nursing in Hong Kong, as stipulated in the Core Competencies for RN(Psy) approved by the NCHK.

The syllabus is based on a set of major objectives and areas of psychiatric nursing knowledge and practice that underpin 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 RN(Psy).

### **II. OBJECTIVES OF THE SYLLABUS**

This syllabus has been developed by the 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 and scope of practice of psychiatric nurses;
- 3. To describe the main content of psychiatric nursing education, including theories and clinical practice in different levels and settings of mental health care, bio-psychosocial perspectives related to nursing, ethical, legal and cultural issues of nursing practice, and professional, managerial and research development;
- 4. To specify the essential subjects and topics of education in psychiatric nursing required under the Core Competency of RN(Psy); and
- 5. To state the minimum number of contact hours<sup>1</sup> and assessments required for each subject area or component under the Core Competencies of RN(Psy).

<sup>&</sup>lt;sup>1</sup> The term "contact hours" refers to the amount of time (in terms of hours) spent by a learner in direct contact with the teaching/training staff of a programme. It includes attendance in class, tutorials, nursing laboratory practice, conducting experiment in laboratory under supervision and supervised session in placement and workshop. For other modes of learning, the Nursing Council of Hong Kong will assess the individual case of merit in the light that there is structured content with learning outcomes, and has interaction and assessment components.

## **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 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 2010, is a state of well being in which the individual realizes his or 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. In this positive sense, mental health is the foundation for individual well-being and the effective function of a community. The positive dimension of mental health is also stressed in the WHO's definition of health as contained in its constitution in 1948: "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 AND CORE COMPETENCIES REQUIRED OF A REGISTERED NURSE (PSYCHIATRIC)

#### Glossary

- Registered Nurse (Psychiatric) [RN(Psy)]
   A nurse who has completed a psychiatric/mental health nursing programme and has registered under the Professional Register Part II of the NCHK.
- 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 RN(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 RN(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 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, nursing research in psychiatric nursing
- Evaluate current health care policy and initiate changes of policies 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.

#### Scope of core competencies required of an RN(Psy)

The scope of core competencies required of an RN (Psy) comprises 5 key aspects:

Competency 1:	Professional, legal and ethical nursing practice
Competency 2:	Health promotion and education
Competency 3:	Management and leadership
Competency 4:	Nursing research
Competency 5:	Personal and professional development

Please refer to the following details.

## SCOPE OF CORE COMPETENCIES OF A REGISTERED NURSE (PSY)

#### **Competence area 1: Professional, legal and ethical nursing practice**

Proficiency in evidence- based nursing practice, applying problem solving skills and psychotherapeutic interventions to perform effective psychiatric nursing care safely, legally and ethically.

#### The Registered Nurse (Psy) should be able to:

- think and reflect analytically and critically.
- integrate nursing knowledge and theories into practice particularly for:
  - assessment of mental health status and psychosocial health needs in line with physiological ones using a systematic and holistic approach;
  - design, implementation and evaluation of care planning with the partnership of client and significant others;
  - restoration and promotion of mental health and enhancement of quality of life for the sake of client's benefits and desire;
  - performing psychotherapeutic interventions proficiently and effectively and documenting the care accurately; and
  - collaboration with other mental health team members in the care provision.
- recognise limits of own abilities and qualification in accepting delegations.
- ensure client safety.
- ensure patients' rights of dignity, autonomy, privacy, confidentiality and access to information and responsibility to treatment, in consistent with the Mental Health Ordinance, Chapter 136.
- maintain a therapeutic environment conducive to mental health.

#### **Competence area 2: Health promotion and education**

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

#### The Registered Nurse (Psy) should be able 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.
- use learning principles and counselling techniques appropriately and effectively.
- 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: Management and leadership**

#### Effective managerial, supervision and leadership skills in mental health nursing practice

#### The Registered Nurse (Psy) should be able to:

- initiate, implement and evaluate change conducive to improvement of mental health care services.
- participate in health care policy planning and evaluation, in partnership with the health care team and the community sectors.
- assess, prevent and manage risks in mental health of clients and families and occupational health and safety of colleagues.
- supervise the junior colleagues and trainees for provision of quality nursing care

#### **Competency 4: Nursing research**

Ability to apply the knowledge and skills in nursing research in different health care settings and in the community.

