



WHO Europe Mental Health Nursing Curriculum

WHO European Strategy for Continuing Education for Nurses and
Midwives

2003

Keywords

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Introduction

This Mental Health Nursing curriculum has been prepared for WHO Europe as one of several post-qualifying curricula, requested by some Member States, to assist them in their progress towards implementation of the WHO European Region Continuing Education Strategy for Nurses and Midwives (WHO 2003). The curriculum in its original form underwent an extensive consultation process. This version presents all of the specialist modules included in the original document, but has additional core modules which are present in all of the post-qualifying specialist curricula prepared by WHO in support of their Strategy for Continuing Education for Nurses and Midwives, above referred to. The Mental Health Nursing curriculum document therefore commences with a description of the context for the Continuing Education Strategy.

Context

The WHO European Region Continuing Education Strategy for Nurses and Midwives is set firmly within the context of the Second WHO Ministerial Conference on Nursing and Midwifery in Europe, which addressed the unique roles and contributions of Europe's nurses and midwives in health development and health service delivery (WHO 2001). At that Conference of Ministers of Health of Member States in the European Region, the Munich Declaration "Nurses and Midwives: A Force for Health" (WHO 2000a) was signed, and this key document, together with the WHO European Strategy for Nursing and Midwifery Education (WHO 2000) form the context for the Continuing Education Strategy.

The need for a Continuing Education Strategy

Nurses and midwives together constitute the largest proportion of the health care workforce in all Member States of the WHO European Region, numbering approximately six million at the start of this new century. The service they provide covers 24 hours of every day of the year. It is imperative that they are competent to provide the highest quality of nursing and/or of midwifery care. In order to do this, their initial nursing and midwifery education must be such that the people of their nation can be assured of their competence to practise on entry to their professions of nursing and midwifery, and that the foundation has been laid for them to continue to learn throughout their professional lives. Maintenance and further development of competence is essential to the ongoing provision of high quality nursing and midwifery care. In the rapidly changing health care services of today, with the knowledge explosion and the impact of technology upon health care, many nurses and midwives are increasingly called upon to work in expanded, specialist and/or advanced practice roles. The WHO European Strategy for Continuing Education for nurses and midwives has been developed in order to assist Member States to ensure the continuing competence of their nursing and midwifery workforce. In some cases this will be by developing new knowledge for specialist fields of clinical nursing and midwifery practice, in others by deepening their knowledge of an existing field of practice, and in yet others by gaining new competencies in the field of nursing and/or midwifery education, management or research.

The Continuing Education Strategy does not stand alone. Firstly, it builds upon the firm foundation provided by the WHO European Strategy for Nursing and Midwifery Education (WHO 2000), in which the link between initial and continuing education is clearly stated:

The initial programme of education must prepare nurses and midwives who are not only competent to practise in today's health services, but who value and are committed to maintaining that competence. This they will achieve through continuing to update their knowledge, skills and attitudes, in order that they can continue to meet the changing health priorities and needs of the people of the Member States (WHO 2000).

Secondly, its principles are in harmony with continuing education developments in nursing more generally in Europe and worldwide and with the growth of specialization in nursing. The International Council of Nurses (ICN) considered specialization as implying a deeper level of knowledge and skill in a specific aspect of nursing than would be acquired in initial nursing education (International Council of Nurses 1987 and 1992). The European Commission's Advisory Committee on Nursing (Commission of the European Communities 1994) recommended that specialist educational preparation was necessary in order to prepare qualified nurses to continue to meet the changing and increasingly complex needs of patients for whom advanced technology was enabling new treatment regimes, with resulting advanced practice roles for nurses. ENNO, the European Network of Nursing Organizations (2000) advocates a European Framework for Specialist Nursing Education, in recognition of the reality that the field of nursing knowledge and skills has become too vast and complex for any one individual to master in full. If quality of care is to be ensured, then specialization within nursing is essential, and they cite European Directives 89/48/CEE and 92/51/EEC, as amended in 1997, as the directives which are appropriate for specialist nurses (European Network of Nursing Organizations 2000).

The aim and purpose of the Continuing Education Strategy

The key aim of the strategy is to ensure fitness for purpose of each Member State's nursing and midwifery workforce. Ongoing competence to practise can only be achieved by a commitment to lifelong learning on the part of all nurses and midwives. However, that personal and professional commitment can only be realized if each Member State accepts its obligation to ensure, or set in place plans to ensure that opportunities for continuing education are provided, and that the requirement for nurses and midwives to maintain their competence is regulated under legislation, in order to support safe, up-to-date and evidence-based practice.

The purpose of the Continuing Education Strategy is therefore twofold; it is both visionary and pragmatic. It provides the vision that will help shape the philosophy of continuing education in nursing and in midwifery, often termed continuing professional development, and it outlines and/or confirms some fundamental guiding principles. If followed, these principles should enable Member States to set up, or further develop existing systems of continuing education. In turn, this will enable nurses and midwives to maintain their competence and so feel confident that their knowledge, skills and attitudes are "fit for purpose" in the multiprofessional team in the health care services of which they are an essential part.

Background to the Continuing Education Strategy

Of crucial importance to the implementation of the Continuing Education Strategy is the implementation by Member States of the WHO Education Strategy for initial nursing and midwifery education. Of equal importance is the belief, which underpins both strategies, that education and practice are very closely related. Education and practice must move ahead

together, in mutual respect and partnership, with shared values and goals. This is essential to the provision of an appropriate quality of cost-effective and efficient nursing and midwifery care and of health promotion for all the people of the Member States of the WHO European Region. This progress and partnership must be achieved within the changing structures of health care priorities and provision in the different Member States, many of which are undergoing major political, economic, social and demographic change and are in the midst of health care reforms. Although some of these differences can be significant, the shared values were clearly demonstrated at the Second WHO Ministerial Conference on Nursing and Midwifery in Europe (WHO 2001) when, in The Munich Declaration (WHO 2000a), Ministers of Health stated their belief that:

Nurses and midwives have **key and increasingly important roles** to play in society's efforts to tackle the public health challenges of our time, as well as in ensuring the provision of high quality, accessible, equitable, efficient and sensitive health services which ensure continuity of care and address people's rights and changing needs (WHO 2000a).

In the "Munich Declaration" which was issued by Ministers at the Conference all relevant authorities were urged to "step up their action" in order to strengthen nursing and midwifery by:

- ensuring a nursing and midwifery contribution to decision-making at all levels of **policy** development and implementation;
- addressing the **obstacles**, in particular recruitment policies, gender and status issues, and medical dominance;
- providing financial incentives and opportunities for **career advancement**;
- improving initial and continuing **education** and access to higher nursing and midwifery education;
- creating **opportunities for nurses, midwives and physicians to learn together** at undergraduate and postgraduate levels, to ensure more cooperative and interdisciplinary working in the interests of better patient care;
- supporting research and dissemination of information to develop the **knowledge and evidence base** for practice in nursing and midwifery;
- seeking opportunities to establish and support **family-focused community nursing and midwifery** programmes and services, including, where appropriate, the Family Health Nurse;
- enhancing the roles of nurses and midwives in **public health, health promotion and community development** (WHO 2000a).

Of the above actions, those of direct relevance to the Continuing Education Strategy are the need to improve continuing education and access to higher nursing and midwifery education; to create opportunities for nurses, midwives and physicians to learn together at both undergraduate and postgraduate levels in order to ensure more cooperative and interdisciplinary working in the interests of better patient care; to support research and dissemination of information in order to develop the knowledge and evidence base for practice; to provide financial incentives and opportunities for career advancement; and to ensure nurses and midwives contribute to decision-making at all levels of policy development and implementation.

