Primary Mental Health and Addiction Credential Programme Guidelines

This document is intended to provide guidance that supports and informs local credential programme development, delivery and review. It outlines the expectations of Te Ao Maramatanga New Zealand College of Mental Health Nurses Inc. in relation to programme content and delivery arrangements.

Increasingly we are being asked to consider a range of digital options for programme delivery and in response to requests for more detail about our expectations, we have reviewed and updated this guidance.

> We welcome proposals and discussion from local programmes in relation to the current guidance. The programme reference group are prepared to be flexible to differing local contexts and developments as we continue to develop the programme together. We encourage you to make contact early, with the Director of Credentialing, if your proposed programme development differs from what we describe in this guidance.

Local Programme Leadership Support and Cross Sector Collaboration

There is a clear expectation from our funder, the sector and local communities that we work in collaborative partnerships, inclusive of mana whenua and tangata whenua, to provide best practice approaches at all levels, including governance, programme development, resourcing and delivery.

Programme Hours

We expect nurses submitting a portfolio for credential to have accessed a total of 45 hours of professional development relating to the content outlined in the learning objectives.

We require that local programmes provide:

- 6 sessions of professional supervision (individual or group) and a requirement that nurses participate in at least 4 of these. (4 hours minimum).
- The remaining 39--41 hours consist of a programme tailored to deliver 75% of the learning objectives content. As an example, current programmes are arranged into 5x8hour days or 6x6.5hour days delivered over 6 months
- Online learning that has been endorsed by the college, can be provided by the college up to 8 programme hours and covers Understanding Depression, Understanding Stress and Anxiety, Understanding Problematic Substance Use and Transitioning New Learning into Practice

Programme Delivery

We consider a key asset of the programme to be the in person sessions which provide participants with opportunities for:

- Extended discussions with speakers, to gain confidence and enhance a range of therapeutic skills through practice and feedback
- Making collegial connections and learning from the experience of peers

• Exposure to locally relevant speakers to develop and enhance consultation and local referral networks

While the college prioritises in person delivery to meet the practice goals of the programme, online learning may be utilised for pre and post programme use and some knowledge based topics that provide the basis for experiential skills-based learning and development of collegial cross-sector relationships.

Proposals seeking the endorsement of new online learning options and/or proposing delivery arrangements that differ from this guidance, can be discussed with the Director of Credentialing and added to the programme reference group agenda. The reference group meets fortnightly and will prioritise discussion regarding proposals and endorsements, as they are tabled.

Local programme outlines submitted for feedback should clearly indicate any online learning packages being recommended to participants.

Local programme co-ordinators are responsible for assessing the accessibility of online learning for your participants and any barriers to their use such as computer confidence, internet and device access.

Programme participation timeframes

• There is an expectation that from programme start to successful completion should take no longer than 12 months, as per below table
• Challenges to the below include participants who have extenuating circumstances and on occasion the availability of assessors
• Course submission timeframes are determined by the local Programme Co-ordinator and communicated to the Director of Credentialing
• Extenuating circumstances are discussed between the participant and local programme co-ordinator and a request for timeframe extension conveyed to the Director of Credentialing
• Participants who move regions can possibly join their new regions programme, facilitated by contacting the Director of Credentialing
• Participants will occasionally, due to extenuating circumstances, complete the programme requirements, over two consecutive programmes
• Participants who do not complete the programme for example because of maternity leave or long recovery from illness, can apply to resume and complete at a later date. These applications will be assessed on a case by case basis, between the local programme co-ordinator and Director of Credentialing

Months	1	2	3	4	5	6	7	8	9	10	11	12
Prog Attendance	██	██	██	██	██	██						
PIO Login	██	██	██	██	██	██	██	██		██	██	██
Submit work							██	██				
Results										██	██	██

The Collaborative Programme Approach

The programme is developed and supported collaboratively both locally and nationally. The following table outlines what is provided by the college and what is sourced and resourced locally.

