# A Continuing Professional Development Framework for Liaison Mental Health Nursing in Greater Manchester

Adapted with thanks from work completed by London Liaison Mental Health
Nurses' Special Interest Group

(For full reference please see appendix)

<u>Index</u>	Page
Introduction	2
How to use the tool	3
Individual Competency Frameworks	4
My Development Action plan	20
Appendix – Original Competency Framework	22

### Introduction

This competency framework inevitably does not accommodate every single aspect of the work of the liaison mental health nurse. There are a number of aspects of that work which are generic & common to mental health nurses in other areas e.g. community mental health teams, crisis services & even acute inpatient wards. Rather than write an exhaustive, & very lengthy, text, it was decided that the work should be focused & specific. The document is designed to enable mental health liaison practitioners undertake a reflective practice approach, identifying their personal strengths and skills and areas where they may need further development. It is not intended to be used as a formal management appraisal tool but may support individuals with this process.

Finally, this document & the process it details recognise that mental health nursing is not static. A practitioner may be expert in one area for a period of time but, for any variety of reasons, 'lose' some of that expertise. An area of practice that is not frequently employed might be an example of this. Equally, it is possible to be perfectly competent in an area of practice in certain conditions but perform at a less expert level if those conditions vary. Regular use of this document, coupled with reflective practice & critical thinking on the part of the nurse, can help the practitioner re-assess their competence in the key areas of practice & maintain a positive & less subjective approach to their continuing practice.

### How to Use the Tool

In total there are 19 competency areas for liaison mental health nursing contained in this document. As stated above, the document should support a practitioner in the development of their practice, both in terms of strengths and also areas where they may need to develop. It is intended that a practitioner takes a pragmatic view on the 19 areas and focuses on one or two at a time. Possibly where they feel their practice is strong or in areas they may be moving into in which they feel less confident. It is recommended that practitioners follow the 3 stages identified.

The DACUM (Developing a curriculum model) Performance Rating Scale (Herman & Kenyon 1987) can be used to enable the practitioner to rate the level of achievement in all areas of the competency framework. This means that a nurse may identify him/ herself as being expert in one aspect of a competency while competent in another & only working at a level of the inexperienced practitioner in yet another. The grading, or scoring, system is to further discriminate levels of achievement. It is also possible to identify an overall level of performance & achievement by combining the scores from all competencies, thus giving the practitioner a sense of progress in all aspects of their role.

	Level of achievement	Grade
Inexperienced	Cannot perform this activity satisfactorily to participate in the clinical environment	0
practitioner in this field	Can perform this activity but not without constant supervision & some assistance	1
<b>V</b>	Can perform this activity satisfactorily but requires supervision & some assistance	2
Competent practitioner	Can perform this activity satisfactorily with supervision but no assistance	3
<b>V</b>	Can perform this activity satisfactorily without supervision	4
Expert practitioner	Can perform this activity with initiative & adaptability to special problem situations	5
	Can perform this activity with initiative & adaptability to special problem situations & lead others	6

### Stage 1 - Self assessment from the nurse identifies initial level of performance:

The nurse undertakes a self-assessment, using the DACUM rating scale detailed above, reflecting upon their own practice, theoretical knowledge, practical skills & experience.

### Stage 2 – Reflective discussion

The nurse will meet with either their supervisor, a peer or a practice educator to discuss the self-assessment. This discussion should be based on examples of practice & evidence based research & reading. From this discussion a further rating will be given which will then form the basis for any on-going CPD (Continuing Professional Development).

### Stage 3 - Development Action plan

Following the first 2 stages the practitioner should then think about how they want to use their reflection to impact on their practice. This could be through using strengths in a particular area to help mentor/develop other staff, either through formal practice education routes or as an informal resource within the service. Or they may want to improve development areas through formal training/teaching, reflective practice groups, focused study, reading, visits, shadowing or searching out a mentor.

# **Individual Competency areas for Liaison Mental Health Nursing**

The table can be used as a quick reference guide to the 19 competency areas detailed on pages 2-22.

1.	Providing liaison mental health nursing assessment & consultation	10.	Providing nursing advice on medication
2.	The assessment of risk including self-harm	11.	Working with people with specific physical illnesses
3.	Providing nursing assessment & advice of patient's capacity	12.	Working with older adults
4.	Identifying & considering ethical issues	13.	Working with people with a substance misuse problem
5.	Providing nursing advice on legal issues	14.	Working with people with specific psychosomatic disorders
6.	Interventions used in liaison mental health nursing	15.	Working with people with learning disabilities
7.	The admission & discharge of patients	16.	Working with mothers & babies
8.	Liaison Mental Health Nurses maintaining accurate records,	17.	Working with children & young people
	documentation & report writing	18.	Education, training, & supervision
9.	Providing nursing advice on the management & care of patients with	19.	Evaluating Liaison Mental Health Nursing provision
	complex psychosocial &/or challenging presentations		