On a worldwide basis, at the Fifty-fourth World Health Assembly in May 2001, delegates from the 191 countries present stressed the crucial and cost-effective role of nurses and midwives in

reducing mortality, morbidity and disability in populations, in caring for those who are ill and in promoting healthier lifestyles (WHO 2001a).

If nurses and midwives are to fulfil these key roles to their maximum potential, if they are to work effectively in partnership with others in the health care team, then it is imperative that they build systematically upon their initial nursing and midwifery education, continuing their professional education in ways which ensure they maintain competence to meet the needs of the people of their nations for health care.

The Health Care context

As the Continuing Education Strategy was being prepared, all governments across Europe continued to face a wide range of complex health problems. Although in each Member State the existence and the severity of these problems varies, they include environmental pollution; the increasing gap between the rich and the poor; unacceptable levels of maternal and child morbidity and mortality; and a resurgence of diseases thought to have been conquered such as, for example, tuberculosis, cholera, typhoid fever and malaria. There are increases in the level of chronic illness, including cancer, cardiovascular diseases and mental health disorders; in lifestyle-related problems such as unhealthy diet, lack of exercise, smoking, alcohol and substance misuse and in sexually transmitted diseases. In some parts of the Region, wars and ethnic conflict continue to cause intense suffering, increasing numbers of refugees and homeless people and disruption to society's essential infrastructures. There are also the major challenges for health care systems which are inherent in the changing demography, i.e. the steady increase in the proportion of elderly people in the population which, in some Member States, is compounded by a gradual decrease in the proportion of those who normally contribute to the gross domestic product through working.

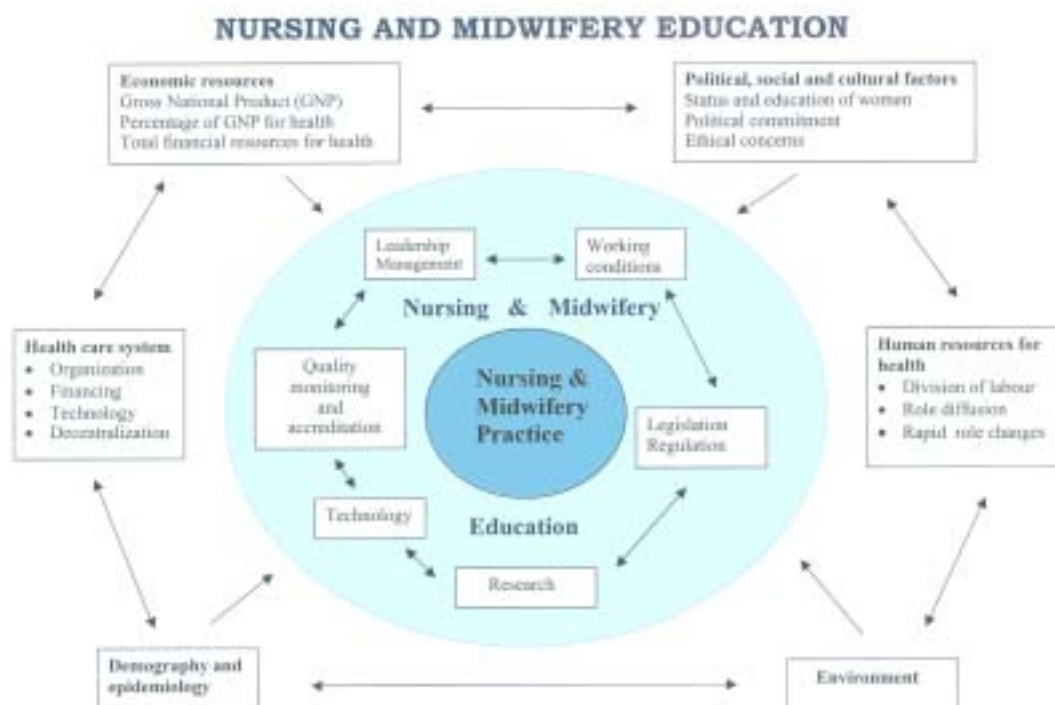
The future is likely to see continuing reforms of the health sector. These include a greater involvement of citizens and the community in decision-making about care; more people cared for at home and therefore a growing demand for community-based health services; a steady increase in the availability of new treatments and therapies; increasing costs of providing care; and more and more ethical challenges. However, whatever the reforms and changes, care which is centred upon the individual will remain the starting point of the health care organization and of the work of all nurses and midwives

Continuing advances in practice, in the evidence base and in the quality of care required make it imperative that the capabilities of the nursing and midwifery workforce are regularly updated, and that there is a commitment by Member States to ensure provision of appropriate continuing education. Effective implementation of the role of the nurse and of the midwife as outlined in the Strategy for Nursing and Midwifery Education is the essential first step. Effective implementation, or setting in place of plans to achieve implementation of the Strategy for Continuing Education is also essential if the workforce is to be prepared for the necessary specialist and advanced practice roles which the developments outlined above demand. Member States will be required to regularly evaluate and, if necessary, update their existing continuing education provision, to keep pace with the priority of maintaining a nursing and midwifery workforce which is fit for purpose, and which remains fit for purpose.

Just as "health care does not take place in isolation from political, economic and cultural realities" (WHO 1996), so nursing and midwifery education and practice do not take place in isolation from the political, social, economic, environmental and cultural realities of the Member

States; neither must they be seen in isolation from the various stages of health care reform and the dynamic nature, or otherwise, of progress. Figure 1 depicts that complexity.

Figure 1. The dynamic context of nursing and midwifery education
Adapted from WHO 1996



Likewise, nurses and midwives do not practise in isolation from their colleagues in the other health care professions. Although each profession contributes unique knowledge and skills to health promotion, the care of patients and to the health care system as a whole, there is a need for much more multidisciplinary and interdisciplinary work, in a spirit of recognition and respect for each other's authority, responsibility, ability and unique contribution. Thus, nurses and midwives must continue to build upon their initial professional education so as to continue to take their full part as members of the multiprofessional health care team, sharing both in decision-making and, when appropriate, in taking responsibility for leadership of the team and for the outcomes of the work of the team.

The Member States of the WHO European Region need well prepared, up-to-date, competent nurses and midwives, who participate in lifelong learning and who are able to work confidently, maintaining professional standards of care as the sound basis for multiprofessional collaboration and partnership with patients, healthy individuals, families and communities.

The Mental Health Nursing Curriculum

All Member States are reminded that this is a sample curriculum. It should be used as guidance and be adapted as necessary to meet the Member State's specific priorities and needs for Mental Health Nursing.

1. Mental Health Nursing

Mental health nursing is concerned with the prevention, treatment and nursing care of people of all ages who are suffering from mental illness and its effects. Despite steady and continuing improvements in health care and living conditions in many countries of the world, extended life expectancy and improved economic growth have brought an increase in the numbers of people who are suffering from mental illness (WHO 1998). This now represents a heavy burden on health care resources worldwide, making it imperative that countries develop explicit policies and implementation strategies to tackle this challenge. Such policies need to include action to improve understanding about mental illness and to develop effective services, in order to reduce morbidity, disability and mortality arising from mental illness (WHO 1998a). An important element in these services is the provision of appropriately educated nursing staff. Such nurses require a well-developed knowledge base, along with specialist skills in both the technological and caring dimensions of mental health nursing and must be equipped with the expertise to make sound clinical judgements both autonomously and as full members of the multidisciplinary health care team.

1.1 Definition of Mental Health Nursing and the Mental Health Nurse

The mental health nurse has successfully completed specialist post-qualification education in mental health nursing which builds upon initial generalist nursing education. This enables the nurse, in addition to her/his generalist role, to work in a specialist role with individuals and families experiencing and/or affected by mental illness, in whatever setting they may be, i.e. hospitals or the community. The mental health nurse seeks to enable the individual and/or family to adapt to their altered health state, especially those who have an enduring mental health illness, and helps them to learn how to cope with a range of problems, such as altered perceptions and altered beliefs.