Ability to collect, analyse, interpret and use research data to improve nursing and health care practices.

**Competency 5: Personal and professional development** 

Ability to maintain own physical, mental and emotional well-being.

Ability to develop and maintain nursing as a profession and maintain one's status as a professional registered nurse.

## V. EDUCATION PREPARATION

A registered psychiatric nurse is a graduate who has successfully completed an education programme in psychiatric nursing at an approved institute of nursing and included the following requirements for application of registration with the NCHK:

#### (a) Duration of the programme

An education programme in psychiatric nursing should include theoretical instructions 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 admission to Part II of the Register maintained by the NCHK.

#### (b) Theoretical instruction

A minimum of 1,230 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 Appendix.

The programme should provide students with opportunities to examine a range of perspectives through which to experience and understand concepts and practices of 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 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 students' 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 1,400 hours of clinical experience is required. The minimum requirement of clinical experience on different nature of experience is included in Section VI.

Students should be placed to a variety of psychiatric care settings to provide them with opportunities to practice 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 students identify specific learning objectives during their clinical placement. Learning will take place through practical instructions and supervised practice, seminars, ward meetings and multidisciplinary conferences.

#### (d) Special considerations

Special considerations will be given to a person if he/she satisfies any one of the following conditions:

- 1. That person has already registered in Part I (general) of the register of the NCHK. A maximum of 33% of both theoretical and clinical requirements as stipulated in this syllabus can be exempted. A maximum of 40% of both theoretical and clinical requirements can also be exempted if the person possesses any post-registration psychiatric nursing qualifications obtained from the academic institutions recognised or accredited by the NCHK, meeting both the theoretical and clinical requirements as stipulated in this syllabus.
- 2. That person has already enrolled in Part II (psychiatric) of the enrolment of the NCHK. A maximum of 20% of both theoretical and clinical requirements as stipulated in this syllabus can be exempted.
- 3. That person has completed a nursing programme but has not enrolled or registered with the NCHK. The number of hours of theoretical requirements to be exempted is subject to the recommendations of the academic institutions accredited by the NCHK and meets the requirements as stipulated in the NCHK. There shall be no exemption from the requirement of clinical experience for the Licensing Examination (Part II).

## VI. THEORETICAL REQUIREMENTS

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

### **Theoretical instruction**

The total amount of time for teaching and learning activities should not be less than 1 230 contact hours.

Competency 1: Professional, legal and ethical nursing practice		
Section	Subjects/Topics	Minimum contact hours
1A.	General, Medical, behavioural and social sciences	450
1A.1	Human davalonment	
	Human development General psychology	
	Clinical psychology	
1A.3 1A.4	Sociology and health care	
1A.4 1A.5	Anatomy and physiology of human body	
1A.5 1A.6	Pharmaco-therapeutics	
1A.0 1A.7	Microbiology in nursing	
1A.7 1A.8	Psychiatry	
1A.9	Chinese medicine and complementary and alternative medicine	
171.7	Chinese medicine and complementary and alternative medicine	
1 <b>B</b> .	Therapeutic communication	60
10 1		
1B.1	Therapeutic communication in psychiatric nursing	
1B.2	Application of therapeutic communication and counselling skills, helping relationships and group dynamics in psychiatric	
	care settings (see Appendix 1B.2)	
1C.	Professional nursing practice	480
1C.1	Concepts of nursing and nursing theories	
1C.2	Dimensions of professional nursing	
1C.3	Fundamentals of psychiatric nursing practice	
1C.4	Principles of first-aid	
1C.5	Principles and practice of psychiatric nursing	
1C.6	Common general medical and surgical conditions	
1 <b>D.</b>	Legal and ethical aspects	40
1D.1	Forensic psychiatry (see Appendix 1A.8)	
1D.1 1D.2	Ethical and legal issues in mental health nursing	
1E.	Information technology applied to nursing and health care	20

