



# Enabling good practices by international collaboration

**World Mental Health Day, Cyprus**

Roland van de Sande, MSc, PhD Candidate  
Secretary General, Horatio, European Psychiatric Nurses



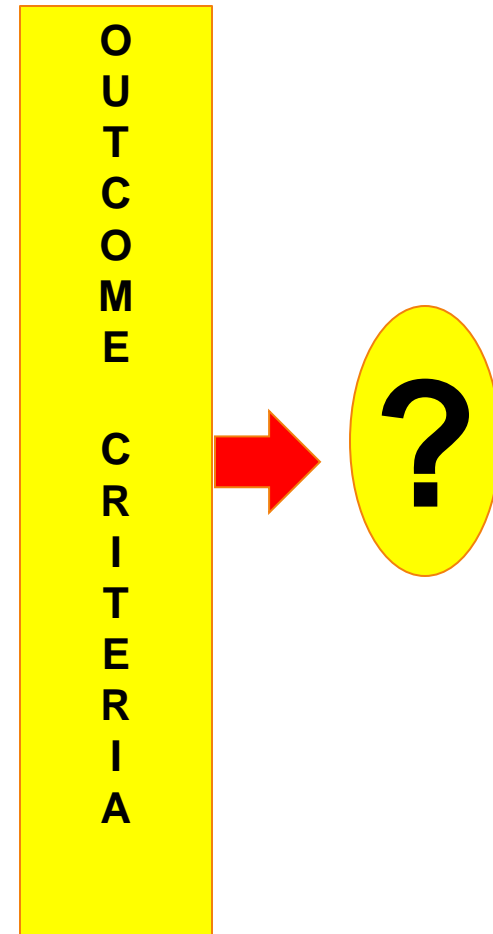
# Core issues

- **Continious education**
- **Clinical decision making**
- **Interventions**

# General driving keys in expert practice

Manley & McCormack (1997),

- Reflective ability
- Organization of practice
- Interpersonal relationships
- Autonomy and authority
- Ensuring a solid reputation



# Career pathways in psychiatric nursing

(European debates)

Supervisors at Master or PhD level

Advanced Nurse Practitioners  
Master level required?

Level 6 Specialist –Nurses / 120ECTS

Disease related focus?

(A1) Level 5 nurse/ 240 ECTS

Bachelor level

Debates;  
distinction level of functioning ?