1. 0	Competency for providing liaison mental health nursing assessment & consultation	Rating: Self- assessment	Rating: Reflective discussion
1.	Can demonstrate knowledge of the different components of liaison mental health assessment within a bio psychosocial model, including risk assessment & mental state examination.		
2.	Can demonstrate an up to date knowledge of mental health issues, their diagnosis & treatment.		
3.	Can demonstrate an up to date knowledge of health issues encountered in the acute hospital setting by liaison mental health nurses.		
4.	Can demonstrate the ability to engage acute trust clinical staff to obtain information relevant to the assessment of comorbid physical-psychological presentations.		
5.	Can demonstrate ability to obtain information from wide variety of sources to inform patient assessment.  Can demonstrate ability to consider safety in the context of undertaking an assessment with patient & carers.		
6.	Can demonstrate ability to engage & establish empathic rapport with patients & their carers in a variety of acute hospital settings, e.g. Emergency Departments, in-patients wards & out-patients depts. Can demonstrate range of communication skills to obtain a comprehensive assessment in context of patient's presentation.		
7.	Can demonstrate the ability to complete a formulation & management plan based on the assessed needs of the patient & taking in consideration the views & preferences of the patient & carers.		
8.	Can demonstrate the ability to document the assessment, formulation & agreed management plan based on the assessed needs of the patient. Documentation should take various forms to accommodate the communication needs of the patient, carers & the wider clinical team.		
9.	Can demonstrate the ability to communicate the formulation & management plan to the patient, carers, clinical team & the wider multi-agency team.		
10.	Can demonstrate the ability to use negotiation & assertiveness skills to advocate for the mental health needs of the patient in the acute hospital setting.		
11.	Can demonstrate the ability to manage own time & prioritise workload to ensure short & long term tasks are achieved.		

2.	Competency for the assessment of risk including self-harm	Rating: Self- assessment	Rating: reflective discussion
	Theoretical Competency		
1.	Can demonstrate knowledge of mental illness & different mental health problems in relation to risk to self & others.		
2.	Can demonstrate knowledge of the principles, different factors & clinical indicators contributing to risk to self & others.		
3.	Can demonstrate up to date knowledge of changing trends, risk indicators, national targets & national guidance related to the assessment of risk to self & others.		
4.	Can demonstrate knowledge of use & effectiveness of particular risk screening & assessment tools.		
5.	Can demonstrate knowledge of effectiveness of specific interventions for people who present with risk to self or others.		
6.	Can demonstrate knowledge of relevant research & its application to practice.		
7.	Can explain the rationale for carrying out an assessment of risk with all patients referred as an integral part of the assessment process.		
8.	Can describe techniques involved in the assessment of risk & teach other clinical staff where appropriate.		
9.	Can demonstrate knowledge of local & national policies that might impact on the assessment of risk as well as the liaison mental health nurse's legal & clinical responsibilities in this area.		
10	Can demonstrate knowledge of mental health promotion & preventative strategies in relation to risk.		
	Clinical Competencies		
11	Can combine theoretical knowledge with practical, clinical skills in assessing risk.		
12	Can demonstrate the ability to gather all necessary information to assist in the risk assessment process.		
13	Can demonstrate the skills, including those of communication, necessary to move through the different phases of a therapeutic relationship with the patient during the assessment & treatment process.		
14			

15	Can demonstrate the necessary clinical skills & interventions to undertake a risk assessment utilising a structured clinical judgement approach.	
16	Can demonstrate the ability to undertake risk assessment such that changes in pattern of risk behaviour are identified & appropriate amendments of risk management plans are implemented.	
17	Can demonstrate the ability to arrive at a formulation of risk following assessment which incorporates the principles of positive risk taking.	
18	Can formulate a comprehensive risk management plan to address areas of identified risk & oversee this until clinical responsibility is passed to another clinician or clinical team.	
	Communication Skills	
19	Can accurately & comprehensively document a risk assessment & risk management plan once it is completed.	
20	Can demonstrate the ability to actively involve the patient & where possible the patient's carers in agreeing the detail of a risk management plan.	
21	Can communicate the level & nature of risk identified, & an effective risk management plan, to other relevant professionals involved in the patient's care.	
22	Can co-ordinate the role of different members of the clinical team in managing clinical risk.	

Note: This is the largest of the individual competency frameworks, which is why it has been split into three parts. It should be read for the assessment of patients who pose a risk to self or others & for risk assessment in its widest sense. Risk assessment should always be a part of a more comprehensive assessment process & the nurse should be as competent in undertaking a full psychosocial mental health assessment as in assessing risk.

3.	Competency for providing nursing assessment & advice of patient's capacity	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate up to date knowledge of the legislation & guidance involved in determining a person's capacity.		
2.	Can demonstrate knowledge of the legal principles & guidelines involved & the liaison mental health nurse's role in the process, as well as those of other clinicians.		
3.	Can describe the process & techniques involved in assessing the capacity of a patient related to a particular instance of care or treatment decision.		
4.	Can explain the rationale for undertaking an assessment of an individual's capacity.		
5.	Ensure that any advance decisions are incorporated into the decision making process & that this process is clearly documented including the rationale.		

