Standards of Psychiatric Nurses in British Columbia

Revised
March 25, 1995

College of Registered Psychiatric Nurses of British Columbia
INTRODUCTION

The mandate of the College of Registered Psychiatric Nurses of British Columbia (CRPNBC) is to serve and protect the public. The CRPNBC is responsible through self-regulation to assure a safe, accountable and ethical level of psychiatric nursing practice. It is accountable to the public through government regulation under the Health Professions Act. This accountability includes assuring the qualifications of those wishing to enter the profession, developing and maintaining acceptable standards of psychiatric nursing practice and fostering means to ensure continued safety to practice through a discipline process. The College is committed to the development and enhancement of the profession and its members in its ongoing promotion of psychiatric nursing education and expertise as a public service. This Standards document provides definitions and descriptions of basic and advanced psychiatric/mental health nursing practice. It defines the scope, functions, and roles of the practice of psychiatric/mental health nurses as well as the diverse settings in which they practice.

The College has developed ten Standards for Practice as they apply to psychiatric/mental health nursing in British Columbia today. The first eight are basic level functions. The first four relate to the nursing process (assessment, planning, implementation, and evaluation). Standards four through eight relate to professional development (legal, ethical, collaborative, and growth). Standards nine and ten are advanced level functions (independent practice, and administrative/management). Two further advanced level standards are currently under development (research & education).

The College first appointed a Standards Committee in 1975. A document titled “A Working Paper on Standards of Psychiatric/Mental Health Nursing Practice for Registered Psychiatric Nurses in British Columbia” was accepted by the CRPNBC Board of Directors in 1980. In January 1982, a researcher was employed to incorporate and validate the four nursing process standards and their associated criteria and performance factors within the clinical environment. The subsequent document was accepted by the CRPNBC in November 1985 and published and distributed to members. The next phase was to identify and validate the next four standards dealing with professional behaviours. The final report was completed in April 1987.

The current standards (March 1995) have been organized and revised to reflect today’s social issues, mental health concerns, and needs for care in British Columbia. The following committee members are thanked for their participation on the current review of the CRPNBC Standards of Psychiatric/Mental Health Nursing Practice:

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The College recognizes that regular, ongoing review is essential to maintain a contemporary statement of standards. Members are encouraged to contribute to these regular revisions, as they did in the development of the initial standards.

Jacqollyne Keath, RPN, RN, Master’s Candidate, chair Professional Practice Committee
CONTEXT OF PRACTICE

A Registered Psychiatric Nurse provides psychiatric/mental health nursing care to individuals, families, and groups to enable them to function at an optimal level of psychological wellness through more effective adaptive behaviours and increased resilience to stress. The RPN must be able to provide safe, basic physical care, have a wide understanding of psychological and developmental problems and their treatment, and have a highly developed level of communication skills (verbal, nonverbal, and written).

Registered Psychiatric Nurses work with children, adolescents, adults and elderly, with dysfunctional behaviour patterns, and/or developmental handicaps. RPNs work as team members or independently. using appropriate consultation and small group decision-making. RPNs work in various kinds of inpatient facilities, community settings and, with suitable academic preparation and/or experience, in Independent practice, education, research or management.

DESCRIPTION OF PSYCHIATRIC/MENTAL HEALTH NURSING

Psychiatric/mental health nursing practice is comprised of the functions performed in clinical, administrative, educational and research roles where the specific knowledge base consists of:

1.) effecting the provision of the Health Professions Act.

2.) promoting and maintaining an enlightened and progressive standard of psychiatric/mental health nursing education and practice,

3.) ensuring standards of practice and code of ethics,

4.) providing consultation and support to members on personal matters and nursing issues.

5.) promoting activities which contribute to mental health.

Because of its scope, psychiatric/mental health nursing is necessarily holistic and considers the needs and strengths of the whole person, the family and the community.
DEFINITION OF TERMS

Advanced and basic level psychiatric/mental health nursing:

*Basic level* - diploma RPN. Many professional nurses who contribute to the practice of psychiatric/mental health nursing are either entry level RPNs or are novices in the specialty.

*Advanced level* - RPN with baccalaureate degree or higher education. An RPN with five years psychiatric/mental health nursing practice with relevant supplemental continuing education may be considered at the advanced level. This preparation is distinguished by a depth of knowledge of theory and practice, supervised clinical practice, and competence in advanced nursing skills. The psychiatric/mental health nurse has the ability to apply knowledge, skills, and experience autonomously to complex mental health issues.