2. The Mental Health Nursing course

2.1 Aims

The aims of the course and of the curriculum are to:

- provide a challenging educational experience which will develop the student's intellectual and imaginative abilities in order to facilitate the development of independent judgement and problem-solving skills;

- provide an educational framework that will encourage the student to develop her/his skills of analysis and critical awareness in order to stimulate an enquiring and creative approach to both the theory and practice of mental health nursing;
- develop the student's ability to respond to changing needs in mental health care in an analytical way;
- develop the student's critical awareness of relevant research findings and facilitate integration of these findings into mental health nursing practice;
- develop her/his knowledge and understanding of health policies and systems relevant to the development and provision of mental health services of the country and their impact for the population;
- provide leadership which is appropriate in the context of mental health nursing and which is underpinned by knowledge and understanding of relevant nursing and social theories and conceptual frameworks;
- contribute to the evaluation of the mental health nursing services being provided to the population of the country.

2.2 Structure, length and mode of delivery

The curriculum is structured in modules or units of study, several of which combine both theory and practice elements. The length of the course must be sufficient to enable the student, on successful completion, to achieve the specified competencies or learning outcomes, the academic award and the specialist nurse qualification relevant to the course, and is normally of 40 weeks. Each week of the course is calculated as comprising 30 hours, which gives a total of 1200 hours. The preferred mode of delivery is full-time. Flexibility to deliver the course in a part-time mode or by distance/on-line learning should be open to negotiation, depending upon each Member State's resources.

The course is based on the philosophy of the mental health nurse as a reflective, lifelong learner (Figure 2, Section 2.6). It emphasizes the importance of the integration of theory and practice, which should be, wherever possible, evidence-based.

2.3 Entry requirements

Course participants will be nurses who have successfully completed an initial nursing education programme, as described in the WHO European Strategy for Nursing and Midwifery Education entitled "Nurses and midwives for health: A WHO European strategy for nursing and midwifery education" (WHO 2000) or its equivalent. They should have a minimum of two years post-qualifying experience.

2.4 Competencies or learning outcomes

The competencies or learning outcomes of the course have been developed to demonstrate achievement of both theoretical and clinical learning in the following areas:

- Specialist clinical practice
- Care and programme management

- Clinical practice leadership
- Clinical practice development.

These are detailed in the Continuing Education Strategy (WHO 2003) and are based upon the United Kingdom Central Council for Nursing, Midwifery and Health Visiting (UKCC 1998) standards for specialist education and practice, as adapted to mental health nursing. Underpinning knowledge will be delivered in the theoretical component of the course and the students will be expected to integrate and apply this knowledge in mental health nursing practice.

On successful completion of the course, the student will be able to:

- provide purposeful patient-centred (including carer involvement as appropriate) evidence-based assessment, clinical measurement, care plan formulation, implementation and evaluation in a variety of settings;
- provide care which is empathic, non-discriminatory and culturally sensitive;
- work collaboratively with others involved in mental health care, e.g. patients, families and/or carers, and members of the multidisciplinary team, within the appropriate ethical, legal, professional and policy frameworks;
- provide care, whenever possible, in partnership with patients and their families and/or carers, and seek to empower the patient;
- seek out and evaluate available evidence and, where appropriate, use it to shape nursing care;
- accept responsibility and accountability for the appropriate application of legislation, policy, ethics, and professional codes of conduct relevant to mental health practice;
- demonstrate effective multidisciplinary, interagency and intersectoral working;
- demonstrate effective use of therapeutic communication skills.

2.5 Curriculum Content

The curriculum will be delivered in a series of nine modules. In order to complete the course, the student must successfully complete all modules. While all of the modules offer the knowledge needed to develop a reflective and competent mental health nurse, modules one, three, five and seven specifically focus on generic transferable knowledge and skills which are applicable for all nurses working in a specialist role. These modules form the “core curriculum” and feature as part of all the other WHO European Specialist Nursing curricula.

2.6 Teaching/learning and assessment strategies

These strategies will stimulate learning at all six levels of cognitive skills, as described by Bloom (1956) in his seminal text. The teaching/learning and assessment strategies employed in the course should be congruent with the principles of andragogy, the rationale for which is that teachers and students will bring to the course existing competencies – relevant knowledge, skills and attitudes – to contribute to a mutually educative process. Overall, emphasis will be placed on interactive approaches. Active student participation, facilitated by nurse teachers (who have a role both in the university setting and in clinical practice) and by mentors (in practice/clinical areas) is considered to be the optimum way of achieving learning outcomes. There will continue

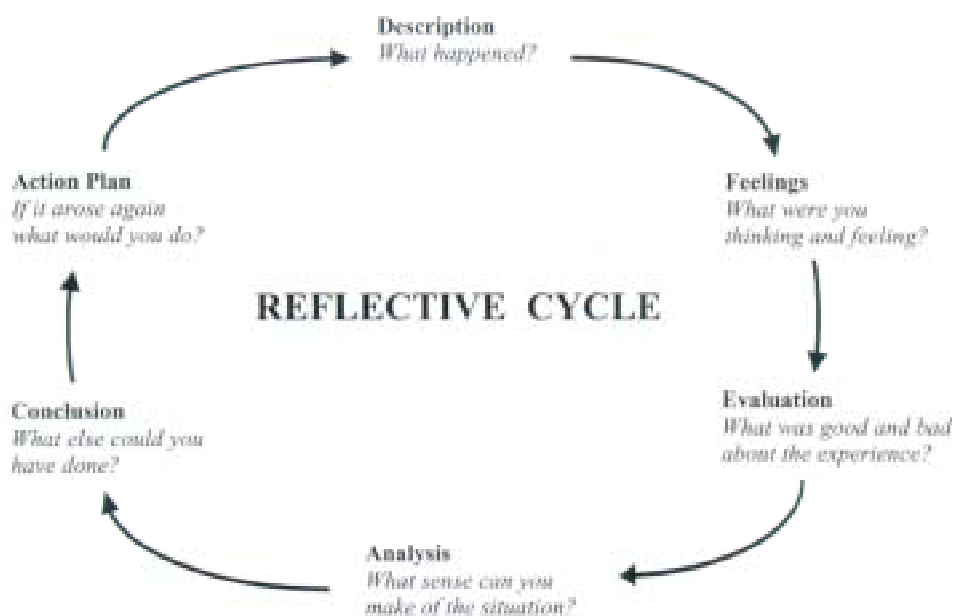
to be a place for the didactic lecture, but it is envisaged that this will constitute a relatively minor proportion of the curriculum. The latest educational technology available in the particular Member State, including where feasible on-line or E-learning and video-conferencing, should be used to enhance teaching and learning.

A key objective will be the use of “reflection” as a means of learning from and developing expert practice (Figure 2). This will require the student to maintain a reflective diary/journal for the duration of the course. Case studies, critical incidents and care scenarios will form the focus for a reflective, problem-solving approach to learning.

Assessment methods should be supportive of the adult learning approach, should promote the integration of theory and practice, be research/evidence based and include a variety of methods. Assessment will enable the measurement of the student’s progress and achievement in relation to the prescribed competencies/learning outcomes of the mental health nursing course.

The success of the teaching/learning and assessment strategies will depend critically on the availability and deployment of appropriately qualified and prepared nurse educators who are committed to the philosophy of adult learning approaches. In addition, such interactive and problem-solving approaches must be supported by an environment which is conducive to learning. This must include attention to the provision of adequate space, library facilities and other technological resources, all of which should be borne in mind at the planning stage.