(A2) Level 4 Nurse

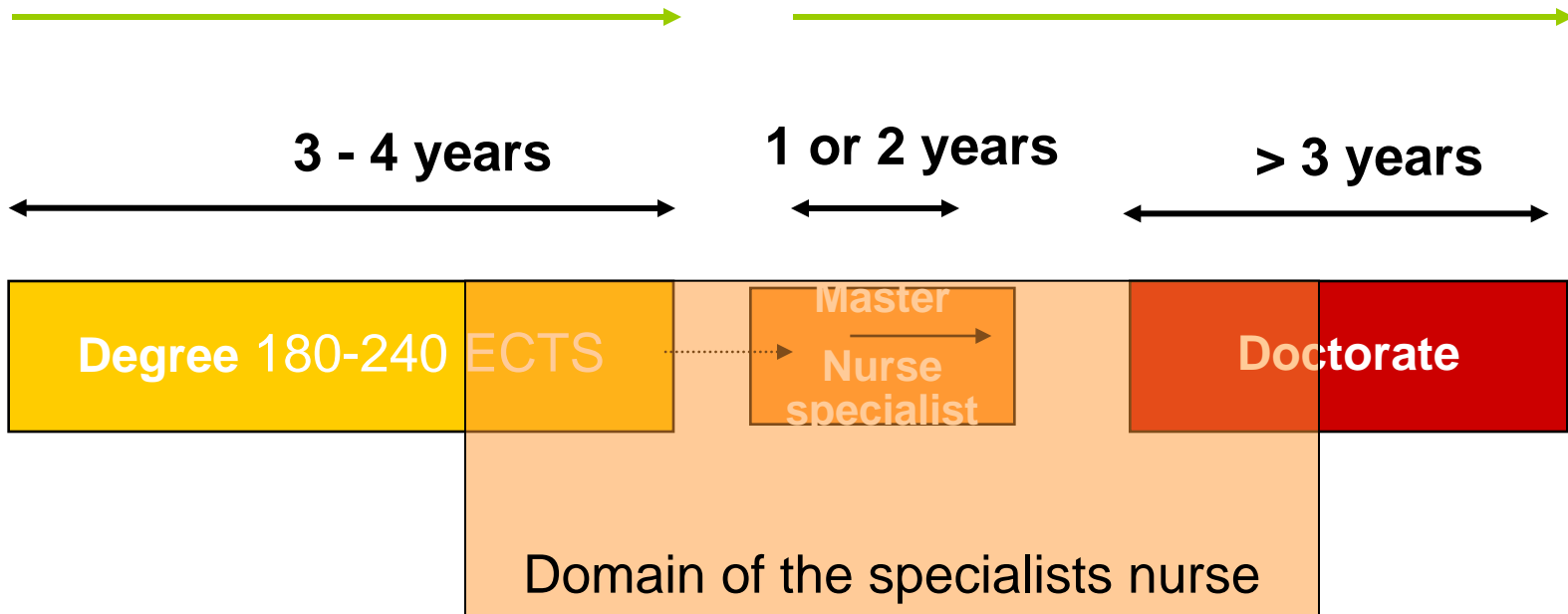
Diploma level

Inservice training or based on full time education

# Academic structure versus clinical reality

Level I

Level II



300 ECTS

# Bachelor & Master nursing education



<b>Inhabitants</b>	<b>16,5 million</b>
Registered nurses (Diploma 56% Bachelor 34%, ANP 8%)	240.000
Annual amount of new students Schools of Nursing, Universities of Applied Science	2700
Annual enrolment new nursing students	2300
Schools of Nursing, Universities of Applied Science	17
Master prepared nurses (10 nurse academies)	4000
Academic chairs in nursing science	3
Centres of Excellence, University of Applied Science (35 in health & social care)	277

# International ANP debates

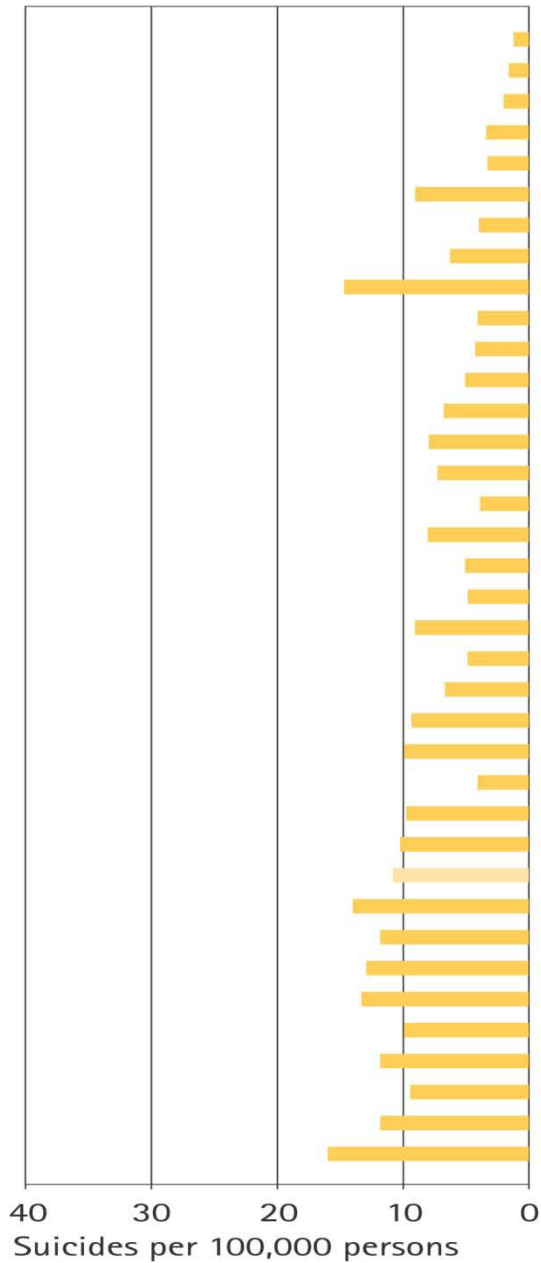
- **Professionalization agenda works out both positive and negative**
- **Many organised nursing bodies resisted Nurse Practitioner roles based on an argument that these practitioners will become physician substitutes**
- **Are ANP's just taking on roles 'left' by doctors?**
- **Or are ANP's challenging extended practice in nursing domains**
- **Definition disagreements on nursing, medical and psychosocial interventions.**

