e-KSF

Postoutline : Physiotherapist Band 6

Created On Monday, June 26, 2006
Created By Liz John
This Post Outline Is Not Approved

Assigned To :
Purpose : Work in a variety of specialist areas on rotation across the Trust .The experienced physiotherapist with existing post graduate knowledge & skills will be able to develop advanced clinical practice within a specific field/fields. They will have responsibility for own caseload of patients, deciding on nature,type & frequency of treatment with senior support. This will include patients with multi pathology & complex needs
The post holder will consolidate & bulid on graduate skills & knowledge.
They will work as part of the multi-disciplinary team & will communicate across health & social services. Following a period of intensive induction/training the psot holder will participate in on call & emergency duties where they will work as an independent practioner managing critically ill patients.
In addition they will provide support for the clinical supervision of physiotherapists,student physiotherapists & support staff.
Pay Band :
Reporting To : Senior physiotherapist

KSF Dimensions, Levels And Indicators

Dimension Type	Dimension Number	Dimension Name	Second Gateway (Full Outline)		Foundation Gateway (Subset Outline)	
			Level	Indicator	Level	Indicator
Core	C1	COMMUNICATION	3	A,B,C,D,E,F	2	A,B,C,D,E
Core	C2	PERSONAL AND PEOPLE DEVELOPMENT	3	A,B,C,D,E,F,G	3	A,B,C,D,F
Core	C3	HEALTH, SAFETY AND SECURITY	2	A,B,C,D,E,F	2	A,B,C,D,E,F
Core	C4	SERVICE IMPROVEMENT	2	A,B,C,D,E,F	1	A,B,C,D,E
Core	C5	QUALITY	2	A,B,C,D,E,F	2	A,B,C,D,E,F
Core	C6	EQUALITY AND DIVERSITY	2	A,B,C,D	2	A,B,C,D
Specific	HWB6	ASSESSMENT AND TREATMENT PLANNING	3	A,B,C,D,E,F,G,H,I,	3	A,B,C,D,E,F,G,H,I,J
Specific	HWB7	INTERVENTIONS AND TREATMENTS	3	A,B,C,D,E,F,G,H,I	3	A,B,C,D,E,F,G,H,I

C1   COMMUNICATION

Overview:

This dimension relates to effective communication in whatever form it takes place. Effective communication is a two way process. It involves identifying what others are communicating (eg through listening) as well as communicating oneself, and the development of effective relationships.

Progression through the levels in this dimension is characterised by developments in:
- the subject matter of the communication
- the situation in which the communication takes place
- the purpose of the communication
- the numbers of people that are being communicated with, their diversity and the effect of these on the communication skills required.

Second Gateway (Full Outline)	**Foundation Gateway (Subset Outline)**
Level : 3 Develop and maintain communication with people about difficult matters and/or in difficult situations	Level : 2 Communicate with a range of people on a range of matters

Second Gateway (Full Outline)

Level Indicators:

a) identifies the range of people likely to be involved in the communication, any potential communication differences and relevant contextual factors

b) communicates with people in a form and manner that:
- is consistent with their level of understanding, culture, background and preferred ways of communicating
- is appropriate to the purpose of the communication and the context in which it is taking place
- encourages the effective participation of all involved

c) recognises and reflects on barriers to effective communication and modifies communication in response

d) provides feedback to other workers on their communication at appropriate times

e) keeps accurate and complete records of activities and communications consistent with legislation, policies and procedures.

f) communicates in a manner that is consistent with relevant legislation, policies and procedures.

Foundation Gateway (Subset Outline)

Level Indicators:

a) communicates with a range of people on a range of matters in a form that is appropriate to them and the situation

b) improves the effectiveness of communication through the use of communication skills

c) constructively manages barriers to effective communication

d) keeps accurate and complete records consistent with legislation, policies and procedures

e) communicates in a manner that is consistent with relevant legislation, policies and procedures

