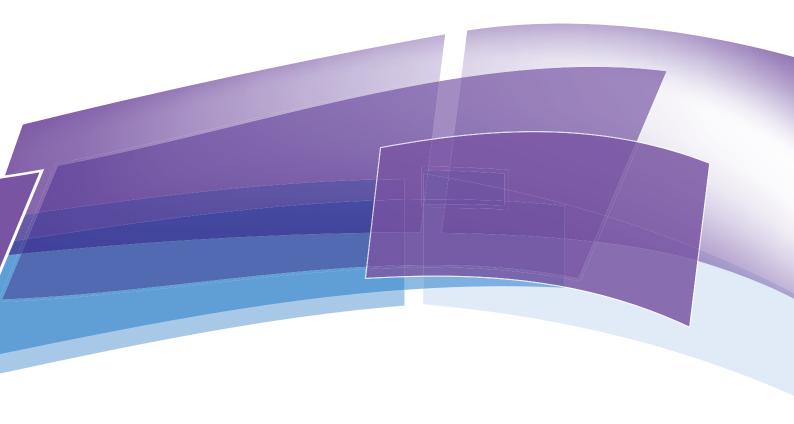
A Competency Profile for Nurses and Midwives: promoting the mental health and well-being of children and young people







Published by Northern Ireland Practice and Education Council for Nursing and Midwifery (NIPEC)

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Contents

	Page		
Preface	3		
Foreword	4		
Section I			
1.1 Introduction	5		
1.2 Development of the competency profile1.3 Purpose of the competency profile	5 6		
1.3 Ful pose of the competency profile	0		
Section 2			
2.1 What is a competency profile?	7		
2.2 Who is the competency profile for?	8		
Section 3			
3.1 Competency framework	10		
Domain I Mental health promotion and prevention	12		
Domain 2 Communication	19		
Domain 2 Communication Domain 3 Assessment Domain 4 Intervention Domain 5 Promoting safety Domain 6 Ethical and legal practice	27		
Domain 4 Intervention	32		
Domain 5 Promoting safety	39		
Domain 6 Ethical and legal practice	44		
Section 4			
4.1 Learning and development framework	51		
4.2 How to get started	52		
4.3 Producing evidence to demonstrate competence	53		
4.4 Planning for your learning and development	54		
Glossary of terms	55		
References	56		
Appendices			
Appendix I - Competency frameworks reviewed	59		
Appendix 2 - Relevant legislation and frameworks reviewed			
Appendix 3 - Membership of project board			
Appendix 4 - Membership of expert reference group			
Appendix 5 - Competence assessment tool	66		
Appendix 6 - Learning and development record proforma	106		

Preface

Good mental health and emotional well-being across the lifespan are major priorities for the Department of Health, Social Services and Public Safety (DHSSPS), and particularly so for the children and young people of Northern Ireland. We know that 30-40% of young people may at some time experience a mental health problem, and up to 20% will have a diagnosable mental health disorder. Considering this high prevalence rate, it is crucial that all staff review, develop and enhance the core skills and competencies required for working with children and young people, irrespective of job title or qualification. This competency profile provides the opportunity and impetus to do just that. It outlines what nurses and midwives need to know and need to do, in order to promote, improve and safeguard the emotional health and well-being of children and young people.

This profile is the outcome of a successful partnership between the Office of the Chief Nursing Officer (DHSSPS) and the Northern Ireland Practice and Education Council for Nursing and Midwifery (NIPEC), and I would like to extend my thanks to the Project Board and the Expert Reference Group for their contribution to the development of this innovative and exciting publication.

I am happy to endorse the competency profile to all practitioners who come into contact with, or work directly with, children and young people and their families. My challenge to you is to own and drive implementation of this profile, which will help to inform, guide and develop your practice as we move into a new era of mental health care in Northern Ireland.

Professor Martin Bradley Chief Nursing Officer

A. S. Fralley

Foreword

NIPEC on behalf of the DHSSPS, is pleased to present this competency profile for nurses and midwives promoting the mental health and well-being of children and young people in Northern Ireland.

The development of this competency profile is timely in terms of the context within which nurses and midwives work. For instance, it will support the standards currently being developed as part of the Northern Ireland Mental Health and Well-being Service Framework and assist in Delivering the Bamford Vision (DHSSPS, 2009). It also links with the new standards and competencies being developed by the Nursing and Midwifery Council (NMC) for pre-registration education and the philosophy of the proposed children, family and public health pathway (DH, 2009). Similarly, it complements the current work on the development of a National Strategy for Mental Health and Well-being of Children and Young People (Social Care Institute for Excellence, 2009).

The competencies listed within this profile reflect the current knowledge base and scope of practice required to support the promotion of mental health and well-being for children and young people. As scientific knowledge expands, however, and health care systems and practice change in response to societal needs, these competencies may also evolve. Periodic review and updating of these competencies is, therefore, recommended to ensure their currency and reflection of these changes.

NIPEC would like to thank all of those who contributed to the development of this competency profile, especially the following:

- The members of the Project Board, who guided and supported this work
- The members of the Expert Reference Group, who contributed to the development of the competency profile. A special word of thanks also goes to the Writing Group, for refining the competencies: Billie Hughes (lead), Barney Hanna, Dr Heather Hanna, Mary Findon-Henry, Calum McDonald and Teresa Mungur
- Robin Arbuthnot (Regional Management Side Lead for Northern Ireland) who
 reviewed the competence assessment tool in relation to the core and specific
 dimensions of the NHS Knowledge and Skills Framework
- Finally, our thanks to all the groups, agencies and organisations across the statutory, independent and voluntary sectors for their contribution throughout the consultation process which helped to refine this competency profile further.

Trances & Mc Murray

Frances McMurray Chief Executive NIPEC Moira Davren Chair Project Board

Mina Daview

Section I

1.1 Introduction

The promotion of mental health and well-being, and the prevention of mental ill health, are essential for the development of a healthy and resilient society (Leavey et al, 2009). The importance of a highly skilled and educated nursing and midwifery workforce is well recognised by healthcare commissioners, educators, practitioners and service users. This profile is, therefore, a collection of the core competencies that are central to the effective performance of nurses and midwives¹ in addressing the emotional well-being and mental health of children and young people.

This competency profile was primarily developed to support practitioners, who come into contact with, or work directly with, children and young people and their families, as well as those who work in specialist Child and Adolescent Mental Health Services (CAMHS). It aims to enable practitioners to assess their competence and identify their learning and development needs in relation to: the promotion of mental health and well-being; the prevention of mental ill health and the provision of accessible, safe and effective person-centred and recovery focussed services.

The ways in which practitioners will use this competency profile will differ, depending on their area of practice and their role. Practitioners should determine which level is appropriate to their role and then assess themselves against the competencies within the competency framework, using the competence assessment tool. They can then use the learning and development framework to plan, with their line managers appropriate learning and development activities, to meet their development needs relating to the competency areas. This flexible approach to learning and development, promoted in and supported by NIPEC's Development Framework (www.nipecdf.org), will help practitioners make best use of the wide range of learning opportunities available to them.

1.2 Development of the competency profile

The DHSSPS commissioned NIPEC to lead a project to develop a competency profile for nurses and midwives: promoting the mental health and well-being of children and young people. The project commenced in April 2009.

The competency profile has been developed through:

- A review of the literature on competency frameworks related to children and young people's mental health and well-being
- Comparative analysis of generic and specialist (including CAMHS) competency frameworks. See Appendix I for a list of the frameworks reviewed

- Review of key documents; see Appendix 2 for a list of the documents reviewed
- Consultation with practitioners throughout Northern Ireland
- Advice from the Project Board (Appendix 3)
- Advice from Expert Reference Group members (Appendix 4).

Visit www.nipec.hscni.net to download a copy of this competency profile. It will also be available for practitioners to complete online during 2010.

1.3 Purpose of the competency profile

This competency profile outlines the core competencies that practitioners require in order to address the mental health and well-being of children and young people. These competencies describe the integrated knowledge, skills, judgment and attributes required for a practitioner to practice safely and ethically in a health and social care setting, regardless of patient populations or practice environments. It also provides examples of opportunities to support practitioners' ongoing learning and development.

The competency profile can be used to:

- Help identify the relevant expertise and skills that practitioners who come into contact, or work directly, with children and young people should possess
- Help practitioners and their employers/managers identify gaps in knowledge and skills, assisting them with planning of ongoing training and development needs and preparing for career progression
- Inform the commissioning, development and provision of appropriate continuing education and training programmes.

The competency profile should be used in a structured manner, within protected time, to allow practitioners to develop their knowledge, skills and attitudes, thereby maximising their contribution to the modernisation of health and social care services.

The competency profile is designed to be read and used in conjunction with other relevant health and social care documents, including legislation, codes of practice, competency frameworks, action plans, and strategies. See Appendices 1 and 2 for examples.

Section 2

2.1 What is a competency profile?

A competency profile includes a competency framework, which is made up of a range of competencies against which practitioners can assess themselves using an assessment tool. It also comprises a learning and development framework to facilitate personal and professional development.

Competencies

"A competency is a quality that depicts the combination of knowledge, skills, experience and attitudes that an individual needs for the effective performance of a role" (NMC, 2007). A practitioner is, therefore, deemed competent when s/he possesses the skills and abilities required for lawful, safe and effective professional practice without direct supervision (RCN, 2008).

Competency framework

A competency framework is a collection of competencies that are thought to be central to effective performance (NIPEC, 2006). According to the International Council of Nurses (ICN, 1997), competence reflects:

- Knowledge, understanding and judgment
- Skills: cognitive, technical or psychomotor and interpersonal
- A range of personal attributes and attitudes.

Competency frameworks, therefore, have wide utility in relation to professional regulation, quality assurance, educational review, recruitment and deployment of the nursing workforce, in role development and/or job specification and performance appraisal (ICN, 2003).

Learning and development framework

Learning and development encompasses a wide range of activities designed to improve the performance of practitioners. A learning and development framework facilitates individuals in planning opportunities to develop skills, knowledge, attitudes and behaviours in order to improve their performance and competence. Learning and development activities can include on-the-job training, development opportunities, such as special projects, conferences, secondments, and mentoring, as well as formal classroom training (Australian Public Service Commission, 2009).

2.2 Who is the competency profile for?

This competency profile is relevant for all nurses and midwives who either come into contact with children and young people in the course of their job, or who work directly with children and young people.

The following three practitioner levels have been identified:

Level I Practitioner:

Practitioners whose primary role is to provide care for adults, but who may also in the course of their work come into contact with, or provide care for, children and young people, for example:

- Adult Nurses who work in A&E, Medicine, Surgery or other Adult Specialisms
- Community Nurses, e.g. District Nurses, General Practice Nurses
- Midwives
- Occupational Health Nurses
- Palliative Care Nurses
- Adult Mental Health Nurses
- Adult Learning Disability Nurses
- Nurses working in custodial settings
- Nurses providing care to adults who have parental responsibility for children or young people (The Children (Northern Ireland) Order 1995) or care for children or young people (e.g. child minders).

Level 2 Practitioner:

Practitioners who work directly with children and young people such as:

- Children and Young People's Nurses
- Learning Disability Nurses
- Mental Health Nurses (includes cognitive behavioural nurse therapists)
- Palliative Care Nurses
- Health Visitors
- School Nurses
- Midwives
- Nurses working in custodial settings.

Level 3 Practitioner:

Practitioners who work directly with children and young people in mental health services such as:

- Generic Child and Adolescent Mental Health Nurses
- Specialist Child and Adolescent Mental Health Services
- Learning Disability Nurses working with children and young people who have additional mental health difficulties (includes behaviour nurses/therapists)
- Adult Mental Health and Learning Disability Nurses who care for children and young people in in-patient or out-patient mental health services.

NB: This is not an exhaustive list

This competency profile can also be used by:

- Health and Social Care Board, Public Health Agency, Local Commissioning Groups and HSC Trusts
- Independent, voluntary and private health care providers
- Patient Client Council and service users
- Professional and regulatory bodies of healthcare professionals
- Commissioners and providers of all relevant education and development.

Section 3

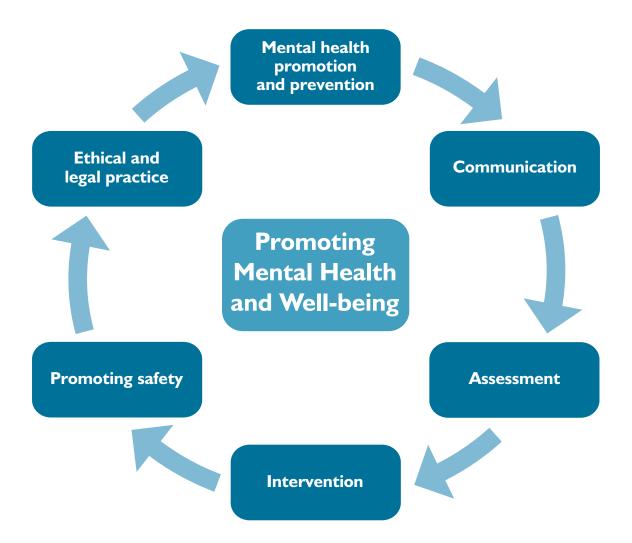
3.1 Competency Framework

This competency framework describes the core competencies that relate to the care and services you, as a practitioner, should develop in order to ensure that you promote the mental health and well-being of children and young people. By completing the competence assessment tool (Appendix 5), you can identify your learning and development needs in relation to the promotion of the mental health and well-being of children and young people. The competency profile, including the assessment tool (Appendix 5), can be downloaded at www.nipec.hscni.net It will also be available for you to complete online during 2010.

This framework will also facilitate you in preparing for your annual appraisal and personal development planning. It can also be used in conjunction with the Knowledge and Skills Framework (NHS/KSF, 2004) to help preparation for development reviews. To support this, the competency domains have been cross-referenced with the core and specific dimensions of the KSF.

