

COMPETENCIES FOR MENTAL HEALTH NURSING

1. NATURE OF SPECIALIZATION

A Mental Health Nurse is a mental health care practitioner who is a professional nurse that has been trained as a mental health care nurse specialist and is able to provide prescribed mental health care, treatment and rehabilitation services. Such nurse holds an additional qualification in Mental Health Nursing, in accordance with the *Mental Health Care Act No.17 of 2002*.

Mental Health Nursing (MHN) is a specialized field with a focus on expanded roles and competencies to improve the mental health of all persons. The immense impact of mental illness is illustrated by the fact that depression alone is predicted to be the second largest cause of DALY (disability adjusted life years) by 2020 and, taking into account the added burden of substance abuse, psychoses and trauma, it is probable that mental illness is already the leader in DALY in South Africa. The importance of a strong core of specialized mental health nurses is therefore paramount.

In addition, data from the South African Stress and Health (SASH) study indicates that the lifetime prevalence for any common mental disorder was 30.3% in South Africa (Herman et al, 2009). This is in the context of a shortage of *mental health practitioners* in South Africa, with only 7.5 nurses in mental health per 100,000 of the population, 0.28 psychiatrists per 100,000 population, 0.32 psychologists per 100,000 population, 0.4 social workers and 0.13 occupational therapists in mental health care per 100,000 population (WHO, 2007).

Mental Health Care Nursing addresses the mental health care needs of individuals, families, groups and populations throughout the lifespan, inclusive of emerging vulnerable population groups. These specialists function at primary, secondary and tertiary levels.

The Mental Health Nurse will be professionally equipped to serve the community as a specialist mental health care practitioner in mental health establishments as well as the broader community. This Mental Health Nurse will be able to function independently



Cecilia Makiwane Building,
602 Pretorius Street, Arcadia, Pretoria 0083
Private Bag X132, Pretoria 0001,
Republic of South Africa



Tel: 012 420 1000
Fax: 012 343 5400
SANC Fraud Hotline: 0800 20 12 16



website: www.sanc.co.za

with basic, intermediate and advanced clinical competencies which are recognised both nationally and internationally in the mental health care environment. In the mental health facilities and the broader community, they will perform as independent, interdependent and dependant mental health practitioners, leaders and consultants in providing evidence-based care to patients, their families/ significant others and the community, as set out by the relevant legislative frameworks.

The Mental Health Nurse will be able to:

- Function competently and professionally in the mental health care environment.
- Have a range of skills, inclusive of critical thinking and clinical reasoning skills, knowledge and attitudes to enable him/her to make a meaningful contribution to the mental health services, the community and policy development.
- Display a high standard of ethical principles, inclusive of equity and justice, to ensure accountability.
- Provide primary, secondary and tertiary care to mental health care users, their families and the community through all phases of mental illness, commencing at the prodromal phase through to re-integration into the community; thereby involving prevention of mental illness, promotion of mental health care and treatment to rehabilitation, using a recovery supportive approach.
- Work as a specialist practitioner with other team members within the health care system, inclusive of policy makers, the mental health care user, the family and community stakeholders (including traditional healers).
- Identify practice gaps and implement research to contribute to practice and policy development.

2. MENTAL HEALTH NURSING

A Mental Health Nurse functions wherever there are people. As statistics show, one in every four people will develop mental illness during their lifetime, therefore the need for a Mental Health Nurse is essential everywhere (Herman et al. 2009). According to the *Mental Health Care Act*, the mental health environment includes health establishments, institutions, facilities, buildings or places where persons receive care, treatment or rehabilitative assistance, diagnostic or therapeutic interventions or other health services, and includes facilities such as community health and rehabilitation centres, clinics, hospitals and psychiatric hospitals. Services are rendered to health care users, their families and the communities. In addition to the above, they work in policy development, research, education and as beneficiaries of scholarships.