	Can accurately & comprehensively record, in all relevant documentation, the process undertaken to assess the capacity of a patient, including findings & any specific advice &/or recommendations that result from assessment.	
7.	Can communicate any advice &/or information to other members of the wider clinical team.	

4.	Competency in identifying & considering ethical Issues	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate knowledge of ethical principles underpinning patient care in the acute hospital setting.		
2.	Can demonstrate knowledge of ethical principles underpinning patient care in the acute hospital setting.		
3.	Can explain the rationale for identifying ethical issues relating to the care & treatment of individual patients.		
4.	Can explain the role of different disciplines &/or agencies in meeting the needs of patients in relation to ethical issues.		
5.	Can demonstrate how the nurse can assist the patient &/ or carers in addressing ethical issues relating to the patient's care & treatment.		
6.	Can accurately document any ethical issues that arise out of nursing interventions in an individual patient's care & treatment.		
7.	Can communicate concerns & issues about an individual patient's care & treatment with other members of the clinical team.		

Note: As with legal issues, this is an area of work that raises problems of inconsistency in practice & difficulties gaining consensus among practitioners & other involved. The identification & consideration of ethical issues has much in common with both legal issues & the capacity to consent but not exclusively so. A forum for both reflection & review is once more a necessary component of helping nurses to develop & maintain the consistent application of principles & practice in this area. An important concern for liaison mental health nurses in all cases where there are legal &/or ethical considerations is the duty of care & responsibilities as identified by their own trust policies & the Nursing & Midwifery Council.

5. C	competency for providing nursing advice on legal issues	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate up to date knowledge of relevant legislation & common law principles as they apply to patient care in the acute hospital.		
2.	Can demonstrate knowledge of principles underpinning legislation & legal issues related to patient care including relevant codes of conduct, accountability & scope of practice.		
3.	Can describe local procedures involved in the application of particular legislative aspects related to patient care.		
4.	Can explain the roles of different agencies &/or disciplines involved in the application of a particular legislative function in a patient's care &/or treatment.		
5.	Can describe nurse's role in the implementation of any statutory legal procedures relating to patient care.		
6.	Can accurately document any nursing involvement &/or responsibilities in the implementation of legislative procedures or legal issues relating to patient care.		
7.	Can communicate with other members of the clinical team relevant information about legal aspects of an individual patient's care.		
8.	Can follow through all aspects of the liaison mental health nurse's role in the implementation of the legal aspects related to an individual patient's care ensuring that all members of the treating clinical team are involved in the decision making process.		
9.	Can support treating clinical teams to consider accessing legal advice in complex & challenging clinical situations.		
10.	Ensure that any acts or omissions which breach local policy or legal principles are reported to the appropriate parties.		

Note: Legislation impacting upon nurses' practice is wide & varied. Some relates entirely to nursing itself while others may be related to the treatment of people with mental illness e.g. the Mental Health Act (1983) & the subsequent 2007 amendment. Within the acute trust the Mental Capacity Act (2005) & the subsequent Deprivation of Liberty Safeguards is also pertinent. Common Law refers to law where there is no specific legislation but a collection of case precedents that determine future legal judgements until re-defined by the courts.

6. (	Competency for interventions used in liaison mental health nursing	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate knowledge of evidence based bio-psychosocial approaches & a range of therapies suitable for crisis work, physical-psychological co-morbidities & mental health emergencies.		
2.	Can demonstrate knowledge of evidence based approaches for providing therapeutic interventions both in a single assessment & in on-going short term work.		
3.	Can explain the rationale for providing a particular therapeutic response to an assessment.		
4.	Can demonstrate in practice the necessary skills to undertake a therapeutic intervention in a range of clinical situations e.g. crisis work, risk management, mental health emergencies & a range of psychosocial & behavioural presentations in the acute hospital environment.		
5.	Can produce accurate & comprehensive documentation of assessments, case formulations, interventions & outcomes with consideration for clinical governance & audit needs.		
6.	Can demonstrate in theory & in practice a collaborative approach working across boundaries & services/agencies with patients & their carers, as meets the individual need to include vital people in treatment plans.		
7.	Can demonstrate the ability to interview a patient & produce a case formulation, developing a collaborative treatment approach. This will consider all aspects of the patient & his/her particular needs.		
8.	Can communicate & explain core aims & expected outcomes to other members of the wider clinical team.		
9.	Can provide direct & indirect care to a specified patient population by overseeing the implementation of therapeutic interventions including facilitation & clinical & management supervision of staff, through to the point at which clinical responsibility is passed to another team or, to the patient.		
10.	Can consider the whole liaison service development in response to a specific patient population need & provide information to develop the psychological/mental health care to an acute hospital environment.		
11.	Can demonstrate the ability to promote positive attitudes to people with psychological problems through education & the challenging of stigma.		
12.	Can demonstrate an up to date knowledge of the locally agreed role of the liaison mental health nurse in responding to major incidents.		
13.	Actively participates in supervision relating to any therapeutic interventions they provide.		

