

Psychiatric Mental Health Nursing Core Competencies Individual Assessment

Name: _____ Orientation Start Date: _____ Completion Date: _____

Instructions: Pre-Assessment-the nurse will rate each knowledge, skill, or attitude (KSA) from 1 (novice) to 5 (expert) in each box. Following orientation or training, the nurse and preceptor will collaboratively provide a post-assessment. **Bold/asterisked ()** KSAs must be rated "competent" for independent practice. See the legend.

Competency (Knowledge, Skill, Attitude)	Assessment		Evaluation Method	Comments	References (See Appendix A)
	Pre-	Post-			
Team Work	CRITICAL THINKING: Communicates appropriate information to staff members in a courteous, professional, and approachable manner. Maintains professional composure at all times, ensures thorough patient care is delivered, and manages conflicts appropriately and in a timely manner				
* Demonstrates ability to communicate and use effective interpersonal skills with colleagues and other members of the medical center					2 (chap 58-60), 3 (chap 2, 11)
Fosters a positive work environment and encourages team work					2 (chap 58-60), 3 (chap 2, 11)
Verbalizes knowledge of patient and staff rights and responsibilities					10, 11, 12
Ensures customer satisfaction oriented environment for both patients, families, and other customers					2 (chap 58-60), 3 (chap 2, 11), 10, 11, 12
* Verbalizes basic scope of practice for Psychiatric Nurses, Psychiatrists, and Psychologists					2 (chap 58-60), 3 (chap 2, 11), 10, 11, 12
* Ensures a safe environment for patients/families/ staff, identifying health & safety risks & takes appropriate and immediate steps to alleviate the risk					2 (chap 58-60), 3 (chap 2, 11), 10, 11, 12
Growth & Development	CRITICAL THINKING: Demonstrate competent assessment of developmental needs of patients experiencing psychiatric disorders				
Recognize traditional versus non-traditional behavioral patterns in terms of developmental milestones					14
* Evaluate, plan, and implement age appropriate care for patients with psychiatric disorders					14
(1) Recognize major disorders occurring in adulthood					
(a) Mood Disorders					
(b) Psychotic Disorders					

Self Assessment

- 1 = Novice
- 2 = Advanced Beginner
- 3 = Competent
- 4 = Proficient
- 5 = Expert

Evaluation Method

- D = Demonstration/Observation
- I = Interactive Class
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- V = Verbal

Pre-Assessment Page Total: _____

Post-Assessment Page Total: _____

File Individual Assessment in Training Record; Summary in Individual Professional File

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Competency (Knowledge, Skill, Attitude)	Assessment		Evaluation Method	Comments	References (See Appendix A)
	Pre-	Post-			
(c) Substance Use Disorders					
(d) Anxiety Disorders					
(2) Recognize major disorders occurring in older age					
(a) Dementia					
(b) Delirium					
(c) Depression					
Patient Assessment	CRITICAL THINKING: Recognizes the normal and abnormal psychosocial issues that impact on families and individuals. Appropriately interacts with individuals of varying cultures and ethnic backgrounds and recognizes the influence on behaviors.				
*Interacts with patients to conduct information gathering interview on the following age groups:					2 (chap 2), 3 (chap 2)
*(1) Adults (18-64 years)					
(2) Geriatric (65 plus)					
*Conducts an information gathering interview to obtain the following:					2 (chap 1, 7,8, 9), 3 (chap 2)
(1) Statement of presenting problem					
(2) Psychosocial history					
(3) Current occupational/interpersonal Functioning					
(4) Mental status evaluation					
(5) Substance use, abuse or dependency assessment					
(6) Suicidal/Homicidal risk assessment					
(7) Indications of physical or sexual Abuse					
Recognize cultural, racial, and ethnic diversity and the impact on care of psychiatric illnesses					14
*Documents results of patient interview, makes preliminary determination of the type and degree of psychopathology.					2 (chap 1, 7,8, 9), 3 (chap 2)
Identifies and prioritizes individual client needs.					2 (chap 1, 7,8, 9), 3 (chap 2)