Mental Health Nurses are recognized as responsible and accountable professionals who work in partnership with inter-professional and multidisciplinary teams as well as the community, to provide comprehensive mental health care to all people. This care includes assessment/screening and preventative measures, management and rendering

of care, the promotion of mental health and the identification of people at risk, to implement preventive measures, treatment and rehabilitation.

The Mental Health Nurse can carry out the following core skills across the lifespan:

- Promote mental health in all settings and to all people, addressing issues of stigma and mental wellbeing.
- Critically reflect on practice and evidence, and through engaging clinical reasoning skills determine and implement mental health illness prevention strategies at a primary, secondary and/or tertiary level.
- Demonstrate an in-depth knowledge of theories which underpin mental health practice.
- Identify populations at risk of mental health problems through community entry and engagement with community, to collaboratively recommend evidence-based prevention and early detection activities as well as key mental health interventions in community crises periods.
- Collaborate with the mental health care user, his/her family, the community and the multidisciplinary team to conduct evidence-based, comprehensive mental health assessments; to diagnose, prioritise, stabilise or refer as appropriate; and to develop collaborative diagnosis care and treatment plans.
- Demonstrate evidence of sound clinical judgement and clinical reasoning, reflection-in-action, drawing on in-depth knowledge of the aetiology of mental illness and psychopharmacology, to initiate appropriate management.
- Establish therapeutic relationships with mental health care users, their families and the community.
- Conduct evidence-based mental health, and social or psychotherapeutic interventions, inclusive of the use of m-Health (mobile) / e-Health (digital).
- Exercise an advocacy role in care, treatment and rehabilitation, with a recovery-supportive approach.

The following guiding principles underpin all the Mental Health Nursing competencies:

- Mental Health Nursing is based on specialised mental and biopsychosocial health theoretical frameworks and current evidence-based information and practices, as well as a recovery-focused approach;
- A commitment to culturally sensitive, human rights based, person-centred approaches;
- The inclusion of mental health across all levels of care, from promotion to rehabilitation, and across the lifespan;
- Focuses on community, family (including significant others) and individuals;
- Located in international guidelines, the framework of the *Mental Health Care Act No. 17 of 2002* and other core South African legislation and mental health policies, and

striving towards the National Development Plan (*NDP 2030*) and the United Nations Strategic Development Goal 3 (*SDG 3*).

3. OVERLAP OF COMPETENCIES

Some competencies will overlap with allied health workers, e.g. psychologists, social workers, occupational therapists and counsellors. There is also an overlap with the role of psychiatrists in the management of psycho-pharmacy. In addition, certain Mental Health Nursing competencies can be included as a component in all nursing qualifications, as mental health is an integral part of wholeness.

4. SUMMARY OF CORE COMPETENCIES

*** Please note that all discussed interventions also include persons with severe and profound intellectual disability, neurological problems and substance abuse.**

DOMAIN 1: PROFESSIONAL, ETHICAL & LEGAL PRACTICE	
SUBDOMAIN/ CORE COMPETENCY	SPECIFIC COMPETENCY
1.1. Professional Practice	1.1.1 Accept accountability for increased responsibility, including own professional judgment, actions, outcomes of care, ethical practice and continued competence in accordance with legislation and policy frameworks (both nationally and internationally).
	1.1.2 Recognize and practise within the professional, ethical and legal parameters of the Mental Health Nurse as a mental health care practitioner.
	1.1.3 Recognize own level of competence and limitations in order to take actions as a Mental Health Nurse.
	1.1.4 Collaborate with the mental health care user, his/her family (including significant others), the community and the multidisciplinary team to ensure a team-based approach, and consults with or refers to appropriate other aid sources when