Examples Of Application: Referrals
Patient Notes
oAssessment
oIntervention Plan
oTreatment
oRecording of clinical interventions
oDischarge summaries
oEvidence of consent
oMDT meetings, case conferences, inter-agency meetings
Appropriate environment for communication to be effective including privacy/confidentiality
Letters e.g. Thank you letters, appointment letters
Message Book for receiving and passing on of information
Use of interpreters, signers.
Use of technology e.g. amplified phones, speaker phones. IT
Recording minutes of meetings
Facilitating meetings e.g. co-ordinator, secretary
Audit reports
Induction programme
Developing local protocols and procedures
Incident Forms
Complaints Procedure Documentation
Sickness reports
Statistical Data
Action Plans for change implementation
Supervision Notes
Performance Management documentation e.g. PDR
CPD portfolio
Reflective Diary

Examples of Application: The people with whom the individual is communicating might be:
- users of services (such as patients and clients)
- carers
- groups (including families)
- the public and their representatives
- colleagues and co-workers
- managers
- workers from other agencies
- visitors
- the media.
Matters might relate to:
 - establishing and maintaining contact with different people
 - explaining how to do something
 - making arrangements
 - reporting any changes that are needed
 - sharing information and opinions
Communication might take a number of forms including:
 - oral communication
 - signing
 - written communication
 - electronic communication (eg email, databases, electronic results and reports)
 - the use of third parties (such as interpreters and translators)
 - the use of communication aids (eg charts, pictures, symbols, electronic output devices, specially adapted computers)
 - the use of total communication systems.
Communication skills might include:
 - listening skills
 - non-verbal skills and body language
 - questioning skills
Barriers to communication may be:
 - environmental (eg noise, lack of privacy)
 - personal (eg the health and wellbeing of the people involved)
 - social (eg conflict, violent and abusive situations, ability to read and write in a particular language or style).
Managing barriers might include:
 - changing the environment or context
 - changing the form of communication
 - helping others' communication
 - modifying the style and/or form of communication
 - monitoring the effectiveness of own communication
 - presenting a positive image of her/himself and the service
 - simplifying the content
 - using communication aids.
Legislation, policies and procedures may be international, national or local and may relate to:
 - complaints and issue resolution
 - confidentiality
 - data protection (including the specific provisions relating to access to health records)
 - disability
 - diversity
 - employment
 - equality and good relations
 - human rights (including those of children)
 - information and related technology
 - language.

C2   PERSONAL AND PEOPLE DEVELOPMENT

Overview:

This dimension is about developing oneself using a variety of means and contributing to the development of others during ongoing work activities. This might be through structured approaches (eg the NHS KSF development review process, appraisal, mentoring, professional/clinical supervision) and/or informal and ad hoc methods (such as enabling people to solve arising problems).

Progression through the levels in this dimension is characterised by
-    taking greater responsibility for your own personal development - this includes more reflectiveness and self-evaluation, and addressing own development needs
-    increasing involvement in supporting others and their development including a wider range of people with different backgrounds
-    having a greater understanding of own and other's learning needs and preferences, styles of learning and how to facilitate learning and development.

Second Gateway (Full Outline)	**Foundation Gateway (Subset Outline)**
Level : 3 Develop oneself and contribute to the development of others	Level : 3 Develop oneself and contribute to the development of others

Level Indicators: a) reflects on and evaluates how well s/he is applying knowledge and skills to meet current and emerging work demands and the requirements of the KSF outline for his/her post b) identifies own development needs and sets own personal development objectives in discussion with his/her reviewer c) takes responsibility for own personal development and maintains own personal development portfolio d) makes effective use of learning opportunities within and outside the workplace evaluating their effectiveness and feeding back relevant information e) enables others to develop and apply their knowledge and skills in practice f) contributes to the development of others in a manner that is consistent with legislation, policies and procedures g) contributes to developing the workplace as a learning environment.	**Level Indicators:** a) reflects on and evaluates how well s/he is applying knowledge and skills to meet current and emerging work demands and the requirements of the KSF outline for his/her post b) identifies own development needs and sets own personal development objectives in discussion with his/her reviewer c) takes responsibility for own personal development and maintains own personal development portfolio d) makes effective use of learning opportunities within and outside the workplace evaluating their effectiveness and feeding back relevant information f) contributes to the development of others in a manner that is consistent with legislation, policies and procedures

Examples Of Application: Audit

Contributes to training events e.g. conferences, seminars and "away days"