7.	Competency for the admission & discharge of patients	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate knowledge of the principles that will govern decisions about admitting or discharging patients e.g. risk/safety, acting in accordance with existing treatment plans.		
2.	Can explain the rationale for decisions about whether or not to admit or discharge a patient following assessment &, where applicable, a period of treatment.		
3.	Can demonstrate knowledge of principles involved in making a decision to admit patient into a certain area of mental health services e.g. acute inpatient psychiatric ward or for follow up within the liaison mental health service.		
4.	Can demonstrate knowledge of principles involved in making decision to discharge patient from liaison mental health service but refer onto another service e.g. CMHT, social services or voluntary sector agency.		
5.	Can demonstrate the ability to negotiate, with relevant clinicians, an admission to another part of a mental health service e.g. an acute inpatient psychiatric ward, providing the necessary information on all matters pertinent to the admission.		
6.	Can demonstrate consultation & effective communication with the referrer & other clinicians involved in the patients care.		
7.	Can accurately & comprehensively document the rationale for all decisions about the admission & discharge of patients, including information, where relevant, about different options considered.		
8.	Can demonstrate understanding of relevant policies, national & local, that are applicable to mental health liaison nurse's rights, responsibility & accountability in making decisions about admission & discharge of patients.		
9.	Can demonstrate self-awareness & an understanding of the varying nature of one's own capabilities in different clinical situations, particularly in relation to recognising when it is safe & reasonable to act semi-independently or when to seek a second opinion from colleagues before admitting or discharging a patient.		

Note: It should be noted that nurses working in mental health liaison services will often have more freedom to act clinically than colleagues in other specialities. While all practitioners should work within the parameters of their teams, they will also be making major clinical decisions in a semi-autonomous fashion, particularly in relation to the discharge of patients following an initial assessment. This is an area where nurses should be identified as being both competent & confident before taking on this responsibility.

8.	Competency for maintaining accurate records, documentation & report writing	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate knowledge of the rationale for comprehensive record keeping & documentation in a clinical arena.		
2.	Can demonstrate knowledge of local policies, & national/NMC guidelines on documentation, record keeping, report writing, as well as available support in decisions related to responding to requests for, & the writing of, reports.		
3.	Can demonstrate effective communication through written documentation.		
4.	Can demonstrate an understanding of the processing of requests for different types of documentation e.g. G.P. letters or incident reports.		
5.	Can demonstrate the ability to write a comprehensive account of patient contact or report, including the pertinent & relevant information required for different types of documentation.		
6.	Can demonstrate an understanding of the need to separate information given by the patient, other health professionals, carers/family or others, & subjective impressions.		
7.	Can demonstrate a working knowledge of the Data Protection Act (1998) & NHS Information Governance. Including the need to balance a patient's right to confidentiality with the requirement to share essential written information that could affect the safety of the patient &/or others.		
8.	Can demonstrate an understanding of the need to safeguard the confidentiality of third party information where disclosure would present a risk to the third party.		
9.	Can demonstrate appropriate decision making regarding the dissemination of completed written documentation & patient information to relevant parties e.g. what written information constitutes a good written referral & how it should be laid out.		
10.	Can demonstrate ability to write a clear & comprehensive account of an assessment, including a core biographical history, history of presenting complaint, mental state examination, documentation of risk, & a formulation indicating the nurse's overall impression of patient's current presentation, recommendations for treatment & care, the details & rationale for a management plan, incorporating who will take responsibility for its different components.		
11.	Can demonstrate an understanding of the need for all patient records & documentation to be stored securely & privately.		

9.	Competency for providing nursing advice on the management & care of patients with complex psychosocial &/or challenging presentations	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate theoretical knowledge of reasons why patient's presentation may be perceived as 'difficult' e.g. understand organisational, environmental & cultural context, as well as clinical issues such as physical &/or mental health problems.		
2.	Can demonstrate ability to undertake an assessment of immediate issues & any risk factors associated.		
3.	Can demonstrate the ability to assist the responsible clinical team to develop & implement an immediate management plan which also considers risk management.		
4.	Can demonstrate an ability to complete a detailed assessment of any 'challenging behaviour', its history & context & place this within a full biographical assessment wherever necessary.		
5.	Can demonstrate the ability to help relevant staff understand the overall difficulties being experienced & communicate effectively to develop both short &/or longer term management & care plans.		
6.	Can accurately document any liaison mental health nursing involvement &/or responsibilities in the implementation of assessment & treatment process, incorporating any legal issues wherever appropriate.		
7.	Can demonstrate the necessary clinical skills to contain, defuse & manage a patient exhibiting challenging behaviours with reference to local policy.		
8.	Can demonstrate a theoretical knowledge of boundary & limit setting.		
9.	Can demonstrate an ability to review, evaluate & revise care & treatment plans in conjunction with other clinicians involved.		
10	'difficult' by clinicians in the acute hospital, as well as what support can be provided & by whom.		
11	Can demonstrate the ability to provide education on mental health issues & clinical supervision related to work clinicians are undertaking with patients who have mental health problems in a non-mental health setting.		