	<p>encountering situations beyond own competence, and ensures implementation of evidence-based mental health care practice.</p>
	<p>1.1.5 Recognize and respect different levels of accountability for the range of available health care professionals, fostering professional autonomy.</p>
	<p>1.1.6 Lead and participate in activities related to improving access to the range of mental health care services required for effective specialist services.</p>
	<p>1.1.7 Engage in continuous professional development, utilising formal and informal platforms, by reflecting and recognising own level of competence and limitations; and seek development opportunities and record development activities to provide evidence of lifelong learning.</p>
	<p>1.1.8 Commit to the development of peers, students and other categories of healthcare providers by creating a healthy practice environment that promotes and fosters professional growth and resilience.</p>
	<p>1.1.9 Actively participate in activities and affairs of professional associations and regulatory bodies to advocate for professional matters and mental health care (specifically mental health care nursing) in the development of legislation and policies, including the improvement of mental health care practices.</p>
<p>1.2 Ethical Practice</p>	<p>1.2.1 Deliver mental health care in a manner that preserves and protects the autonomy, dignity, rights, values, beliefs and preferences of the mental health care practitioner, users and their family/significant others, and the community.</p>
	<p>1.2.2 Participate in ethical and legal debates concerning complex decisions and orders in the mental health setting, for example: involuntary patients and care of forensic mental health care users, vulnerable populations, and including research activities.</p>
	<p>1.2.3 Acknowledge the significance and contribution of the mental health care user (MHCU), the family/significant others and the community</p>

	in ethical decision making in conjunction with the multidisciplinary team, and assisting them to make informed decisions.
	1.2.4 Maintain and advocate for the autonomy and confidentiality of the MHCU and his/her family within the legal and ethical framework, to protect MHCU confidentiality and adhere to relevant legislation which governs the privacy, access, use, retention and disclosure of personal information.
	1.2.5 Intervene, in accordance with legislative guidance, in cases of illegal, unethical or inappropriate behaviour that expose the MHCU to risk.
	1.2.6 Participate in and advocate for the MHCU, family/ significant others, the community and the profession in all aspects of decision making, especially in respect of ethical dilemmas, and serve as a mentor and role model by participating in the resolution of ethical and clinical dilemmas.
	1.2.7 Advocate for Mental Health Nurses and other auxiliary staff in addressing risks and safety concerns in mental health settings, including the community; promoting advancement and positive practice environments, whilst recognising limitations and scope of practice; and counteract the stigma of mental illness while creating awareness about the epidemic of mental illness.
	1.2.8 Identify, mitigate and manage potential and actual medico-legal risks in the mental health setting, and the reporting thereof to the relevant authorities.
	1.2.9 Display sensitivity to cultural, professional, lifestyle and technological diversity within the multidisciplinary team and mental health/ illness continuum, and promote cultural and lifestyle sensitive care.
	1.4.10 Maintain confidentiality and security of written, verbal and electronic information acquired.
	1.4.11 Promote the recovery and the responsible re-integration of MHCUs back into the community.

1.3. Legal Practice	13.1 Practice in accordance with professional and other relevant legislation applicable to mental health nursing and mental health care.
	1.3.2 Recognise and act upon legislation relating to the professional role and/or professional code of conduct.
	1.3.3 Practice in accordance with current mental health care policies and evidence-based procedural guidelines and protocols.
	1.3.4 Interpret and evaluate current regulations to develop or implement clinical practice guidelines and policies for situations of violence, neglect and abuse, and any other relevant emerging areas of identified need.
	1.3.5 Demonstrate knowledge of all relevant legislation (national and international) which may impact on mental health care nursing practice.
	1.3.6 Demonstrate knowledge of mental health legislation in terms of admission, transfer, discharge and rehabilitation under the <i>Mental Health Care Act No. 17 of 2002</i> .
DOMAIN 2: CARE PROVISION AND MANAGEMENT	
SUBDOMAIN/ CORE COMPETENCY	SPECIFIC COMPETENCY
2.1. Health promotion and illness prevention	2.1.1 Promote mental health in all settings through inter-sectoral collaboration and engagement, to create awareness and address issues such as minimising stigma and discrimination, mental health literacy, mental wellbeing, healthy lifestyles, coping mechanisms and resilience, thereby building capacity and social capital.
	2.1.2 Conduct analyses of mental health needs to identify populations at risk of mental health problems, to recommend evidence based prevention, screening and early detection activities.
	2.1.3 Critically reflect on social determinants of mental illness, epidemiological studies on burden of disease, and evidence studies