Secondments

Work Placements

Project Work Research and Development

Undertaking Reviewer role in KSF

Performance Management documentation e.g. PDR

Professional/Clinical Supervisor

Coaching

Student clinical educator

Mandatory Training records

Courses – e.g. Clinical or Organisational/ Managerial

Certificates of Attendance

In-Service Training programmes i.e. feedback from courses attended, journal clubs

Clinical Networks e.g SIG

Support Groups/Peer Support

Presentations

Conducting induction programme

Supervisory Records

Shadowing/ Mentoring

CPD portfolio

Reflective Diary

Examples of Application: Own development needs might include:
- critically appraising new and changing theoretical models, policies and the law
- developing new knowledge and skills in a new area
- developing new knowledge and skills in own work area
- developing strategies to manage emotional and physical impact of work
- keeping up-to-date with evidence-based practice
- keeping up-to-date with information technology
- maintaining work-life balance and personal wellbeing
- managing stress
- updating existing knowledge and skills in own work area

Personal development includes taking part in:
 - the development review process - reviewing what you are doing well now and areas for development
 - identifying own learning needs and interests and how to address these
 - on-job learning and development including: learning through doing, reflective practice, participating in specific areas of work, learning from others on the job, learning from developing others, professional supervision, undertaking qualifications in the workplace, networking
 - off-job learning and development on one's own including: e-learning, private study, distance learning
 - off-job learning and development with others including: induction, formal courses, scenario-based learning, role play, learning sets, undertaking qualifications in education settings
 - evaluating the effectiveness of learning and its effect on own work.

Others, who might support an individual's development or who the individual might help to develop, will include:
 - patients and clients
 - carers
 - the wider public
 - colleagues in immediate work team
 - other colleagues
 - workers from other agencies.

Enabling others to develop might include:
 - acting as a coach to others
 - acting as a mentor to others
 - acting as a role model
 - acting in the role of reviewer in the development review process
 - demonstrating to others how to do something effectively
 - discussing issues with others and suggesting solutions
 - facilitating networks of practitioners to learn from each other (eg electronic forums, bulletin boards)
 - providing feedback and encouragement to others
 - providing feedback during assessment in the workplace (eg for NVQs/SVQs, student placements)
 - providing information and advice
 - providing professional supervision
 - sharing own knowledge, skills and experience
 - supporting individuals who are focusing on specific learning to improve their work and practice
 - supporting others on work placements, secondments and projects

Legislation, policies and procedures may be international, national or local and may relate to:
 - confidentiality
 - data protection (including the specific provisions relating to access to health records)

- disability
- diversity
- employment
- equality and good relations
- human rights (including those of children)
- information and related technology
- language
- learning and development.

C3   HEALTH, SAFETY AND SECURITY

Overview:

This dimension focuses on maintaining and promoting the health, safety and security of everyone in the organisation or anyone who comes into contact with it. It includes tasks that are undertaken as a routine part of one's work such as moving and handling.

Those who come into contact with the organisation will be anyone who interacts with an employee of the organisation or who is affected by the actions of the organisation.

Progression through the levels in this dimension is characterised by
-    an increasing number and range of people and work areas for which one is responsible
-    greater proactivity and focus on good practice going from following set procedures to identifying the need for improvement
-    increasing responsibilities for risk management and contingency management
-    greater involvement in investigation and follow-up of breaches to health, safety and security.

Second Gateway (Full Outline)

Level : 2 Monitor and maintain health, safety and security of self and others

Level Indicators:

a)   identifies and assesses the potential risks involved in work activities and processes for self and others

b)   identifies how best to manage the risks

c)   undertakes work activities consistent with:
-    legislation, policies and procedures
-    the assessment and management of risk

d)   takes the appropriate action to manage an emergency summoning assistance immediately when this is necessary

e)   reports actual or potential problems that may put health, safety and security at risk and suggests how they might be addressed

f)   supports others in maintaining health, safety and security.

Foundation Gateway (Subset Outline)

Level : 2 Monitor and maintain health, safety and security of self and others

Level Indicators:

a)   identifies and assesses the potential risks involved in work activities and processes for self and others

b)   identifies how best to manage the risks

c)   undertakes work activities consistent with:
-    legislation, policies and procedures
-    the assessment and management of risk

d)   takes the appropriate action to manage an emergency summoning assistance immediately when this is necessary

e)   reports actual or potential problems that may put health, safety and security at risk and suggests how they might be addressed

f)   supports others in maintaining health, safety and security.