Note: Support for clinicians working with a patient identified as behaving in a challenging manner or with a more complex psychosocial presentation may take the form of supporting the responsible clinical team rather than direct assessment of the patient by the LMHN. The work may include helping the clinical team address organisational or functional issues which might be highly practical e.g. staffing levels or more complex issues within their team e.g. about communications & relationships.

10.	Competency for providing nursing advice on medication	Rating: Self- assessment	Rating: reflective discussion
1.	Can explain the rationale & limitations for mental health nursing involvement in advice about medication including adherence to local policy.		
2.	Can demonstrate knowledge of the principles involved in the prescription of medication.		
3.	To demonstrate a knowledge of the impact upon mental state of a broad range of medications including psychotropic medication & polypharmacy.		
4.	Can explain the rationale for providing advice on medication prescribing for patients with mental health problems.		
5.	Can explain the role of different members of the broader clinical team in the prescribing of medication.		
6.	Can accurately & comprehensively record, in all relevant documentation, any involvement in advice or requests for advice about prescribing issues.		
7.	Can communicate any advice &/or information to other members of the wider clinical team.		
8.	Has knowledge of how to assist physicians with the prescription of medication by involving an appropriate psychiatrist/ pharmacist.		
9.	Can communicate the rationale for & impact of psychotropic medication to patients, carers & the wider clinical team.		

Note: Nurses involved in discussing issues related to the prescription &/or administration of medication should be clear about the limits of their own role, education & responsibility. Although they may be able to provide initial guidance for inexperienced physicians or nurses not familiar with all aspects of psychotropic medication &/or its interactions with other drugs, this is no substitute for consultation with psychiatrists &/or pharmacists.

1	1.Competency for working with people with specific physical illnesses	Rating: Self- assessment	Rating: reflective discussion
1	. Can demonstrate evidence based knowledge of the prevalence of psychological morbidity associated with specific physical illnesses & its effect on treatment & prognosis.		
2	2.		
	Can demonstrate knowledge of the psychological impact associated with physical illness.		
3	Can demonstrate knowledge of support groups & specialist services available for people with specific illnesses		
	including expert patient programmes		

4.	Can demonstrate effective communication with patients with physical-psychological co-morbidities, their carers & members of the care team.	
5.	Can demonstrate the ability to educate patients, their carers & members of the care team about the psychological issues associated with physical illness.	
6.	Can demonstrate the ability to develop effective working relationships with patients, their carers & members of the care team.	
7.	Can demonstrate the ability to support patients, their carers & members of the care team in participating in all aspects of the patient's health care.	
8.	Can demonstrate the ability to recognise the mental health needs associated with an individual's physical illness.	
9.	Can demonstrate the ability to participate in the development & documentation of all aspects of care, including care plans, addressing the mental health needs of patients with specific physical illness.	
10.	Can demonstrate the ability to implement a range of appropriate interventions, supported by an evidence base, that address the mental health needs of patients with physical illness.	
11.	Can demonstrate the ability to evaluate care that addresses mental health needs of patients with physical illness, & document results of evaluation adjusting care plan to ensure relevant & effective care is continually provided.	

12.	Competency for working with older adults	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate an understanding of normal aging processes.		
2.	Can demonstrate up to date knowledge of mental health issues associated with the ageing process.		
3.	Can demonstrate up to date knowledge of psychosocial risk factors for mental health issues in older adults & specific groups more vulnerable to these issues e.g. patients at increased risk of developing dementias associated with cardio-vascular disease.		
4.	Can demonstrate a comprehensive knowledge of dementia, delirium & depression/anxiety & specific medical conditions which commonly produce psychological effects in older adults.		
5.	Can demonstrate up to date knowledge of impact of aging on risk & its assessment & management, e.g. suicide & falls.		
6.	Can demonstrate effective communication with older adults with physical-psychological co-morbidities, including cognitive & sensory impairment, their carers & members of the care team.		