The competency framework is made up of six domains (Figure 1).

Figure 1: Competency framework



Each domain includes competency areas (Table 1) and specific competencies, which will assist you in measuring your achievement and plan for your progress.

Table I: Competency Domains and Areas

DOMAINS COMPETENCY AREAS

DOMAIN I Mental health promotion and prevention	1.1	Understanding of mental health and well-being. Normal development parameters for children and young people. Promoting health and well-being and the prevention of mental ill health.
DOMAIN 2 Communication	1.1 1.2 1.3	Engagement. Giving, receiving and sharing information. Multi-disciplinary/multi-agency collaborative working.
DOMAIN 3 Assessment	1.1 1.2	Recognition and screening. Child, young person and family holistic assessment.
DOMAIN 4 Intervention	1.1 1.2 1.3	Early intervention Referral and transition Evaluation of outcomes
DOMAIN 5 Promoting safety	1.1	Safeguarding children and young people Risk assessment and management
DOMAIN 6 Ethical and legal practice	1.1 1.2 1.3	Professional and legal aspects Continuous professional development Research and development

DOMAIN I: MENTAL HEALTH PROMOTION AND PREVENTION

This domain has been mapped against the following KSF dimensions: Core Dimensions 1, 2, 3, 4, 5 and 6; Specific Dimensions HWB1, HWB2, HWB3 and HWB4

Competence area 1.1: Understanding of mental health and well-being

This competence refers to the knowledge, skills and attitudes required in understanding mental health and well-being as it relates to children, young people and their families.

Competence area 1.2: Normal development parameters for children and young people

This competence refers to the knowledge, skills and attitudes required in understanding the physical, cognitive, behavioural, emotional and psychological growth and development of children and young people.

Competence area 1.3: Promoting health and well-being and the prevention of mental ill health

This competence refers to the knowledge, skills and attitudes required in the promotion of the well-being and mental health, education, prevention and early intervention strategies in relation to children and young people.

Competence area 1.1: Understanding of mental health and well-being

KNOWLEDGE

Competencies for Level 1 practitioners

- Awareness of the factors that can influence mental health and well-being at various developmental stages in children, young people and their families.
- Awareness of the 'family' as a concept, its dynamics and influences on the child's or young person's behavioural and emotional development and functioning.
- Awareness of the resilience and risk factors in relation to children, young people and their families.
- Awareness of the concept of 'mental health' in cultural context.
- Awareness of the behaviours, emotions and mental health problems outside the normal range for age, gender and culture for children and young people.

Competencies for Level 2 practitioners

- Understanding of the causes of behavioural, emotional and mental health problems in children and young people (i.e. predisposing, precipitating and perpetuating factors).
- Knowledge of how learning, mental health and physical difficulties impact on children and young people's mental health and well-being.
- Understanding of the behavioural, emotional and mental health disorders with relevance to children and young people.
- Understanding of the impact that health inequalities and social deprivation has on the emotional well-being and mental health of children and young people.

Competencies for Level 3 practitioners

 Knowledge of the difference between mental illness and psychological or developmental delay which also impact upon mental health and well-being.

SKILLS

Competencies for Level I practitioners

- Evaluates how one's own values, attitudes and behaviour impact on the mental health and well-being of children and young people.
- Actively seeks opportunities to foster mental health promotion in children and young people.
- Refers to appropriate services (e.g. primary, community, primary or secondary care) which support children, young people and their families.
- Listens and responds appropriately to parents who are concerned about their child's or young person's mental health.

Competencies for Level 2 practitioners

- Identifies behavioural, emotional and mental health problems in children and young people.
- Critically appraises factors, which can positively influence the holistic functioning of children and young people, strengthening their resilience to mental health difficulties (e.g. the importance of family support).
- Enables children and young people to manage or cope successfully with stressful situations to achieve their desired outcome.

ATTITUDES

- Shows sensitivity to the needs or concerns of the child or young person.
- Values the contribution of other members of the health care team and agencies to the care of the child or young person.

Competence area 1.2: Normal development parameters for children and young people

KNOWLEDGE

Competencies for Level I practitioners

 Awareness of the impact of parental mental and or physical illness on the child or young person's development.

Competencies for Level 2 practitioners

- Understanding of the key normal developmental milestones for children and young people.
- Understanding of the significance of delayed or disordered development and the signs of possible development delay.
- Understanding of the principles of attachment and the effects on human development.
- Knowledge of the different ways in which children and young people form meaningful relationships, how these might change and how this relates to mental health.
- Knowledge of the different parenting approaches, backgrounds and routines and the effects of these at various development stages for children and young people.
- Understanding of how to interact and motivate children and young people in ways that support the development of their ability to think and learn and achieve their full potential.
- Knowledge of how to empower and encourage parents and families to motivate and encourage children and young people to achieve their full potential.
- Understanding of the impact of transitions between the different stages of child development.

SKILLS

Competencies for Level I practitioners

- Observes family interactions and the impact of parental physical or mental ill health on children in the family.
- Listens actively to the child, young person and/or parents to gain an understanding of concerns expressed about developmental, behavioural, psychological, emotional or mental health issues.
- Recognises the signs of abuse or neglect in children and young people and takes appropriate action.

Competencies for Level 2 practitioners

- Observes a child's or young person's behaviour, understands its context and recognises physical, cognitive, behavioural, emotional, psychological or mental health difficulties.
- Recognises the signs of a possible developmental delay.
- Supports a child or young person and their family to reach an informed decision.
- Provides a person-centred needs based support service to the child, young people and family with a developmental difficulty or disability.
- Demonstrates an appreciation of the impact of transitions between the different stages of child development.

ATTITUDES

- Demonstrates the values of a person-centred approach to health care.
- Values the unique development needs of the child or young person.

Competence area 1.3: Promoting health and well-being and the prevention of mental ill health

KNOWLEDGE

Competencies for Level 1 practitioners

- Awareness of the link between the physical health, emotional and psychological well-being of children and young people.
- Awareness of the role and function of the family in promoting and sustaining mental health and well-being.
- Awareness of family diversity, cultural variations and demonstrates sensitivity to these differences.

Competencies for Level 2 practitioners

- Knowledge of mental health promotion activities appropriate to children and young people within current role.
- Understanding of local, regional and national groups, organisations and agencies which promote well-being and mental health of children, young people and families.
- Understanding of strategies in the community which can promote mental health and emotional well-being e.g. through youth clubs, drop-in centres.
- Knowledge of the importance of providing information, education and preventative work with children and young people e.g. on suicide awareness, smoking, substance misuse and teenage pregnancy.
- Knowledge of applied models of health promotion and prevention that contribute to the well-being and mental health of children, young people and families.
- Knowledge of how schools, friends and families can promote, sustain and advocate for mental health and well-being.

SKILLS

Competencies for Level 1 practitioners

 Recognises and contributes to mental health and well-being promotion activities for children, young people and families.

Competencies for Level 2 practitioners

- Involves children, young people and their families in mental health promotion and prevention activities and development of strategies to address them at local level.
- Uses opportunities for the promotion of mental health and emotional well-being for children and young people, which supports the Northern Ireland Government strategy "Our Children and Young People Our pledge" (2006).
- Seeks to identify gaps in the provision of services for children and young people at risk of mental health difficulties and their families.
- Recognises children and young people who are vulnerable to mental health problems and develops proactive programmes aimed at minimising risk factors.
- Encourages positive supports and influences for children and young people (such as family, relatives, friends, significant others) to facilitate the development of resilience.
- Evaluates strategies which promote the mental health and well-being of children and young people.
- Facilitates and/or participates in groups in relation to promotion and prevention
 of mental health and well-being for children and young people, ensuring their voice
 is heard.

ATTITUDES

- Demonstrates a positive clinical and professional leadership approach to fostering mental health promotion and prevention behaviours in the care of the child or young person.
- Values seamless health care across sectors.

DOMAIN 2: COMMUNICATION

This domain has been mapped against the following KSF dimensions: Core Dimensions 1, 2, 3, 4, 5 and 6; Specific Dimensions HWB2, HWB4 and G7

Competence area 2.1: Engagement

This competence refers to the knowledge, skills and attitudes required to actively involve and support children, young people and those caring for them in the provision and delivery of services and decisions that affect them.

Competence area 2.2: Giving, receiving and sharing information

This competence refers to the knowledge, skills and attitudes required to give, share and receive information in a timely and accurate way, respecting issues and legislation surrounding confidentiality and disclosure of information.

Competence area 2.3: Multi-disciplinary/Multi-agency collaborative working

This competence refers to the knowledge, skills and attitudes required to promote, develop and maintain constructive relationships with staff working together to meet fully the needs of children, young people and those who care for them.

Competence area 2.1: Engagement

KNOWLEDGE

Competencies for Level I practitioners

- Knowledge of the components of effective communication with regard to dignity, respect, equality and diversity.
- Knowledge of the skills and attitudes required to communicate effectively.
- Understands that successful engagement between children, young people, their families and health and social care professionals is essential to safe and effective care.
- Awareness of the factors that act as enablers and barriers to effective engagement of children, young people and their families.
- Understands that where the first language of children, young people and their
 parents is not English, it is important to ensure their understanding, by providing
 e.g. interpreting services and/or information they can understand using signs,
 symbols or pictures.
- Understanding of the role and value of families as collaborative partners in supporting their children to achieve positive outcomes
- Knowledge of methods of interacting and listening to children and young people to make them feel valued and involved.
- Understands the influences of gender, social and cultural differences in relation to how children and young people communicate.
- Knowledge of how inference or interpretation can result in a difference between what is said and what is understood.
- Knowledge of how to adapt your style of communication to the needs and abilities of children and young people who do not communicate verbally.
- Understanding of the need to sustain relationships with children, young people and parents who may wish not to engage with mental health services.
- Awareness of services available for children, young people and their family from vulnerable groups and those who are socially excluded.

Competencies for Level 2 practitioners

- Knowledge that children, young people and their families require access to information and support related to the diagnosis of mental health problems and the associated stigma.
- Understanding of the key components of therapeutic relationships with children, young people and their parents.

SKILLS

Competencies for Level I practitioners

- Communicates with the child, young person, families and others involved in their care, in a way that is appropriate to their age, preference and culture.
- Establishes a rapport with children, young people and their families using the appropriate form of communication.
- Seeks to reach a shared understanding with the child, young person or family by using effective communication skills e.g. active listening, observing and reading non-verbal behaviour.
- Creates an environment of trust, emphasising respect for the child or young person and their family, making them feel valued.
- Seeks to maintain contact with children, young people and families who may wish not to engage with mental health services.

Competencies for Level 2 practitioners

- Engages with children, young people and families, involving them in collaborative decision-making about their care.
- Summarises situations in the appropriate way for the child, young person and family (taking into account factors such as background, age and personality).
- Offers constructive support and positive regard to families acknowledging the difficulties that can be faced with children and young people.
- Develops and maintains an effective therapeutic relationship with children, young people and their family.
- Enables a child or young person to identify positive personal life experiences and knowledge.
- Recognises technologies that support the process of engagement with children and young people (e.g. email, texting).
- Acknowledges families' feelings about disengaging from the relationship and explores reasons for same within scope of professional practice.
- Manages own feelings about disengagement in a constructive and appropriate manner through peer/professional supervision.

Competencies for Level 3 practitioners

 Recognises the reasons/triggers for disengagement and is able to implement engagement strategies for those hard- to-reach children, young people and families.

ATTITUDES

- Shows willingness to establish a rapport with the child, young person and their family.
- Values the need for clear lines of communication with relevant members of the child or young person's health care team to promote safe and effective care.

Competence area 2.2: Giving, receiving and sharing information

KNOWLEDGE

Competencies for Level I practitioners

- Knowledge of the importance of keeping accurate and complete records, and how to do so, according to relevant codes of practice and organisational policies.
- Knowledge of the organisation's policy related to the storage, safe keeping and disposal of records.
- Knowledge of the circumstances where information, even if confidential in nature, may be shared without consent (for example, where the child or young person is at risk of harm from self or others or there is a legal obligation to disclose).
- Understanding of the various sources for gathering relevant information regarding the child or young person.
- Knowledge of the importance of clarity of information exchange and the requirement to share this with children, young people, families, agencies and communities.

Competencies for Level 2 practitioners

 Understanding of existing legislation, the circumstances in which children and young people can consent to medical treatment without their family's knowledge, with respect to equality and diversity.

SKILLS

Competencies for Level I practitioners

- Encourages children, young people and families to share information where appropriate, ensuring that they understand why it is important to do so.
- Uses available information to support effective decision making, for example, by assessing the relevance and status of information and passing it on when appropriate.
- Informs the child, young person and family how the information obtained will be respected and used in relation to the decision making process.
- Develops and maintains accurate and complete records.
- Adheres to the organisation's policy and procedures regarding confidentiality and the disclosure of information to third parties, and the specific circumstances under which disclosure may be made.
- Presents choices to children and young people and obtains consent to sharing information.

 Shares information as and when required in the interests of the child or young person, guided by the Data Protection Act (1998) and relevant professional codes of practice.

Competencies for Level 2 practitioners

- Ability to communicate, verbally and in writing, complex issues in relation to a child or young person's mental health (e.g. mental state, risk management plan).
- Shares information in a way that is appropriate to the age, understanding and preference of the child or young person (e.g. in writing, by telephone, electronically or using visual/symbol communication aids).

Competencies for Level 3 practitioners

 Critically appraises information for children, young people and families from a range of sources.

ATTITUDES

- Values the right of individuals to make informed decisions.
- Values the importance of giving, receiving and sharing information to promote high quality health care for children and young people.