Figure 2. The Reflective Cycle
Gibbs 1988



2.7 Supervision of practice

Clinical practice should be undertaken under the auspices of a suitably experienced mental health nurse, who will ensure that the students gain the relevant experience during the period of clinical practice. The clinical practice assessment should be designed to demonstrate achievement of the clinical learning outcomes.

Supervisors are responsible for guiding students through clinical practice periods as well as making an assessment of the student's competence to practise by the end of the clinical experience. The course leader should retain responsibility for the student throughout this period and should liaise with the student and supervisor as appropriate.

2.8 Optimum student intake and teacher/student ratio

As interactive adult teaching/learning and assessment strategies will be used throughout the course, which will include the requirement for clinical supervision, the optimum intake per course is likely to be 30 students. The ideal teacher-student ratio should not exceed 1:10, i.e. one teacher per ten students.

2.9 Accreditation with ECTS points

Each module is assigned credit points using the European Credit Transfer System (ECTS). The ECTS system has been chosen because the European Community Directives guide nursing and midwifery education for all European Union (EU) countries and those accession countries which become members of EU (European Commission 1989). Credits are "a numerical value allocated to course units (modules) to describe the student workload required to complete them" (European Commission 1995). In other words the number of points does not reflect only the direct contact hours, e.g. while the student is attending a lecture, seminar, practical skills demonstration or tutorial and is in direct contact with the teacher, but also includes the number of hours which the student is expected to devote to independent study or practising of skills. Credit points take into account the learning in both the university, i.e. the theory component of a module, and in practice placements. The total number of ECTS credits for an academic year is 60. Their apportionment per module reflects the length of that module, calculated in weeks and number of hours. A week is taken as comprising 30 hours, and 20 hours equates to one ECTS credit point. Thus, a two-week, 60-hour module earns three credit points and a 16-week, 480-hour module earns 24 credit points. The overall length of the course is 40 weeks or 1200 hours which equate to 60 ECTS credit points. Further information on this system and its application to nursing education can be found in Section 8 of the Guidelines prepared to assist Member States with implementation of the initial Education Strategy (WHO 2001b).

2.10 Quality control and evaluation

External audit will be essential to evaluate the quality and standards of the course, as evidenced by the curriculum design, the teaching/learning strategies, the marking of student assessments and the results in both academic work and in practice learning outcomes. Curriculum evaluation should be carried out by teachers, students and also by those providing the service, i.e. mental health nursing managers and existing mental health nurses.

3. Teachers and mentors

The types of teaching/learning and assessment strategies considered essential for this curriculum are challenging for teachers, mentors and students. It is therefore important, if they are to be effectively delivered, that only qualified nurse teachers and mentors are involved. The setting up

of structures to ensure peer group support and close liaison between teachers and mentors will be particularly important in the early years, as there may be no role models either in education or in practice.

Teachers of the mental health nursing course must:

- hold a degree at an academic level equivalent to the requirements for university or equivalent institute teachers in the country;
- hold a teaching qualification in order to apply appropriately the full range of research-based teaching, learning and assessment strategies within the theory and clinical components of the curriculum;
- hold the qualification to which the programme leads, or be able to provide evidence of updating of knowledge, skills and attitudes relevant to mental health nursing;
- teach and/or work within mental health nursing;
- take responsibility for the clinical supervision of the nurse on practice placement, and share this responsibility with their clinical mentor.

The mental health nurse who is acting as mentor must be experienced in mental health nursing and must hold the appropriate academic qualification.

4. Location of the course

The theoretical component of the course should be delivered in a university or equivalent institute. Practice elements will take place in hospitals, community and/or home settings or other places where mentally ill patients are being cared for.

5. Qualification on successful completion of the course

On successful completion of the curriculum the nurse will receive the specialist qualification and postgraduate academic award of “Mental Health Nurse”. The specialist qualification will be formally recorded in accordance with the country’s legislative and regulatory system for nursing and nurses.

6. Course content – Modules One to Nine

An overview of the curriculum, and descriptions of the modules which comprise the curriculum are given in the following pages. It should be noted that a number of concepts and subjects introduced in one module are revisited and further developed in another. As knowledge and experience are gained, students will be able to view these concepts and subjects from different aspects and build upon their earlier learning and experience.

MENTAL HEALTH NURSING CURRICULUM

OVERVIEW

Module One

INTRODUCTORY
MODULE:
Concepts, Practice and Theory

2 weeks – 60 hours
ECTS credits – 3

Module Two

MENTAL HEALTH
NURSING I
Understanding Mental Health and
Mental Illness

4 weeks – 120 hours
ECTS credits – 6

Module Three

INFORMATION
MANAGEMENT AND
RESEARCH

2 weeks – 60 hours
ECTS credits – 3

Module Four

MENTAL HEALTH
NURSING II
Assessment and Intervention

8 weeks – 240 hours
ECTS points – 12

Module Five

DECISION-MAKING

2 weeks – 60 hours
ECTS credits – 3

Module Six

MENTAL HEALTH
NURSING III
Management and Collaborative
Practice

8 weeks – 240 hours
ECTS credits – 12

Module Seven

LEADERSHIP AND
MANAGING RESOURCES

2 weeks – 60 hours
ECTS credits – 3

Module Eight

MENTAL HEALTH NURSING IV
Policy and Legislation

6 weeks – 180 hours
ECTS credits – 9

Module Nine

MENTAL HEALTH
NURSING V
Specialist Module

6 weeks – 180 hours
ECTS credits – 9

**WHO Regional Office for Europe
Mental Health Nursing Curriculum**

MODULE ONE

Title: Introductory Module
 Concepts, Practice and Theory

Duration: 2 weeks – 60 hours

ECTS Credit points: 3

Module Content Summary

This module introduces the student to the key concepts which have shaped the mental health nursing curriculum. The approach will encourage the student to build upon, integrate and expand their existing knowledge, skills and experience using the new knowledge and experiences which will be gained as a result of studying the curriculum. The close relationship between the practice of nursing and the theoretical and research knowledge related to nursing will be explored using examples from mental health nursing. The teaching and learning strategies will encourage the nurse to get to know her/his fellow students and to share professional knowledge and experiences. The value of debate about the relevance of the theoretical content to mental health nursing practice will be explored.

This module will take place in the university setting or equivalent institute setting.

Syllabus

The Mental Health Nurse
Typical care scenarios
The competency-based and research-based curriculum
Concept of competence
Androgogy – appropriate teaching and learning strategies for students and for adult patients
Facilitation of learning
Problem-solving
Teamwork
Debating as a form of constructive challenge
Analytical and critical thinking and its relationship to the practice of mental health nursing
Continuing professional development/lifelong learning

Learning Outcomes

On completion of this module, the student will be able to demonstrate:

- understanding of how previous learning and experience can inform and enrich the new knowledge and skills necessary for the practice of mental health nursing;
 - knowledge of a variety of teaching and learning strategies which may be appropriate to the education of nurses and of patients and their families/carers;
 - an understanding of competence and its relevance in nursing practice and in the team approach to care;
 - an analytic and critical approach to discussion and constructive debate about nursing issues;
 - a commitment to lifelong learning and continuing professional development.
-

Reading List

WHO publications
National and international literature covering the syllabus
Where accessible – on-line and distance learning materials

Teaching/learning Strategies

Lecture (key concepts)	Case Studies
Reflective exercises	Seminars
Group work	Debate and discussion

Assessment Methods

Dates on which assignments are due:

Format of assignment:

Examination – multiple choice and short answer questions – 50% of whole

Short essay – approximately 600 words – 50% of whole

The student will choose a concept from those listed in the syllabus and discuss the relevance of the chosen concept to her personal understanding, at this early stage of the course, of what will be expected of her as a qualified Mental Health Nurse.

