NMC Outcomes and Performance Criteria - Nursing Stage Three – MH

Part A - Professional Values

1. Practice ethically and within the law at all times. (NMC1.1)
2. Carry out nursing duties in accordance with the Codes of Practice for the Mental Capacity Act, Mental Capacity Act any other relevant legislation whilst recognising associated ethical dilemmas. (NMC 1.1.1)
3. Practice in a manner that promotes equitable care for all and challenge any form of inequity. (NMC 1.2)
4. Challenge stigma and inequalities faced by individuals with mental illness. (NMC 1.3.1)
5. Engage, maintain and disengage from professional boundaried relationships. (NMC 2.5)
6. Maintain accurate, clear and complete records, including the use of electronic formats, using appropriate and plain language. (NMC 2.8)
7. Maintain confidentiality unless a need for safety and protection overrides it. (NMC 2.9)
8. Utilise knowledge of key public health issues to ensure that individuals with mental illness secure equal access to health screening, health promotion and healthcare. (NMC 3.5)
Part B - Demonstrate the ability to assess individual needs

1. Build collaborative, non-judgemental relationships with others. (NMC 2.1)
2. Develop partnerships that empower individuals and groups to develop safe self-care. (NMC 1.4)
3. Recognise the impact of ill-health and other factors upon an individual’s ability to communicate their needs. (NMC 2.3)
4. Undertake comprehensive, holistic assessments using interaction, observation and measurement and appropriate recording. (NMC 3.3)
5. Undertake comprehensive assessments in order to plan deliver sensitive and appropriate care, especially during progressive and terminal illness. (NMC 3.4)
Part C - Demonstrate the ability to contribute to risk assessment and management

1. Recognise and respond to the needs of all people especially the vulnerable. (NMC 3.1.1)
2. Facilitate disclosure of abuse of all types from clients. (NMC 2.4.1)
3. Take steps to protect individuals at risk of abuse. (NMC 3.9)
4. Promote mental health and prevent mental illness in at risk groups (such as the homeless). (NMC 3.5.1)
5. Recognise mental and physical deterioration in clients and initiate appropriate action. (NMC 3.7)
6. Undertake evidence-based interventions that minimise risk of suicide/self-harm. (NMC 3.7.2)
7. Utilise positive but appropriate risk taking in challenging situations, especially where compulsion is being used. (NMC 3.9.1)
8. Recognise early signs of emotional distress in others and seek to resolve conflicts quickly and with dignity either individually or through third parties. (NMC 2.4)
Part D - Demonstrate the ability to plan care for a range of individuals experiencing mental health problems

1. Use best available knowledge to plan and deliver care to individuals with physical health problems (including co-morbid conditions). (NMC 3.2)
2. Plan and undertake individual and group therapeutic interventions. (NMC 3.3.1)
3. Utilise a range of skills to promote health and well-being. (NMC 3.8)
4. Utilise a range of skills to promote recovery and self-management. (NMC 3.8.1)
5. Recognise the limitations and safe use of a range of medical and nursing interventions. (NMC 3.6)
Part E - Demonstrate safety and competence in implementation of agreed plans

1. Promote individual and public health across the lifespan especially for those who are particularly vulnerable. (NMC 1.3)
2. Promote health through education and role-modelling. (NMC 2.7)
3. Provide information to clients and carers in appropriate, understandable language and format. (NMC 2.2)
4. Actively seek to minimise the power imbalances evident when individuals are being detained or otherwise being controlled against their will. (NMC 1.2.1)
5. Explore the meaning of mental illness for individuals and promote meaningful recovery. (NMC 1.4.1)
6. Clarify and confirm the role of the nurse by responding appropriately to the varying needs of individuals and groups. (NMC 1.5)
7. Use communication strategies to engage and support individuals with thought and perceptual disturbance. (NMC 2.1.1)
8. Work in collaboration with clients and families when delivering individual and group interventions. (NMC 3.4.1)
9. Develop relationships with carers and deliver family interventions. (NMC 2.7.1)
10. Facilitate group interventions with clients/carers. (NMC 2.1.2)
11. Use personal experience and appropriate self-disclosure to promote recovery. (NMC 2.6)
12. Use early intervention, crisis resolution and relapse prevention/management if required. (NMC 3.7.1)
Part F - Demonstrate competence in medication management

1. Apply knowledge of pharmacology when contributing to team and client/family discussions regarding treatment options
2. Utilise the principles of treatment concordance in the best interest of individuals receiving pharmacological and physical treatments. (NMC 3.6.1)
3. Discuss the ordering, receiving, storing and disposing of medication safely within appropriate legal framework and local policy and where possible demonstrate
4. Demonstrate the accurate calculation of medication frequently encountered on placement
5. Discuss (and where appropriate demonstrate) the safe administration and recording of medication by a range of routes in accordance with local policy
6. Discuss the effects and side-effects of administered medicines (including anaphylaxis) and the monitoring, management and recording/reporting
7. Discuss the provision of sufficient information to clients to facilitate safe self-administration of medicine, assess client’s competence in such, and demonstrate where appropriate
Part G - Demonstrate the ability to work collaboratively with other team members and agencies, and manage clinical environments

1. Clarify and confirm the role of other professionals by working collaboratively and appropriately with them to deliver care to individuals. (NMC 1.6)
2. Balance individual autonomy with team work. (NMC 4.6)
3. Promote safety, security and continuity of care through effective communication across service boundaries. (NMC 4.6.1)
4. Work collaboratively across a range of professions and agencies (NMC including through referral) to deliver positive health outcomes for clients. (NMC 4.7)
Part H - Demonstrate the ability to evaluate care

1. Manage competing priorities and maintain the best quality of care possible. (NMC 4.3)
2. Evaluate care using a range of methods and communicate changes to others. (NMC 3.10)
3. Encourage users and carers to participate fully in the evaluation of therapeutic interventions.
4. Utilise evaluation to improve the experience of care services. (NMC 4.2)
5. Contribute to the improvement of healthcare through the development of services. (NMC 4.1)
Part I - Demonstrate a commitment to the ongoing development of self and others

1. Use reflective practice, supervision and support to facilitate ongoing insight into their performance and the acquisition of appropriate knowledge and skills. (NMC 1.7, 4.4)
2. Use best available knowledge to identify the limits of their competence to deliver care and make referral to others when in the face of complexity. (NMC 1.8, 3.1)
3. Seeks out and utilises best available evidence for their practice. (NMC 1.9)
4. Use supervision to explore the impact of personal values on their leadership/management practice. (NMC 4.4.1)
5. Actively manages own values and emotional distress through reflection and clinical supervision. (NMC 1.8.1)
6. Use a range of teaching and facilitation skills to develop others. (NMC 4.5)
7. Promote mental health and its care across disciplines/organisations. (NMC 4.5.1)