Case Management: Using case management a psychiatric/mental health nurse is responsible for assessing needs, identifying services, and monitoring and evaluating client status. A case manager coordinates care through collaboration with all involved health professionals ensuring accessibility and availability of care.

Client: Refers to a patient, individual, consumer or any person, family, group or community entering the health care system at any point to receive health care services.

Conceptual Model: A mental image that is a structural representation of reality.

Conceptual Model for Nursing: A mental image of a way of looking at nursing that includes assumptions, values and the following major units: the goal of the nursing care, the conception of the client, the role of the nurse, the source of the client’s difficulty, the nurse’s intervention, and the consequences of the nursing activities.

Diagnostic and Statistical Manual of Mental Disorders: A manual published by the American Psychiatric Association that provides a listing of official diagnostic classifications for mental disorders. Each disorder is classified on one of five axes. Axis I and II include all clinical syndromes and personality disorders, Axis III contains physical disorders, and Axis IV and V provide information about psychosocial stressors and adaptive functioning.

Family: Refers to the group of people who are concerned with caring for the client. Persons within a family are related with some degree of emotional bonding through blood, marriage, adoption, or mutual consent. Families through commitment, interrelationships, and communication, undertake mutual decision-making and share goals.

Health Care Team: A group of health professionals and allied health care workers such as Registered Psychiatric Nurses, Registered Nurses, Psychiatrists and other Physicians, Psychologists, Social Workers, Licensed Practical Nurses, Occupational Therapists, Recreational Therapists, Dieticians, Nursing Assistants, and Volunteers; who are educated at various levels working together with the client to provide health care. In this document the terms health care team and mental health care team may be used interchangeably.
**Independent, Interdependent and Dependent Nursing Care:** activities carried out within the nursing process singly and in relation to other members of the health care team.

*Dependent care* - activities carried out in response to medical direction. The RPN is responsible, however, for understanding and, when necessary, questioning all directions received regarding the provision of care.

*Independent care* - activities carried out by the nurse using one’s own judgments in assessing, planning, implementing and evaluating care. These activities develop from the Registered Psychiatric Nurse’s education, training and experience in health promotion, restoration and maintenance, with the central focus in psychiatric/mental health nursing on development of health-promoting interpersonal relationships.

*Interdependent care* - activities undertaken in collaboration with allied members of the health care team.

**Nursing:** The unique function of the nurse in assisting the client in attainment of optimal health.

**Nursing Diagnosis:** A statement of the client’s problems, concerns, or needs, which may be actual or potential.

**Nursing Order:** A specific action-oriented statement that describes those behaviours the RPN will utilize in assisting the client to achieve the desired outcome.

**Nursing Process:** The orderly and systematic series of actions directly related to specific nursing goals involving the assessment, planning, implementation and evaluation of a client’s care. An RPN uses the nursing process to establish a therapeutic relationship and plan care in collaboration with the client or family who requires assistance in dealing with health concerns.

**Nursing Team:** A group of nursing professionals and allied health care workers working together to provide nursing care such as RPNs, RNs, LPNs, Nursing Assistants.

**Optimal Health:** A dynamic, optimal sense of harmony of the mind, body, and soul. It is interpretive, and is the best possible state of health as perceived by the client and/or psychiatric nurses.

**Psychotherapy/Psychotherapeutic Care:** Treatments designed to promote mental health, harmony and social integration. These include independent nursing care such as counseling or teaching sessions and concurrent dependent nursing care such as chemotherapy or electro-convulsive therapy (ECT).

**Registered Psychiatric Nurse:** A person who has met all registration requirements laid down in the act governing the CRPNBC. The RPN is a graduate of an educational program offered in post-secondary institutions or a hospital-based psychiatric nursing program and is prepared for work in a variety of psychiatric/mental health, handicapping, rehabilitative, and physical care settings.
**Scope of Practice:** A range of nursing functions that are differentiated according to level of practice, role of the nurse, and work setting. The parameters are determined by provincial legislation, professional code of ethics, and nursing standards as well as each individual’s personal competency to perform particular activities or functions.

**CRPNBC**

**STANDARDS of PSYCHIATRIC/MENTAL HEALTH NURSING PRACTICE**

1. The Registered Psychiatric Nurse systematically collects, analyses, and synthesizes data about a client’s health status,

2. The Registered Psychiatric Nurse develops a specific psychiatric nursing care plan based on the nursing diagnosis.

3. The Registered Psychiatric Nurse carries out the planned interventions in assisting the client achieve optimal health.

4. The Registered Psychiatric Nurse observes and evaluates client’s health status in accordance with the plan of care designed to assist the client achieve optimal health.