7.	Can demonstrate ability to develop effective working relationships with older adults, their carers & members of	
	care team.	
8.	Can demonstrate the ability to undertake an effective assessment of the older adult patient, utilising evidence based	
	assessment tools as appropriate.	
9.	Can demonstrate the ability to support older adults, their carers & members of the care team in participating in all aspects of the patient's health care.	
10.	Can demonstrate the ability to help relevant staff understand the overall difficulties being experienced by the older adult patient & communicate effectively with carers & relevant clinical teams to develop both short &/or longer term management & care plans.	
11.	Can demonstrate the necessary clinical skills to contain & manage the older adult patient exhibiting challenging behaviours with reference to local policy.	
12.	Can demonstrate an up to date understanding of potential effects of psychotropic medication & polypharmacy in older adults & demonstrate a capability in advising both	
13.	Can demonstrate the ability to participate in the development & documentation of all aspects of care, including care plans, addressing the mental health needs of older adults.	
14.	Can demonstrate the ability to implement a range of appropriate interventions, supported by an evidence base, that address the mental health needs of older adults.	
15.	Can demonstrate the ability to evaluate care that addresses the mental health needs of older adults, & document the results of the evaluation adjusting the care plan to ensure relevant & effective care is continually provided.	
16.	Can demonstrate the ability to act upon concerns about safeguarding issues.	
17.	Can demonstrate ability to liaise effectively with services involved in patient's care including MHCOP, physical care team, social services & primary care services & to discuss & assist in implementation of effective care programmes for older adults.	

13	3.Competency for working with people with a substance misuse problem	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate up to date knowledge of legal & illicit substances that can potentially be abused.		
2.	Can demonstrate up to date knowledge of the physical & psychological effects of substance misuse.		
3.	Can demonstrate up to date knowledge of signs & symptoms of withdrawal from addictive substances.		

4.	Can demonstrate up to date knowledge of the theory & application of detoxification regimes.	
5.	Can demonstrate an understanding of the interaction between substance misuse & mental health problems.	
6.	Can demonstrate ability to undertake comprehensive assessment of patient's drug & alcohol history & current use.	
7.	Can demonstrate the ability to undertake an initial risk assessment of an intoxicated patient & develop an interim management plan* to maintain the safety of the patient & others pending full bio psychosocial assessment once the patient is capable of meaningful engagement.	
8.	Can demonstrate the clinical skills & knowledge to therapeutically engage patients who misuse substances in the assessment & treatment process.	
9.	Can demonstrate the clinical skills & knowledge of evidence based interventions for patients who misuse substances e.g. harm minimisation work, health education, brief interventions.	
10.	Can demonstrate up to date knowledge of the range of services available to patients who misuse substances, both at the time of referral & for longer term treatment & support.	
11.	Can demonstrate the ability to provide educational information to acute hospital staff, carers & relatives.	
12.	care plans, addressing the mental health needs of patients who misuse substances.	
13.	Can demonstrate ability to evaluate care that addresses mental health needs of patients who misuse substances, & document results of evaluation adjusting care plan to ensure relevant & effective care is continually provided.	

**Note:** LMHN assessment should occur in tandem with medical treatment. Where it is not appropriate to assess the patient directly due to their intoxication & or their physical health status background information & information from third parties can be obtained to feed into the full assessment process once the patient's physical status improves such that they can engage with the assessment. Prior to the point of patient engagement an initial risk assessment of the patient should be undertaken to inform interim management of the patient.

14	.Competency for working with people with specific psychosomatic disorders	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate knowledge of the prevalence of psychosomatic disorders.		
2.	Can demonstrate knowledge of the impact associated with psychosomatic disorders.		

3.	Can demonstrate ability to communicate effectively with patients with psychosomatic disorders, their carers &	
	members of the care team.	
4.	Can demonstrate ability to educate patients, their carers & members of care team about issues associated with psychosomatic disorders, promoting positive attitudes towards people with psychological problems.	
5.	Can demonstrate the ability to develop effective, collaborative working relationships with patients, their carers & members of the care team.	
6.	Can demonstrate the ability to support patients, their carers & members of the care team in participating in all aspects of the patient's mental health care.	
7.	Can demonstrate ability to assess mental health needs associated with individual's psychosomatic disorder.	
8.	Can demonstrate the ability to participate in the development & documentation of all aspects of care, including care plans addressing the mental health needs of patients with specific psychosomatic disorders.	
9.	Can demonstrate the ability to implement a range of appropriate interventions, supported by an evidence base, that address the mental health needs of patients with psychosomatic disorders.	
10.	Can demonstrate ability to evaluate care that addresses mental health needs of patients with psychosomatic disorders, & document results of evaluation adjusting care plan to ensure relevant & effective care is continually provided.	

**Note:** This competency can be used for looking at the work of the nurse in relation to patients who present with a variety of problems, including medically unexplained symptoms, conversion disorders, factitious disorders, somatisation & hypochondriasis.

15	Competency for working with people with learning disabilities	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate an understanding of learning disabilities.		
2.	Can demonstrate an evidence based understanding of the increased morbidity & mortality due to physical &/ or mental health issues in people with learning disabilities.		
3.	Can demonstrate up to date knowledge of the impact of learning disability on risk & its assessment &management, e.g. vulnerability.		
4.	Can demonstrate effective communication with people with learning disabilities, including sensory impairment, their carers & members of the care team.		
5.	Can demonstrate the ability to develop effective working relationships with people with learning disabilities, their carers & members of the care team.		
6.	Can demonstrate the ability to undertake an effective assessment of the learning disability patient, utilising evidence based assessment tools as appropriate.		