Competence area 2.3: Multi-disciplinary and multi-agency collaborative working

KNOWLEDGE

Competencies for Level I practitioners

- Knowledge of how multi-disciplinary and multi-agency working can contribute to more effective delivery of care.
- Awareness of your role and responsibilities within the multi-disciplinary team in relation to the mental health and well-being of children, young people and family.
- Understanding of the role and responsibilities, of each member of the multi-disciplinary team in relation to the mental health and well-being of children, young people and families.
- Knowledge of the importance of clarifying your role and that of others when working with children and young people.
- Knowledge of contingency planning when there is an unsatisfactory response from other services for support/involvement in relation to the well-being of the child or young person which protects their best interests.
- Awareness of the role of other relevant healthcare professionals who contribute to the care of children, young people and family and the particular benefits and strengths which each brings.

Competencies for Level 2 practitioners

- Awareness of the range of multi-agency organisations and individuals working with children, young people and those caring for them.
- Understanding of your role within a multi-agency collaboration and how it relates to the roles of other multi-agency workers.
- Knowledge of why effective communication is particularly important in multi-disciplinary and multi-agency working.
- Knowledge of local provision of children's services and how these contribute to comprehensive multi-agency children and young people's mental health services.
- Knowledge of referral pathways between children's services and child and adolescent mental health services.

Competencies for Level 3 practitioners

 Knowledge of how to collaborate effectively with other CAMHS tiers and to contribute/lead the mapping of clear pathways for CAMHS service users.

SKILLS

Competencies for Level | practitioners

- Works within a team context, forging and sustaining relationships and respecting the contribution of others working with children, young people and families.
- Communicates effectively with other practitioners and professionals, listening and ensuring that you are being listened to and answered.
- Shows appreciation that others may not have the same understanding of professional terms and may interpret abbreviations such as acronyms differently.
- Provides timely, appropriate, succinct information to enable other practitioners to deliver their support to the child or young person.
- Seeks to be proactive, initiates necessary action and is able and prepared to put forward own experienced, informed and professional views.

Competencies for Level 2 practitioners

- Ability to challenge decisions and situations in the interests of the child or young person, by deliberating and asking considered questions.
- Presents facts and observations objectively regarding the child or young person to appropriate multi-professional team members.
- Ability to analyse and evaluate information to support multi-disciplinary/ multi-agency decision-making.

Competencies for Level 3 practitioners

- Identifies possible sources of support within multi-disciplinary and multi-agency teams.
- Facilitates staff not working in CAMHS, through consultation, teaching or liaison, to support the emotional well-being and mental health of children and young people within their scope of practice and in the best interests of the child and young person.
- Ability to support other professionals to ensure appropriate and timely referrals to Tiers 3 and 4 of Child and Adolescent Mental Health Services.

ATTITUDES

- Respects the contribution of nurses, multi-professionals and multi-agencies to the health and well-being of the child or young person.
- Shows willingness to promote, develop and maintain constructive relationships with multi-professionals and multi-agencies to meet fully the needs of the child, young person and family.

DOMAIN 3: ASSESSMENT

This domain has been mapped against the following KSF dimensions: Core Dimensions 1, 2, 3, 4, 5 and 6; Specific Dimensions HWB2, HWB3, HWB4 and HWB6

Competence area 3.1: Recognition and screening

This competence refers to the knowledge, skills and attitudes required to recognise, screen, record and action the early signs of a mental health or well-being problem in relation to a child or young person and family.

Competence area 3.2: Child, young person and family holistic assessment

This competence refers to the knowledge, skills and attitudes required to undertake a holistic assessment of the child or young person in the family context, using a person-centred and evidence-based approach.

Competence area 3.1: Recognition and screening

KNOWLEDGE

Competencies for Level I practitioners

- Knowledge of early warning signs of mental health and well-being problems in relation to a child or young person
- Awareness of screening and referral systems and practices for children and young people in relation to mental health and well-being.

Competencies for Level 2 practitioners

- Awareness that early recognition, assessment and treatment of mental health and well-being problems in children and young people can result in a substantially shorter and less disabling course of illness.
- Knowledge of how to integrate mental health and well-being consultations as part of the overall general healthcare of children and young people.
- Understanding of the range of mental health problems/illnesses that children and young people may have and their effect.
- Knowledge of a range of tools appropriate for the purpose of screening for mental health problems in relation to a child or young person.

SKILLS

Competencies for Level I practitioners

 Seeks, in a timely manner, the advice of an appropriate healthcare professional, where there are concerns about the mental health and well-being of a child or young person.

Competencies for Level 2 practitioners

• Describes and records the early signs and symptoms of a mental health problem in a child or young person and reports or refers this to the appropriate service.

Competencies for Level 3 practitioners

- Compiles and analyses information from the child, young person, their family and other relevant sources, using appropriate, valid and objective measurements in order to make a reasoned judgment regarding their mental health and well-being.
- Ability to make an accurate differential diagnosis and distinguish between variations on normal development and emerging developmental disorder/mental illness.

ATTITUDES

- Values the need for early recognition and identification of a mental health problem to alleviate symptoms and suffering.
- Shows willingness to establish a rapport with the child, young person and family to ascertain individual preferences, abilities and/or needs.

Competence area 3.2: Family, child and young person holistic assessment

KNOWLEDGE

Competencies for Level I practitioners

• Awareness of the need to collaborate with appropriate family members using a transparent assessment process.

Competencies for Level 2 practitioners

- Understanding of assessment models relevant to children and young people to determine their mental health and well-being needs.
- Knowledge of the organisation's Assessment Framework for Children and Young People and how to use it.

Competencies for Level 3 practitioners

• Knowledge of a range of tools appropriate for the purpose of assessing the mental health, emotional disorders and potential risk factors, in relation to a child or young person.

SKILLS

Competencies for Level I practitioners

- Gathers and reviews relevant information relating to the family's background, circumstances and needs.
- Identifies when children and young people are distressed during the assessment process and offers support.
- Empowers children, young people and their families to participate actively in the assessment process.

Competencies for Level 2 practitioners

- Ability to assess and describe a family's structure, function and dynamics with clarity, including the child's place in the family, the main supports a family might benefit from and what's most likely to be helpful for them, identifying both protective and risk factors.
- Completes a mental state assessment, accurately identifying key symptoms and signs
 of mental illness.
- Ensures that the assessment process represents the views and opinions of the child or young person and family.
- Works collaboratively with other health care professionals or agencies to undertake
 joint assessments to inform decisions about the mental health of the child or
 young person.

Competencies for Level 3 practitioners

- Assesses the emotional development and mental health of the child or young person, using a person-centered and holistic approach. with a genuine focus on the promotion of mental health and well-being
- Where appropriate, uses mental health assessment and identification tools to complement and enhance the assessment process to determine the severity of mental health needs and associated risks.
- Contributes to ongoing assessment through the provision and interpretation of specialist assessments, such as psychometric tests, specialist diagnostic assessments (e.g. behavioural and cognitive assessment).

ATTITUDES

- Shows respect for holistic and person-centred care.
- Shows willingness to establish a rapport with the child, young person and family to ascertain individual preferences, abilities and/or needs.

DOMAIN 4: INTERVENTION

This domain has been mapped against the following KSF dimensions: Core Dimensions 1, 2, 3, 4, 5 and 6; Specific Dimensions HWB2, HWB3, HWB4, HWB5, HWB7 and G7

Competence area 4.1: Early intervention

This competence refers to the knowledge, skills and attitudes required for identifying and responding to concerns in a timely manner.

Competence area 4.2: Referral and transition

This competence refers to the knowledge, skills and attitudes required to process referral and transitions, to meet the assessed mental health needs of children and young people in family context.

Competence area 4.3: Evaluation of outcomes

This competence refers to the knowledge, skills and attitudes required to evaluate intervention outcomes.

DOMAIN 4: INTERVENTION (continued)

Competence area 4.1: Early intervention

KNOWLEDGE

Competencies for Level | practitioners

- Understanding of the need for prevention, early identification and referral in relation to children and young people who may have mental health problems.
- Awareness of the 'Threshold of Needs Model' (UNOCINI; DHSSPS, 2008) regarding early interventions and evidence based intervention for children and young people.

Competencies for Level 2 practitioners

- Understanding of the concept of serious mental illness in relation to children and young people.
- Knowledge of the circumstances in which to provide support/interventions in response to the needs of children and young people and when to refer the situation to another practitioner or professional (e.g. children and young people with high risk needs).
- Knowledge of evidenced-based models of interventions and treatments appropriate
 to children and young people in relation to mental health and well-being.

Competencies for Level 3 practitioners

 Knowledge of the concept of serious mental illness, core psychopathology and appropriate therapeutic responses.

DOMAIN 4: INTERVENTION (continued)

SKILLS

Competencies for Level I practitioners

- Engages with the child, young person and family to ensure concerns are acted upon in a timely manner.
- Assesses the need for early intervention and onward referral if appropriate.
- Plans and delivers interventions appropriate to own role and scope of practice with children, young people and their families, according to their identified mental health needs.

Competencies for Level 2 practitioners

- Provides advice, information and support to children, young people and family members on the appropriate management of their condition.
- Identifies and facilitates access to relevant support systems in the community for children, young people and their families with identified mental health needs.
- Negotiates achievable goals with children, young people and their families, when appropriate.
- Develops, encourages and evaluates positive supports and influences for children (such as family, relatives, friends, significant others) to facilitate the development of resilience.
- Demonstrates skills in teaching coping strategies relevant to mental health and well-being to children, young people and their families.
- Applies and evaluates a range of relevant therapeutic interventions with children, young people and their families (e.g. CBT, family interventions, psychotherapies).
- Monitors and supports children, young people and their families in relation to mental health and well-being, appropriate to own role and scope of professional practice.
- Reviews with the individual and significant others the effectiveness of the interventions provided and evaluates whether the goals and the overall plan of care have been met.

ATTITUDES

- Shows willingness to support and empower the child, young person and family through appropriate intervention.
- Shows willingness to work in partnership with the child, young person and family to ascertain individual preferences and/or needs.

DOMAIN 4: INTERVENTION (continued)

Competence area 4.2: Referral and transition

KNOWLEDGE

Competencies for Level I practitioners

- Knowledge of how to access support and advice from appropriate health care
 professionals, CAMHS and other children's services to aid the early identification and
 support of those with mental health needs.
- Knowledge of local protocols including eligibility criteria for effective referral to mental health and/or related services for children, young people and families.
- Understanding of the need for urgency and timeliness when referring children and young people to specialist mental health services.
- Knowledge of local resources and information services available to support children and young people in relation to their mental health and well-being.

Competencies for Level 2 practitioners

- Knowledge of referral and transition arrangements between specialist services (e.g. CAMHS) and generic mental health or children's services.
- Knowledge of local protocols when there has been an insufficient response from mental health services following a referral.
- Understanding of how to manage children, young people and their families in relation to referral and transitions across the CAMHs tiers, including learning disability services.

Competencies for Level 3 practitioners

- Knowledge of transition issues for children and young people with mental health needs from CAMHS tiers to adult mental health and learning disability services.
- Knowledge of specialist regional resources for children and young people with identified mental health needs and how to access these.

DOMAIN 4: INTERVENTION (continued)

SKILLS

Competencies for Level | practitioners

• Identifies relevant additional sources of support for children, young people, and their families and facilitates engagement and access.

Competencies for Level 2 practitioners

- Accesses and makes appropriate referrals to local services and amenities to support the development and reduce isolation of children and young people, e.g. voluntary agencies and family support services.
- Makes referrals to appropriate health care professionals, specialist CAMHS and other children's services for children, young people and their families in relation to their mental health and emotional well-being.
- Evaluates the likely impact of different types of transition on children and young people and identifies ways of supporting them and their families during this process.
- Presents transition to children and young people in a positive and reassuring manner, in order to help them understand and prepare for changes in their situation.
- Gathers, collates and transfers necessary information to assist smooth transition of children and young people to other services and agencies, in advance of transition.
- Enables children and young people to explore their concerns about transitions and notifies appropriate colleagues if necessary.

Competencies for Level 3 practitioners

• Enables children and young people to manage and cope successfully through episodes of transition.

ATTITUDES

Competencies for practitioners at all levels

- Shows respect for the need for clear lines of communication with relevant members of the child's or young person's health care team, during the transition or referral process, to promote safe and effective care.
- Shows willingness to provide clinical leadership to support the work of nurses and other health care professionals during the transition or referral process.

DOMAIN 4: INTERVENTION (continued)

Competence area 4.3: Evaluation of outcomes

KNOWLEDGE

Competencies for Level I practitioners

- Understanding of why evaluation is necessary and how it can be used to improve quality of care in the short and long term.
- Awareness of the methods of involving individuals and significant others effectively in evaluation, and the purpose of doing this.

Competencies for Level 2 practitioners

- Knowledge of the different methods used to evaluate the process and outcomes of different interventions, including those that are evidence-based.
- Knowledge of how methods of evaluation should be adapted to reflect the needs of the child or young person.
- Understanding of the purpose of modifying interventions as a result of the outcomes of evaluation with individuals, significant others and other members of the team.
- Knowledge of how to evaluate your own contribution constructively and make recommendations for improvement.
- Understanding of your role and responsibilities in recording the evaluation and review of care provided to the child, young person and family.

Competencies for Level 3 practitioners

 Knowledge of specific tools in relation to measuring outcomes for child and adolescent mental health services.

DOMAIN 4: INTERVENTION (continued)

SKILLS

Competencies for Level I practitioners

• Critically evaluates own role in meeting the mental health and well-being needs of children and young people.

Competencies for Level 2 practitioners

- Engages with service users in service planning, development, review and evaluation to review progress towards planned outcomes.
- Uses valid evidence-based practices in evaluating the quality of nursing care (e.g. benchmarking, clinical audit).
- Participates in quality improvement and quality assurance activities.
- Evaluates and documents progress towards expected outcomes and modifies care plans accordingly.

