

Rights, Relationships and Recovery

The Report of the National Review of
Mental Health Nursing in Scotland

Summary

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Introduction by the Chief Nursing Officer

Welcome to this summarised version of *Rights, Relationships and Recovery - the Report of the National Review of Mental Health Nursing in Scotland*.

The title of the report was very deliberately chosen. It represents the central importance of:

- a *rights-based approach* to practice
- developing *positive relationships* as the starting point for all interventions with service users, carers and families in mental health nursing practice
- *recovery* as the underpinning principle of therapeutic interventions.

Rights, Relationships and Recovery is the first Chief Nursing Officer's review of mental health nursing in Scotland. It was driven by a single core purpose: to enhance and develop mental health nursing so that service users and their families and carers gain continual improvements in their experiences and outcomes of care. **I would urge you to read the full review report and the detailed action plan we have set out.**

In this summary, we outline the foundations for actions to develop mental health nursing in Scotland, how these actions will be supported, and the next stages in delivering and implementing the actions.

The review involved service users and carers, individuals holding senior posts in the mental health field and mental health nurses working together. Their drive, energy and imagination shaped the review, its report and the action plan. We learned that regardless of the group people might belong to, we all shared a common vision and wanted the same things for the future.

The action plan that accompanies the review report calls on everyone involved in mental health services to play their part. It is a wide and challenging agenda, but one that is achievable, and must be achieved. To do this we need to keep working together.

I will establish a National Implementation Group to drive and monitor delivery of the actions, and each NHS Board will also be expected to establish a local implementation group. Service users, families and carers and mental health nurses shaped this report, and they need to join together during the next stages to drive implementation.

My challenge to mental health nurses is to own the report and drive implementation of the action plan. You need to positively exercise your accountability, voice, influence and leadership to bring about the changes you want for yourself and others, harnessing and strengthening alliances to make a difference. Be brave, challenging, and productive in promoting service users' rights and recovery.

Paul Martin, RN, RHV, DMS, MBA
Chief Nursing Officer

Key messages - the foundations for action



Culture and values – strengthening the climate for care

- Mental health nursing is focused on caring about people, about spending time with people, and on developing and maintaining helpful relationships with service users and their families and carers.
- We need to continue to develop rights-based and person-focused mental health care by promoting values and principles-based practice in mental health nursing.
- The recovery approach should be adopted as the model for mental health nursing care and intervention, particularly in supporting people with long-standing mental health problems.
- We need models of practice that are centred on relationships between mental health nurses and people, maximise nurses' contact time with service users, families and carers, and promote rights and recovery-based working.

To support this we have developed an action plan that will:

- Make sure all mental health nurses have access to values-based training.
- Make sure that mechanisms are in place to embed values-based practice in nurses' personal development plans and clinical supervision.
- Encourage charge nurses in mental health settings to work with service user organisations to use recovery environmental audit tools to gauge their current practice and to help in the development of recovery-based approaches.
- Develop a national framework for training in recovery-based practice to support the dissemination of recovery-focused frameworks into practice.
- Support mental health nurses in reviewing and revising how they carry out assessments, plan care and work with people to make sure that approaches used maximise contact time between mental health nurses and service users and support values and recovery-focused practice

Key messages - the foundations for action



Practice and services

- We need to support the development of mental health nurses' roles in priority areas of acute inpatient, crisis care and intensive home treatment services.
- In particular, we need to support and develop the role of mental health nursing in acute inpatient care.
- Mental health nurses will continue to have a key role in contributing to supporting people with long-term and complex mental health problems and need to adopt strengths-based approaches to working with people towards recovery.
- Mental health services and mental health nursing must make the support of older people with mental health problems a priority. We need to make sure mental health nurses are prepared and developed to deliver this.
- The role of mental health nursing in providing early intervention to people at risk of developing mental health problems needs to be developed and enhanced.
- Mental health nurses must continue to develop their roles in health improvement, health promotion and tackling inequalities.
- People who use mental health services want more access to 'talking therapies' such as psychosocial interventions and psychological therapies, but demand outweighs supply. We need to increase opportunities for mental health nurses to be developed to deliver these therapies.