Competency 2: Health promotion and education		
Section	Subjects/Topics	Minimum contact hours
2A.	Education theories	10
2A.1 2A.2	Health education and promotion Psycho-education for clients, family and the community ( <i>see</i> <i>Appendix 1C.5.10</i> )	
2B.	Concepts of health and mental health; mental health promotion	50
2B.1 2B.2	Concepts of health and mental health Contemporary issues and trends in mental health care	
2C.	Theories of communication and counseling	(included in 1B.1)
2D.	Rights and responsibilities of the individual	(included in 1D)

Competency 3: Management and leadership		
Section	Subjects/Topics	Minimum contact hours
3A.	Management and leadership theories	30
3B.	Health care system and policies	20
3C.	Politics and health care practice	
3C.1	Professional associations and organizations ( <i>see Appendix 3C.1</i> ) Social organisation, sociological aspects of hospitals, institutions	10
3C.2	and health care system ( <i>see Appendix 3C.2</i> ) Contemporary social and health issues and its impact on mental	(included in 1C.4)
3C.3	health services (see Appendix 3C.3)	5

Compet	Competency 4: Nursing research	
Section	Subjects/Topics	Minimum contact hours
4A.	Basic knowledge in nursing research	40
<b>4B.</b>	Appraising, disseminating and utilising research findings	

Section	Subjects/Topics	Minimum contact hours
5A.	Individual mental health and well-being	(included in 2B.1)
5B.	Professional development	
5B.1	Specialisation and advanced psychiatric nursing practice ( <i>see Appendix 2B.2</i> )	5
5B.2	Health care system and policies	(included in <b>3B</b> )
5C.	Nursing as a profession	10
	Total:	1 230

VII. CLINICAL PRACTICE REQUIREMENT
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Clinical experiences	Minimum requirement (Hours)
Nursing management for acute/subacute clients	340
Nursing management for psychiatric rehabilitation/long-stay clients	340
Community psychiatric nursing and mental health out-reaching services	310
Nursing management for psychogeriatric clients	120
Nursing management for clients with medical and surgical problems	120
Nursing management for child and adolescent clients	60
Nursing management for clients with learning disabilities	60
Nursing management for clients with substance-related disorders	50
<u>Total:</u>	1 400 (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 according to the Hospital Authority Ordinance (Cap. 113, Laws of Hong Kong) or private hospitals registered under the Private Healthcare Facilities Ordinance (Cap. 633, 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.

## VIII. CLINICAL ASSESSMENT GUIDELINES

#### 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 student will have acquired essential clinical skills necessary for psychiatric nursing practice.

#### I. <u>Aim</u>

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

#### II. <u>Objectives</u>

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

#### III. <u>Clinical experience and clinical placement</u>

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 student 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 student 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 and 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
- 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

- 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
  - Management of clinical areas

#### V. <u>Period(s) of assessment</u>

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

The student 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 student's performance and make himself/herself available to the student during his/her period of supervision. Clinical assessor should give feedback to the student regarding his/her knowledge and skills **on a continuing basis.** Regular feedback will allow the student to be aware of his/her achievements or weaknesses and will allow an opportunity for the student 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 student who has failed in the first attempt); and
- Third attempt period (applicable to the student who has failed in the first attempt and second attempt).

#### VI. <u>Continuing Clinical Assessment Committee</u>

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;
- appointment of clinical assessors.

## IX. 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 a modular system of training be used. Whereby 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 students 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.