Competencies for Level 3 practitioners

- Uses evidence based tools to measure outcomes against national/regional standards in specialist children, young people and family services.
- Participates in local and national research initiatives relevant to own area of practice.

ATTITUDES

Competencies for practitioners at all levels

- Shows motivation and commitment to the development of services for children and young people.
- Shows willingness to participate in innovations in health care.

DOMAIN 5: PROMOTING SAFETY

This domain has been mapped against the following KSF dimensions: Core Dimensions I, 2, 3, 4, 5 and 6; Specific Dimensions HWB2, HWB3 and HWB4

Competence area 5.1: Safeguarding children and young people

This competence refers to the knowledge, skills and attitudes required to protect children and young people who may be at risk, or are likely to suffer harm.

Competence area 5.2: Risk assessment and management

This competence refers to the knowledge, skills and attitudes required in order to assess and manage risks in relation to children or young people causing harm to themselves or others.

Competence area 5.1: Safeguarding children and young people

KNOWLEDGE

Competencies for Level I practitioners

- Understanding of what is meant by safeguarding and the different ways in which children and young people can be harmed.
- Understanding of the different forms and extent of abuse and their impact on children's and young people's development.
- Understanding of national guidance and local procedures, and your own role and responsibilities within these, for safeguarding and promoting children's and young people's welfare, e.g. Children Order 1995 and UN Convention of the Rights of the Child.
- Understanding of when and how to discuss concerns with parents and families.
- Awareness of the factors that can affect parenting and increase the risk of abuse (for example, domestic violence).
- Awareness of the key agencies involved in child protection.

Competencies for Level 2 practitioners

- Understanding of the key role of families in safeguarding and promoting the welfare children and young people.
- Knowledge of the route for referral when abuse has been disclosed by a child, young person and/or their family.
- Knowledge of how to advocate for children or young people to protect their dignity, autonomy and rights.

Competencies for Level 3 practitioners

• Knowledge of the impact on mental capacity of children and young people living with mental ill health and/or a learning disability, in relation to risk.

SKILLS

Competencies for Level I practitioners

- Exercises professional judgment to determine when a child or young person is in danger or at risk of harm, and takes action to protect them.
- Ability to seek advice and report concerns, ensuring they are listened to.

Competencies for Level 2 practitioners

- Ability to complete a UNOCINI assessment at the appropriate level.
- Completes reports for child protection proceedings appropriate to role and within scope of professional practice.

Competencies for Level 3 practitioners

- Provides children or young people with the opportunity to participate in decisions affecting them, appropriate to their age and ability, and taking their wishes and feelings into account.
- Formulates evidence and evaluates thresholds of harm within an ongoing therapeutic context.

ATTITUDES

Competencies for practitioners at all levels

- Shows commitment and motivation towards the provision of safe and effective care for children and young people.
- Shows awareness of professional accountability, with regard to the safe and effective care of children and young people.

Competence area 5.2: Risk assessment and management

KNOWLEDGE

Competencies for Level I practitioners

- Knowledge of the wide range of risk factors (e.g. physical, social and educational) that can affect the mental health and well-being of children and young people.
- Understanding of the factors which may result in children or young people harming themselves or others.
- Knowledge of the Mental Health (Northern Ireland) Order (1986) regarding the capacity to give consent to treatment in relation to a child or young person.

Competencies for Level 2 practitioners

- Awareness of the principles of the DHSSPS Protect Life Strategy: 2006 2011.
- Knowledge of when and how to intervene early to avoid a potential crisis situation and provide appropriate support once the crisis has been resolved.
- Knowledge of relevant professional and organisational policies and how these should inform and guide the assessment and management of risk.

Competencies for Level 3 practitioners

 Knowledge of specific risk assessment and management tools that can be applied to children and young people to identify and manage clinical risks (e.g. DHSSPS (2009) Guidance for assessing and managing risk).

SKILLS

Competencies for Level 1 practitioners

 Identifies, records and reports areas and situations where children and young people are at risk of harming themselves or others.

Competencies for Level 2 practitioners

- Contributes to a systematic assessment of risk factors and develops a range of strategies to address identified risks.
- Contributes to the development of a comprehensive risk management plan.

Competencies for Level 3 practitioners

- Ability to manage own anxiety and take 'therapeutic risks', whilst working safely and ethically.
- Ability to apply the Mental Health Order (1986) in the best interests of the child or young person, in relation to risk assessment and management.

ATTITUDES

Competencies for practitioners at all levels

- Fosters a multi-disciplinary team approach to health care.
- Shows respect for ethical principles and professional accountability and responsibility, with regard to safe and effective care of children and young people.

DOMAIN 6: ETHICAL AND LEGAL PRACTICE

This domain has been mapped against the following KSF dimensions: Core Dimensions 1, 2, 3, 4, 5 and 6; Specific Dimension GI

Competence area 6.1: Professional and legal aspects

This competence refers to the knowledge, skills and attitudes required to practice in an accountable and responsible manner, using one's own professional judgement and actions and ensuring that they conform to relevant legislation, policy and professional code of practice.

Competence area 6.2: Continuous professional development

This competence refers to the knowledge, skills and attitudes required to assess and develop own CPD in line with role and skills required to deliver safe and effective care.

Competence area 6.3: Research and development

This competence refers to the knowledge, skills and attitudes required to initiate and participate in audit and research, have up-to-date knowledge of research, then introduce findings to ensure best practice.

Competence area 6.1: Professional and legal aspects

KNOWLEDGE

Competencies for Level I and 2 practitioners

- Knowledge of professional codes of practice with regard to information handling, confidentiality, informed consent and disclosure.
- Understanding of the rights, choices and responsibilities of children and young people and family.

Competencies for Level 3 practitioners

 Knowledge of policy developments in health, education social services that have an impact on CAMHS provision e.g. disability, race relations, youth offending, fostering and adoption, domestic violence etc.

SKILLS

Competencies for practitioners at all levels

- Accepts accountability and responsibility for own professional judgement and actions and works within professional boundaries and scope of practice.
- Appropriately challenges health care practice which could compromise the safety, privacy or dignity of the child or young person.
- Identifies unsafe practice and takes appropriate action.
- Is self-aware with regard to own beliefs and values and reflects on how these may influence care-giving.
- Respects the values, customs, spiritual beliefs and practices of individuals and groups and exercises culturally competent practice.
- Reports and records clinical activity in line with professional guidelines and the local clinical and social care governance framework.
- Implements legislation to support children and young people (e.g. the Children Order (Northern Ireland), Human Rights Act, Mental Health Order, Northern Ireland, the Disability Discrimination Act).

ATTITUDES

Competencies for practitioners at all levels

- Shows willingness to provide clinical leadership to support the work of nurses and other health care professionals.
- Shows respect for ethical principles and professional accountability and responsibility, with regard to safe and effective care of children and young people.

Competence area 6.2: Continuous professional development

KNOWLEDGE

Competencies for practitioners at all levels

- Understanding of qualities and aspects of clinical and professional leadership.
- Knowledge of reflective practice processes.
- Understanding of the principles and processes of self and peer review.
- Knowledge of models of supervision within teams.
- Understanding of the roles and responsibilities of a supervisor and supervisee.
- Understanding of how to ensure own practice is up to date, evidence-based, safe and effective.

SKILLS

Competencies for Level 1 and 2 practitioners

- Promotes and maintains the professional image of nursing.
- Contributes to the development of professional nursing practice.
- Acts as an effective role model and mentor.
- Assumes responsibility for lifelong learning and maintenance of competence.
- Takes action to meet continuing education needs.
- Contributes to the education and professional practice development of students and colleagues.
- Takes opportunities to learn together with others, contributing to health care delivery.
- Identifies and plans learning, development and supervision needs with relevance to the mental health and well-being of children and young people.

Competencies for Level 3 practitioners

- Supports others in understanding the mental health and emotional well-being needs of children and young people and how these can be addressed in their work.
- Regularly assesses and updates own level of knowledge regarding mental health and well-being problems/illnesses in children and young people.
- Evaluates personal and professional development needs in relation to CAMHS services.
- Provides and evaluates clinical supervision to relevant health care professionals in response to identified needs.
- Develops the knowledge and skills of relevant healthcare professionals, through appropriate training, to enhance the well-being and mental health of children and young people when specialist child and young people's mental health services are not required.

ATTITUDES

Competencies for practitioners at all levels

- Values the importance of continued professional development in line with role and skills required to deliver safe and effective care.
- Shows willingness to develop knowledge and skills to meet the needs of children and young people.

Competence area 6.3: Research and development

KNOWLEDGE

Competencies for Level I practitioners

• Understanding of service development processes and evidence based practice, e.g. data collection, audit, user involvement, research.

Competencies for Level 2 practitioners

- Knowledge of how to critically evaluate the service, on an ongoing basis, and contribute to evidence-based practice with relevance to the mental health and well-being of children and young people.
- Knowledge of how to involve service users and other stakeholders in the provision of services with relevance to the mental health and well-being of children and young people.

Competencies for Level 3 practitioners

• Knowledge of how evaluate service developments and delivery, with relevance to the mental health and well-being of children and young people.

SKILLS

Competencies for Level I practitioners

Ability to access research and use information systems.

Competencies for Level 2 practitioners

- Uses and evaluates evidence-based practice to enhance care and services provided, with relevance to the emotional well-being and mental health of children and young people.
- Contributes to the collation of data and information in relation to children and young people to support service improvements.
- Seeks opportunities within own area of practice to develop a culture of learning and development, with relevance to the mental health and well-being of children and young people.
- Identifies to relevant line managers the need for additional resources to enhance the quality of services for children and young people in relation to mental health and emotional well-being.

Competencies for Level 3 practitioners

- Contributes to and generates research to inform evidence-based practice with relevance to the mental health and well being of children and young people.
- Uses continuous quality improvement approaches to identify gaps and develop services that are evidenced based and meet organisational or government priorities.
- Disseminates research with relevance to the mental health and well-being of children and young people.
- Initiates and manages practice or service development initiatives with relevance to the emotional well-being and mental health of children and young people, taking account of relevant research, clinical guidelines and policy.

ATTITUDES

Competencies for practitioners at all levels

- Values the importance of research and development to ensure best practice.
- Shows motivation and commitment to the development of services.

The competency assessment tool (Appendix 5) can be downloaded at **www.nipec.hscni.net** it will also be available for you to complete online during 2010.

Section 4

4. Learning and development framework

The NMC Code of Conduct (2008) requires all nurses and midwives to take part in appropriate learning and practice activities to maintain and develop their competence. To determine your learning and development needs it may be useful for you to adopt a Learning Needs Analysis (LNA) approach involving the following steps:

Step I	Review and Assess your knowledge, skills and attitudes using the competence assessment tool and compile your evidence to support your assessment.
Step 2	Identify and prioritise your learning and development needs with your line manager, from your assessment results, including any 360° feedback.
Step 3	Plan and action suitable learning opportunities with your line manager and agree relevant learning outcomes. Record these in your learning and development plan.
Step 4	Evaluate your learning and development in relation to improvements in your knowledge, skills and attitudes. Maintain a reflective record of your learning and development in your portfolio, to support your annual appraisal/development review.

(Adapted from NIPEC (2009) Learning Needs Analysis for Nurses and Midwives)

You can commence your learning needs analysis by completing a self-assessment using the competencies within the framework in Section 3. A competence assessment tool has been developed to assist you with this (Appendix 5).

The tool will also facilitate you in preparing for your annual appraisal and personal development planning. It is important to remember that this framework should be used in conjunction with other competency frameworks relevant to your role and area of practice, including KSF (NHS/KSF, 2004).

4.2 How to get started

Section 3 contains the competency framework, which comprises six domains, associated competency areas and relevant competency statements against which you can assess your competence, depending on your role. This helps you build a picture of how you are performing in your job and what your individual learning and development needs are. To use the competency framework, you must first decide the level of competence you require for your role, and then assess yourself against the individual competence statements at that level, using the assessment tool (Appendix 5), which has the following rating scale:

LD	You need a lot of development
SD	You need some development
WD	You feel you are well developed
NA	Not applicable

What Level am I?

In order to determine which competencies are relevant for you, you need to decide which of the three levels of practice applies to your role (see page 8 for examples). You should strive to achieve a well-developed score for the competencies relevant to your role.

It is important to remember that, depending on your role, you could find that you need to assess yourself at more than one level. You may find it helpful, therefore, to discuss with your line manager which level or levels of competencies are most applicable to your role.

In addition, it is assumed that if you are practising at a particular level, you will already have developed the competencies at the previous level. For instance, it is likely that a Level 3 practitioner will have developed the underpinning knowledge, skills and attitudes at Levels I and 2. However, this may not always be the case.

4.3 Producing evidence to demonstrate competence

As a practitioner, you are required to develop a portfolio to demonstrate your continuous professional development for renewal of your registration with the Nursing and Midwifery Council (NMC, 2008). Some of the evidence included in your portfolio can also be brought to your annual personal development review/appraisal meetings. For more help to create your own electronic portfolio, go to www.nipecdf.org.uk This website was developed by NIPEC for nurses and midwives. It is a secure site, free to access and easy to use.

Forms of evidence that you may gather for your portfolio include: case histories, self-appraisal via a reflective diary, 360° feedback, verification of practice and structured observation of practice (NIPEC, 2005).

The Royal College of Nursing (RCN, 2008) identified the following important points to consider when gathering evidence:

- Ensure that you understand what the competency statement is asking of you.
- Review any existing work that could be used, and do not re-invent the wheel.
- Identify whether the existing evidence is appropriate.
- Consider what else you may need to do in developing evidence. Are you familiar with a reflective model, such as Kolb (1984), Johns (1996), Gibbs (1988) or Taylor (2006)?
- Identify someone who can provide you with feedback on your practice. Do you have further development needs and have you considered how you might address them?
- Think about using evidence that can cover several competencies. For example, a
 reflective diary record may demonstrate that you have used a variety of knowledge
 and skills in providing care.