5. The Registered Psychiatric Nurse practices within the limitations established by law.

6. The Registered Psychiatric Nurse practices within the boundaries established by the CRPNBC Code of Ethics.

7. The Registered Psychiatric Nurse functions effectively with other members of the health care team.

8. The Registered Psychiatric Nurse demonstrates responsibility for professional growth and contributes to the professional growth of others.

9. The Registered Psychiatric Nurse in Independent Practice/ Community Mental Health is an advanced level RPN using counseling, psychotherapy or case management interventions to assist clients in improving or regaining their optimal health.

10. The Registered Psychiatric Nurse in management is an advanced level nurse qualified by education and experience.
ACHIEVING STANDARDS of PRACTICE

The development of standards for nursing practice is a BEGINNING step toward the attain-ment of quality nursing care. The adoption of standards helps clarify nurses’ areas of ac-countability, since the standards provide the nurse, the health agency, other professionals, clients, and the public with a basis for evaluating practice. Standards also define the nursing profession’s accountability to the public.

In addition to the knowledge of standards, each practitioner must have an understanding of the rationale behind the standard and know the criteria expected. As well, the practitioner must know the factors against which performance is measured or evaluated.

Standards are a prerequisite to the evaluation of performance, since they provide a baseline for measurement. However, they must take into account independent, interdependent and dependent functions of nurses, be suited to educational preparation and experience, and respect the freedom of informed choice.

Because standards must be broad enough to apply in any practice setting, the performance factors are given as basic guidelines. They may not be comprehensive for all situations and must lend themselves to further development and refinement by nurses so they are meaningful in the workplace. The psychiatric/mental health nurse’s critical thinking, and fastidious use of theoretical knowledge, research, and nursing models provides a comprehensive nursing assessment and accurate client diagnosis. This allows for analysis of the reciprocal relationship between client, environment, health, and nursing.
STANDARD 1 (ASSESSMENT)

The Registered Psychiatric Nurse systematically collects, analyses, and synthesizes data about a client’s health status.

RATIONALE:

Systematic collection of data is the first part of the nursing process and is a prerequisite for realistic assessment of a client’s, family’s, or community’s needs for the formulation of the entire care plan.

CRITERIA:

1. Systematically collects data about the client from all available sources.

2. Organizes and analyses the data using a nursing model.

3. Formulates and organizes by prioritizing actual and potential nursing diagnoses.

4. Identifies health strengths.

PERFORMANCE FACTORS:

1.1 Collects and documents pertinent client data. The data may include but is not limited to:
   - ability to remain safe and not be a danger to self or others - client’s presenting concerns, and symptoms - mental health examination – physical health examination - history of family and significant others
   - physical, mental, developmental, cognitive and emotional health status
   - daily activities, addictions, functional health status, health habits, social roles
   - interpersonal relationships, communication skills, and coping patterns - spiritual or philosophical beliefs and values - strengths and competencies that can promote wellness
   - other contributing factors that promote health such as: living situation and ability to manage the environment

2.1 Describes the nursing model being used.
2.2 Collects information that is consistent with the model described.
2.3 Interprets the data in accordance with the described conceptual model.
2.4 Interprets the data taking into consideration the interdisciplinary plan of care.
2.5 Validates the data collection with the client and, whenever possible, with the family.

3.1 States nursing diagnoses that are consistent with the model being used.
3.2 States the criteria used to establish priorities.
3.3 Documents the nursing diagnoses in order of priority.
3.4 Modifies the diagnoses or the priorities based on the changing needs of the
client or family.

3.5 Includes the client and, whenever possible, the family in developing the diagnoses, arranging priorities, and modifying care.

3.6 Identifies priority of needs in collaboration with the client and other relevant persons.

4.1 Documents the health strengths of the client or family.

4.2 Incorporates the health strengths into the formulation and development of diagnoses.

4.3 Diagnoses conform to accepted classification system - for example: North American Nursing Diagnosis Association (NANDA), The Diagnostic and Statistical Manual (DSM IV, 1994).
STANDARD 2 (PLANNING)

The Registered Psychiatric Nurse develops a specific psychiatric nursing care plan for a client based on the nursing diagnosis.

RATIONALE:

Planning is the second of four steps in the nursing process. A definite plan of care, based on thorough and ongoing assessment, is needed to develop the goals and the interventions required to meet the client’s needs and to provide a specific outline for continuity of care.

CRITERIA:

1. Acknowledges the client’s right to participate in decisions affecting care.

2. Whenever possible, incorporates observations and reports by the client and the family in developing and modifying the psychiatric nursing care plan.