## CORE SUBJECTS AND TOPICS OF THEORETICAL INSTRUCTION

Section	Subjects/Topics	Minimum contact hours <sup>#</sup>
1A.	Medical, behavioural and social sciences	450
1A.1	Human development	(20)
	1. Developmental psychology	
	2. Developmental stages: normal development and related problems	
1A.2	General psychology	(30)
	1. Introduction to psychology	
	2. Personality, individuality, self and self-concept	
	3. Perception and consciousness	
	4. Learning, remembering, thinking and forgetting	
	5. Attitude	
	6. Motivation, emotion, drive and needs	
	7. Intelligence and cognition	
	8. Stress, health and coping in an individual and family situation	
	9. Mental health, mental defence mechanisms and stress management	
	10. Social behaviour and psychology	
1A.3	Clinical psychology	(40)
	1. Psychopathology	
	2. Psychotherapeutic interventions: individual therapy, group therapy,	
	cognitive-behaviour therapy, play therapy, family therapy	
	3. Theory and practice of counselling	
	4. Crisis intervention	
	5. Psychological testing	
	6. Application of psychological concepts to the understanding and	
1 4 4	management of clients with mental disorders	(40)
1A.4	Sociology and health care	(40)
	1. Concepts and theoretical perspectives of sociology and	
	<ol> <li>Socialization process</li> <li>Concepts of role, social status, culture, norms and social</li> </ol>	
	2. Concepts of role, social status, culture, norms and social stratification	
	3. Labelling theory, deviance, conformity and social control	
	4. Social organization, sociological aspects of hospital, institution and	
	4. Social organization, sociological aspects of hospital, institution and health care system	
	5. Impacts of illness, hospitalization, institutionalization on	
	individuals, families and society	
	<ol> <li>Law, culture, and ethnic, social changes and cultural background in</li> </ol>	
	relation to mental disorders	
	7. Sociological approaches to the understanding of mental disorders	

<sup>&</sup>lt;sup>#</sup> Number in bold are the total hours for the subject and those in brackets are the breakdown of hours for reference only

Section	Subjects/Topics	Minimum contact hours <sup>#</sup>
1A.5	<ul> <li>Anatomy and physiology of human body</li> <li>1. The overall structure, functions and physiological activities of major organs and systems in the body: <ul> <li>Alimentary system</li> <li>Cardiovascular system</li> <li>Endocrine system</li> <li>Integumental system</li> <li>Lymphatic system</li> <li>Musculo-skeletal system</li> <li>Nervous system and special senses</li> <li>Reproductive system</li> <li>Urinary system</li> </ul> </li> <li>Biochemistry</li> <li>Genetics</li> <li>Pathophysiology</li> </ul>	(60)
1A.6	<ul> <li><i>Pharmaco-therapeutics</i></li> <li>Pharmacokinetics and pharmaco-dynamics</li> <li>Legal aspects in prescription, storage and administration of drugs</li> <li>Routes of administration</li> <li>Indications and contraindications of drugs commonly used in psychiatry and medical condition</li> <li>Idiosyncrasies, tolerance, absorption and elimination of drugs</li> <li>Side, toxic and cumulative effects of drugs</li> <li>Strategies of client education ensuring safe, effective and appropriate self-administration</li> <li>Clinical pharmacotherapy of mental disorders</li> </ul>	(30)
1A.7	<ul> <li>Microbiology in nursing</li> <li>1. Classification, morphology and modes of living</li> <li>2. Introduction to the study of common pathogens</li> <li>3. Bodily defence and immunity</li> <li>4. Hospital infection</li> <li>5. Roles of infection control team in the hospital</li> <li>6. Prevention of infection in the community</li> </ul>	(40)

<sup>&</sup>lt;sup>#</sup> Number in bold are the total hours for the subject and those in brackets are the breakdown of hours for reference only