Types of evidence

There is a variety of material that you can collect to demonstrate evidence of competence and which you can take to your development review or appraisal meeting.

This may include:

- Outcomes of projects you are, or have been, involved in
- Practice developments/changes in practice
- Reflective diaries
- Evidence of qualifications
- · Certificates of attendance with reflection on learning
- Assessments and appraisals
- Supervision meetings
- Publications and presentations
- Evidence of group work
- Evidence of involvement in policy and protocol development
- Evidence of membership of advisory groups
- Evidence of involvement in research and evidence-based reviews.

4.4 Planning for your learning and development

Having completed the competence assessment tool, you can also ask different people to assess you. This is commonly known as a 360° assessment. To do this, ask the individuals if they are happy to assess you against the relevant competencies using the assessment tool (Appendix 5). Some of the people you may want to ask, in addition to your line manager, to complete a 360° assessment are:

- Other practitioners you work with
- Other members of the multi-professional team
- Children, young people, or their families who are in your care.

Having gathered all your competency assessment results, you are now ready to meet with your manager to agree what you need to learn and develop. It is important to plan how you are going to achieve, record and evaluate this. The learning and development proforma in Appendix 6 will help you with this activity.

It is recommended that you only select two or three competency areas to focus on at any one time. You may wish to take one competency area in a 4-6 week period and provide evidence of your learning as you acquire the knowledge, skills and attitudes you want to develop; this can then be added into your portfolio.

There are a variety of learning activities which you can choose to suit your learning style, for example:

- Supervised practice with a more experienced colleague
- Formal learning and development programmes
- Visits to another service area to observe practice or develop a specific area of competence
- Working with an allied health professional to develop a specific area of competence
- Completing an audit on an area of practice
- · Development of practice activities
- Service development activities
- Distance and e-learning activities.

For more information about these and other learning activities please visit: www.nipecdf.org/learn/actList.asp

Glossary of terms

Children and young people

The terms "children" and "young people" in this competency profile encompass children from birth to 18 years, including those over the age of 18 years in receipt of child and adolescent services.

Parents

"Parents" are the legal guardians of the child or young person or those who fulfil a locum parentis role.

Families

"Families" comprise parents, carers, siblings and other relatives.

Mental health difficulties

This refers to the full range of mental health difficulties that may be experienced by individuals. These range from the lower levels of mental distress experienced by many to the more serious and specific mental illnesses, such as schizophrenia and major depression, experienced by a lesser number of individuals.

Learning disability and learning difficulty

The document Equal Lives defines learning disability as "a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning" (DHSSPS, 2005, p171). The term "learning disability" should not be confused with the term "learning difficulty", which refers to a broad range of disorders some of which are dyslexia, hearing impairment, visual impairment.

National Health Service Knowledge and Skills Framework (NHS/KSF)

The NHS Knowledge and Skills Framework (NHS/KSF, DH 2004) defines and describes the level of knowledge and skills that staff in Health and Social Services require in order to deliver quality services. As the KSF is a broad generic framework, it will be complemented by the competencies in this profile, which have been prioritised to meet the needs of practitioners.

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Appendix I

Competency frameworks reviewed

A comparative analysis was conducted of generic and specialist competency frameworks including child and adolescent mental health services frameworks. The influential frameworks include:

- Real Skills Plus (2008) New Zealand: A Competency Framework for the Infant Child and Youth Mental Health and Alcohol and other Drug Workforce
- Respiratory Competency Assessment Tool (2008)
- A Competency Framework for Nurses Working in Parkinson's Disease Management (2008).
- Skills for Health National Workforce Programme (2007) CAMHS Tiers 3 and 4
- Safeguarding Children and Young People: Roles and Competences for Health Care Staff Intercollegiate Document (2006)
- NIPEC (2006) Competency Profile Foundation Paper.
- Canterbury Christchurch University College (2004) Core Capabilities Needed for Effective Working with Children
- Sainsbury Centre for Mental Health (2004) Ten essential shared capabilities for the mental health workforce

Appendix 2

Relevant legislation and frameworks reviewed

Examples of legislation, codes of practice and frameworks which the Competency Profile is designed to be used in conjunction with. Note this is not an exhaustive list.

- Mental Health (Northern Ireland) Order (1986)
- UNCRC (1989) United Nations Convention on the Rights of the Child
- The Children (Northern Ireland) Order 1995
- Human Rights Act (1998)
- DHSSPS (2003) Promoting Mental Health Strategy and Action Plan 2003 2008
- DH (2004) The NHS Knowledge and Skills Framework and the Development Review Process
- DHSSPS (2005) Review of Mental Health and Learning Disability (Northern Ireland)
 Equal Lives: Review of Policy and Services for People with a Learning Disability in
 Northern Ireland
- Royal College of Paediatrics and Child Health (2006) Safeguarding Children and Young People: Roles and Competences for Health Care Staff Intercollegiate Document
- OFMDFM (2006) Our Children and Young People Our Pledge: a Ten Year Strategy for Children and Young People in Northern Ireland 2006 - 2016
- DHSSPS (2006) The Bamford Review of Mental Health and Learning Disability:
 A Vision of a Comprehensive Child and Adolescent Mental Health Service
- Disability Discrimination Order (2006)
- DHSSPS (2006) Protect Life: a Shared Vision
- NMC (2008) The Code: Standards of Performance and Ethics for Nurses and Midwives
- Area Children's Planning Committees (2008) Northern Ireland Children's Services Plan 2008 – 2011 (2008)
- DHSSPS(2009) Delivering the Bamford Vision The response of the Northern Ireland Executive to the Bamford Review of Mental Health and Learning Disability: Action Plan 2009 – 2011
- Northern Ireland Association for Mental Health(2009) A Flourishing Society: Aspirations for Emotional Health and Well-being in Northern Ireland

Relevant legislation and frameworks reviewed (continued)

- DHSSPS (2009) Agreed Standards and Criteria for Information sharing for Agencies Working with Families and Children in Northern Ireland
- DHSSPS (2009) Good Practice Guidance on the Assessment and Management of Risk in Mental Health and Learning Disability Services
- DHSSPS (2009) Legislative Framework for Mental Capacity and Mental Health Legislation. Policy Consultation Document
- Social Care Institute for Excellence (2009) Think Child, Think Parent, Think Family
- DHSSPS (2009) Think Individual Think Family Project
- DHSSPS (2010) Mental Health and Well-being Service Framework (unpublished work in progress).

Appendix 3

Membership of project board

Name	Job Title	Organisation
Moira Davren (Chair)	Co-Director for Nursing Education and Learning	Belfast HSC Trust
Maurice Devine	Nursing Officer, Mental Health, Learning Disability and Older People	DHSSPS
Frances McMurray	Chief Executive	NIPEC
Cathy McCusker (Project Lead)	Senior Professional Officer	NIPEC
Dr Carole McIlrath	Senior Professional Officer	NIPEC
Pat Patten	Lay Council Member	NIPEC
Rodney Morton	Programme Manager, Mental Health and CAMHS	Health and Social Care Board
Jackie Nelson	Head of Nursing Northern Trust/Regional Coordinator for the Development of Eating Disorder Service within CAMHS	Northern HSC Trust
Mary McCarthy	Senior Clinical Nurse Specialist	Southern HSC Trust
Paul Devlin	Referral Co-ordinator/Clinical Nurse Specialist	Western HSC Trust
Caroline Lee	Assistant Director of Nursing (Workforce)	South Eastern HSC Trust
Anne Doherty	Deputy Director	Mindwise
Meabh Murray	Volunteer	Mindwise
Fiona Martin	Assistant Director of Nursing (Education) Mental Health and Learning Disability	Queen's University Belfast
Martin Milligan	Nurse Education Consultant	Nursing and Midwifery Education, Beeches Management Centre

Appendix 4

Membership of expert reference group

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Stuart Johnston	Volunteer, Mindwise.
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Teresa Mungur	Ward Manager, Children and Adolescents, South Eastern HSC Trust.
Karen Murray	Teaching Fellow, Midwifery, Queen's University, Belfast

Membership of expert reference group (continued)

Meabh Murray	Volunteer, Mindwise.
Jackie Nelson	Head of Nursing, Northern Trust/ Regional Co-ordinator for the Development of Eating Disorder Service within CAMHS.
Paul O'Hare	Behaviour Nurse Therapist/ Team Leader Behaviour Support Team, South Eastern HSC Trust.
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Ruth Watson	Clinical Manager, South Eastern HSC Trust.
Dr Janet Watters	General Practitioner - Out of Hours.
Jonathan Welsh	Clinical Nurse Specialist, Belfast HSC Trust.
Jennifer Wright	Volunteer, Mindwise.

Appendix 5

Competence Assessment Tool

DOMAIN I: MENTAL HEALTH PROMOTION AND PREVENTION

KSF Mapping

Core Dimensions 1, 2, 3, 4, 5 and 6; Specific Dimensions HWB1, HWB2, HWB3 and HWB4

Competence area 1.1: Understanding of mental health and well-being

This competence refers to the knowledge, skills and attitudes required in understanding mental health and well-being as it relates to children, young people and their families.

Competence area 1.2: Normal development parameters for children and young people

This competence refers to the knowledge, skills and attitudes required in understanding the physical, cognitive, behavioural, emotional and psychological growth and development of children and young people.

Competence area 1.3: Promoting health and well-being and the prevention of mental ill health

This competence refers to the knowledge, skills and attitudes required in the promotion of the well-being and mental health, education, prevention and early intervention strategies in relation to children and young people.

DOMAIN I: MENTAL HEALTH PROMOTION AND PREVENTION

Competence area I.I: Understanding of mental health and well-being.

Competence statement: this competence refers to the knowledge, skills and attitudes required in understanding mental health and wellbeing as it relates to children, young people and their families.

Rating Scale: LD Needs a lot of development

SD Needs some development

WD Is well developed NA Not Applicable

Level	KN	OWLEDGE	LD	SD	WD	N/A
I	i.	Awareness of the factors that can influence mental health and well-being at various developmental stages in children, young people and their families.				
I	ii.	Awareness of the 'family' as a concept, its dynamics and influences on the child's or young person's behavioural and emotional development and functioning.				
I	iii.	Awareness of the resilience and risk factors in relation to children, young people and their families.				
I	iv.	Awareness of the concept of 'mental health' in cultural context.				
I	V.	Awareness of the behaviours, emotions and mental health problems outside the normal range for age, gender and culture for children and young people.				
2	vi.	Understanding of the causes of behavioural, emotional and mental health problems in children and young people (i.e. predisposing, precipitating and perpetuating factors).				
2	vii.	Knowledge of how learning, mental health and physical difficulties impact on children and young people's mental health and well-being.				
2	viii.	Understanding of the behavioural, emotional and mental health disorders with relevance to children and young people.				

Level	KN	OWLEDGE (continued)	LD	SD	WD	N/A
2	ix.	Understanding of the impact that health inequalities and social deprivation has on the emotional well-being and mental health of children and young people.				
3	X.	Knowledge of the difference between mental illness and psychological or developmental delay which also impact upon mental health and well-being.				
Level	SK	ILLS	LD	SD	WD	NA
I	i.	Evaluates how one's own values, attitudes and behaviour impact on the mental health and well-being of children and young people.				
I	ii.	Actively seeks opportunities to foster mental health promotion in children and young people.				
I	iii.	Refers to appropriate services (e.g. primary, community, primary or secondary care) which support children, young people and their families.				
I	iv.	Listens and responds appropriately to parents who are concerned about their child's or young person's mental health.				
2	V.	Identifies behavioural, emotional and mental health problems in children and young people.				
2	vi.	Critically appraises factors, which can positively influence the holistic functioning of children and young people, strengthening their resilience to mental health difficulties (e.g. the importance of family support).				
2	vii.	Enables children and young people to manage or cope successfully with stressful situations to achieve their desired outcome.				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Shows sensitivity to the needs or concerns of the child or young person.				
I	ii.	Values the contribution of other members of the health care team and agencies to the care of the child or young person.				

Competence area 1.2: Normal development parameters for children and young people

Competence statement: this competence refers to the knowledge, skills and attitudes required in understanding the physical, cognitive, behavioural, emotional and psychological growth and development of children and young people.

Rating Scale: LD Needs a lot of development

SD Needs some development

WD Is well developed NA Not Applicable

Level	KN	OWLEDGE	LD	SD	WD	NA
I	i.	Awareness of the impact of parental mental and or physical illness on the child or young person's development.				
2	ii.	Understanding of the key normal developmental milestones for children and young people.				
2	iii.	Understanding of the significance of delayed or disordered development and the signs of possible development delay.				
2	iv.	Understanding of the principles of attachment and the effects on human development.				
2	V.	Knowledge of the different ways in which children and young people form meaningful relationships, how these might change and how this relates to mental health.				
2	vi.	Knowledge of the different parenting approaches, backgrounds and routines and the effects of these at various development stages for children and young people.				
2	vii.	Understanding of how to interact and motivate children and young people in ways that support the development of their ability to think and learn and achieve their full potential.				
2	viii.	Knowledge of how to empower and encourage parents and families to motivate and encourage children and young people to achieve their full potential.				
2	ix.	Understanding of the impact of transitions between the different stages of child development.				