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	Pre-	Post-			
Prepares, implements, evaluates, and revises nursing care plan with measurable, realistic behavioral goals.					2 (chap 1, 7,8, 9), 3 (chap 2)
Documents all patient contacts properly according to unit specific documentation procedures.					10,11,12
Psychobiology	CRITICAL THINKING: Recognizing key symptoms of top clinical presentations, population based (active duty, combat, post deployment, pre deployment, family members); looking at young adult to older adult and timeline in career. Identifying basic behaviors and relating to the neuropsychology that is occurring, and the behavioral nursing interventions to promote recovery.				
*Keeps current and is able to identify the classification system of psychopathology contained within the DSM V.					1, 2
Demonstrates knowledge of atypical mental or emotional behavior patterns.					1,2,3
Recognizes and interprets the manifestations of emotional and physical states.					1,2,3
*Able to recognize key symptoms and applies appropriate psychiatric nursing interventions with the following top clinical presentations:					1,2,3
(1) Delusional and other psychotic disorders					1, 2 (chap 13), 3 (chap 6)
(2) Bipolar disorders					1, 2 (chap 15), 3 (chap 7)
(3) Depressive disorders					1, 2 (chap 15), 3 (chap 7)
(4) Substance Abuse/dependence disorders					1, 2 (chap 12), 3 (chap 4)
(5) Personality disorders					1, 2 (chap 27), 3 (chap 8)
(6) Anxiety disorders including PTSD					1, 2 (chap 16), 3 (chap 5)
(7) Eating disorders					1, 2 (chap 23), 3 (chap 8)
(8) Delirium, dementia, and other cognitive disorders					1, 2 (chap 10), 3 (chap 9)
Understands eligibility requirements for services in the public/private sectors, referral processes, and community-based funding sources for active, reserve, retired and dependents					14

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	Pre-	Post-			
Patient and Staff Safety	CRITICAL THINKING: Ensuring patient and staff safety through the utilization of non-violent crisis intervention, utilization of least restrictive measures, verbal de-escalation techniques, milieu/environment techniques, pharmacological interventions, and physical interventions				
Demonstrates knowledge of emergency reporting.					2 (chap 34), 10,11,12
*Awareness of and in compliance with the different levels of precautions for patients according to specific unit policies.					10,11,12
*Providing structure and enforcing ward rules and patient conformance to same, to maintain a therapeutic ward milieu.					10,11,12
*Verbalizes and utilizes least restrictive interventions.					3 (chap 2)
*Verbalizes and utilizes verbal de –escalation techniques.					3 (chap 2)
*Completes restraint certification with emphasis on managing assaultive behavior and least restrictive techniques.					10,11,12
Completed refresher training and online command restraint training, if required, with annual updates.					9, 10, 11, 12
Determines the need for and demonstrates competency in the application of care of patient in 4-point restraints according to unit/command specific policies.					10,11,12
*Demonstrates knowledge of and administers medications according to unit and command specific policies and SOP.					10,11,12, 13
*Observes and reports responses to medication to include compliance, expected therapeutic effects, and side effects.					10,11,12, 13
Recognizing Abuse and Neglect	CRITICAL THINKING: Treats patient and family with dignity and respect with emphasis placed on their psychological needs				
Verbalizes role in identifying high risk families or situations					1, 2 (chap 32), 3 (chap 10)

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Competency (Knowledge, Skill, Attitude)	Assessment		Evaluation Method	Comments	References (See Appendix A)
	Pre-	Post-			
Verbalizes signs/symptoms of the following for children, spouses, and/or vulnerable adults					1, 2 (chap 32), 3 (chap 10)
(1) Physical and/or sexual abuse					
(2) Physical and/or medical neglect					
(3) Emotional maltreatment					
Notifies PCM if family is high risk or signs and symptoms of abuse/neglect are present, reported, or observed					1, 2 (chap 32), 3 (chap 10), 10, 11, 12
Psychopharmacology	CRITICAL THINKING: Knowledge of psychotropic medications, their common side effects, and the clinical interventions to manage the side effects.				
*Administers medications according to unit and command specific policies and standard operating procedures.					10, 11, 12
*Observes and reports responses to medication to include compliance, expected therapeutic effects, and side effects.					13
Behavioral Health Interventions	CRITICAL THINKING: Identifies knowledge of and utilizes foundations of psychiatric mental health nursing with communication and patient-nursing skill sets.				
*Demonstrates therapeutic interpersonal relationships, communication, and coping skills with patient and staff.					2 (chap 1), 3 (chap 2)
Participates as an active member of the interdisciplinary team and community process.					3 (chap 2)
Provides individual patient counseling, structured patient teaching, group educational teaching, and family educational teaching.					3 (chap 2)
Provides structure and enforces ward rules and patient conformance to same to maintain therapeutic ward milieu.					10, 11, 12
*Demonstrates appropriate professional boundaries					14
Promotes and facilitates optimal levels of independence in activities.					3 (chap 2)
Interprets behavior of self and others and takes appropriate actions in nursing situations.					3 (chap 2)