7.	Can demonstrate the ability to support patients with learning disabilities, their carers & members of the care team in participating in all aspects of the patient's health care, promoting choice & dignity in care.	
8.	Can demonstrate the ability to help relevant staff understand the communication needs of individual patients with learning disabilities & support approaches which promote effective communication of treatment plans & choices.	
9.	Can demonstrate the necessary clinical skills to contain & manage any identified challenging behaviours with reference to local policy.	
10.	Can demonstrate an up to date understanding of potential effects of psychotropic medication & polypharmacy in patients with learning disabilities & demonstrate a capability in advising both patients, carers & other clinicians involved in the patient's care & treatment.	
11.	Can demonstrate the ability to participate in the development & documentation of all aspects of care, including care plans, addressing the mental health needs of patients with learning disabilities.	
12.	Can demonstrate the ability to evaluate care that addresses the mental health needs of patients with learning disabilities, & document the results of the evaluation, adjusting the care plan to ensure relevant & effective care is continually provided.	
13.	Can demonstrate the ability to act upon concerns about safeguarding issues.	
14.	Can demonstrate the ability to liaise effectively with, other services involved in the patient's care including learning disability services, physical care team, social services & primary care services & to discuss & assist in the implementation of effective care programmes for patients for learning disabilities.	

16.	Competency for working with mothers & babies	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate up to date knowledge of mental health issues specific to motherhood.		
2.	Can demonstrate knowledge of the psychosocial risk factors for mental health issues in the perinatal period.		
3.	Can demonstrate up to date understanding of potential effects of psychotropic medication in pre & post-partum woman & demonstrate capability in advising both patients & other clinicians involved in mother's care & treatment.		
4.	Can demonstrate an understanding of the risk of relapse for women with a history of mental illness who are pregnant.		
5.	Can demonstrate an understanding of the effects of mental illness on the developing child.		

6.	Can demonstrate knowledge of evidence based treatment approaches & good practice in the care of women with perinatal mental illness.	
7.	Can demonstrate knowledge of local, regional & national resources available to support women with mental health problems in motherhood.	
8.	Can demonstrate knowledge & understanding of safeguarding issues, as well ethical & legal considerations in relation to childbirth & motherhood.	
9.	Can demonstrate the ability to act upon concerns about safeguarding issues.	
10.	Can demonstrate the ability to conduct a bio psychosocial assessment of the mental health needs of a woman during the perinatal period.	
11.	Can demonstrate the ability to utilise evidence based assessment tools in the assessment of perinatal mental health.	
12.	Can demonstrate the ability to formulate & communicate a plan of recommended support to relevant services.	
13.	Can demonstrate the ability to liaise effectively with midwifery, health visiting & children's & families social work teams to discuss & assist in the implementation of effective care programmes for women suffering, or at risk from, perinatal illness or relapse of existing mental health problems.	

17.	.Competency for working with children & young people	Rating: Self- assessment	Rating: reflective discussion
1.	Can demonstrate up to date knowledge of mental health issues specific to childhood & adolescence.		
2.	Can demonstrate knowledge of the psychosocial risk factors for mental health issues in childhood & adolescence, identifying specific groups more vulnerable to mental health issues.		
3.	Can demonstrate an understanding of the effects of mental illness on the psychological development & life chances of children & young people.		
4.	Can demonstrate an understanding of the risk of relapse for children & young people with serious mental illness, including early onset psychosis.		
5.	Can demonstrate knowledge of evidence based treatment approaches & good practice in the care of children & young people.		

6.	Can demonstrate an up to date understanding of potential effects of psychotropic medication in children & young persons & demonstrate a capability in advising both patients, carers & other clinicians involved in the child & young person's care & treatment.	
7.	Can demonstrate knowledge of local, regional & national resources available to support children & young people with emotional difficulties & mental health problems including services in the 4 tiers.	
8.	Can demonstrate knowledge & understanding of safeguarding issues, as well ethical & legal considerations in relation to competency, consent & the legal frameworks of the Mental Health Act (1983 amended 2007) & Children Act (2004).	
9.	Can demonstrate the ability to conduct a bio psychosocial assessment of the mental health needs of a child or young person, including carers & family members in the assessment wherever appropriate.	
10.	Can demonstrate the ability to utilise evidence based assessment tools in the assessment of child & adolescent mental health.	
11.	Can demonstrate the ability to formulate & communicate a plan of recommended support to relevant services.	
12.	Can demonstrate the ability to act upon concerns about safeguarding issues.	
13.	Can demonstrate the ability to liaise effectively with, other services involved in patient's care including CAMHS, paediatrics, social services & educational services & to discuss & assist in implementation of effective care programmes for children & young people suffering, or at risk from, acute, chronic or relapsing.	