Level	SK	ILLS	LD	SD	WD	NA
I	i.	Observes family interactions and the impact of parental physical or mental ill health on children in the family.				
I	ii.	Listens actively to the child, young person and/or parents to gain an understanding of concerns expressed about developmental, behavioural, psychological, emotional or mental health issues.				
I	iii.	Recognises the signs of abuse or neglect in children and young people and takes appropriate action.				
2	iv.	Observes a child's or young person's behaviour, understands its context and recognises physical, cognitive, behavioural, emotional, psychological or mental health difficulties.				
2	V.	Recognises the signs of a possible developmental delay.				
2	vi.	Supports a child or young person and their family to reach an informed decision.				
2	vii.	Provides a person-centred needs based support service to the child, young people and family with a developmental difficulty or disability.				
2	viii.	Demonstrates an appreciation of the impact of transitions between the different stages of child development.				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Demonstrates the values of a person-centred approach to health care.				
I	ii.	Values the unique development needs of the child or young person.				

Competence area 1.3: Promoting health and well-being and the prevention of mental ill health

Competence statement: this competence refers to the knowledge, skills and attitudes required in the promotion of mental health and well-being, including education, prevention and early intervention strategies in relation to children and young people.

Rating Scale: LD Needs a lot of development

SD Needs some development

WD Is well developed NA Not Applicable

Level	KN	OWLEDGE	LD	SD	WD	NA
I	i.	Awareness of the link between the physical health, emotional and psychological well-being of children and young people.				
I	ii.	Awareness of the role and function of the family in promoting and sustaining mental health and well-being.				
1	iii.	Awareness of family diversity, cultural variations and demonstrates sensitivity to these differences.				
2	iv.	Knowledge of mental health promotion activities appropriate to children and young people within current role.				
2	V.	Understanding of local, regional and national groups, organisations and agencies which promote well-being and mental health of children, young people and families.				
2	vi.	Understanding of strategies in the community which can promote mental health and emotional well-being e.g. through youth clubs, drop-in centres.				
2	vii.	Knowledge of the importance of providing information, education and preventative work with children and young people e.g. on suicide awareness, smoking, substance misuse and teenage pregnancy.				
2	viii.	Knowledge of applied models of health promotion and prevention that contribute to the well-being and mental health of children, young people and families.				
2	ix.	Knowledge of how schools, friends and families can promote, sustain and advocate for mental health and well-being.				

DOMAIN I: MENTAL HEALTH PROMOTION AND PREVENTION (continued)

Level	SK	ILLS	LD	SD	WD	NA
I	i.	Recognises and contributes to mental health and well-being promotion activities for children, young people and families.				
2	ii.	Involves children, young people and their families in mental health promotion and prevention activities and development of strategies to address them at local level.				
2	iii.	Uses opportunities for the promotion of mental health and emotional well-being for children and young people, which supports the Northern Ireland Government strategy "Our Children and Young People - Our pledge" (2006).				
2	iv.	Seeks to identify gaps in the provision of services for children and young people at risk of mental health difficulties and their families.				
2	V.	Recognises children and young people who are vulnerable to mental health problems and develops proactive programmes aimed at minimising risk factors.				
2	vi.	Encourages positive supports and influences for children and young people (such as family, relatives, friends, significant others) to facilitate the development of resilience.				
2	vii.	Evaluates strategies which promote the mental health and well-being of children and young people.				
2	viii.	viii. Facilitates and/or participates in groups in relation to promotion and prevention of mental health and well-being for children and young people, ensuring their voice is heard.				
Level	ATTITUDES		LD	SD	WD	NA
I	i.	Demonstrates a positive clinical and professional leadership approach to fostering mental health promotion and prevention behaviours in the care of the child or young person.				
I	ii.	Values seamless health care across sectors.				
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DOMAIN 2: COMMUNICATION

KSF Mapping

Core Dimensions 1, 2, 3, 4, 5 and 6; Specific Dimensions HWB2, HWB4 and G7

Competence area 2.1: Engagement

This competence refers to the knowledge, skills and attitudes required to actively involve and support children, young people and those caring for them in the provision and delivery of services and decisions that affect them.

Competence area 2.2: Giving, receiving and sharing information

This competence refers to the knowledge, skills and attitudes required to give, share and receive information in a timely and accurate way, respecting issues and legislation surrounding confidentiality and disclosure of information.

Competence area 2.3: Multi-disciplinary/Multi-agency collaborative working

This competence refers to the knowledge, skills and attitudes required to promote, develop and maintain constructive relationships with staff working together to meet fully the needs of children, young people and those who care for them.

Competence area 2.1: Engagement

Competence statement: this competence refers to the knowledge, skills and attitudes required to actively involve and support children, young people and those caring for them in the provision and delivery of services and decisions that affect them.

Rating Scale: LD Needs a lot of development

SD Needs some development

Level	KN	OWLEDGE	LD	SD	WD	NA
I	i.	 Knowledge of the components of effective communication with regard to dignity, respect, equality and diversity. 				
I	ii.	Knowledge of the skills and attitudes required to communicate effectively.				
I	iii.	Understands that successful engagement between children, young people, their families and health and social care professionals is essential to safe and effective care.				
I	iv.	Awareness of the factors that act as enablers and barriers to effective engagement of children, young people and their families.				
I	V.	Understands that where the first language of children, young people and their parents is not English, it is important to ensure their understanding, by providing e.g. interpreting services and/or information they can understand using signs, symbols or pictures.				
I	vi.	Understanding of the role and value of families as collaborative partners in supporting their children to achieve positive outcomes				
I	vii.	Knowledge of methods of interacting and listening to children and young people to make them feel valued and involved.				
I	viii.	Understands the influences of gender, social and cultural differences in relation to how children and young people communicate.				
I	ix.	Knowledge of how inference or interpretation can result in a difference between what is said and what is understood.				

Level	KN	OWLEDGE (continued)	LD	SD	WD	N/A
I	x.	K. Knowledge of how to adapt your style of communication to the needs and abilities of children and young people who do not communicate verbally.				
I	xi.	Understanding of the need to sustain relationships with children, young people and parents who may wish not to engage with mental health services.				
I	xii.	Awareness of services available for children, young people and their family from vulnerable groups and those who are socially excluded.				
2	xiii.	Knowledge that children, young people and their families require access to information and support related to the diagnosis of mental health problems and the associated stigma.				
2	xiv.	Understanding of the key components of therapeutic relationships with children, young people and their parents.				
Level	SKI	ILLS	LD	SD	WD	NA
I	i.	Communicates with the child, young person, families and others involved in their care, in a way that is appropriate to their age, preference and culture.				
I	ii.	Establishes a rapport with children, young people and their families using the appropriate form of communication.				
I	iii.	Seeks to reach a shared understanding with the child, young person or family by using effective communication skills e.g. active listening, observing and reading non-verbal behaviour.				
I	iv.	Creates an environment of trust, emphasising respect for the child or young person and their family, making them feel valued.				
1	V.	Seeks to maintain contact with children, young people and families who may wish not to engage with mental health services.				
2	vi.	Engages with children, young people and families, involving them in collaborative decision-making about their care.				

Level	SKI	LLS (continued)	LD	SD	WD	N/A
2	vii.	vii. Summarises situations in the appropriate way for the child, young person and family (taking into account factors such as background, age and personality).				
2	viii.	Offers constructive support and positive regard to families acknowledging the difficulties that can be faced with children and young people.				
2	ix.	Develops and maintains an effective therapeutic relationship with children, young people and their family.				
2	X.	Enables a child or young person to identify positive personal life experiences and knowledge.				
2	xi.	Recognises technologies that support the process of engagement with children and young people (e.g. email, texting).				
2	xii.	Acknowledges families' feelings about disengaging from the relationship and explores reasons for same within scope of professional practice.				
2	xiii.	Manages own feelings about disengagement in a constructive and appropriate manner through peer/professional supervision.				
3	xiv.	Recognises the reasons/triggers for disengagement and is able to implement engagement strategies for those hard- to-reach children, young people and families.				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Shows willingness to establish a rapport with the child, young person and their family.				
I	ii.	Values the need for clear lines of communication with relevant members of the child or young person's health care team to promote safe and effective care.				

Competence area 2.2: Giving, receiving and sharing information

Competence statement: this competence refers to the knowledge, skills and attitudes required to give, share and receive information in a timely and accurate way, respecting issues of confidentiality and disclosure of information.

Rating Scale: LD Needs a lot of development

SD Needs some development

Level	KN	OWLEDGE	LD	SD	WD	NA
I	i.	Knowledge of the importance of keeping accurate and complete records, and how to do so, according to relevant codes of practice and organisational policies.				
1	ii.	Knowledge of the organisation's policy related to the storage, safe keeping and disposal of records.				
I	iii.	Knowledge of the circumstances where information, even if confidential in nature, may be shared without consent (for example, where the child or young person is at risk of harm from self or others or there is a legal obligation to disclose).	ential in nature, may be or example, where the risk of harm from self			
I	iv.	Understanding of the various sources for gathering relevant information regarding the child or young person.				
I	V.	Knowledge of the importance of clarity of information exchange and the requirement to share this with children, young people, families, agencies and communities.				
2	vi.	Understanding of existing legislation, the circumstances in which children and young people can consent to medical treatment without their family's knowledge, with respect to equality and diversity.				

LD SD WD NA

Level SKILLS

LCVCI	J. C.				****	11/4
I	i.	Encourages children, young people and families to share information where appropriate, ensuring that they understand why it is important to do so.				
I	ii.	Uses available information to support effective decision making, for example, by assessing the relevance and status of information and passing it on when appropriate.	ing the			
I	iii.	Informs the child, young person and family how the information obtained will be respected and used in relation to the decision making process.				
I	iv.	Develops and maintains accurate and complete records.				
I	V.	Adheres to the organisation's policy and procedures regarding confidentiality and the disclosure of information to third parties, and the specific circumstances under which disclosure may be made.				
I	vi.	Presents choices to children and young people and obtains consent to sharing information.				
I	vii.	Shares information as and when required in the interests of the child or young person, guided by the Data Protection Act (1998) and relevant professional codes of practice.				
2	viii.	Ability to communicate, verbally and in writing, complex issues in relation to a child or young person's mental health (e.g. mental state, risk management plan).				
2	ix.	Shares information in a way that is appropriate to the age, understanding and preference of the child or young person (e.g. in writing, by telephone, electronically or using visual/symbol communication aids).				
3	x.	Critically appraises information for children, young people and families from a range of sources.				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Values the right of individuals to make informed decisions.				
I	ii.	Values the importance of giving, receiving and sharing information to promote high quality health care for children and young people.				

Competence area 2.3: Multi-disciplinary and multi-agency collaborative working

Competence statement: this competence refers to the knowledge, skills and attitudes required to promote, develop and maintain constructive relationships with other staff working together to meet fully the needs of children, young people and those who care for them

Rating Scale: LD Needs a lot of development

SD Needs some development

Level	KN	OWLEDGE	LD	SD	WD	NA
I	i.	Knowledge of how multi-disciplinary and multi-agency working can contribute to more effective delivery of care.				
I	ii.	Awareness of your role and responsibilities within the multi-disciplinary team in relation to the mental health and well-being of children, young people and family.				
I	iii.	Understanding of the role and responsibilities, of each member of the multi-disciplinary team in relation to the mental health and well-being of children, young people and families.				
I	iv.	Knowledge of the importance of clarifying your role and that of others when working with children and young people.				
I	V.	Knowledge of contingency planning when there is an unsatisfactory response from other services for support/involvement in relation to the well-being of the child or young person which protects their best interests.				
I	vi.	Awareness of the role of other relevant healthcare professionals who contribute to the care of children, young people and family and the particular benefits and strengths which each brings.				
2	vii.	Awareness of the range of multi-agency organisations and individuals working with children, young people and those caring for them.				
2	viii.	Understanding of your role within a multi-agency collaboration and how it relates to the roles of other multi-agency workers.				