Examination: Mark awarded%

Essay: Mark awarded%

Aggregate mark for module (out of 100%)

**WHO Regional Office for Europe
Mental Health Nursing Curriculum**

MODULE TWO

Title: Mental Health Nursing I
Understanding Mental Health and Mental Illness

Duration: 4 weeks – 120 hours

ECTS Credit Points: 6

Module Content Summary

The aim of this module is to build upon, expand and further develop the knowledge, skills and attitudes acquired in the student's initial education on the nursing care of mentally ill people. There will be a focus on the biological, psychological, sociodemographic and spiritual influences on the mental health status of populations and the implications this has for effective mental health nursing practice. The epidemiology and causation of mental illness will be studied and mental health and mental illness will be analysed within the wider context of health care. An understanding of mental ill health from the perspective of the patient will be gained.

This module will take place in the university or equivalent institute setting.

Syllabus

Concepts of mental health:

Defining mental health and mental illness

Epidemiology – incidence, prevalence, morbidity, disability and mortality

Mental health status of populations

Sociodemographic influences and indicators of mental health and mental illness

Biological, psychological and spiritual influences on mental health and mental illness

Mental disorders – clinical features of common mental illnesses

Mental health and public health

Inequalities in health

Government and voluntary sector mental health campaigns

Patient and carer perspectives of mental illness:

The “lived experience” of mental illness and its consequences

Groups involved in specialist mental health services

Public, voluntary, private and self-help group provision

Cultural sensitivities in mental health issues and care

Competencies or Learning Outcomes

On completion of this module, the student will be able to:

- critically review current strategies and literature dealing with public health issues that have an effect on mental health;
- describe and discuss the epidemiology of mental illness within the population;
- demonstrate understanding of the wide range of factors which may influence mental health and mental illness;
- demonstrate understanding of mental illness from the patient's and the family's/carer's perspective;
- recognize the presenting features of common mental illnesses;
- describe the effects of service access, social exclusion, stigma and discrimination;
- critically evaluate different systems of patient/family/carer support available within the public, private and voluntary sectors;
- promote positive attitudes and challenge negative discriminatory attitudes towards patients of mental health services and their families and/or carers;
- explain and support the need for effective information systems and infrastructures to enable services to be patient focussed and designed to meet their needs for care.

Reading List

WHO publications

National and international literature covering the syllabus

Where accessible – On-line and distance learning materials

Teaching/learning Strategies

Lectures

Student-led seminars

Discussions – multidisciplinary and where feasible, including patients

Tutorials

Problem-based scenarios

Assessment Methods

Date assignment due: two weeks after end of module

Format of assignments:

Examination – multiple choice and short answer questions – 50% of whole

Essay – 1000 to 1500 words – The student will choose a subject from the syllabus and discuss its relevance to their understanding, at this early stage of the course, of what will be expected of them as a qualified Mental Health Nurse – 50% of whole.

Examination: Mark awarded%

Essay: Mark awarded%

Aggregate mark for module (out of 100%)%

**WHO Regional Office for Europe
Mental Health Nursing Curriculum**

MODULE THREE

Title: Information Management and Research

Duration: 2 weeks – 60 hours

ECTS Credit Points: 3

Module Content Summary

This module will enable students to extend their knowledge in relation to applied aspects of information management and research. It will develop their understanding of approaches to information management and the research process, ethical issues in relation to obtaining informed consent from participants in research, confidentiality and security of data and the communication of results of relevance to practice. The research component will have a particular focus on studies and evidence which contribute to knowledge within the field of mental health nursing.

80% of this module will be based in the university or equivalent institute setting.
20% of this module will be practice-based.

Syllabus

Sources/types of information, knowledge and evidence
Analytical and critical thinking, critical appraisal and constructive questioning of practice
The research process, research design and methods
Basic statistics – interpreting demographic and statistical data, summarising data and drawing conclusions
Identifying and measuring outcomes
Information management and information technology
Documentation – structure and standardization
National and local information systems
Report writing
Core/minimum data sets
Ethical issues, confidentiality and security of data/records

Learning outcomes

On completion of this module, the student will be able to demonstrate the ability effectively to:

- analyse different sources of information and apply as appropriate to practice;
 - seek out and interpret relevant statistical data and research of relevance to mental health nursing;
 - set measurable outcomes for nursing practice;
 - appraise and appropriately utilize developments in information technology;
 - maintain accurate, clear and timely records;
 - maintain confidentiality of data;
 - utilize knowledge and information gained through the practice of nursing in an ethical manner.
-

Reading List

WHO publications

National and international literature covering the syllabus

Where accessible – On-line and distance learning materials

Teaching/learning Strategies

Lectures

Group work

Student-led seminars

Discussions

Case study presentations

Mentor support

Assessment methods

Date on which assignment is due:

Format of assignment:

Essay – either a critical review of a research study relevant to mental health nursing or an analysis and critique of epidemiological data related to the incidence of national mental health priorities (100% of whole).

Mark awarded.....%

**WHO Regional Office for Europe
Mental Health Nursing Curriculum**

MODULE FOUR

Title: Mental Health Nursing II
Assessment and Intervention

Duration: 8 weeks – 240 hours

ECTS Credit Points: 12

Module Content Summary

The aim of this module is to enable the student to gain more in-depth knowledge and understanding of common mental health problems and to apply this in the clinical areas, demonstrating positive attitudes to patients and their families and involving them wherever possible in decisions about care. The student will further develop therapeutic communication skills for example in interviewing, engagement, assessment, care plan formulation and evaluation, and the management of emotion.

75% of this module will take place in a university or equivalent institute setting.
25% will take place in practice settings.

Syllabus

Concepts of mental health:

Attitudes – personal and public to people with mental ill health

Societal and media representations

Stigma

Patient's and their families'/carers' views of the effects of mental ill health

Promotion of mental health:

Key concepts and models

Factors enhancing and/or detrimental to mental health

Services and support available formally and informally in the public, private and voluntary sectors

Interviewing and relationship skills

Verbal and nonverbal skills

Planning, introduction, orientation, rapport, engagement, flexibility, summarizing and closure

Information gathering in a systematic way.

Clinical assessment and measurement

Purpose of measurement:

Process and outcome measures

Standard measurement
Using and interpreting measures
Reliability and validity issues
Assessment skills – including risk assessment with regard to absconding, wandering, falling, self-harm, harm to others and self-neglect
Risk management strategies
Models of emotion and handling emotion
 Autonomic, behavioural and cognitive aspects of emotion
 Common responses to a range of emotions, e.g. fear, anger, sadness
 Evidence based interventions for managing emotion
Care plan formulation:
 Information handling and the drawing together of assessment information
 Making collaborative meaningful sense of the assessment information
 Tentative hypothesis making
Clinical decision-making – patient's expressed need, risk assessment, service options, and likelihood of advice being followed
Collaborative care planning – rationales of care planning and involvement of patients, families and carers:
 Elements of comprehensive care planning
Evidence based interventions:
 Psychological, biological and complementary interventions
Nondiscriminatory, culturally sensitive practice:
 Specific concerns and needs related to gender, ethnicity and vulnerable groups
Adverse factors associated with stigma and social exclusion.
Patient centred care
Use of models and theories supporting the patient at the centre of care delivery
Human and patient rights
Protection of the vulnerable patient and of rights to service access for patients, families and carers.
Developing a reflective approach to individual casework

Competencies or Learning Outcomes

On completion of this module, the student will be able to:

- critically analyse and evaluate theoretical perspectives on mental health;
- identify the purpose of clinical assessment and measurement, including standardized measures, highlighting advantages and disadvantages;
- practise, identify, utilize and interpret clinical outcome measures;
- differentiate between outcome and process measures;
- utilize and interpret process measures;
- demonstrate ability to use evidence from a range of sources in order to produce a comprehensive assessment of needs, including risk assessment;
- identify and explain the rationales for patient-centred open and semi-structured interviewing and the areas covered in the assessment;

- demonstrate skill in patient-centred interviewing;
- demonstrate effective observation skills on which to base assessment of patient's mental state and of risk;
- critically review models of emotion and identify evidence-based interventions to manage emotion;
- demonstrate the use of appropriate strategies in managing emotion;
- identify the purpose and elements of care plan formulation;
- identify and demonstrate effective use of information to develop care plans, inclusive of patient-centred goals;
- identify rationales and specific engagement strategies for involving patients, families and/or carers in care planning;
- utilize strategies to involve families and/or carers in the care of patients;
- identify and explain a range of evidence-based interventions, including psychological, biological and complementary;
- complete nursing documentation accurately and punctually;
- discuss relevant areas of mental health promotion and recognize factors which are enhancing/detrimental to mental health promotion and relevant public health issues;
- demonstrate understanding of the roles of those involved in multidisciplinary, interagency and intersectoral working;
- demonstrate comprehensive knowledge and understanding of the variety of provision of formal and informal mental health services in the public, private and voluntary sectors;
- challenge stigma and negative or discriminatory attitudes towards mental ill health and to the patients of mental health services;
- demonstrate the importance of purposeful patient involvement and participation in all aspects of mental health care and treatment;
- demonstrate effective therapeutic relationships which are used for the benefit of patients, families and/or carers;
- demonstrate reflective practice in caring for patients with mental illness.

Reading List

WHO publications

National and international literature covering the syllabus

Where accessible – On-line and distance learning materials

Teaching/learning Strategies

Problem-based scenarios	Observation of student's mentor
Clinical supervision	Role-play
Student-led seminars	Clinical skills workshops and demonstrations
Multidisciplinary discussion groups, where possible involving patients	

Assessment Methods

Dates on which assignments are due:

Format of assignments:

Essay – 2000 to 2500 words –

Either – Promoting positive attitudes towards mental illness – the role of the media, society and the family/carers

Or – Nature and nurture – their influence on the maintenance of mental health and/or on its breakdown – 60% of whole

Clinical Assessment demonstrating achievement of competencies/learning outcomes of the module – 40% of whole

Mark awarded:%

Mark awarded:%

Aggregate mark for module (out of 100%)%

**WHO Regional Office for Europe
Mental Health Nursing Curriculum**

MODULE FIVE

Title: Decision-making

Duration: 2 weeks – 60 hours

ECTS Credit Points: 3

Module Content Summary

This module will enable students to extend their knowledge of decision-making processes, typology and skills in preparation for their future role as mental health nurses.

66% of this module will be based in the university or equivalent institute setting.
34% of this module will be practice-based.

Syllabus

Decision-making – theories, processes, skills
Diagnostic reasoning, therapeutic, clinical
Concepts of accountability, responsibility and autonomy in decision-making
Critical thinking in practice
Ethical issues and involvement of the patient and carer in decision-making
Strategic decision-making
Prioritizing care
Rationing care
Legal aspects in relation to practice

Learning outcomes

On completion of this module, the student will be able to:

- demonstrate an understanding of the complexities of clinical decision-making;
 - analyse and describe examples of decision-making in relation to her/his care of mentally ill patients;
 - describe the exercise of accountability and responsibility in relation to her/his care of mentally ill patients;
 - differentiate between strategic and clinical/ethical decision-making in nursing;
 - discuss the rationale for involving patients, families and/or carers in decision-making about their care, ways of doing so and the implications of such involvement;
 - state the key principles which guide the rationing and the prioritization of care in the student's country;
 - outline the law in relation to nursing in her/his country and the implications for mental health nursing.
-

Reading List

WHO publications
National and international literature covering the syllabus
Where accessible – On-line and distance learning materials

Teaching/learning Strategies

Lectures	Discussions
Group work	Case study presentations
Student-led seminars	Mentor support

Assessment methods

Date on which assignment is due:

Format of assignment:

Examination – multiple choice and short answer questions – 100% of whole

Mark awarded.....%

**WHO Regional Office for Europe
Mental Health Nursing Curriculum**

MODULE SIX

Title: Mental Health Nursing III
Management and Collaborative Practice

Duration: 8 weeks – 240 hours

ECTS Credit Points: 12

Module Content Summary

The aim of this module is to expand and further develop the knowledge, attitudes and skills acquired in the previous modules. There will be a continued emphasis on the application of skills of interviewing (including engagement), assessment, clinical measurement, care plan formulation and delivery of evidence-based interventions in a nondiscriminatory and culturally sensitive manner with patients using mental health services. Students will take part in multidisciplinary, interagency and intersectoral work and develop skills in effective team working in hospital and community settings.

Relevant legislation and policy will be addressed throughout the module.

25% of this module will take place in the university of equivalent institute setting.
75% will take place in practice settings.

Syllabus

Multidisciplinary, interagency and intersectoral working
Different service groupings involved in mental health services – public, private, voluntary sectors, patient, carer and self-help groups
Hospital inpatient and community services:
Specialist services, e.g. culture specific, children, women and mental health, homelessness teams
Effective team working and liaison:
Group processes
Achieving consensus
Promoting group needs and solutions
Motivation
Dealing with conflict
Skill mix
Assessment and clinical measurement skills – engaging patients in a variety of settings
Relationship building

Interviewing and risk assessment:

The range of risks to self and to others

Psychiatric emergencies:

Aggression

Self-harm

Suicide attempts

Causes, prevention and evidence-based interventions and management of patients who have attempted suicide

Personal safety issues

Collaborative care planning, care plan formulation and clinical decision-making

Evaluation of involvement of patients, families and/or carers in care planning and interventions

Developing care plans in the multidisciplinary, interagency and intersectoral contexts

Evidence-based interventions for mental health nursing care:

Medication management

Psychosocial interventions e.g. coping skills enhancement, engagement strategies, problem-solving; behavioural and cognitive interventions, e.g. activity scheduling, social skills training; cognitive behavioural therapy techniques, interventions to reduce self-harm

Interventions to reduce self-harm and harm to others

Family interventions and relapse prevention.

Evaluation of planned care and interventions in the context of multidisciplinary working

Use of a systematic approach, including the use of structured tools where appropriate

Clinical outcome and process measures, involving patients, families and/or carers

Adapting interventions on the basis of evaluation

Nondiscriminatory, culturally sensitive practice – issues related to gender, age, ethnicity and sexuality – specific concerns and needs

Documentation, record-keeping

Role in management of care

Communicating and liaising with other agencies

Competencies or Learning Outcomes

On completion of the module, the student will be able to:

- analyse and critically examine legislation, policy, reports, and ethics relevant to mental health practice;
- analyse and critically review literature on social exclusion, e.g. relevant to employment, housing, political and legal representation, health, crime and leisure;
- analyse and critically review literature regarding the outcomes of multidisciplinary, interagency and intersectoral working;
- identify, critically analyse and apply in practice a range of standardized measures used in mental health services;
- synthesize and apply knowledge of patient-centred assessment, including risk assessment, and integrate the use of collaborative care plan formulation and decision-making, in practice;
- formulate a risk management strategy appropriate to risks identified;

- identify, critically analyse and apply effective interventions, management and prevention of psychiatric emergencies;
- identify, critically analyse and apply evidence-based interventions in practice;
- identify and critically analyse the growing knowledge base about the outcomes of involving patients, families and/or carers in engagement and support strategies;
- analyse, critically review and apply strategies for modification of planned care, including nondiscriminatory and culturally sensitive practice;
- undertake a comprehensive assessment of actual and potential risk factors in the clinical environment
- assist in providing a safe environment for patients, visitors and staff by taking appropriate steps to manage risk;
- assess the role and contribution of the mental health nurse in care management in multidisciplinary, interagency and intersectoral mental health services;
- accurately and punctually complete nursing documentation and shared records;
- promote positive attitudes and challenge negative discriminatory attitudes towards patients of mental health services.