3. Incorporates observations and reports of other members of the health care team in developing and modifying the psychiatric nursing care plan.

4. Goals are client-oriented, therapeutically sound, measurable, and achievable behavioural outcomes.

5. Formulates nursing orders in relation to identified goals.

PERFORMANCE FACTORS:

1.1 Assesses the client’s abilities and resources to participate in care planning.

1.2 Explains the rationale for participation to the client.

1.3 Provides the client with relevant information about health problems.

1.4 Consults with the client prior to making decisions affecting care.

1.5 Verifies the identification of diagnoses, goals, and the methods of achieving, evaluating, and revising them.

1.6 Verifies the appropriateness of the plan before proceeding.

1.7 In consultation with the client, identifies client’s responsibilities.

1.8 Supports the client’s independence.

1.9 Discusses progress in attaining stated goals.

1.10 Discusses alternatives that may be selected to deal with health problems.

1.11 Documents the client’s involvement in care planning.

2.1 Assesses the family’s and community’s abilities and resources for participation in care planning.

2.2 Explains the rationale for participation to the family.

2.3 Provides the family with relevant information.

2.4 Consults with the family prior to making decisions as appropriate.
2.5 Verifies the identification of diagnoses, goals, and the methods of achieving, evaluating, and revising them with the family.
2.6 Verifies with the family the appropriateness of the plan before proceeding.
2.7 In consultation with the family, identifies family responsibilities.
2.8 Supports family in carrying out care.
2.9 Discusses with the family progress toward goals.
2.10 Discusses with the family alternative strategies for care.
2.11 Documents the family’s involvement in care planning.

3.1 Involves other members of the nursing team in formulating the plan of care.
3.2 Delegates aspects of data collection and implementation to allied nursing personnel in line with their job descriptions.
3.3 Communicates relevant information to allied nursing personnel.
3.4 Obtains feedback from allied nursing personnel.
3.5 Communicates with appropriate members of the health care team about the management of the client.
3.6 Formulates expected outcomes congruent with those of other members of the health team.
3.7 Participates in the formulation of overall team goals and plans.
3.8 Verifies the client’s achievement of actual outcomes with other members of the health team.
3.9 Identifies psychiatric nursing knowledge, skills, and activities, and articulates information so that it is coordinated with other health team members.
3.10 Provides psychiatric nursing consultation to other team members.
3.11 Incorporates observations and reports of others in developing and modifying the psychiatric nursing care plan.
3.12 Uses small group decision-making process to facilitate team activities.
3.13 Provides for appropriate community follow up to insure continuity of care.

4.1 Records goals, which include expected outcomes stated in measurable terms.
4.2 Records goals with specified time for accomplishment.
4.3 Records long term goals.
4.4 Records short term goals.
4.5 Communicates nursing goals to other members of the health care team.

5.1 Formulates a plan of care which reflects the Registered Psychiatric Nurse’s identification of health problems.
5.2 Identifies a variety of interventions designed to achieve goals.
5.3 Selects interventions that reinforce the strengths of the client.
5.4 Uses scientific principles in selecting the interventions.
5.5 Includes interventions which are the responsibility of the client.
5.6 Includes interventions to achieve expected physiological outcomes.
5.7 Includes interventions to achieve expected psychological outcomes.
5.8 Determines the method of measuring effectiveness of interventions.
5.9 Determines time frame for interventions.
5.10 Records client based nursing interventions.
5.11 Modifies interventions according to changes in health status.
STANDARD 3 (Implementation)

The Registered Psychiatric Nurse carries out the planned interventions in assisting the client achieve optimal health.

RATIONALE:

Psychiatric/mental health nurses use a wide variety of interventions to prevent mental and physical illness and to promote, maintain and retain health. The Registered Psychiatric Nurse selects interventions according to their level of practice. The basic level nurse may select counseling, case management, self-care activities, group therapy, health teachings, and a variety of other approaches to meet the mental health needs of clients. The advanced level nurse may engage in psychotherapy, and act as a consultant in addition to the basic level interventions.

CRITERIA:

1. Initiates or supervises the initiation of the psychiatric nursing care plan.

2. Implements nursing orders until they are no longer required, are observed to be ineffective, or need revision.

3. Modifies priorities on an ongoing basis to meet the client’s needs.

4. Provides consistent support and reassurance to the client and whenever possible, to the family while implementing the care plan.

5. Encourages the client to maintain active involvement in the ongoing therapeutic program.

6. Whenever possible encourages the family to discuss, question, and explore feelings and concerns about past, present, and projected therapies.