ection	Subjects/Topics	Minimum contact hours <sup>#</sup>
1A.8	Psychiatry	(150)
1A.8 1A.9	Psychiatry         1. History and development of psychiatry         2. Actiology of mental disorders         3. Classification of mental disorders         4. Psychiatric disorders in elderly         6. Psychiatric disorders, phobia and obsessive-compulsive disorders         - Delusional disorders         - Dissociative disorders; Somatoform disorders         - Dissociative disorders;         - Organic brain syndrome and disorders         - Personality disorders         - Organic brain syndrome and disorders         - Personality disorders         - Post-traumatic stress disorders and acute stress disorders         - Psychological and psychiatric aspects associated with pregnancy and childbirth; metabolic and endocrine disorders         - Substance related disorders         - Substance related disorders         - Psychiatric emergency; suicide and aggression         7. Treatment/therapies in psychiatry: physical, psychological, behavioural, social, occupational therapy and electro-convulsive therapy         8. Forensic psychiatry         9. Psychiatric rehabilitation         10. Community psychiatry         11. Case management         Chinese medicine and complementary and alternative medicine         - Concepts of Chinese medicine         - Concepts of Chinese medicine         - Introduction to modern Chinese medicine	(150)
	<ul> <li>Introduction to common methods of complementary and alternative medicine</li> <li>Introduction to common approaches of therapy</li> </ul>	

<sup>&</sup>lt;sup>#</sup> Number in bold are the total hours for the subject and those in brackets are the breakdown of hours for reference only

Section	Subjects/Topics	Minimum contact hours <sup>#</sup>
1 <b>B.</b>	Therapeutic communication	60
1B.1	<ul> <li>Therapeutic communication in psychiatric nursing</li> <li>Self-awareness and growth</li> <li>Therapeutic use of self</li> <li>Interpersonal relationships</li> <li>Verbal and non-verbal communication skills</li> <li>Therapeutic attending and listening skills, empathic responding skills, questioning skills; assertive training</li> <li>Principles and process of helping relationships</li> <li>Stages and process of therapeutic groups</li> </ul>	(40)
1B.2	Application of therapeutic communication and psychotherapeutic interventions, helping relationships and group dynamics in psychiatric nursing practice	(20)
1C.	Professional nursing practice	480
1C.1	Concepts of nursing and nursing theories	(20)
	<ol> <li>History of nursing and nursing education</li> <li>The philosophy of nursing</li> <li>The development of psychiatric nursing</li> <li>The nature of psychiatric nursing</li> <li>Nursing theories for psychiatric nursing practice</li> </ol>	
1C.2	Dimensions of professional nursing	(40)
	<ol> <li>Scope of the nursing profession</li> <li>Professional conduct and discipline</li> <li>Professional advocacy and role development</li> <li>Role and functions of a psychiatric nurse</li> <li>Core competencies for psychiatric nursing</li> <li>Critical thinking, decision making and reflective practice in nursing</li> <li>Dimensions of trans-cultural nursing</li> <li>Partnership and team work</li> </ol>	

<sup>&</sup>lt;sup>#</sup> Number in bold are the total hours for the subject and those in brackets are the breakdown of hours for reference only

Section	Subjects/Topics	Minimum contact hours <sup>#</sup>
1C.3	Fundamentals of psychiatric nursing practice	(100)
10.5	<ol> <li>Assessing client's needs         <ul> <li>Nursing process, nursing diagnosis and clinical reasoning</li> <li>Health assessment; physio-psycho-social-mental status examination; application of psychological assessment tools to clinical practice</li> <li>Collection and observation of specimens: urine, stool, sputum, blood and wounds</li> <li>Diagnostic clinical reasoning</li> </ul> </li> <li>Planning, implementation and evaluation of client-centered care in:         <ul> <li>Safe and therapeutic environment</li> <li>Breathing</li> <li>Nutrition and metabolism</li> <li>Elimination</li> <li>Activity of daily living</li> <li>Personal hygiene and appearance</li> <li>Sleep and rest</li> <li>Roles and relationships</li> <li>Setf-concept and self-esteem</li> <li>Stress coping and tolerance</li> <li>Values and beliefs</li> <li>Dignity in dying</li> </ul> </li> <li>Nursing documentation</li> <li>Occupational health and safety</li> <li>Infection control</li> <li>Procedures used in psychiatric nursing practice, e.g. physical</li> </ol>	
	restraint, administration of medications, injections, and aseptic technique	
1C.4	<ul> <li>First-aid management</li> <li>1. Aims and principles of first-aid</li> <li>2. Cardio-pulmonary resuscitation</li> <li>3. Asphyxia</li> <li>4. Wounds and haemorrhage</li> <li>5. Unconsciousness</li> <li>6. Fracture, sprain and dislocation</li> <li>7. Burns, scalds and electrocution</li> <li>8. Poisoning</li> <li>9. Bites, stings and foreign bodies</li> <li>10. Use of bandages and splints</li> <li>11. Lifting and transportation of the injured</li> </ul>	(40)