Reading List

WHO publications

National and international literature covering the syllabus

Where accessible – On-line and distance learning materials

Teaching/learning Strategies

Problem-based scenarios

Role-play

Student-led seminars

Multidisciplinary discussion groups,
where possible involving patients

Clinical supervision

Tutorials

Clinical skills workshops and demonstrations

Assessment Methods

Dates on which assignments are due:

Format of assignments:

Preparation of a clinical learning portfolio demonstrating achievement of selected competencies/learning outcomes relevant to the place of the student's clinical experience – 50% of whole

Clinical Assessment demonstrating achievement of competencies/learning outcomes of the module – 50% of whole

Mark awarded:%

Mark awarded:%

Aggregate mark for module (out of 100)%

**WHO Regional Office for Europe
Mental Health Nursing Curriculum**

MODULE SEVEN

Title: Leadership and Managing Resources

Duration: 2 weeks – 60 hours

ECTS Credit Points: 3

Module Content Summary

This module will enable students to explore aspects of leadership and of management which have relevance in mental health nursing practice. Key principles of effective multidisciplinary team working will be analysed and applied to mental health nursing practice, and students will gain an understanding of the complex nature of organizational change.

50% of this module will be based in the university or equivalent institute setting.
50% of this module will be practice-based.

Syllabus

The concept of leadership – theories, processes and skills:

Management – theories and processes

Managing human resources

The patient and her/his family as a resource:

Care management

Organization and management of the mental health nursing service

Delegation of duties and responsibilities

Budgetary control

Time management

Management of change

Working as a multidisciplinary team member

Working with statutory, voluntary and private agencies involved in mental health care service provision

Standard setting and quality assurance systems

Learning outcomes

On completion of this module, the student will be able to:

- demonstrate understanding of leadership principles and processes and their application in mental health nursing practice;
 - demonstrate an understanding of management principles and processes and their application in the organization and management of the mental health nursing service;
 - analyse the relative merits of different methods of work load measurement, in relation to the mental health nursing setting;
 - utilize the mental health unit's/ward's protocols in scheduling adequate staffing cover, reporting when safe levels cannot be achieved;
 - demonstrate knowledge of different methods of care management and of effective delegation;
 - appropriately manage her/his time both when on duty in mental health settings and when studying;
 - show awareness of how the mental health nursing service budget is managed;
 - play a full part in maintaining standards and in contributing to quality assurance monitoring;
 - demonstrate in practice the team member role of the mental health nurse.
-

Reading List

WHO publications

National and international literature covering the syllabus

Where accessible – On-line and distance learning materials

Teaching/learning Strategies

Lectures

Practice in scheduling work rotation

Discussions

Mentor support

Assessment methods

Date on which assignment is due:

Format of assignment: Essay of 1000–1500 words focusing on analysis of one concept from the syllabus and its application to practice in the mental health nursing environment – 100% of whole.

Mark awarded.....%

**WHO Regional Office for Europe
Mental Health Nursing Curriculum**

MODULE EIGHT

Title: Mental Health Nursing IV
Policy and Legislation

Duration: 6 weeks – 180 hours

ECTS Credit Points: 9

Module Content Summary

This module will provide students with the opportunity to build upon work in previous modules and further develop her/his knowledge and understanding of local, national and international policy and legislation and its application in the care of mentally ill patients. The role of the mental health nurse in influencing mental health policy at all levels of its formulation, implementation and evaluation will be explored.

50% of this module will take place in the university or equivalent institute setting.
50% will take place in practice settings.

Syllabus

Health policy and the national policy making process
Legislation, policy and ethics relevant to mental health care
Development and structure of country's mental health provision
Citizens' and patients' rights
Protection of the individual and of the public
The mental health nurse's role in influencing and shaping policy
Social exclusion and mental health
Mental health promotion
Public health
Inequalities in health
Facilitating change in mental health nursing
Professional codes of conduct and their application in the management and organization of care
Quality of care, quality assurance – models and methods
Measuring quality in practice, clinical audit and standard setting
The importance of accurate record keeping
Report writing

Competencies or Learning Outcomes

On completion of the module, the student will be able to:

- demonstrate knowledge and understanding of policies and legislation which impact on mental health care provision and of their implications for mental health nursing practice;
- ensure that the rights of patients, and of their families and/or carers are protected;
- demonstrate a willingness to explore proposed changes in practice in a positive manner and an awareness of barriers to change;
- apply and evaluate quality assurance systems, models and methods of ensuring and maintaining high standards of nursing care;
- demonstrate ability to deliver and manage high quality care within the existing national health policy framework;
- effectively deliver and manage the care of a patient who is subject to the legislative process, i.e. is a compulsory admission, police admission or under a court of protection order;
- devise and evaluate a small-scale mental health promotion strategy;
- utilize information systems to support the organization and management of care;
- prepare accurate and comprehensive records of patient care and communicate these effectively with other members of the team;
- practise at all times in accordance with professional codes of conduct and ethical behaviour for mental health nurses;
- reflect on her/his practice and identify learning needs.

Reading list

WHO publications

National and international literature covering the syllabus

Where accessible – On-line and distance learning materials

Teaching/learning Strategies

Problem-based scenarios

Role-play

Seminars

Multidisciplinary discussion groups,
where possible involving patient

Clinical supervision

Tutorials

Clinical skills workshops and demonstrations

Assessment Methods

Dates on which assignments are due:

Format of assignments:

Preparation of a clinical learning portfolio demonstrating achievement of selected competencies/learning outcomes relevant to the place of the student's clinical experience – 50% of whole

Clinical Assessment demonstrating achievement of competencies/learning outcomes of the module – 50% of whole

Mark awarded:%

Mark awarded:%

Aggregate mark for module (out of 100)%

**WHO Regional Office for Europe
Mental Health Nursing Curriculum**

MODULE NINE

Title:	Mental Health V Specialist Module
Duration:	6 weeks – 180 hours
ECTS Credit Points:	9

Module Content Summary

The aim of this module is to provide the student with the opportunity to gain insight into a specialist mental health service. As far as is feasible, the student will be able to choose an area of particular interest, and to extend and apply her existing knowledge, skills and attitudes and develop new knowledge and skills. Examples of specialist areas of mental health provision and nursing are Child and Adolescent services, Forensic services, Alcohol/Substance Misuse services, Elderly Care, Rehabilitation and Post Trauma Care.

16% (one week) of this module will take place in the university or equivalent institute setting.
84% (five weeks) will be in the practice setting.

Syllabus

Mental ill health relevant to specialist areas:

Epidemiology

Clinical features

Policy and legislation relevant to specialist mental health provision

Rationales for the development of specialist services:

Historical trends, identified need, service aims, funding and service structures

Mental health promotion and public health issues in specialist service provision:

The role of specialist services in promoting health.