# Challenges in clinical decision making

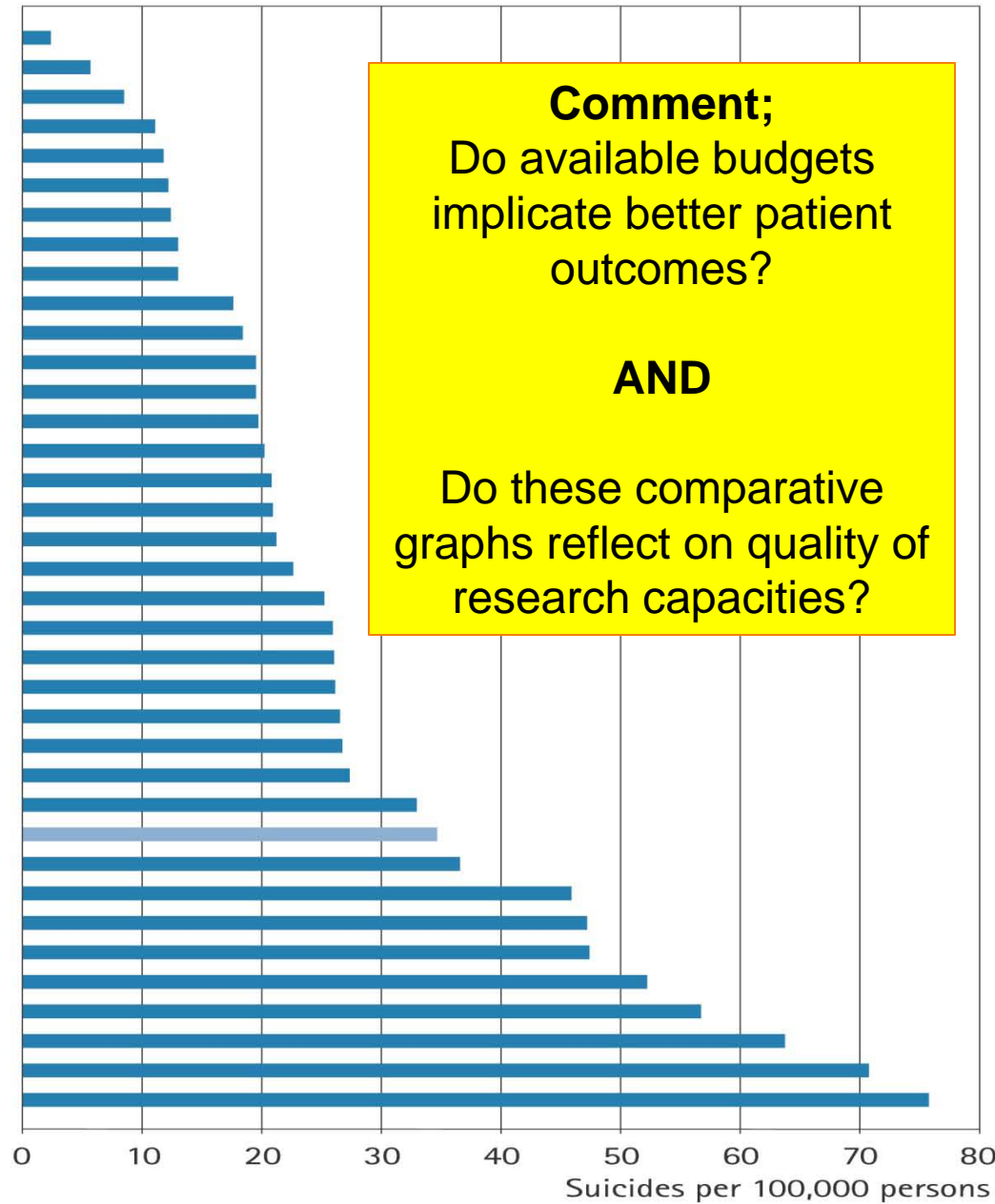
- Symptom evaluations
- Crisis response measures
- Maintaining therapeutic relationships