7. Promotes the realization of optimal health in individuals through the use of psychotherapeutic interventions,

8. Promotes the realization of optimal health in clients through health teaching.

9. Provides information regarding referral to available community resources that may assist the client and/or the family to meet identified goals.

10. Performs psychiatric nursing procedures as defined by the employing agency.

PERFORMANCE FACTORS:

1.1 Initiates or supervises the initiation of client focused, goal-directed interventions.
1.2 Uses the care plan to guide interventions.
1.3 Records the care plan.

2.1 Follows through with the plan of care in an organized fashion.
2.2 Attends to all elements of care within a time period realistic to the situation.
2.3 Continually updates the plan of care.

3.1 Records the effects of the care plan.
3.2 Modifies priorities to meet the changing needs of the client.

4.1 Selects interventions based on the highest probability of acceptability and effectiveness to the client and/or family.
4.2 Encourages participation by the client and/or family in implementing the plan.
4.3 Provides positive feedback to the client and/or family.

5.1 Encourages the client toward independence and self-direction.
5.2 Assists the client to identify, test out, and evaluate constructive patterns of living.
5.3 Reinforces positive behaviour.

6.1 Employs principles of communication.
6.2 Employs principles of problem solving and critical thinking.
6.3 Encourages the family to discuss, question, and explore their feelings about the client’s problem.
6.4 Encourages the family to discuss, question, and explore their feelings about the client’s treatment.
6.5 Encourages the family to discuss, question, and explore their feelings about the client’s and their own coping strategies.

7.1 Identifies the learning needs of the client.
7.2 Uses appropriate teaching techniques to meet the client’s learning needs.
7.3 Evaluates the teaching carried out.
7.4 Records the teaching plan.

8.1 Incorporates multiculturalism concepts to maintain a therapeutic milieu.
8.2 Employs a variety of psychotherapeutic interventions (group therapy, outpatient counseling) to assist clients to achieve and maintain their optimal health.
8.3 Documents interventions.

9.1 Involves the client, family, the health team, and appropriate community resources.
9.2 Is aware of and refers clients and families to appropriate community resources.

10.1 Demonstrates competent psychomotor skills.
10.2 Promotes physical health.
10.3 Performs procedures as defined,
10.4 Records procedures and their effect on the client.
STANDARD 4 (Evaluation)

The Registered Psychiatric Nurse observes and evaluates the client’s health status in accordance with the plan of care which is designed to assist the client achieve optimal health.

RATIONALE:

Evaluation is the fourth part of the nursing process. The Registered Psychiatric Nurse observes and evaluates the effectiveness of interventions so appropriate changes can be made in the treatment and nursing plans of care, incorporating the contributions of the client, family, and other members of the health care team.

CRITERIA:

1. Observes, evaluates, reports, and records the effects of therapies and nursing interventions on an ongoing basis.

2. Whenever possible, discusses with the client and the family the client’s progress toward goals.

3. Recommends changes in the treatment plan to other members of the health care team.

4. Modifies the plan of care based on the attainment of goals, the effectiveness of the treatment plan, and whether or not a positive change has occurred.

PERFORMANCE FACTORS:

1.1 Selects criterion standards that guide observation.

1.2 Relates the criterion standards to the diagnosis and goal.

1.3 Collects information on the effectiveness of all portions of the care plan.

1.4 Assesses the care plan in relation to identified diagnoses, goals and interventions.

1.5 Adapts the care plan to meet the changing needs of the individual.

2.1 Involves client and family in assessment of nursing care in perception of their health needs.

2.2 Involves the individual and family in revising the plan of care.

3.1 Incorporates observations and reports of other health care professionals in developing and modifying the care plan.

3.2 Recommends changes in the treatment plan to other members of the health care team.

4.1 Modifies the care plan as required on the basis of evaluation.

4.2 Implements the revised nursing interventions.
4.3 Records the effects of therapies and Interventions on an ongoing basis.
4.4 Continues the nursing process in a cyclical fashion until the relationship is terminated.
STANDARD 5 (Legal)

Registered Psychiatric Nurse practices within the limitations established by law.

RATIONALE:

Knowledge of the legal boundaries governing psychiatric nursing practice is necessary to protect the public, the client, and the Registered Psychiatric Nurse.

CRITERIA:

1. Knows relevant legislation and regulations governing psychiatric nursing.
2. Knows relevant legislation governing rights of clients.
3. Takes appropriate action to ensure that own and others' practice conforms to acceptable standards.
4. Maintains membership in good standing in the professional regulatory body.