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Competency (Knowledge, Skill, Attitude)	Assessment		Evaluation Method	Comments	References (See Appendix A)
	Pre-	Post-			
*Uses the techniques of social learning, reality therapy, supportive therapy, behavior modification, CBT, coping mechanisms, and psychoeducation among others to help client deal with his/her health problems.					2 (chap 6,35), 3 (chap 2, chap 3)
Patient Education	CRITICAL THINKING: Assesses patient education needs based on physical, cultural, religious, educational, language and age-specific criteria. Also assesses the patient's/family's motivation and readiness to learn and adapts teaching based on current needs				
Documents education teaching per specific unit procedures.					9, 10, 11, 12
Familiar with various education materials for patient education					9, 10, 11, 12
Operational Psychiatry	CRITICAL THINKING: Recognizes key symptomology of combat operational stress and PTSD. Knowledge of and utilization of stress reduction techniques, psychoeducation, and behavioral health interventions for the prevention of and reduction of operational stress disorders				
*Identify the clinical symptoms of combat stress, concussion syndromes, and substance use disorders.					8, 2 (chap 16), 3 (chap 5),
*Identify the clinical pathways of treatment of the co-morbid disorders (PTSD, TBI, ETOH) and the appropriate treatment courses.					8, 9, 15
Recognize the clinical symptoms of PTSD, acute vs. delayed, associated comorbid conditions, and populations at risk.					8, 2 (chap 16), 3 (chap 5)
Identify and implement and recommend appropriate treatments for combat stress in theater					8
*Identify, recommend, and/or implement TBI screening tools and treatment modalities					8, 9
*Ensure ability to prioritize crisis intervention care					8, 14
*Provision of immediate physical safety and comfort					8
*Maintain unit integrity through privacy, normalization, and education					8

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Competency (Knowledge, Skill, Attitude)	Assessment		Evaluation Method	Comments	References (See Appendix A)
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*Able to educate alternate providers about the mental health evaluation and interventions until stabilization of care is received					8, 14

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	Pre-	Post-			
COMMAND SPECIFIC	<u>CRITICAL THINKING:</u>				
	<u>CRITICAL THINKING:</u>				
	<u>CRITICAL THINKING:</u>				

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Recommended Result

Result	Total Post Assessment Points (83 items max = 415 points max)	Overall Recommended Result
<input type="checkbox"/>	81 – 125	Novice
<input type="checkbox"/>	126 – 208	Advanced beginner
<input type="checkbox"/>	209 – 291	Competent
<input type="checkbox"/>	292 – 374	Proficient
<input type="checkbox"/>	375 – 415	Expert

All Competency knowledge, skills, and attitudes marked in **bold** with an asterisk (*) are critical for independent professional nursing practice; they must be rated “competent” or above for the nurse to be overall “competent”.

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Psychiatric Mental Health Nursing Core Competencies

Appendix A: References

1. DSM-5 Diagnostic and Statistical Manual of Mental Disorders, 5th Ed. American Psychiatric Association, 2013.
2. Kaplan and Sadock's Synopsis of Psychiatry (11th ed.) 2014
3. Psychiatric Certification Review Guide (2nd Ed). Clare Houseman, 2004
4. Practice Guideline for Treatment of Patients with Major Depressive Disorder. APA, 2007
5. Practice Guideline for Treatment of Patients with Bipolar Disorder. APA, 2007
6. Practice Guideline for Treatment of Patients with Schizophrenia. APA, 2007
7. Practice Guideline for Treatment of Patients with Suicidal Behavior. APA, 2007
8. VA/DOD Clinical Practice Guideline for Management of Post Traumatic Stress. Department of Veterans Affairs, 2010
9. Defense Veterans Brain Injury Clinic (DVBIC) Clinical Management Guidance for Traumatic Brain Injury, 2014
10. Command Specific Instructions
11. Mental Health Standards Manual (unit-specific nursing policies)
12. Nursing Standards Manual (command nursing policies)
13. Nursing Procedure Manual (command nursing procedures)
14. Essential Psychopharmacology: The prescribers guide. Stephen Stahl, 2014
15. The Essentials for Psychiatric Mental Health Nursing. APNA, 2013

