

**OKLAHOMA DEPARTMENT OF CORRECTIONS
Basic Nursing Initial/Annual MHU Competency Verification**

Name of Employee: _____ Facility: OSP MBCC JHCC

Name of Mentor: _____

Task	References/Learning Activities	Date Evaluated	Evaluator's Initials	Competency Method
A. Assessment of Patients: In collaboration with the patient, the Nurse will systematically assess the patient.				
1. Performs MHU assessment which includes mental health status while applying appropriate standards of care, practice guidelines and policies and procedures:	Review: • OP-140127 • OP-140129 • OP-140130 • OP-140140 • OP-140141 • OP-140201 • OP-140653 • OP-140701			<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A
a. Psychological assessment	RN Only			<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A
b. AIMS assessment - assists psychiatrist or Mental Health Nurse Practitioner	Review: • DOC-140201C			<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A
c. Global Assessment of Functioning (GAF)	RN Only			<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A
B. Care of Patients: In collaboration with the patient, the nurse will demonstrate the ability to apply the nursing process in a developmentally and culturally appropriate manner.				
1. Make daily rounds and include appropriate documentation.				<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A
2. Collaborates with multidisciplinary mental health team to develop multidisciplinary treatment plan, prioritize care needs, evaluate effectiveness of care, and make required alterations in plan.	RN Only			<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A
3. Attends daily team meetings. a. Responsible for report of patient assessment b. Collect and gather data on patient				<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A

OKLAHOMA DEPARTMENT OF CORRECTIONS
Basic Nursing Initial/Annual MHU Competency Verification

Task	References/Learning Activities	Date Evaluated	Evaluator's Initials	Competency Method
<i>B. Care of Patients: In collaboration with the patient, the nurse will demonstrate the ability to apply the nursing process in a developmentally and culturally appropriate manner.</i>				
4. Initiates use of therapeutic restraints or seclusion per medical provider orders. Includes documentation and assessments per policy.	Review: <ul style="list-style-type: none"> • OP-140141 • DOC 140141A • DOC 140141B • DOC 140141C • DOC 140141D • DOC 140141E • DOC 140141 Attachment A 			<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A
5. Identification of suicide/self-harm risks and initiate suicide precautions/prevention per policy.	Review: <ul style="list-style-type: none"> • OP-140129 			<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A
6. Monitor suicide watch with required documentation.	Review: <ul style="list-style-type: none"> • DOC140129 Attachment A • DOC 140129A 			<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A
7. Is aware and understands programs, housing, and other special considerations at mental health units. a. Treatment programs b. Psychiatric emergencies c. Housing areas and secure lockdown. d. Placement in segregation cells.	Review: <ul style="list-style-type: none"> • OP-140201 • OP-140652 • OP-040204 			<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A
<i>C. Medication Administration</i>				
1. Safely administers psychotropic medications according to policies and procedures, standards, and patient care guidelines. Has knowledge of and understands medication side effects and contraindications.	RN /LPN - Identify and assess for side effects of medications.			<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A
2. Follow and understand forced medication procedure per policy.	Review: <ul style="list-style-type: none"> • OP-050108 • OP-140652 • DOC 140652A • DOC 140652B • DOC 140652C • DOC 140652E • DOC 140652F 			<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> N/A