PERFORMANCE FACTORS:

1.1 Describes specific legislation affecting RPN practice in employment setting.
1.2 Describes regulations affecting RPN practice in employment setting.
1.3 Discusses relationship of legislation to RPN practice with other team members.
2.1 Describes legislation that governs client rights.
2.2 Explains legislated rights to clients and others.
2.3 Monitors own practice in relation to client’s rights legislation.
3.1 Follows accepted procedures in identifying breaches of care standards.
3.2 Follows accepted procedures in acting on identified breaches of care standards.
3.3 Recognizes own limitations and refers the client to appropriate resources whenever necessary.
3.4 Uses professional judgment in carrying out dependent care.
STANDARD 6 (Ethical)

The Registered Psychiatric Nurse practices within the boundaries established by the CRPNBC Code of Ethics.

RATIONALE:

A guide to ethical behaviour is required to insure safety to the public. The psychiatric/mental health nurse engages in therapeutic interactions and relationships that promote and support health. Boundaries must be established to safeguard the client's well-being and to prevent the development of intimate or sexual relationships.

CRITERIA:

1. Provides care within the boundaries established by the Code of Ethics.
2. Conducts all professional relationships in accordance with the Code of Ethics.
3. Interprets the Code of Ethics to others.
4. Maintains a therapeutic and professional relationship at all times.

PERFORMANCE FACTORS:

1.1 Identifies the parts of the Code of Ethics related to client care.
1.2 Identifies the relationship between the content of the Code of Ethics and own RPN practice,

2.1 Identifies those parts of the Code of Ethics relating to professional relationships.
2.2 Identifies ethical dilemmas and seeks available resource to help resolve dilemmas.

3.1 Discusses the Code of Ethics with colleagues and others.
3.2 Describes the relationship of the Code of Ethics to RPN practice.
3.3 Reports abuse of client’s rights, unethical, incompetent and illegal practices.

4.1 Functions as a client advocate.
4.2 Delivers care in a nonjudgmental and nondiscriminatory manner,
4.3 Discusses with client boundaries of the client-nurse relationship.
4.4 Does not promote or engage in intimate or sexual relationships with current clients.
4.5 Recognizes that to engage in intimate or sexual relationships with former clients is unusual to accepted practice.
STANDARD 7 (Collaborative)

The Registered Psychiatric Nurse functions effectively with other members of the health care team.

RATIONALE:

The delivery of effective health care requires a collaborative effort by all personnel.

CRITERIA:

1. Functions competently as a member of an interdisciplinary team.
2. Identifies relationship of own role to the health care system.
3. Assumes required leadership roles.

PERFORMANCE FACTORS:

1.1 Identifies own role and roles of other team members in the local community in which the RPN practices.
1.2 Uses appropriate communication channels.
1.3 Demonstrates respect for colleagues.
1.4 Participates in planning, implementing, and evaluating selected programs to meet the community’s mental health needs.

2.1 Identifies components of health care system.
2.2 Identifies role of employing agency in the health care system.
2.3 Identifies own role in relation to employing agency.

3.1 Describes expectations of leadership roles in employing agency.
3.2 Identifies appropriate situations for assuming leadership role.
3.3 Demonstrates ability to supervise other staff as appropriate.

4.1 Identifies basic ethnic, cultural and socio-economic factors and their effects on mental health concerns.
4.2 Recognizes current social issues that influence the nature of mental health concerns.
4.3 Participates with other members of the mental health team in assessing community mental health needs.
Standard 8: (Professional)

The Registered Psychiatric Nurse demonstrates responsibility for personal growth and contributes to the professional growth of others.

RATIONALE:

All Registered Psychiatric Nurses have a responsibility to contribute to the growth of self and of the profession.

CRITERIA:

1. Participates in activities of the professional regulatory body.
2. Participates in continuing professional education activities.
3. Promotes and participates in activities designed to improve psychiatric nursing practice and care.
4. Participates, promotes, and utilizes research as an integral part of professional psychiatric nursing.

PERFORMANCE FACTORS:

1.1 Attends meetings of the College at the local and provincial level.
1.2 Participates in committees of the College,
1.3 Participates in projects and other special activities of the College.

2.1 Takes part in in-service education offered at place of employment.
2.2 Participates in non-credit continuing education activities.
2.3 Participates in post-basic credit practice-related educational opportunities.
2.4 Shares in identifying the educational needs of other members of the nursing team.