The College – Funded by Te Pou	Local Programme Group – Locally Resourced
Programme Guidance (this document) developed and overseen by the Programme Reference Group	A local group from Te Whatu Ora, Primary Healthcare Organisations, Iwi Health and Kaupapa Māori Organisations, Health and Social Service NGO's etc, convene to discuss providing a programme,
Programme development support from the Credentialing team: Director and Kaitohu, Project Manager Administrator External Evaluator – pilot phase & ongoing evaluation support & reports	The local group can meet with members of the Credentialing team available by phone/zoom and in person to assist in developing a programme outline that meets the programme guidance and local priorities. Local co-ordinator liaises with the external evaluator to facilitate evaluation tasks are completed as required.
Programme Approval from Programme Reference Group	A draft outline is consulted on locally and then presented to the programme reference group for approval.
IT Support includes: Individual user logins for assembling and submitting users credentialing application, accessing 5 eLearning packages, monthly newsletters and other key resource materials A local co-ordinator dashboard to monitor individuals progress and cohort data IT support for users that require this	A locally appointed programme co-ordinator provides nurse participant details to the college to set up the online logins and dashboard, registration with the college. Local programme co-ordinators receive orientation to the use of the online system from the college and can refer individual users to the college if required.
Short presentations on the first and last programme days are provided to explain the credentialing process and the college role in the programme.	In person programme days are co-ordinated and facilitated locally. Programme registrations are managed locally. Speakers and supervisors are sourced locally with networking support from the college.
Credential process – At the end of the programme, nurses submit a credentialing application and this is assessed by college assessors and a credential awarded with assessor feedback.	When the last programme day has concluded, nurses are provided with a local letter, confirming their attendance at the programme and supervision. This is submitted along with other requirements, for assessment. Nurses are notified by email of the result of their assessment and can access feedback and an electronic certificate, via their individual login
Credentialing automatically entitles the nurse to Associate membership to the college for 1 year (usually $150). Nurses are posted a letter of congratulations and welcome to the college and a printed certificate.	Some local programmes do hold a local celebration of nurses having achieved credential. Some local funders do fund extended consults in primary care for credentialed nurses. This differs across regions.
Re-credentialing (3 years from date of original credential), is managed by the college who send nurses a reminder, six months before the re-credential is due, provide login access and a re-credentialing eLearning package.	Local co-ordinator can access information about credentialed and re-credentialing nurses, via the dashboard. They are also alerted when a credentialed nurse from another area moves to the region. Some regions hold refresher days for re-credentialing nurses and/or invite them to attend regular programme days

Learning Objectives and Programme Delivery

Local programmes require content that meets 75% of the below Learning Objectives.

Learning Objective 1 – Mental Health & Addiction in the New Zealand Context	Learning Objective 2 – Prevention and Early Intervention Best Practice
1.1 Common concerns – addiction, anxiety, depression, and trauma 1.2 Māori health, equity, models, and perspectives on wellbeing 1.3 Tangata whaiora models and perspectives on wellbeing 1.4 Mental health and the Law 1.5 Suicide prevention & assessment, and management of risk to self and from others 1.6 Stigma & discrimination and impact/barriers to wellbeing 1.7 Best practice models and perspectives	2.1 Screening tools and processes, brief assessment and evidenced-based frameworks 2.2 Brief intervention tools – common examples over life span 2.3 Local community, social and health services 2.4 Consultation and referral pathways 2.5 Self-help resources and support services
Learning Objective 3 – Therapeutic Use of Self in a Primary Care Setting.	**Learning Objective 4 – Working with People Experiencing Longer Term and/or multiple issues with their health and wellbeing**
3.1 Extending brief intervention tools 3.2 Engagement, rapport and working in partnership 3.3 Solution focused and mana enhancing strategies 3.4 Motivational approaches and conversations 3.5 The role of common medications & side effects in the context of therapeutic approaches	4.1 Co-existing concerns– mental health, addiction, physical health across the lifespan 4.2 Understanding and responding to trauma 4.3 Working with family, whānau and the impact of their environmental settings 4.4 Maximising cross sector collaboration to increase equity of access to care for specific populations 4.5 Common and emerging concerns for vulnerable populations, crisis assessment, grief, and psychosocial impacts of pandemics

Additional Commentary from Content Review to inform Programme Content

Learning Objective 1

- equity issues for rural and remote patients
- risk assessment - from others and links to assessing trauma or violence
- other wellbeing models when working with diverse groups and other ethnicities (links to relevance of CALD)

Learning Objective 2

- Brief intervention tools need to be evidenced based and culturally sensitive
- Stronger emphasis on Youth
- Coaching Skills – supporting self help and recommending resources
- Emphasis on referral pathways – community and iwi based services that support the whole continuum from wellbeing, self help, treatment services and services for people in distress and crisis

Learning Objective 3

- Rationale for moving medication from LO4 to LO3 – the latter is focusing on talking as the intervention and therefore understanding medication as adjunct rather than a stand alone treatment option in complexity.
- Introduction of trauma and context of trauma informed care in their settings and signalling that responding to trauma will be focused on in LO 4

Learning Objective 4

- Equity lens for Māori, Pacifica remains paramount to weave through the programme including the environmental and rural/remote access challenges
- Traumatic effects of institutional racism and colonisation for Māori
- Teaching the concept of 'universal precautions' approach to trauma, and skills in asking and responding safely
- Consider and monitor the ongoing impact of Covid and long-Covid, on peoples health, wellbeing and social circumstances.
- Complexity as it relates to multi-systems approach to health and social needs, accessing or developing multi disciplinary care planning structures within their settings to manage their own wellbeing
- Considerations that relate to age and the different mental health and wellbeing concerns common to specific age groups across the lifespan