Introduction

Welcome to the Recovery to Practice pilot program, *Acute Care Psychiatric-Mental Health Nurses: Preparing for Recovery-Oriented Practice*. You are helping to launch a very special national initiative that will begin to transform psychiatric-mental health nursing practice.

The Substance Abuse and Mental Health Services Administration (SAMHSA) has called for the transformation of mental health care in America from an illness-centered paradigm to recovery-oriented systems of care. As part of this initiative, the American Psychiatric Nurses Association (APNA) launched a 5-year project to develop and implement a training curriculum that promotes greater awareness, acceptance, and adoption of mental health recovery principles and practices among psychiatric-mental health nurses. APNA is one of five organizations that have committed to a recovery-oriented system of care.

This educational program was developed around SAMHSA’s 10 components of recovery (self-direction, individualized and person-centered, empowerment, holistic, nonlinear, strengths-based, peer support, respect, responsibility, and hope) through the collaboration of psychiatric-mental health nurses, mental health consumers and mental health recovery experts. It recognizes that the recovery components are embedded in psychiatric-mental health nursing theory, research and practice and it builds on strengths that are foundational to nursing emphasizing culture, partnership, recovery language and the impact of trauma on persons who receive mental health care.

The program will discuss recovery knowledge, skills and attitudes and it will focus on facilitating change in psychiatric-mental health nursing practice. Recovery focused psychiatric-mental health nursing practice will align with SAMHSA’s national initiatives and JCAHO’s standard on patient centered communication (Additional Resources: R³ Report).

**SAMHSA Working Definition**

Recovery from Mental Disorders and/or Substance Use Disorders: A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

Through the Recovery Support Strategic Initiative, SAMHSA has delineated four major dimensions that support a life in recovery:

- **Health**: overcoming or managing one’s disease(s) or symptoms—for example, abstaining from use of alcohol, illicit drugs, and non-prescribed medications if one has an addiction problem—and for everyone in recovery, making informed, healthy choices that support physical and emotional wellbeing.
- **Home**: a stable and safe place to live;
- **Purpose**: meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income and resources to participate in society; and
- **Community**: relationships and social networks that provide support, friendship, love, and hope.
Purposes of the Recovery to Practice Initiative

1. Award 5-year subcontracts to national mental health professional organizations

2. Develop and implement training curricula that promote greater awareness, acceptance, and adoption of mental health recovery principles and practices among mental health providers.

3. To reach and affect the greatest number of mental health service providers, especially those in the public sector

Background – Recovery to Practice Project

Since being identified as the single most important aim of mental health services by both the 1999 Surgeon General’s Report on Mental Health and the 2003 President’s New Freedom Commission, the notion of recovery has rapidly and broadly permeated the American mental health system. With roots extending back to the birth of psychiatry in the 18th century, recovery should not be considered a passing fad. As its re-introduction is intended to bring about a fundamental transformation of mental health care—in the words of the 2005 Federal Action Agenda, “a revolution” in care.

But what, then, is “recovery” in relation to mental illness? And what implications does this concept have for transforming mental health practice to become “recovery-oriented”? To begin answering these questions, and to promote the transformation of mental health care to a recovery-orientation, on October 1, 2009, the Center for Mental Health Services (CMHS), Office of the Associate Director for Consumer Affairs, within the Substance Abuse and Mental Health Services Administration (SAMHSA), contracted with Development Services Group, Inc. (DSG) to launch a 5-year Recovery to Practice (RTP) initiative. Within SAMHSA’s workforce development priority area, this initiative seeks to advance a recovery-oriented approach to mental healthcare by developing, promoting, and disseminating training curricula on how to translate the concept of mental health recovery into practice; and by providing a Recovery to Practice Recovery Resource Center for mental health professionals engaged in this work.

The Recovery to Practice initiative is the most recent of the Federal Government’s efforts to promote recovery for all Americans affected by mental illness. As noted above, recovery was acknowledged as a key concept in the 1999 U.S. Surgeon General’s Report on Mental Health and in the 2003 Final Report of the President’s New Freedom Commission on Mental Health (Achieving the Promise: Transforming Mental Health Care in America). These two documents, and the resulting SAMHSA Federal Action Agenda, agree that recovery should be the goal for all mental health services and that to achieve this vision of recovery, a fundamental transformation of mental health care is needed. As a result of this transformation, recovery will become the expectation for anyone with a mental illness, mental health services and supports will actively facilitate recovery, and mental health care will be consumer-and family-driven.
The Substance Abuse and Mental Health Services Administration has been a consistent supporter and facilitator of the growth of the mental health recovery movement. To help bring clarity to evolving concepts of recovery, SAMHSA and the Interagency Committee on Disability Research, in partnership with six other Federal agencies, convened the National Consensus Conference on Mental Health Recovery and Mental Health Systems Transformation on December 16–17, 2004. The conference participants developed the National Consensus Statement on Mental Health Recovery, which describes 10 fundamental components and principles of recovery. The National Consensus Statement can be viewed at http://mentalhealth.samhsa.gov/publications/allpubs/sma05-4129/.

Despite these efforts, there is still limited training and education for mental health providers on the translation of recovery concepts and principles into practice. As a result, many mental health professionals have not been exposed to recovery-oriented practices, and/or been trained in how to implement them. The Recovery to Practice project aims to address this need.

The Recovery to Practice initiative includes two complementary components: 1) Creating a Recovery Resource Center for mental health professionals complete with Web-based and print materials, training, and technical assistance for professionals engaged in the transformation process; and 2) creating and disseminating recovery-oriented training materials for each of the major mental health professions. Through these two major components, the RTP initiative aims to foster a better understanding of recovery, recovery-oriented practices, and the roles of the various professions in promoting recovery.
Mission, Vision, Goals and Objectives

Mission

Develop a sustainable curriculum that introduces recovery oriented nursing practice to acute care psychiatric nurses.

Vision

Develop a cadre of PMH-RNs prepared to implement recovery-oriented practice.

Goals

1. Increase the knowledge of acute care psychiatric nurses about the evolution of recovery in the mental health field.

2. Enhance the skills of acute care psychiatric mental health nurses to promote the development and implementation of recovery oriented practice.

3. Promote attitudes necessary to create a recovery promoting environment.

Objectives

By the end of the training participants will be able to:

1. Identify at least three areas of the Recovery Movement that will have an impact on nursing.

2. Identify at least three aspects of nursing care that can be modified to become recovery oriented.

3. Describe at least two ways in which the attitudes of nurses impact the implementation of recovery-oriented nursing interventions.

4. Identify the two key components of PMH Scope and Standards of Psychiatric-Mental Health Nursing Practice.

5. Identify at least three psychiatric-mental health nursing interventions to achieve recovery-oriented outcomes.

6. Identify three ways in which nurses can use their life experiences and those of persons with mental health and/or substance use conditions to promote recovery in inpatient settings.