	<p>on mental health interventions, to determine and implement mental health illness prevention strategies at a primary, secondary and tertiary level.</p> <p>2.1.4 Based on the needs assessment plans, develop and implement needs-based programmes to promote mental health and wellbeing. These plans can encompass psycho-education of individuals or groups or more direct-action plans, in close co-operation with other stakeholders.</p> <p>2.1.5 Develop and use follow-up systems and multidisciplinary assessments to ensure that populations receive appropriate access to mental health services.</p> <p>2.1.6 Advise decision makers at local, provincial, national and international levels on policies affecting mental health.</p>
<p>2.2. Clinical competencies in assessment of mental health care users (MHCUs)</p>	<p>2.2.1 Establish specialised theory-based therapeutic relationships with MHCUs, their family and the community, and maintain personal and professional integrity in a therapeutic, person-centred relationship to promote goal-directed change.</p> <p>2.2.2 Using a culturally sensitive approach, recognize the signs and symptoms of the mental disorders, identify problems and maladaptive behaviour patterns, demonstrate in-depth knowledge of the causes and recognize and promptly and effectively intervene against the potential risk for self and others.</p> <p>2.2.3 Consider the unique age-specific aspects and specialist theory-based assessment techniques, to inform planning, implementation and evaluation across all levels of mental health care for the vulnerable mental health population throughout the lifespan.</p> <p>2.2.4 Collaborate with the MHCUs, their family, the community and multidisciplinary team (to collect collateral information) in order to conduct evidence-based, comprehensive mental health assessments, using diagnostic tools and acceptable diagnostic criteria, and ordering diagnostic tests and procedures in line with scope of practice, to</p>

	<p>diagnose, prioritise, stabilise or refer – as appropriate – and develop collaborative diagnosis, care and treatment plans and rehabilitation.</p> <p>2.2.5 Collect, analyse data and interpret relative to physical, psychological, cultural, spiritual and social aspects of the MHCUs, family and/or community health and, using the data, derive nursing diagnoses and differential diagnoses to collaborate with the MHCU, family and/or community to formulate a care plan specific to the individual/ family/ the community.</p> <p>2.2.6 Conduct assessment of crisis situations (psychiatric emergencies) such as suicide or self-harm attempts, in instances of comorbidity and trauma, and determine appropriate care plans and interventions to enhance mental health.</p> <p>2.2.7 Record and report the findings of mental health assessments and interventions (paper-based and electronic) to relevant stakeholders accurately, completely and in a timely manner, in compliance with Nursing Practice standards and institutional policies.</p>
<p>2.3. Clinical competencies: planning of care, treatment and rehabilitation of MHCUs</p>	<p>2.3.1 Formulate an individualized and person-centred, comprehensive care plan with identified care outcomes, based on nursing and differential diagnoses, findings from a comprehensive mental health assessment, inputs from other health team members and Nursing Practice standards.</p> <p>2.3.2 Apply critical thinking and clinical reasoning skills, underpinned by sound clinical judgement and in-depth knowledge of the aetiology of mental illness, mental health care practises and psychopharmacology, to initiate appropriate management to:</p> <ul style="list-style-type: none"> ● Develop effective care plans in collaboration with MHCUs and their families and the communities, to adhere to a recovery approach for individuals, families and groups in institutions as well as the community; ● Develop therapeutic programmes at local, national and international level; ● Involve communities and role-players in the planning and implementation of activities.