3.1 Applies and shares knowledge and skills to improve psychiatric nursing practice.
3.2 Accepts accountability for own psychiatric nursing practice.
3.3 Seeks peer review of care plan effectiveness.

4.1 Utilizes nursing research findings to guide psychiatric/mental health nursing practice.
4.2 Participates in nursing research projects when opportunity arises.
4.3 Refines abilities to collect, organize, categorize and analyze research data.
4.4 Suggest research questions that need to be addressed to improve the practice of psychiatric/mental health nursing.
STANDARD 9: (Independent Practice/Community Mental Health)

The Registered Psychiatric Nurse in Independent Practice/Community Mental Health is an advanced level RPN using counseling, psychotherapy or case management interventions to assist clients in improving or regaining their optimal health.

RATIONALE:

A plan of care is used to guide therapeutic interventions in a systematic way to achieve expected client outcomes. Counseling, or psychotherapy may be individual, group or family oriented. Child psychotherapy and other therapeutic treatments may be used by the qualified psychiatric/mental health nurse to assist clients to foster mental health, prevent mental Illness and disability, and improve or regain previous health status and functional abilities.

CRITERIA:

1. Interventions are based on the needs of the client and accepted nursing practice.

2. Interventions are selected according to the psychiatric/mental health nurse’s level of practice, education and qualifications.

3. Interventions are performed in a safe, ethical, and appropriate manner.

4. Interventions are implemented within an established nursing care plan.

5. Interventions are documented and evaluated.

PERFORMANCE FACTORS:

1.1 Counseling interventions may include but not limited to: communication and interviewing techniques, problem-solving skills, crisis intervention, stress management, relaxation techniques, assertiveness training, conflict resolution, and behaviour modification. These shall be documented.

1.2 Healthy behaviour and interaction patterns are reinforced helping the client to modify or discontinue unhealthy behaviour patterns.

1.3 Counselling promotes client social and personal integration.

2.1 The therapeutic contract is structured to include but not limited to:

• purpose, goals, and expected outcomes
• time, location, and frequency of therapy
• fees and payment schedule
• confidentiality
• members involved in therapy
• availability and way to contact psychiatric/mental health nurse
• responsibilities and expectations of client and psychiatric/mental health nurse
2.2 Knowledge of growth and development, psychology, personality theory, psychopathology, social systems, small-group and family dynamics, stress and adaptation, and theories related to selected therapies based on the client’s needs.

2.3 Utilizes therapeutic principles and research to understand and interpret the client’s emotions, thoughts, and behaviours.

2.4 To reinforce healthy client behaviours and interactions, increasing responsibility and independence are fostered.

2.5 In the absence of the psychiatric/mental health nurse, continuity of care is provided.

2.6 When it has been determined that care provided by the psychiatric/mental health nurse would impair the client/nurse relationship, the client is referred to another qualified provider of client care.

3.1 Case management services are based on a comprehensive approach to the client’s physical, mental, emotional, spiritual, and social health concerns.

3.2 As the client advocate, health-related services and more specialized services are negotiated as required.

3.3 Agencies and providers are maintained throughout the client’s use of the health care service to ensure continuity of care.

3.4 Decisions affecting the care plan will be made in collaboration with the client.
STANDARD 10: (MANAGEMENT)

The Registered Psychiatric Nurse in management is an advanced level nurse qualified by education and experience. The nurse executive or nurse manager uses communication, motivation, leadership, management, problem solving and decision making skills and functions to promote, develop, and maintain an organizational climate conducive to quality nursing practice and effective management of the nursing resource.

RATIONALE:

The delivery of effective health care requires management of the health care team and resources to ensure quality of client care and promotion of psychiatric nursing practice.

CRITERIA:

1. Maintains proficiency in clinical practice as well as able to implement on the unit the operations and goals of the institution.

2. Interacts with clients both directly and indirectly.

3. Contributes to client and staff well-being by ensuring that quality care is given by staff.

PERFORMANCE FACTORS:

1.1 Acts as a clinical resource, rendering expert service to client care.

1.2 Serves as the official supervisor of an assigned division and functions to plan, direct, coordinate, implement, control, evaluate, and improve the quality of client care delivered.

2.1 Interaction with clients may include but is not limited to:
   - answers questions and requests for multidisciplinary team, staff, clients, and families
   - direct client care
   - observes client in rounds
   - receives reports on client status
   - reviews client records.

3.1 Establishes and maintains division standards, goals, objectives, priorities, and facilitates change based on the needs of clients and their families, allied health staff, and on the results and recommendations of audits.