1	8.Competency for education, training, & supervision	Rating: Self- assessment	Rating: reflective discussion
	1. Can demonstrate knowledge of different methods that could be used to educate/ train acute trust colleagues regarding the mental health needs of general hospital patients		
2	2. Can develop resources to facilitate effective education/ training of acute trust colleagues.		
(	3. Can demonstrate use of local & national policies/ initiatives & evidence based materials to inform education & training.		
4	<ol> <li>Can demonstrate the ability to actively engage all relevant stakeholders including commissioners, acute trust partners, patients &amp; carers in the education/ training process.</li> </ol>		
,	5. Can undertake evaluation of education/ training which identifies recommendations for improvement.		

6.	Can demonstrate knowledge of the principles underpinning supervision of acute trust clinical colleagues.	
7.	Can identify a variety of methods of delivering effective supervision to acute trust clinical colleagues.	
8.	Can demonstrate the ability to undertake an evaluation of the effectiveness of supervision.	
9.	Can demonstrate a commitment to use & development of self-awareness & inter-personal skills in non-mental health settings.	
	Can demonstrate the ability to work autonomously, drawing on support as appropriate & to work within own limitations.	
11.	Can demonstrate a commitment to engage in own clinical & managerial supervision on a regular basis utilising a reflective approach to self-development.	
12.	Can demonstrate the ability to identify development needs & to seek out relevant education/ training to meet those needs.	

19. Competency for evaluating Liaison Mental Health Nursing provision			Rating: reflective discussion
1.	Can demonstrate knowledge of different audit tools & methodology that could be used to evaluate interventions used in liaison mental health nursing.		
2.	Can demonstrate knowledge of the principles underpinning audit & evaluation e.g. clinical governance, risk management.		
3.	Can describe the evaluation process in relation to specific interventions that are used within the liaison mental health team.		
4.	Can demonstrate knowledge of local & national policies/ initiatives underpinning evaluation & audit applicable to liaison mental health nursing, e.g. the Royal College of Psychiatrists Psychiatric Liaison Accreditation Network.		
5.	Can demonstrate the ability to actively engage all relevant stakeholders including commissioners, acute trust partners, patients & carers in the evaluation process.		
6.	Can produce & present reports based on the evaluation & audit of liaison mental health nursing which identify recommendations for service improvement.		
7.	Can demonstrate the ability to actively engage with research projects undertaken within the liaison mental health service.		

Competency area	What do I need to develop/learn?	What resources/support do I need?	What will success look like? How will I implement learning?	Target date for completion

Developme	Development Activity Log				
Date	Training / Development Activity	Type of Activity E.g. training, e- learning, reflective practice, supervision, peer discussion	What have I learnt?	Competency area supported	

## **Appendix – Original Competency Framework**

Eales, S., Wilson, N. & Waghorn, J. (Eds) (2014) A Competency Framework for Liaison Mental Health Nursing. London, London Wide Liaison Nurses Special Interest Group. Available from: S.Eales@city.ac.uk / Nicola.Wilson@wlmht.nhs.uk / Jackie.Waghorn@oxleas.nhs.uk

The initial work to identify core competencies for Mental Health Liaison Nurses was carried out in 2002/ 2003. It was a result of discussion among the members of the London Liaison Mental Health Nurses' Special Interest Group about the need to define the core competencies required for nurses working within the speciality. Given the wide variety of patient presentations liaison mental health nurses see, limited availability of educational preparation for the role, & the lack of any strategic professional overview or common service model (Roberts & Whitehead 2002, Hart *et al* 2003, Harrison 2004) the competency framework was developed. This competency framework has acted as a solid base upon which teams of liaison mental health nurses have built & developed their practice.

The competency framework has subsequently been reviewed & updated in 2014 by a sub group of the Liaison Nurses Special Interest Group. This revision has resulted in the inclusion of additional specific competencies which recognise the needs of older adults, mothers & babies, people with learning disabilities & children & young people. Specific competencies about the liaison mental health nurse's role in assessment & education & supervision have also been added to this document.

A definition of nurse competencies is: The ability to perform in a specific role, demonstrating the necessary skills, knowledge & appropriate attitude to a pre-determined level, thus providing adequate levels of knowledge based care to a specified client group.

Short (1984) postulated four normative conceptualisations of competence:

- 1. Performance that may be measured for competence regarding specific behaviours.
- 2. Competence can be viewed as having command of pertinent knowledge &/or skills.
- 3. Competence may be seen as indicative of a degree of capability deemed sufficient in a particular activity.
- 4. A holistic conceptualisation of competence includes knowledge, skills, attitudes, performances & levels of sufficiency.

A number of other issues are relative to the use of a competence framework for self-assessment or within a structured supervision framework:

Competency statements must be measurable & minimise subjective assessment. Competencies cannot be formulated for all aspects of liaison mental health nursing as it is not possible to assess & evaluate them. However, assessment & evaluation is a key component in establishing competencies & it is, therefore, necessary to have an assessment tool.

Competency based education is concerned primarily with ensuring that learners can fulfil the daily role required as practitioners & performance criteria need to be made explicit. Each competency should be identified from best practice from research (Fearon 1998).