	<p>2.3.3 Consult stakeholders (inclusive of MHCU, family, community and advocacy groups) on policies and the development of infrastructure pertaining to mental health care delivery.</p>
	<p>2.3.4 Assess, review and revise planned activities regularly, in collaboration with MHCU, the family/community and other members of the health care team.</p>
<p>2.4. Clinical competencies in the implementation of care, treatment and rehabilitation of MHCUs</p>	<p>2.4.1 Utilize knowledge of therapies and apply related clinical skills in working with the mental health care user, family and/or community to conduct a range of advanced evidence-based psychotherapeutic therapies and therapeutic programmes, in accordance with the developed care plan and best practice standards for individuals, families, groups and communities; including psychosocial rehabilitation, using a recovery-based approach. Therapies will be based on latest evidence such as psycho-education, cognitive behavioural therapy (CBT), psychological first aid (PFA) or crisis therapy, structured family therapy etc.</p>
	<p>2.4.2 Exercise an advocacy role in care of MHCU, treatment and rehabilitation applying a recovery-supportive approach.</p>
	<p>2.4.3 Collaborate and take leadership in multidisciplinary teams and provide coordination and seamless continuation of care for MHCUs, and provide the necessary support to the multidisciplinary team members according to the identified gaps in the implemented actions.</p>
	<p>2.4.4 Act as a consultant at clinical, organizational, national and international levels.</p>
	<p>2.4.5 Maintain currency in knowledge of pharmacology (with an emphasis on psychopharmacology), the positive and negative effects of drugs on a person, and the administration of drugs; and administer medication and assess the effects of medication.</p>

	2.4.6. Utilize psychosocial rehabilitation in a goal-directed manner to foster recovery and physical and mental well-being of the MHCU, and enhance mental nurse/client relationships.
	2.4.7 Demonstrate the ability to conduct an interview, monitor mental health status; and collaboratively and continuously analyse, record and report interventions and MHCU responses to interventions and progress, as directed by care appropriate, evidence-based management tools.
	2.4.8 Provide support for MHCUs and families while in care, treatment and rehabilitation to identify and assist MHCUs and families in overcoming barriers to successful recovery (e.g. adherence, stigma, finances, accessibility, and access to social support).
	2.4.9 Create and maintain a therapeutic environment during all levels of care.
	2.4.10 Develop and maintain current, accurate recordkeeping systems to manage effective communication throughout the health care system.
	2.4.11 Refer to other members of the multidisciplinary team where appropriate.
2.5. Essential clinical skills in the monitoring of care, treatment and rehabilitation of MHCUs	2.5.1 Monitor, record and report progress towards expected outcomes accurately and completely, and evaluate progress towards planned outcomes in consultation with health care users, families and/or carers and the health care team.
	2.5.2 Reflect on and review all implemented actions, to address any shortcomings or lack of progress, and review MHCU outcomes on a regular basis.
	2.5.3 Utilize evaluation data and electronic record data to monitor patient improvement and recovery.
	2.5.4 Demonstrate the ability to access and utilize technology to improve treatment and care of MHCU

2.6. Clinical practice and management in a major incident, combat or disaster situation	2.6.1 Systematic assessment of the impact of a major incident or disaster in identifying needs, planning interventions, and providing and managing care in a resource-limited environment, while maintaining core competencies.
	2.6.2 Care for vulnerable people and their families/ significant others in a hostile, often unsafe, unstable environment, using appropriate competencies. Treat people with special needs and maintain ethical judgement towards casualties, hostile population groups or victims of hostile actions.
	2.6.3 Provide psychological first aid in times of trauma and crisis.
	2.6.4 Display professional development competencies, including monitoring, mentoring and evaluation, with a focus on competency in leadership, teamwork and coordination in the hostile environment setting; while maintaining accountability and legal and ethical aspects.
2.7. Therapeutic communication & relationships	2.7.1 Establish and maintain rapport with the MHCU and families/ significant others through therapeutic communication.
	2.7.2 Apply effectively the principles of facilitative and therapeutic interpersonal skills during interaction with MHCUs, their families, groups and communities, conveying respect for diverse opinions.
	2.7.3 Establish effectively the principles of written, verbal and non-verbal communications skills within the mental health setting.
	2.7.4 Act as role model for and encourage person-centred communication, including MHCUs with compromised communication ability.
	2.7.5 Advocate for the MHCU and family in relation to all interventions and orders.
	2.7.6 Communicate with the family of the MHCU to orientate them about the mental health care interventions, technology and changing status.