ix. Knowledge of why effective communication is particularly important in multi-disciplinary and multi-agency working. x. Knowledge of local provision of children's services and how these contribute to comprehensive multi-agency children and young people's mental health services. xi. Knowledge of referral pathways between children's services and child and adolescent mental health services. xiii. Knowledge of how to collaborate effectively with other CAMHS tiers and to contribute/lead the mapping of clear pathways for CAMHS service users. Level SKILLS LD SD WD NA i. Works within a team context, forging and sustaining relationships and respecting the contribution of others working with children, young people and families. iii. Communicates effectively with other practitioners and professionals, listening and ensuring that you are being listened to and answered. iiii. Shows appreciation that others may not have the same understanding of professional terms and may interpret abbreviations such as acronyms differently. iv. Provides timely, appropriate, succinct information to enable other practitioners to deliver their support to the child or young person. v. Seeks to be proactive, initiates necessary action and is able and prepared to put forward own experienced, informed and professional views. vi. Ability to challenge decisions and situations in the interests of the child or young person, by deliberating and asking considered questions. viii. Presents facts and observations objectively regarding the child or young person to appropriate multi-professional team members.	Level	KN	OWLEDGE (continued)	LD	SD	WD	N/A
and how these contribute to comprehensive multi-agency children and young people's mental health services. 2 xi. Knowledge of referral pathways between children's services and child and adolescent mental health services. 3 xii. Knowledge of how to collaborate effectively with other CAMHS tiers and to contribute/lead the mapping of clear pathways for CAMHS service users. Level SKILLS LD SD WD NA 1 i. Works within a team context, forging and sustaining relationships and respecting the contribution of others working with children, young people and families. 1 ii. Communicates effectively with other practitioners and professionals, listening and ensuring that you are being listened to and answered. 1 iii. Shows appreciation that others may not have the same understanding of professional terms and may interpret abbreviations such as acronyms differently. 1 iv. Provides timely, appropriate, succinct information to enable other practitioners to deliver their support to the child or young person. 1 v. Seeks to be proactive, initiates necessary action and is able and prepared to put forward own experienced, informed and professional views. 2 vi. Ability to challenge decisions and situations in the interests of the child or young person, by deliberating and asking considered questions. 2 vii. Presents facts and observations objectively regarding the child or young person to appropriate	2	ix.	particularly important in multi-disciplinary and				
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i. Works within a team context, forging and sustaining relationships and respecting the contribution of others working with children, young people and families. lii. Communicates effectively with other practitioners and professionals, listening and ensuring that you are being listened to and answered. liii. Shows appreciation that others may not have the same understanding of professional terms and may interpret abbreviations such as acronyms differently. liv. Provides timely, appropriate, succinct information to enable other practitioners to deliver their support to the child or young person. l v. Seeks to be proactive, initiates necessary action and is able and prepared to put forward own experienced, informed and professional views. vi. Ability to challenge decisions and situations in the interests of the child or young person, by deliberating and asking considered questions. vii. Presents facts and observations objectively regarding the child or young person to appropriate	3	xii.	with other CAMHS tiers and to contribute/lead the mapping of clear pathways for CAMHS				
sustaining relationships and respecting the contribution of others working with children, young people and families. I ii. Communicates effectively with other practitioners and professionals, listening and ensuring that you are being listened to and answered. I iii. Shows appreciation that others may not have the same understanding of professional terms and may interpret abbreviations such as acronyms differently. I iv. Provides timely, appropriate, succinct information to enable other practitioners to deliver their support to the child or young person. I v. Seeks to be proactive, initiates necessary action and is able and prepared to put forward own experienced, informed and professional views. 2 vi. Ability to challenge decisions and situations in the interests of the child or young person, by deliberating and asking considered questions. 2 vii. Presents facts and observations objectively regarding the child or young person to appropriate	Level	SKILLS				WD	NA
and professionals, listening and ensuring that you are being listened to and answered. I iii. Shows appreciation that others may not have the same understanding of professional terms and may interpret abbreviations such as acronyms differently. I iv. Provides timely, appropriate, succinct information to enable other practitioners to deliver their support to the child or young person. I v. Seeks to be proactive, initiates necessary action and is able and prepared to put forward own experienced, informed and professional views. 2 vi. Ability to challenge decisions and situations in the interests of the child or young person, by deliberating and asking considered questions. 2 vii. Presents facts and observations objectively regarding the child or young person to appropriate	I	i.	sustaining relationships and respecting the contribution of others working with children,				
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and is able and prepared to put forward own experienced, informed and professional views. 2 vi. Ability to challenge decisions and situations in the interests of the child or young person, by deliberating and asking considered questions. 2 vii. Presents facts and observations objectively regarding the child or young person to appropriate	I	iv.	to enable other practitioners to deliver their				
interests of the child or young person, by deliberating and asking considered questions. 2 vii. Presents facts and observations objectively regarding the child or young person to appropriate	I	V.	and is able and prepared to put forward own				
regarding the child or young person to appropriate	2	vi.	interests of the child or young person, by				
	2	vii.	regarding the child or young person to appropriate				

Level	SKI	ILLS (continued)	LD	SD	WD	N/A
2	viii.	Ability to analyse and evaluate information to support multi-disciplinary/ multi-agency decision-making.				
2	ix.	Identifies possible sources of support within multi-disciplinary and multi-agency teams.				
3	x.	Facilitates staff not working in CAMHS, through consultation, teaching or liaison, to support the emotional well-being and mental health of children and young people within their scope of practice and in the best interests of the child and young person.				
3	xi.	Ability to support other professionals to ensure appropriate and timely referrals to Tiers 3 and 4 of Child and Adolescent Mental Health Services.				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Respects the contribution of nurses, multi-professionals and multi-agencies to the health and well-being of the child or young person.				
I	ii.	Shows willingness to promote, develop and maintain constructive relationships with multi-professionals and multi-agencies to meet fully the needs of the child, young person and family.				

DOMAIN 3: ASSESSMENT

KSF Mapping

Core Dimensions 1, 2, 3, 4, 5 and 6; Specific Dimensions HWB2, HWB3, HWB4 and HWB6

Competence area 3.1: Recognition and screening

This competence refers to the knowledge, skills and attitudes required to recognise, screen, record and action the early signs of a mental health or well-being problem in relation to a child or young person and family.

Competence area 3.2: Child, young person and family holistic assessment

This competence refers to the knowledge, skills and attitudes required to undertake a holistic assessment of the child or young person in the family context, using a person-centred and evidence-based approach.

Competence area 3.1: Recognition and screening

Competence statement: this competence refers to the knowledge, skills and attitudes required to recognise, screen, record and action the early signs of a mental health or well-being problem in relation to a child or young person.

Rating Scale: LD Needs a lot of development

SD Needs some development

Level	KN	IOWLEDGE	LD	SD	WD	NA
I	i.	Knowledge of early warning signs of mental health and well-being problems in relation to a child or young person.				
I	ii.	Awareness of screening and referral systems and practices for children and young people in relation to mental health and well-being.				
2	iii.	Awareness that early recognition, assessment and treatment of mental health and well-being problems in children and young people can result in a substantially shorter and less disabling course of illness.				
2	iv.	Knowledge of how to integrate mental health and well-being consultations as part of the overall general healthcare of children and young people.				
2	V.	Understanding of the range of mental health problems/illnesses that children and young people may have, and their effect.				
2	vi.	Knowledge of a range of tools appropriate for the purpose of screening for mental health problems in relation to a child or young person.				

Level	SK	ILLS	LD	SD	WD	NA
I	i.	Seeks, in a timely manner, the advice of an appropriate healthcare professional, where there are concerns about the mental health and well-being of a child or young person.				
2	ii.	Describes and records the early signs and symptoms of a mental health problem in a child or young person and reports or refers this to the appropriate service.				
3	iii.	Compiles and analyses information from the child, young person, their family and other relevant sources, using appropriate, valid and objective measurements in order to make a reasoned judgment regarding their mental health and well-being.				
3	iv.	Ability to make an accurate differential diagnosis and distinguish between variations on normal development and emerging developmental disorder/mental illness.				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Values the need for early recognition and identification of a mental health problem to alleviate symptoms and suffering.				
I	ii.	Shows willingness to establish a rapport with the child, young person and family to ascertain individual preferences, abilities and/or needs.				

Competence area 3.2: Family, child and young person holistic assessment

Competence statement: this competence refers to the knowledge, skills and attitudes required to undertake a holistic assessment of the child or young person in the family context, using a person-centred and evidence-based approach.

LD SD WD NA

Rating Scale:	LD	Needs a lot of development

Level KNOWLEDGE

SD Needs some development

I	i.	Awareness of the need to collaborate with appropriate family members using a transparent assessment process.				
2	ii.	Understanding of assessment models relevant to children and young people to determine their mental health and well-being needs.				
2	iii.	Knowledge of the organisation's Assessment Framework for Children and Young People and how to use it.				
3	iv.	Knowledge of a range of tools appropriate for the purpose of assessing the mental health, emotional disorders and potential risk factors, in relation to a child or young person.				
Level	SK	ILLS	LD	SD	WD	NA
I	i.	Gathers and reviews relevant information relating to the family's background, circumstances and needs.				
I	ii.	Identifies when children and young people are distressed during the assessment process and offers support.				
I	iii.	Empowers children, young people and their families to participate actively in the assessment process.				
2		Ability to assess and describe a family's structure,				

Level	SK	ILLS (continued)	LD	SD	WD	N/A
2	V.	Completes a mental state assessment, accurately identifying key symptoms and signs of mental illness.				
2	vi.	Ensures that the assessment process represents the views and opinions of the child or young person and family.				
2	vii.	Works collaboratively with other health care professionals or agencies to undertake joint assessments to inform decisions about the mental health of the child or young person.				
3	viii.	Assesses the emotional development and mental health of the child or young person, using a person-centered and holistic approach. with a genuine focus on the promotion of mental health and well-being.				
3	ix.	Where appropriate, uses mental health assessment and identification tools to complement and enhance the assessment process to determine the severity of mental health needs and associated risks.				
3	x.	Contributes to ongoing assessment through the provision and interpretation of specialist assessments, such as psychometric tests, specialist diagnostic assessments (e.g. behavioural and cognitive assessment).				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Shows respect for holistic and person-centred care.				
I	ii.	Shows willingness to establish a rapport with the child, young person and family to ascertain individual preferences, abilities and/or needs.				

DOMAIN 4: INTERVENTION

KSF Mapping

Core Dimensions I, 2, 3, 4, 5 and 6; Specific Dimensions HWB2, HWB3, HWB4, HWB5, HWB7 and G7

Competence area 4.1: Early intervention

This competence refers to the knowledge, skills and attitudes required for identifying and responding to concerns in a timely manner.

Competence area 4.2: Referral and transition

This competence refers to the knowledge, skills and attitudes required to process referral and transitions, to meet the assessed mental health needs of children and young people in family context.

Competence area 4.3: Evaluation of outcomes

This competence refers to the knowledge, skills and attitudes required to evaluate intervention outcomes.

Competence area 4.1: Early intervention

Competence statement: this competence refers to the knowledge, skills and attitudes required for identifying and responding to concerns in a timely manner.

Rating Scale: LD	Needs a lot of development
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SD Needs some development

Level	KN	OWLEDGE	LD	SD	WD	NA
I	i.	Understanding of the need for prevention, early identification and referral in relation to children and young people who may have mental health problems.				
I	ii.	Awareness of the 'Threshold of Needs Model' (UNOCINI; DHSSPS, 2008) regarding early interventions and evidence based intervention for children and young people.				
2	iii.	Understanding of the concept of serious mental illness in relation to children and young people.				
2	iv.	Knowledge of the circumstances in which to provide support/interventions in response to the needs of children and young people and when to refer the situation to another practitioner or professional (e.g. children and young people with high risk needs).				
2	V.	Knowledge of evidenced-based models of interventions and treatments appropriate to children and young people in relation to mental health and well-being.				
3	vi.	Knowledge of the concept of serious mental illness, core psychopathology and appropriate therapeutic responses.				
Level	SKI	ILLS	LD	SD	WD	NA
I	i.	Engages with the child, young person and family to ensure concerns are acted upon in a timely manner.				
I	ii.	Assesses the need for early intervention and onward referral if appropriate.				

Level	SKI	ILLS (continued)	LD	SD	WD	NA
I	iii.	Plans and delivers interventions appropriate to own role and scope of practice with children, young people and their families, according to their identified mental health needs.				
2	iv.	Provides advice, information and support to children, young people and family members on the appropriate management of their condition.				
2	V.	Identifies and facilitates access to relevant support systems in the community for children, young people and their families with identified mental health needs.				
2	vi.	Negotiates achievable goals with children, young people and their families, when appropriate.				
2	vii.	Develops, encourages and evaluates positive supports and influences for children (such as family, relatives, friends, significant others) to facilitate the development of resilience.				
2	viii.	Demonstrates skills in teaching coping strategies relevant to mental health and well-being to children, young people and their families.				
2	ix.	Applies and evaluates a range of relevant therapeutic interventions with children, young people and their families (e.g. CBT, family interventions, psychotherapies).				
2	x.	Monitors and supports children, young people and their families in relation to mental health and well-being, appropriate to own role and scope of professional practice.				
2	xi.	Reviews with the individual and significant others the effectiveness of the interventions provided and evaluates whether the goals and the overall plan of care have been met.				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Shows willingness to support and empower the child, young person and family through appropriate intervention.				
I	ii.	Shows willingness to work in partnership with the child, young person and family to ascertain individual preferences and/or needs.				

Competence area 4.2: Referral and transition

Competence statement: this competence refers to the knowledge, skills and attitudes required to process referral and transitions, to meet the assessed mental health needs of children and young people in family context.

Rating Scale: LD Needs a lot of development

SD Needs some development

Level	KN	OWLEDGE	LD	SD	WD	NA
I	i.	Knowledge of how to access support and advice from appropriate health care professionals, CAMHS and other children's services to aid the early identification and support of those with mental health needs.				
I	ii.	Knowledge of local protocols including eligibility criteria for effective referral to mental health and/or related services for children, young people and families.				
I	iii.	Understanding of the need for urgency and timeliness when referring children and young people to specialist mental health services.				
I	iv.	Knowledge of local resources and information services available to support children and young people in relation to their mental health and well-being.				
2	V.	Knowledge of referral and transition arrangements between specialist services (e.g. CAMHS) and generic mental health or children's services.				
2	vi.	Knowledge of local protocols when there has been an insufficient response from mental health services following a referral.				
2	vii.	Understanding of how to manage children, young people and their families in relation to referral and transitions across the CAMHs tiers, including learning disability services.				
3	viii.	Knowledge of transition issues for children and young people with mental health needs from CAMHS tiers to adult mental health and learning disability services.				
3	ix.	Knowledge of specialist regional resources for children and young people with identified mental health needs and how to access these.				

Level	SK	ILLS	LD	SD	WD	NA
I	i.	Identifies relevant additional sources of support for children, young people, and their families and facilitates engagement and access.				
2	ii.	Accesses and makes appropriate referrals to local services and amenities to support the development and reduce isolation of children and young people, e.g. voluntary agencies and family support services.				
2	iii.	Makes referrals to appropriate health care professionals, specialist CAMHS and other children's services for children, young people and their families in relation to their mental health and emotional well-being.				
2	iv.	Evaluates the likely impact of different types of transition on children and young people and identifies ways of supporting them and their families during this process.				
2	V.	Presents transition to children and young people in a positive and reassuring manner, in order to help them understand and prepare for changes in their situation.				
2	vi.	Gathers, collates and transfers necessary information to assist smooth transition of children and young people to other services and agencies, in advance of transition.				
2	vii.	Enables children and young people to explore their concerns about transitions and notifies appropriate colleagues if necessary.				
3	viii.	Enables children and young people to manage and cope successfully through episodes of transition.				
Level	AT	TITUDES	LD	SD	WD	NA
Ī	i.	Shows respect for the need for clear lines of communication with relevant members of the child's or young person's health care team, during the transition or referral process, to promote safe and effective care.				
I	ii.	Shows willingness to provide clinical leadership to support the work of nurses and other health care professionals during the transition or referral process.				