3.2 Ensures competent, well-trained nursing personnel by identification of skill needs and recommendation of formal education and developmental activities or personally instructing subordinates.

3.3 Directs or personally engages in client/family teaching for optimal recovery and health.
3.4 Maintains timely documentation and anecdotal records on staff to be used in the preparation of performance appraisals.

3.5 Contributes to creating a work climate that encourages positive staff morale, motivations, and commitment.

3.6 Supervises the allocation of resources, remaining accountable to an established budget.

3.7 Establishes an effective working relationship with the health care team.

3.8 Enforces agency and nursing service policy and procedure.
Code of Ethics

Approved by the Board of Directors April 14, 2000
PREAMBLE

The fundamental responsibility of the Registered Psychiatric Nurse is to assist clients to achieve and maintain optimal mental health, to alleviate suffering; and to promote mental health.

The Registered Psychiatric Nurse renders mental health nursing services to the individual, groups, family and community.

The ethics that guide this service evolve from beliefs held in common by members of the psychiatric nursing profession and the society within which it functions.

At the core of psychiatric nursing practice is the therapeutic relationship between the client (individual, family, group and/or community) and the individual Registered Psychiatric Nurse. Establishing and maintaining a professional therapeutic relationship is the responsibility of the Registered Psychiatric Nurse, not the client, and every act or behaviour of the Registered Psychiatric Nurse must benefit the client. Above all, the Professional Code of Ethics is designed to provide guidance to protect the integrity of the therapeutic relationship.

The Code is divided into five sections representing areas of professional nursing obligation. Adoption of the Code reflects the efforts of the College of Registered Psychiatric Nurses of BC and Its members to accept responsibility for the values expressed.

THE REGISTERED PSYCHIATRIC NURSE AND THE INDIVIDUAL

The Registered Psychiatric Nurse:

• Respects and accepts an individual’s uniqueness and integrity regardless of colour; race; national or ethnic origin; creed; sex; age; marital; family or legal status; lifestyle; or social status.

• Is guided by consideration for the dignity, rights and independence of all clients.

• Holds in confidence all information obtained in the nurse-client relationship and uses professional judgement in sharing information when this is the best interest of the client and society.

• Is obligated to inform clients about their care and to ensure Informed consent prior to providing care.

• Demonstrates respect for the right of choice and personal freedoms held by clients and acknowledges that clients are partners in the decision-making process.

• Upholds the competent person’s legal and moral right to refuse treatment and to choose to live at risk, as long as those decisions are In keeping with the law.
Maintains a current awareness and will be compliant with all provincial legislation relating to confidentiality.

Will not initiate or participate in any practice that is considered harmful to the welfare of clients.

THE REGISTERED PSYCHIATRIC NURSE AND PRACTICE

The Registered Psychiatric Nurse:

• Accepts responsibility for specific acts and functions based on the Standards of Practice prepared by the College of Registered Psychiatric Nurses of BC.

• Practices within one’s own level of competency; additional help or supervision will be sought when aspects of client care required are beyond their level of expertise.

• Provides competent care to clients based on the Standards of Practice and is accountable for outcomes of nursing actions.

• Actively participates in the Continuing Competency Program.

THE REGISTERED PSYCHIATRIC NURSE AND SOCIETY

The Registered Psychiatric Nurse:

• Shares with other citizens the responsibility for initiating and supporting action to meet the mental health needs of individuals, and groups within our society.

• Is committed to client advocacy, public education and consumer involvement.

THE REGISTERED PSYCHIATRIC NURSE AND CO-WORKERS

The Registered Psychiatric Nurse:

• Co-operates and collaborates with other health team members to meet clients’ needs for care.

Reports to the appropriate authorities and to the College of Registered Psychiatric Nurses of BC any incompetent or unethical behaviour of associates, while guarding against petty or trivial accusations.

Takes appropriate action, when the actions of any health team member are not in conformity with the accepted standards of care.
THE REGISTERED PSYCHIATRIC NURSE AND THE PROFESSION

The Registered Psychiatric Nurse:

• Demonstrates knowledge of and practices within the boundaries defined by provincial legislation related to the practice of psychiatric nursing.

• Takes responsibility for continuing individual professional growth and development.

• Shares with the professional College, governments, educational facilities and employers, the responsibility for ensuring that programs for professional development and continued quality of care are available.

• Participates in the efforts of the profession to develop, maintain, monitor, and review the Standards of Psychiatric Nursing Practice and Psychiatric Nursing Education, as legislated under the Health Professions Act.

• Refrains from permitting their name along with professional credentials to be used in connection with the endorsement of commercial products.