Women



Men



**Comment;**  
 Do available budgets  
 implicate better patient  
 outcomes?  
  
**AND**  
  
 Do these comparative  
 graphs reflect on quality of  
 research capacities?



Early recognition of alarming  
symptoms




# GMHAT/PC

The Global Mental Health Assessment  
Tool

(Primary Care Version)

***Vimal Kumar Sharma***<sup>®</sup>

Cheshire and Wirral Partnership 

NHS Foundation Trust

# Quality of clinical decisionmaking in acute wards?

assessment  
and  
monitoring

multidisciplinary  
risk  
communication

transparency  
rapid decision  
making

justification and  
timing coercive  
interventions

# CrisisMonitor Acute Psychiatry

**Roland van de Sande, MSc, Prof. Dr. Henk Nijman,  
Prof. Dr. Cees van der Staak, Edwin Hellendoorn, GGZ-VS,  
Dr. E.Noorthorn ,Prof. Dr. Niels Mulder**

**bavo**europoort

# CRISISMONITOR TOOLS

**Kennedy Axis V (Kennedy, 2003) Short version**

**Broset Violence Checklist (Almvik et al,2001)**

**Kennedy Axis V (Kennedy,2003) Full version**

**Brief Psychiatric Rating Scale (Overall et al,1988)**

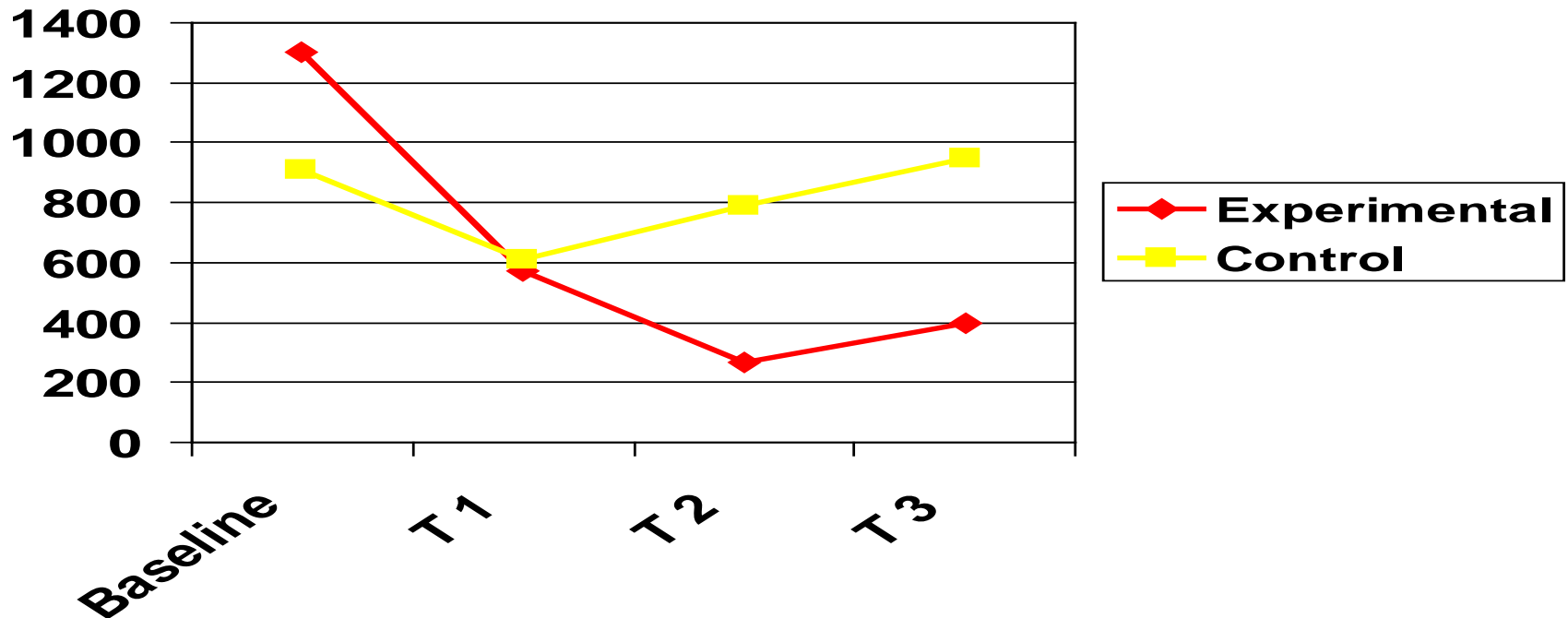
**Scale of Dangerousness (Mulder & van Baars,2004)**

**Social dysfunction and Aggression Scale (Wistedt et al,1990)**

**SOAS-R (Nijman et al, 1999)**

# Significant reduction in seclusion hours after implementing short term risk assessment

(van de Sande et al, 2009)



Key role nurses in cluster randomized clinical trial  
in acute psychiatric wards