	2.7.7 Demonstrate therapeutic use of self-principles to manage complex interpersonal situations.
DOMAIN 3: PERSONAL & QUALITY OF CARE	
SUBDOMAIN/ CORE COMPETENCY	SPECIFIC COMPETENCY
3.1. Quality improvement	3.1.1 Always adopt safe practice. Regularly analyse the mental health care system and its philosophy to align mental health nursing accordingly, e.g. aligning with the Primary Health Care Approach and the <i>Mental Health Care Act No. 17 (2002)</i> .
	3.1.2 Collaboratively develop and analyse indicators, checklists and outcomes to monitor for risks and unintended outcomes, the implementation of quality initiatives and effectiveness of mental health nursing practice, based on contextual variables such as admissions, length of stay, morbidity, mortality and adverse events.
	3.1.3 Recognise workplace violence and aggression, and implement risk mitigation strategies for the recognition and management of disruptive and violent behaviour in the mental health care setting.
	3.1.4 Design innovations to effect change in mental health nursing practice and improve patient outcomes through the integration of evidence-based knowledge, skills and attitude.
	3.1.5 Evaluate the practice environment and quality of mental health nursing rendered, in relation to existing evidence, feedback from MHCU and pre-set indicators, and implement appropriate strategies.
	3.1.6 Use the results of quality improvement activities to initiate changes in mental nursing practice and in the mental health care delivery systems.

3.2. Continuing Education	3.2.1 Create and utilize learning opportunities for orientation and teaching of staff, MHCUs and families in the highly unfamiliar and stressful mental health care environment.
	3.2.2 Continuously explore and reflect on the self and staff competence and keep themselves and staff up to date with current health issues and health care trends in the dynamic environment of mental health nursing.
	3.2.3 Maintain personal growth through active participation in enriching sessions, to acquire clinical and professional knowledge, skills and attitudes/values.
	3.2.4 Apply the principles of teaching, learning and evaluation to design educational programmes that enhance the knowledge and practice of staff.
	3.2.5 As a competent and responsible member of staff, participate in the facilitating of formal and informal education of students and staff.
	3.2.6 Provides frequent positive and constructive feedback in a way that motivates both under-performing and high-performing individuals
	3.2.7 Act as a competent and accountable consultant or resource person for mental health care in the health care facility to enable staff to develop to their full potential.
	3.2.8 Maintain complete and accurate clinical records (written and electronically) that provide up to date evidence of competency and lifelong learning.
	3.2.9 Participate actively in formative and summative assessment of students, using evidence-based assessment tool.

DOMAIN 4: MANAGEMENT & LEADERSHIP	
SUBDOMAIN/ CORE COMPETENCY	SPECIFIC COMPETENCY
4.1. Management and Leadership	4.1.1 Demonstrate professional accountability and advocacy in executing clinical, managerial and educational activities to empower staff members and promote quality care.
	4.1.2 Share, foster and translate the vision and mission of the organization into the practice of nursing in the mental health care setting.
	4.1.3 Coordinate the care, treatment and rehabilitation of MHCUs across the healthcare journey, to achieve optimal outcomes within this environment.
	4.1.4 Oversee the care treatment and rehabilitation given by staff members and multidisciplinary team members, while ensuring accountability for the quality of care given to MHCUs and their families.
	4.1.5 Develop and implement a succession plan to ensure continuity of care (and mental health nursing leadership) in the mental health nursing practice.
	4.1.6 Liase effectively between various parties in effort to uphold the image of the profession and empower colleagues.
	4.1.7 Influence decision-making bodies to improve the mental health nursing practice environment and patient outcomes.
	4.1.8 Participate in efforts to influence health care policy on behalf of MHCUs and the profession.
	4.1.9 Participate in designing systems that support effective teamwork and positive outcomes in the mental health care environment.
	4.1.10 Manage and evaluate innovation and embrace high leadership opportunities to facilitate change in the mental health care setting