Competence area 4.3: Evaluation of outcomes

Competence statement: this competence refers to the knowledge, skills and attitudes required to evaluate intervention outcomes.

Rating Scale: LD Needs a lot of development

SD Needs some development

Level	KN	OWLEDGE	LD	SD	WD	NA
I	i.	Understanding of why evaluation is necessary and how it can be used to improve quality of care in the short and long term.				
I	ii.	Awareness of the methods of involving individuals and significant others effectively in evaluation, and the purpose of doing this.				
2	iii.	Knowledge of the different methods used to evaluate the process and outcomes of different interventions, including those that are evidence-based.				
2	iv.	Knowledge of how methods of evaluation should be adapted to reflect the needs of the child or young person.				
2	V.	Understanding of the purpose of modifying interventions as a result of the outcomes of evaluation with individuals, significant others and other members of the team.				
2	vi.	Knowledge of how to evaluate your own contribution constructively and make recommendations for improvement.				
2	vii.	Understanding of your role and responsibilities in recording the evaluation and review of care provided to the child, young person and family.				
3	viii.	Knowledge of specific tools in relation to measuring outcomes for child and adolescent mental health services.				

Level	SK	ILLS	LD	SD	WD	NA
I	i.	Critically evaluates own role in meeting the mental health and well-being needs of children and young people.				
2	ii.	Engages with service users in service planning, development, review and evaluation to review progress towards planned outcomes.				
2	iii.	Uses valid evidence-based practices in evaluating the quality of nursing care (e.g. benchmarking, clinical audit).				
2	iv.	Participates in quality improvement and quality assurance activities.				
2	V.	Evaluates and documents progress towards expected outcomes and modifies care plans accordingly.				
3	vi.	Uses evidence based tools to measure outcomes against national/regional standards in specialist children, young people and family services.				
3	vii.	Participates in local and national research initiatives relevant to own area of practice.				
Level	AT	TITUDES	LD	SD	WD	NA
1	i.	Shows motivation and commitment to the development of services for children and young people.				
1	ii.	Shows willingness to participate in innovations in health care.				

DOMAIN 5: PROMOTING SAFETY

KSF Mapping

Core Dimensions I, 2, 3, 4, 5 and 6; Specific Dimensions HWB2, HWB3 and HWB4

Competence area 5.1: Safeguarding children and young people

This competence refers to the knowledge, skills and attitudes required to protect children and young people who may be at risk, or are likely to suffer harm.

Competence area 5.2: Risk assessment and management

This competence refers to the knowledge, skills and attitudes required in order to assess and manage risks in relation to children or young people causing harm to themselves or others.

Competence area 5.1: Safeguarding Children and Young People

Competence statement: this competence refers to the knowledge, skills and attitudes required to protect children and young people who may be at risk, or are likely to suffer harm.

Rating Scale: LD Needs a lot of development

SD Needs some development

Level	KN	OWLEDGE	LD	SD	WD	NA
I	i.	Understanding of what is meant by safeguarding and the different ways in which children and young people can be harmed.				
I	ii.	Understanding of the different forms and extent of abuse and their impact on children's and young people's development.				
I	iii.	Understanding of national guidance and local procedures, and your own role and responsibilities within these, for safeguarding and promoting children's and young people's welfare, e.g. Children Order 1995 and UN Convention of the Rights of the Child.				
I	iv.	Understanding of when and how to discuss concerns with parents and families.				
I	V.	Awareness of the factors that can affect parenting and increase the risk of abuse (for example, domestic violence).				
I	vi.	Awareness of the key agencies involved in child protection.				
2	vii.	Understanding of the key role of families in safeguarding and promoting the welfare children and young people.				
2	viii.	Knowledge of the route for referral when abuse has been disclosed by a child, young person and/or their family.				
2	ix.	Knowledge of how to advocate for children or young people to protect their dignity, autonomy and rights.				
3	x.	Knowledge of the impact on mental capacity of children and young people living with mental ill health and/or a learning disability, in relation to risk.				

Level	SK	ILLS	LD	SD	WD	NA
I	i.	Exercises professional judgment to determine when a child or young person is in danger or at risk of harm, and takes action to protect them.				
I	ii.	Ability to seek advice and report concerns, ensuring they are listened to.				
2	iii.	Ability to complete a UNOCINI assessment at the appropriate level.				
2	iv.	Completes reports for child protection proceedings appropriate to role and within scope of professional practice.				
3	V.	Provides children or young people with the opportunity to participate in decisions affecting them, appropriate to their age and ability, and taking their wishes and feelings into account.				
3	vi.	Formulates evidence and evaluates thresholds of harm within an ongoing therapeutic context.				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Shows commitment and motivation towards the provision of safe and effective care for children and young people.				
I	ii.	Shows awareness of professional accountability, with regard to the safe and effective care of children and young people.				

Competence area 5.2: Risk assessment and management

Competence statement: this competence refers to the knowledge, skills and attitudes required in order to assess and manage risks in relation to a children or young people causing harm to themselves or others.

Rating Scale: LD Needs a lot of development

SD Needs some development

Level	KN	OWLEDGE	LD	SD	WD	NA
I	i.	Knowledge of the wide range of risk factors (e.g. physical, social and educational) that can affect the mental health and well-being of children and young people.				
I	ii.	Understanding of the factors which may result in children or young people harming themselves or others.				
I	iii.	Knowledge of the Mental Health (Northern Ireland) Order (1986) regarding the capacity to give consent to treatment in relation to a child or young person.				
2	iv.	Awareness of the principles of the DHSSPS Protect Life Strategy: 2006 - 2011.				
2	V.	Knowledge of when and how to intervene early to avoid a potential crisis situation and provide appropriate support once the crisis has been resolved.				
2	vi.	Knowledge of relevant professional and organisational policies and how these should inform and guide the assessment and management of risk.				
3	vii.	Knowledge of specific risk assessment and management tools that can be applied to children and young people to identify and manage clinical risks (e.g. DHSSPS (2009) Guidance for assessing and managing risk).				

Level	SK	ILLS	LD	SD	WD	NA
I	i.	Identifies, records and reports areas and situations where children and young people are at risk of harming themselves or others.				
2	ii.	Contributes to a systematic assessment of risk factors and develops a range of strategies to address identified risks.				
2	iii.	Contributes to the development of a comprehensive risk management plan.				
3	iv.	Ability to manage own anxiety and take 'therapeutic risks', whilst working safely and ethically.				
3	V.	Ability to apply the Mental Health Order (1986) in the best interests of the child or young person, in relation to risk assessment and management.				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Fosters a multi-disciplinary team approach to health care.				
I	ii.	Shows respect for ethical principles and professional accountability and responsibility, with regard to safe and effective care of children and young people.				

DOMAIN 6: ETHICAL AND LEGAL PRACTICE

KSF Mapping

Core Dimensions 1, 2, 3, 4, 5 and 6; Specific Dimension GI

Competence area 6.1: Professional and legal aspects

This competence refers to the knowledge, skills and attitudes required to practice in an accountable and responsible manner, using one's own professional judgement and actions and ensuring that they conform to relevant legislation, policy and professional code of practice.

Competence area 6.2: Continuous professional development

This competence refers to the knowledge, skills and attitudes required to assess and develop own CPD in line with role and skills required to deliver safe and effective care.

Competence area 6.3: Research and development

This competence refers to the knowledge, skills and attitudes required to initiate and participate in audit and research, have up-to-date knowledge of research, then introduce findings to ensure best practice.

Competence area 6.1: Professional and legal aspects

Competence statement: this competence refers to the knowledge, skills and attitudes required to practice in an accountable and responsible manner, using one's own professional judgement and actions and ensuring that they conform to relevant legislation, policy and professional code of practice.

Rating Scale:	LD	Needs a lot of development
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SD Needs some development

Level	KN	IOWLEDGE	LD	SD	WD	NA
I	i.	Knowledge of professional codes of practice with regard to information handling, confidentiality, informed consent and disclosure.				
I	ii.	Understanding of the rights, choices and responsibilities of children and young people and family.				
3	iii.	Knowledge of policy developments in health, education social services that have an impact on CAMHS provision e.g. disability, race relations, youth offending, fostering and adoption, domestic violence etc.				
Level	SK	ILLS	LD	SD	WD	NA
I	i.	Accepts accountability and responsibility for own professional judgement and actions and works within professional boundaries and scope of practice.				
I	ii.	Appropriately challenges health care practice which could compromise the safety, privacy or dignity of the child or young person.				
I	iii.	Identifies unsafe practice and takes appropriate action.				
I	iv.	Is self-aware with regard to own beliefs and values and reflects on how these may influence care-giving.				
I	V.	Respects the values, customs, spiritual beliefs and practices of individuals and groups and exercises culturally competent practice.				

Level	SK	ILLS (continued)	LD	SD	WD	NA
I	vi.	Reports and records clinical activity in line with professional guidelines and the local clinical and social care governance framework.				
I	vii.	Implements legislation to support children and young people (e.g. the Children Order (Northern Ireland), Human Rights Act, Mental Health Order, Northern Ireland, the Disability Discrimination Act).				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Shows willingness to provide clinical leadership to support the work of nurses and other health care professionals.				
1						

Competence area 6.2: Continuous professional development

Competence statement: this competence refers to the knowledge, skills and attitudes required for Continued Professional Development in line with role and skills required to deliver safe and effective care.

LD SD WD NA

Rating Scale: LD Needs a lot of development

Level KNOWLEDGE

SD Needs some development

Understanding of qualities and aspects of clinical

		and professional leadership.				
I	ii.	Knowledge of reflective practice processes.				
I	iii.	Understanding of the principles and processes of self and peer review.				
I	iv.	Knowledge of models of supervision within teams.				
I	V.	Understanding of the roles and responsibilities of a supervisor and supervisee.				
I	vi.	Understanding of how to ensure own practice is up to date, evidence-based, safe and effective.				
Level	SKI	LLS	LD	SD	WD	NA
I	i.	Promotes and maintains the professional image of nursing.				
I	ii.	Contributes to the development of professional nursing practice.				
I	iii.	Acts as an effective role model and mentor.				
I	iv.	Assumes responsibility for lifelong learning and maintenance of competence.				
I	V.	Takes action to meet continuing education needs.				
I	vi.	Contributes to the education and professional practice development of students and colleagues.				
I	vii.	Takes opportunities to learn together with others, contributing to health care delivery.				
I	viii.	Identifies and plans learning, development and supervision needs with relevance to the mental health and well-being of children and young people.				

Level	SK	LLS (continued)	LD	SD	WD	NA
3	ix.	Supports others in understanding the mental health and emotional well-being needs of children and young people and how these can be addressed in their work.				
3	x.	Regularly assesses and updates own level of knowledge regarding mental health and well-being problems/illnesses in children and young people.				
3	xi.	Evaluates personal and professional development needs in relation to CAMHS services.				
3	xii.	Provides and evaluates clinical supervision to relevant health care professionals in response to identified needs.				
3	xiii.	Develops the knowledge and skills of relevant healthcare professionals, through appropriate training, to enhance the well-being and mental health of children and young people when specialist child and young people's mental health services are not required.				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Values the importance of continued professional development in line with role and skills required to deliver safe and effective care.				
I	ii.	Shows willingness to develop knowledge and skills to meet the needs of children and young people.				

Competence area 6.3: Research and development

Competence statement: this competence refers to the knowledge, skills and attitudes required to initiate and participate in audit and research, have up-to-date knowledge of research and introduce findings to ensure best practice.

Rating Scale:	LD	Needs a lot of development

SD Needs some development

Level	KN	IOWLEDGE	LD	SD	WD	NA
I	i.	Understanding of service development processes and evidence based practice, e.g. data collection, audit, user involvement, research.				
2	ii.	Knowledge of how to critically evaluate the service, on an ongoing basis, and contribute to evidence-based practice with relevance to the mental health and well-being of children and young people.				
2	iii.	Knowledge of how to involve service users and other stakeholders in the provision of services with relevance to the mental health and well-being of children and young people.				
3	iv.	Knowledge of how evaluate service developments and delivery, with relevance to the mental health and well-being of children and young people.				
Level	SK	ILLS	LD	SD	WD	NA
Level	sk i.	Ability to access research and use information systems.	LD	SD	WD	NA
I 2		Ability to access research and use information	LD	SD	WD	NA
I	i.	Ability to access research and use information systems. Uses and evaluates evidence-based practice to enhance care and services provided, with relevance to the emotional well-being and mental	LD	SD	WD	NA

Level	SKI	ILLS (continued)	LD	SD	WD	NA
2	V.	Identifies to relevant line managers the need for additional resources to enhance the quality of services for children and young people in relation to mental health and emotional well-being.				
3	vi.	Contributes to and generates research to inform evidence-based practice with relevance to the mental health and well being of children and young people.				
3	vii.	Uses continuous quality improvement approaches to identify gaps and develop services that are evidenced based and meet organisational or government priorities.				
3	viii.	Disseminates research with relevance to the mental health and well-being of children and young people.				
3	ix.	Initiates and manages practice or service development initiatives with relevance to the emotional well-being and mental health of children and young people, taking account of relevant research, clinical guidelines and policy.				
Level	AT	TITUDES	LD	SD	WD	NA
I	i.	Values the importance of research and development to ensure best practice.				
I	ii.	Shows motivation and commitment to the development of services.				

Appendix 6

Learning and development record proforma

Organisational/personal objective	Link(s) to KSF core and/or specific dimension	Personal Development Plan
		Development need:
		Action required:
		Evaluation:
		Development need:
		Action required:
		Evaluation:
		Development need:
		Action required:
		Evaluation:





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