Multidisciplinary, interagency and intersectoral working within specialist services

Public, voluntary and private provision

Links with other services and referral pathways

The specific role of the mental health nurse within a specialist service

Assessment:

Specific nature and format of assessments undertaken

Engaging patients of specialist services

Building relationships

Semi-structured interviewing skills

Collaborative care planning:

Involving patients, families and/or carers

Involving multidisciplinary, interagency and intersectoral staff and families in developing care plans within specialist services

Evidence-based interventions specific to the specialist service

Evaluation strategies and adaptation of interventions on the basis of the evaluation

Nondiscriminatory, culturally sensitive practice – issues related to gender, age, ethnicity, and sexuality – concerns and needs specific to specialist services

Documentation and record-keeping

Communicating and liaising with other agencies

Competencies or Learning Outcomes

On completion of this module, the student will be able to:

- analyse and evaluate statistical information on epidemiology of the various specialist mental health services provided in the country;
- demonstrate knowledge and understanding of policies and legislation which impact on her/his chosen area of specialist mental health care provision and of their implications for practice;
- ensure that the rights of patients receiving the specialist service, and of their families and/or carers are protected;
- demonstrate ability to deliver and manage high quality care within the existing specialist service;
- analyse and evaluate the role of specialist mental health services in relation to mental health promotion and public health;
- analyse and evaluate the role of the mental health nurse in the provision of specialist services;
- demonstrate understanding and the use of existing tools and standardized measures;
- utilize information systems to support the organization and management of care;
- prepare accurate and comprehensive records of patient care and communicate these effectively with other members of the specialist service team;
- promote positive attitudes and challenge negative discriminatory attitudes towards patients of the specialist service;
- identify, discuss and evaluate any differences of principle between care delivered within the specialist service and the nonspecialist service;
- practise at all times in accordance with professional codes of conduct and ethical behaviour for mental health nurses;
- reflect on her/his practice and identify learning needs.

Reading list

WHO publications
National and international literature covering the syllabus
Where accessible – On-line and distance learning materials

Teaching/learning Strategies

Problem-based scenarios	Clinical supervision
Role-play	Tutorials
Seminars	Clinical skills workshops and demonstrations
Multidisciplinary discussion groups, where possible involving patients	

Assessment Methods

Dates on which assignments are due:

Format of assignments:

Preparation of a clinical learning portfolio demonstrating achievement of selected competencies/learning outcomes relevant to the specialist area of the student's clinical experience – 50% of whole

Clinical Assessment demonstrating achievement of competencies/learning outcomes of the module – 50% of whole

Mark awarded:%

Mark awarded:%

Aggregate mark for the module (out of 100%)%

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Glossary

For more detail on all those terms, please refer to the Guidelines to the WHO European Strategy for Initial Education for Nurses and Midwives (WHO 2001b)

Academic level

The level of difficulty of a subject. For example level one is commonly used to describe the first year studies in a baccalaureate degree, with levels two, three and four describing second, third and Honours year respectively. Masters level describes postgraduate studies at Masters degree. Doctoral level describes study at Doctor of Philosophy/Doctor of Science level. In general, the higher the level of difficulty, the more requirement there is for demonstration of analytical, critical, evaluative and innovative thinking.

Accreditation (of an institution, programme or curriculum)

A process, based on a system of external peer review, and using written standards, by which the quality of a university's activities and its educational programmes are assessed and, if satisfactory, approved.

Audit

Procedure whereby an organization's activity is measured against agreed standards, in order to establish levels of competence and effectiveness.

Authority

The rightful power to take action. This subsumes the right to make decisions on what action is appropriate.

Clinical Supervision

A clinically focused professional relationship between a practitioner and appropriately prepared clinical supervisor.

Competencies

Broad composite statements, derived from nursing and midwifery practice, which describe a framework of skills reflecting knowledge, attitudes and psychomotor elements. The term "Learning Outcomes" is often used synonymously with "Competencies".

Competent

A level of performance demonstrating the effective application of knowledge, skill and judgment.

Continuing education

Education that builds on initial professional or vocational education.

Credit points

See Accreditation of prior learning.

E-learning

E-learning means electronic learning, (just as e-mail means electronic mail). E-learning is a form of distance learning. Course materials are on-line, students communicate with their lecturers via e-mail, lecturers give feedback via e-mail, assignments are sent in via e-mail and comments returned to students via e-mail. Systems may be set up to enable several students and their lecturers to communicate via “chat rooms”, i.e. where questions and discussions can take place through e-mailing.

Fitness for purpose

Employers are primarily concerned about whether nurses and midwives are able to function competently in clinical practice. The speed of change in the context and content of health care makes it difficult to define fitness for purpose. Its meaning cannot be fixed. Fitness for purpose depends on the commitment of employers and of practising nursing and midwives to constant professional updating (Adapted from UKCC 1999).

Health care reform

Any intended change towards improvement of health care of the acutely and chronically ill, rehabilitation, case-finding, health promotion and maintenance, prevention of disease and disability and health education.

Learning Outcomes

See Competencies

Licence

See Registration

Mentor

An appropriately qualified and experienced person who, through example and facilitation, guides, assists and supports individuals in learning and in acquiring new attitudes. The term is particularly used in relation to supporting learning in practice settings.

Multiprofessional team/Multidisciplinary team

A team of health care professionals from different disciplines, e.g. nurses, midwives, physicians, physiotherapists, who work together towards a common goal which enables them to make the best use of their knowledge, skills and experience in providing patient care.

Network

A grouping of individuals, organizations and/or agencies organized generally on a non-hierarchical basis around some common theme or concern.

On-line learning

See E-learning

Patient

The real person who is the end-user in all our health systems. S/he is the human being who is meant to benefit from our efforts, but who, if reduced to a mere statistic, demonstrates that the heart has gone out of the profession. User(s) of health care services, whether healthy or sick.

Peer review

Scrutiny of the work, activities or output of individuals or a group by other individuals or groups who have qualifications and experience that are directly comparable to those of the people being scrutinized.

Practice placement

The clinical area to which nurses and/or midwives are allocated in order to undertake the practice components of their education. These clinical areas may be in hospital or community settings.

Programme

This term is synonymous with course, i.e. a course of study, and denotes the entire course, in all its elements. It may be a full-time or part-time programme or course, e.g. a degree, or a short course.

Promote health

The process of enabling individuals, families and communities to increase control over the determinants of health and thereby improve their health. An evolving concept that encompasses fostering lifestyles and other social, economic, environmental and personal factors conducive to health.

Prospective Analysis Questionnaire

A questionnaire, based on the Prospective Analysis Methodology (PAM), which is a process that facilitates decision-making, interchange of ideas and opinions, and recognition and development of a need to change.

Resources

Human resources, money, materials, skills, knowledge, techniques and time needed or available for the performance or support of action directed towards specified objectives.

Registration

A method of ensuring a record is maintained of those who are *bona fide* nurses and/or midwives, i.e. they have successfully completed the initial nursing and/or midwifery education programme which is required in their country. In several Member States it is necessary to regularly renew this registration. In order to do so, nurses and midwives must provide evidence of successful completion of continuing education relevant to their area of practice.

Specialist Nurse

A nurse who has successfully completed a post-qualification course of study in a specific clinical field and who applies higher levels of judgement, discretion and decision-making in clinical care in order to improve the quality of patient care, meeting the needs of patients within the specialty and in the specific area of practice.

Standard

Statement of a defined level of quality or competence which is expected in a given set of circumstances. In nursing and midwifery, the statements identify and define the criteria which influence the quality or competence of the nursing/midwifery service, and clarify what is expected in relation to the structures, processes and outcomes. A means of measuring the degree of excellence of an educational programme and of comparing the degree of excellence of one programme with that of others.

Strategies

Broad lines of action to be taken to achieve goals and objectives incorporating the identification of suitable points of intervention, the ways of ensuring the involvement of other sectors and the range of political, social, economic, managerial and technical factors, as well as constraints and ways of dealing with them.

Video-conference

The use of video to bring groups together for discussions and a sharing of views. Groups in geographically separate areas can be connected via video link and can see and hear each other.

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