Competencies for mental health care

Vikram Patel
What is competency?

• Varying definitions and concepts
• Attribute of an individual health worker, not of the treatment
• Two broad properties:
  – The *abilities* required of a person to achieve competent performance: the extent to which the health worker has the knowledge and skills to deliver an intervention to the desired standard
  – The *performance* of the health worker: the extent to which the health worker actually delivers an intervention to the desired standard
Competencies for mental health care

• “Basic” competencies: essential for performing a generic range of mental health care tasks

• “Advanced” competencies: e.g. specific to more specialized mental health care tasks
Basic competencies

Some examples

• Engage the patient
• Assess mental health
• Assess suicide risk
• Give adequate and appropriate information
• Making appropriate decisions on treatment choices
• Know when to refer
• Know how to work collaboratively
Advanced competencies
some examples

• Disorder-specific
  – Differentiate epilepsy from pseudo-seizures
  – Assess severity of drinking problem

• Treatment-specific
  – Deliver problem-solving therapy
  – Manage antipsychotic drug use

• Health context specific
  – Deliver home-based sessions
  – Report to the information system
Why is this important?

• Because competency based education moves education from focusing on what *experts* believe health workers need to know (teacher-focused) to what *health workers* need to know and be able to do in varying and complex situations (student and/or workplace focused).

• Because competency based training is more effective than knowledge based training

• Increasingly adopted in a range of ‘vocational’ training contexts including industrial and health worker training
Steps

Define the tasks

Define what is the competency needed to perform these tasks to the expected standard

Define how to acquire and maintain these competencies

Define how to evaluate them
Competency based education

Key summary points

• CBE is focused on attaining the knowledge and skills of workforce members to achieve the goal of improving patient outcomes.

• Large skill sets are broken down into competencies, which may have sequential levels of mastery, enabling different levels of task-shifting and sharing.

• Competencies reinforce one another from basic to advanced as learning progresses; the impact of increasing competencies is synergistic, and the whole is greater than the sum of the parts.

• Competencies within different contexts may require different bundles of skills, knowledge and attitudes.

• CBE often necessitates more complex assessment, involving portfolios, experiential learning assessment in field experience, demonstration in varying contexts, role play, use of standardized patients or clients, etc.