<sup>&</sup>lt;sup>#</sup> Number in bold are the total hours for the subject and those in brackets are the breakdown of hours for reference only

Section	Subjects/Topics	Minimum contact hours
1C.5	Principles and practice of psychiatric nursing	(180)
		contact hours
	<ul> <li>Psychiatric emergencies: suicide, deliberate self-harm, aggressive behaviour; risk management</li> <li>Nursing therapeutics for elderly with various mental disorders: <ul> <li>Dementia, delirium, amnestic and other cognitive disorders</li> <li>Depression and suicide</li> </ul> </li> </ul>	
	8. Liaison psychiatric nursing care	

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Section	Subjects/Topics	Minimum contact hours
1C.5	<ul> <li>Principles and practice of psychiatric nursing (cont'd)</li> <li>9. Nursing therapeutic in psychiatric rehabilitation: <ul> <li>Impacts of institutionalization</li> <li>Concepts of therapeutic community and milieu therapy</li> <li>Principles and practice of psychiatric rehabilitation nursing</li> <li>Care of clients with alternation in psychosocial adaptation</li> <li>Community resources in psychiatric rehabilitation</li> <li>Multidisciplinary approach in psychiatric rehabilitation</li> </ul> </li> <li>10. Community psychiatric nursing therapeutics for clients with mental disorders: <ul> <li>Perspective and approaches in community psychiatric nursing, case management and out-reaching services</li> <li>Assessment of clients within context of family and community</li> <li>Community psychiatric nursing care for individuals, families and groups</li> <li>Concepts of continuity of mental health care</li> <li>Crisis interventions</li> </ul> </li> </ul>	
1C.6	<ul> <li>Common general medical and surgical conditions</li> <li>Diagnostic investigations and related medical interventions</li> <li>Nursing therapeutics for clients with disorders in various body system functions. In addition, the following conditions should be included: <ul> <li>carcinoma</li> <li>undergoing surgery</li> <li>sexually transmitted diseases</li> <li>dying patients</li> </ul> </li> <li>Procedures used in medical and surgical nursing practice, e.g. administration of medication, injections, aseptic technique, catheterisation, wound dressing, suturing, blood matching and transfusion.</li> </ul>	(100)

<sup>&</sup>lt;sup>#</sup> Number in bold are the total hours for the subject and those in brackets are the breakdown of hours for reference only

Compete	Competency 1: Professional, legal and ethical nursing practice (cont'd)		
Section	Subjects/Topics	Minimum contact hours <sup>#</sup>	
1D.	Legal and ethical aspects	40	
1D.1	Psychiatry		
	1. Forensic psychiatry	included in psychiatry	
1D.2	Ethical and legal issues in mental health nursing	(40)	
	<ol> <li>Legal systems in Hong Kong</li> <li>Mental Health Ordinance</li> <li>Law of torts</li> <li>Moral, ethical and legal issues in psychiatric nursing practice; disciplinary procedures</li> </ol>		
1E.	Information technology applied to nursing and health care	20	
	<ol> <li>Nursing informatics</li> <li>Systems for client information</li> <li>Systems for hospital administration</li> <li>Application of information technology in psychiatric nursing and mental health services</li> </ol>		

Competency 2: Health promotion and education		
Section	Subjects/Topics	Minimum
		contact
		hours#
2A.	Education theories	10
2A.1	Health education and promotion	(6)
	1. Teaching and learning methods	
	2. Health education on individuals, group and community basis	
2A.2	Psycho-education for clients, family and the community	(4)

<sup>&</sup>lt;sup>#</sup> Number in bold are the total hours for the subject and those in brackets are the breakdown of hours for reference only