To support this we have developed an action plan that will:

- Create a national developmental programme for education, training and continuing professional development for acute inpatient care nurses.
- Ensure all inpatient units develop models for practice based on the recovery approach.
- Support and develop new models that promote continuity of care for people across different parts of hospital and community-based mental health services
- Develop a knowledge and practice development network for mental health nursing, initially focusing on acute inpatient care then expanding to include crisis care and intensive home treatment.
- Develop progressive competency-based frameworks and education that will enhance mental health nurses roles:
 - across the spectrum of acute inpatient, crisis care and intensive home treatment services
 - in older people's mental health services.
- Support mental health nurses' contribution to delivering psychosocial interventions and psychological therapies services using a stepped approach to development.
- Create nurse consultant posts to lead the development of mental health nursing's contribution:
 - across the spectrum of acute inpatient, crisis care and intensive home treatment services
 - to older people's mental health services
 - to psychosocial interventions and psychological therapies services.

Key messages - the foundations for action



To support this we have developed an action plan that will:

Education and development

- We need to attract the right people into mental health nursing and make sure they are prepared in the right way. A national framework that will ensure consistency of content and standards throughout Scotland is necessary to achieve this.
 - All mental health nurses, whatever their area of work, need opportunities to continue to learn and develop.
 - We need to actively involve service users, families, carers and practitioners in the design and delivery of education programmes for mental health nurses.
 - We need to develop the role of health care support workers in mental health, matching the roles and skills of health and care workers to people's needs.
 - Leadership is the key ingredient to realising the potential of mental health nursing in Scotland. We need nursing leaders at every level of the profession, not just the top echelons - people who lead through example in their practice and are prepared to challenge obstacles to achieving their goals for service users and their families and carers.
 - We need to continue to strengthen capability for research and evaluation in mental health nursing.
 - The mental health nursing community in Scotland is relatively small. It should be able to, and must, share and build on existing innovation on a national basis to inform developments. We need to develop a much more robust learning climate across the mental health nursing community, enabling innovations to be shared and a common approach to finding solutions to challenges to develop.
- Redesign the programmes that prepare people to be mental health nurses to ensure a clear and consistent national framework.
 - Meaningfully involve service users, carers and practitioners in the design and delivery of these programmes and continuing education programmes for mental health nurses.
 - Identify and share examples of good practice in service user and carer involvement in education to inform development on a national basis.
 - Encourage lecturers in higher education institutions to have direct links with clinical practice.
 - Maximise service user, carer and practitioner involvement in selection procedures for student nurses.
 - Maximise and develop the role of support worker in mental health services.
 - Support newly qualified mental health nurses.
 - Strengthen and enhance leadership in mental health nursing.
 - Ensure regular clinical supervision opportunities are provided for mental health nurses.
 - Create a more robust climate of learning, development, evaluation and research across the mental health nursing community in NHS Scotland.

The next stages - implementing and delivering the action plan

The review of mental health nursing in Scotland should be seen as part of, and not the 'end point' of, a process concerned with supporting and developing mental health nursing in Scotland.

The review has produced a prioritised five-year action plan for the support and development of mental health nursing in Scotland and the Scottish Executive has commissioned other organisations like NHS Education for Scotland and the Scottish Recovery Network to lead further activities to support delivery of the action plan.

It is important that in giving a national direction for developments, the action plan must continue to enable local progression and be owned and actioned at NHS Board, local service and individual practitioner levels.

Mental health services will continue to develop and evolve and the action plan will need to be revisited, monitored and developed at least annually.

To lead, drive, support, regularly monitor and deliver the action plan:

- the Scottish Executive will establish a National Implementation Group to support delivery of the actions
- each NHS Board will establish a local implementation group that reports annually to the National Implementation Group.

The process adopted during the review has successfully enabled joint and productive working among service users and carers, individuals holding senior organisational posts in the mental health field in Scotland and practitioners, all of whom have devoted considerable time and energy to shape the outcomes of the review. This process must be sustained post-review and must be mirrored in the membership and process adopted in the national and local steering and implementation groups:

- at the end of five years, the Scottish Executive will formally revisit progress on the actions and consider further work in the contexts of the evolving service framework for mental health services in Scotland and development of the total mental health workforce.



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