Note: references provided are illustrative and may be substituted for locally held alternates. In the absence of a standardized Nursing Procedural Manual, use your command standard such as the following:

- Mosby Nursing Skills [Web Based Procedure Manual by Subscription]. Available at <http://www.mosbynursingskills.com>
- Springhouse Nursing Procedures [Web Based or local cached Procedure Manual by Subscription] Available at <http://LWW.com/LNPS>
- Perry, A. G. & Potter, P.A. (2008) *Clinical Nursing Skills & Techniques*, 7th ed. Elsevier Mosby, St. Louis.
- Springhouse, *Lippincott's Manual of Nursing Practice*, 5th ed. Lippincott Williams & Wilkins

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Psychiatric Mental Health Nursing Core Competencies Summary

The nurse below has demonstrated professional nursing competencies in the comprehensive assessment, planning, implementation and evaluation of care for all age groups to include:

- Communicates appropriate information to staff members in a courteous, professional, and approachable manner. Maintains professional composure at all times, ensures thorough patient care is delivered, and manages conflicts appropriately and in a timely manner.
- Treats patient and family with dignity and respect with emphasis placed on their psychological needs.
- Assesses patient education needs based on physical, cultural, religious, educational, language and age-specific criteria. Also assesses the patient's/family's motivation and readiness to learn and adapts teaching based on current needs.
- Recognizes the normal and abnormal psychosocial issues that impact on families and individuals. Appropriately interacts with individuals of varying cultures and ethnic backgrounds and recognizes the influence on behaviors.
- Addresses patient by name and rank per their preference. Explains procedures in clear and simple terms using correct terminology. Maintains safety and provides reassurance
- Shows respect for patient and family and addresses patient by name and/or rank per their preference. Involves patient and family in all decisions and encourages the patient to participate in procedure as much as possible. Recognizes that older patients may demonstrate a delayed response to questions and allows them time to phrase an answer. Also adjusts explanations to accommodate short-term memory loss. Explains procedures in clear and simple terms using correct terminology. Maintains safety and provides reassurance.
- Recognizes that quality health care for culturally diverse populations require providers to interact in the language requested by patient. Problems may arise when the linguistic skills of the provider do not match the language of the patient. A provider competent to interact in the language of the patient, a translator with cultural knowledge and an appropriate professional background, or a trained paraprofessional from the patient's culture is used as a translator/culture broker to address language barriers. Also strategies for designing and implementing effective written materials reinforce verbal interactions and allow additional language access
- Recognizes key symptoms of top clinical presentations, population based (active duty, combat, post deployment, pre deployment, family members); looking at young adult to older adult and timeline in career. Identifying basic behaviors and relating to the neuropsychology that is occurring, and the behavioral nursing interventions to promote recovery.
- Ensures patient and staff safety through the utilization of non-violent crisis intervention, utilization of least restrictive measures, verbal de-escalation techniques, milieu/environment techniques, pharmacological interventions, and physical interventions.
- Demonstrates knowledge of psychotropic medications, their common side effects, and the clinical interventions to manage the side effects.
- Identifies knowledge of and utilizes foundations of psychiatric mental health nursing with communication and patient-nursing skill sets.
- Recognizes key symptomology of combat operational stress and PTSD. Knowledge of and utilization of stress reduction techniques, psychoeducation, and behavioral health interventions for the prevention of and reduction of operational stress disorders.

Treatment Facility: _____

Date Assessed: _____

Nurse Name: _____

Current Competency level: _____

Preceptor's Printed Name: _____

Signature: _____

I understand that of all the competencies listed, I will be allowed to perform only those for my skill level/scope of practice and only after I have successfully demonstrated competency.

Nurse's Signature: _____

Date: _____

Division Officer's Signature: _____

Date: _____