Section	Subjects/Topics	Minimum contact hours
2B.	Concepts of health and mental health; mental health promotion	50
	Concepts of health and mental health	
<b>2B.1</b>	1. Models of health	(40)
	2. Public health	
	3. Mental health	
	4. Personal health	
	5. Family health	
	6. Community health	
	7. Health assessment across the lifespan	
	8. Health promotion across the lifespan	
2B.2	Contemporary issues and trends in mental health care	(10)
	1. Promotion of mental health in the community	
	2. Prevention of suicide, substance use, violence, and child and elderly abuse	
2C.	Theories of communication and counseling	(included in 1B.1)
2D.	Rights of an individual	(included in 1D)

Competency 3: Management and leadership		
Section	Subjects/Topics	Minimum
		contact hours #
3A.	Management and leadership theories	30
	1. The management process in nursing	
	- Management theory and role of nurse manager	
	- Planning, organizing, directing and controlling	
	- Human resources management, financial managemen budgeting	it and
	- Leadership in nursing: leadership theory, problem-sol	
	decision making, team building, and managing confli changes	icts and
	- Quality management and improvement, nursing stand nursing audit	lard,
	- Performance appraisal, staff development	
	2. Policies, rules and regulations in health services institution	18
	3. Handling incidents and crisis in management; risk manage	
	4. Grievances, disciplinary and complaint procedures in hosp	
	health services institutions	
	5. Health economics	
	6. Outcome measures in health care	

<sup>&</sup>lt;sup>#</sup> Number in bold are the total hours for the subject and those in brackets are the breakdown of hours for reference only

Competency 3: Management and leadership (cont'd)		
Section	Subjects/Topics	Minimum contact hours
<b>3B.</b>	Health care system and policies	20
	1. Health care services in Hong Kong	
	2. Therapeutics in primary health care	
	3. Mental health services and policy	
	4. Factors influencing the development of mental health care	
	5. Community-based mental health care	
3C.	Politics and health care practice	
3C.1	Dimensions of professional nursing	10
	1. Nurses Registration Ordinance	
	2. Nursing Council of Hong Kong	
	3. Professional associations and organizations	
3C.2	Sociology and health care	(included in
	1. Social organisation, sociological aspects of hospitals, institutions and health care system	1C.4)
3C.3	Contemporary issues and trends in mental health care	5
	1. Contemporary social and health issues and its impact on mental	
	health services	

Section	Subjects/Topics	Minimum
4A.	Basic knowledge in nursing research	contact hours 40
	1. Introduction to nursing research	
	2. Research methods and designs:	
	- Quantitative and qualitative methodology	
	- Quantitative and qualitative data collection and analysis	
	procedures	
	- Elementary statistics	
	3. Formulation of a research proposal	
	4. Critical appraisal of literature	
	5. Use of computer software in data analysis	
4B.	Evidence-based practice	
	1. Appraisal of research findings	
	2. Utilisation of research findings in mental health care	
	3. Dissemination of research findings	

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<sup>&</sup>lt;sup>#</sup> Number in bold are the total hours for the subject and those in brackets are the breakdown of hours for reference only

Competer	ncy 5: Personal and professional development	
Section	Subjects/Topics	Minimum contact hours <sup>#</sup>
5A.	Individual mental health and well-being	(included in 2B.1)
5B. 5B.1	<b>Professional development</b> Specialisation and advanced psychiatric nursing practice (in Section: <i>Contemporary issues and trends in mental health care</i> )	5
5B.2	Health care system and policies	(included in 3B)
5C.	<ul> <li>Nursing as a profession</li> <li>1. Characteristics of a profession</li> <li>2. Nursing as a profession in society:</li> <li>3. Development of political skills and power</li> <li>4. Professional development and lifelong learning of a nurse</li> </ul>	10
	Total:	1 230

<sup>&</sup>lt;sup>#</sup> Number in bold are the total hours for the subject and those in brackets are the breakdown of hours for reference only

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