# Co-morbidity and mortality in SMI patients

- Schizophrenia patients tend to die 10 >20 years earlier than others (Tidelman et al, 2008)
- About 50% suffer from serious somatic illness (Goldman, 1999)
- Half of the cases are not identified timely
- Delayed recognition somatic complaints and undertreatment
- Most common; cardio-vascular failures, diabetes, respiratory and infectious diseases, metabolic syndrome (Green, 2003)

# Nurse Practitioner led somatic screening in schizophrenia patients

Risk factors	Sample (n=35)
<b>Hypertension</b> (blood pressure $\geq 130/85$ mmHg)	17 (49%)
<b>High cholesterol</b> (total $\geq 6.5$ mmol/L of LDL $\geq 2.5$ mmol/L)	20 (57%)
<b>Diabetes</b> (plasma glucosis $\geq 7.0$ mmol/L)	3 (9%)



# Evidence-based interventions

- **Aproximately 25% patients with serious mental illness receive treatment based on evidence-based recommendations or guidelines**

*(Wang, Berglund, Kessler, 2000)*

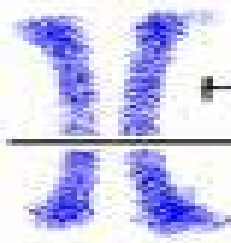
- **Similar findings for schizophrenia disease management**

*(Lehmann, 2001, Anthony et al, 2003))*

- ***Strong need for tailor made psychosocial interventions for severe mentallly ill patients. Nurses are often the only available healthcare professionals for this population***

# Challenges for nurses

- Proportionality and subsidiarity of coercion
- Problem solving interventions
- Crisis home treatment
- Motivational interviewing
- Cognitive behavioral therapy
- Rehabilitation programs
- Health promotion
- Medication management



HORATIO

European  
Psychiatric  
Nurses