	through encouraging creativity, problem solving and critical thinking skills in staff.
DOMAIN 5: RESEARCH	
SUBDOMAIN/ CORE COMPETENCY	SPECIFIC COMPETENCY
5.1. Research	5.1.1 Engage in research activities to inform evidence-based practice, in order to improve and promote optimal patient outcomes.
	5.1.2. Display basic knowledge of research methods and of application of scientific research
	5.1.3 Critically analyse and discuss the findings of research in the field of mental health care within the healthcare team, and negotiate for the implementation of relevant and appropriate applicable findings in the mental health setting.
	5.1.4 Provide and translate evidence-based recommendations for MHCU interventions.
	5.1.5 Participate in the evaluation of mental health series and interventions.
	5.1.6 Disseminate research findings through activities such as presentations, publications, consultations and journal clubs to a variety of audiences that include but are not limited to healthcare providers in the mental health care setting.

5. DEFINITION OF CONCEPTS, BASED ON *THE MENTAL HEALTH CARE ACT, NO. 17 OF 2002*

CONCEPT	DEFINITION
Care and rehabilitation centres	Health establishments for the care, treatment and rehabilitation of people with intellectual disabilities.
Head of a health establishment	Means a person who manages the establishment concerned.
Health care provider	Means a person providing health care services.

Health establishment	Means institutions, facilities, buildings or places where persons receive care, treatment, rehabilitative assistance, diagnostic or therapeutic interventions or other health services, and includes facilities such as community health and rehabilitation centres, clinics, hospitals and psychiatric hospitals.
Mental health care practitioner	Means a psychiatrist or registered medical practitioner or a nurse, occupational therapist, psychologist or social worker who has been trained to provide prescribed mental health care, treatment and rehabilitation services.
Mental health care provider	Means a person providing mental health care services to mental health care users, and includes mental health care practitioners.
Mental health care user	<p>Means “a person receiving care, treatment and rehabilitation services or using a health service at a health establishment aimed at enhancing the mental health status of a user, a State patient and mentally ill prisoner, and where the person concerned is below the age of 18 years or is incapable of taking decisions, and in certain circumstances may include -</p> <ul style="list-style-type: none"> ● A prospective user; ● The person’s next of kin; ● A person authorised by any other law or court order to act on that person’s behalf; ● An administrator appointed in terms of this Act; and ● An executor of that deceased person’s estate and ‘user’ has a corresponding meaning”.
Psychiatric hospital	Means a health establishment that provides care, treatment and rehabilitation services only for users with mental illness.

6. ACKNOWLEDGEMENTS

6.1 The Initial Workgroup

6.2 Contributors to Draft 2 (August 2018)

- Prof JA Chipps and Mr AJ Petersen (UWC)
- Ms CLM Ratshwafo (SANC)
- Ms MJ Mabala (SANC)
- Ms CN Khoathane-Motshabe (SG Lourens Nursing College),
- Dr GL Sekgobela (SG Lourens Nursing College)
- Ms MP Matsoso (National Department of Health)

6.3 Additional feedback

- Dr P. Martin (UWC)
- Dr S Arunachallam (UWC)
- Ms M A Jarvis (UKZN)

7. BIBLIOGRAPHY

Collins, P. Y., Musisi, S., Frehywot, S., & Patel, V. (2015). The core competencies for mental, neurological, and substance use disorder care in sub-Saharan Africa. *Global Health Action, 8*(1), 26682.

Herman, A. A., Stein, D. J., Seedat, S., Heeringa, S. G., Moomal, H., & Williams, D. R. (2009). The South African Stress and Health (SASH) study: 12-month and lifetime prevalence of common mental disorders. *South African Medical Journal, 99*(5).

Murray, C. J., & Lopez, A. D. (1997). Alternative projections of mortality and disability by cause 1990-2020: Global Burden of Disease Study. *The Lancet, 349*(May 24), 1498-1504.

WHO-AIMS Report on Mental Health system in SOUTH AFRICA (2007).