Examples Of Application: Role Model
Health and Safety Representative
Fire Warden
Showing awareness of and reporting potential risks
Risk Assessment i.e. clinical risk, environmental (COSHH) risk
Completion of Incident forms
Debriefing Records (action taken)
Minutes Health and Safety Meeting
Induction
Mandatory training record e.g. Infection Control, Health and Safety at Work
Supervisory Records
Moving and Handling
Violence and Aggression Training
Signed evidence of Policy and Procedure Awareness e.g local induction
Lone Working Procedures
Fire Drill/Evacuation
Waste Management
Energy Conservation
Occupational health clearance
Security of Department
IT Security (own password)
CRB check
CPD portfolio
Reflective Diary
LEVEL 3
Completion of Workplace Inspection
Offering expert advice e.g. Health and Safety, reports, minutes, emails and letters
Taking action to protect others
Reporting inadequate resources to comply with Health and Safety
Role Model
Health and Safety Representative
Showing awareness of and reporting potential risks
Risk Assessment i.e. clinical risk, environmental (COSHH) risk
Completion of Incident forms
Debriefing Records (action taken)
Minutes Health and Safety Meeting
Induction
Mandatory training record e.g. Infection Control, Health and Safety at Work
Supervisory Records
Moving and Handling
Violence and Aggression Training
Signed evidence of Policy and Procedure Awareness
Lone Working Procedures
Fire Drill/Evacuation
Waste Management
Energy Conservation
Occupational Health clearance
Security of Department
IT Security (own password)
CRB check
CPD portfolio
Reflective Diary

Examples of Application: The others for whom a worker has responsibility for their health, safety and security might be:
- users of services (including patients and clients)
- carers
- communities
- the wider public
- colleagues in immediate work team
- other colleagues
- contractors
- visitors to the organisation
- workers from other agencies.
Legislation, policies and procedures may be international, national or local and may relate to:
 - accident/incident reporting
 - building regulations and standards
 - child protection
 - clinical negligence
 - data and information protection and security
 - emergencies
 - hazardous substances
 - health and safety at work
 - infection control
 - ionising radiation
 - moving and handling
 - protection of vulnerable adults
 - risk management
 - security of premises and people
 - working time
 - workplace ergonomics (eg display screen equipment)
Risks to health, safety and security might be related to:
 - the environment (eg issues related to ventilation, lighting, heating, systems and equipment, pests, work-related stress)
 - individuals (eg personal health and wellbeing)
 - information and its use (eg sharing passwords, sharing information with other agencies)
 - physical interactions (eg abuse, aggression, violence, theft)
 - psychological interactions (eg bullying, harassment)
 - social interactions (eg discrimination, oppression, lone working).
Emergencies might be related to:
 - the environment
 - health
 - information
 - security.
Supporting others in maintaining health, safety and security might include:
 - acting as a role model
 - alerting others when there are specific risks
 - enabling individuals to learn healthier, safer and more secure ways of working
 - intervening to protect others from risk
 - moving and handling people and/or goods with others using equipment as appropriate
 - offering information and advice on how to reduce risk

C4   SERVICE IMPROVEMENT

Overview:

This dimension is about improving services in the interests of the users of those services and the public as a whole. The services might be services for the public (patients, clients and carers) or services that support the smooth running of the organisation (such as finance, estates). The services might be single or multi-agency and uni or multi-professional.

Improvements may be small scale, relating to specific aspects of a service or programme, or may be on a larger scale, affecting the whole of an organisation or service. They might arise from:
-    formal evaluations (such as audit)
-    more informal and ad hoc approaches (such as 'bright ideas')
-    applying developments from elsewhere
-    national policy and targets
-    changes in legislation at international or national level
-    working closely with users and the public
-    the need to modernise services.

This dimension also covers the development of direction, policies and strategies to guide the work of the organisation or service, including agreeing vision, values and ethos. Leadership and partnership are key aspects here as it is through inspiring and working collectively with others that strategy and direction can be taken forward into service improvements.

Leadership includes such aspects as:
-    understanding and rising to the challenges of service improvement – critical tasks that need to be done, problems and issues to be faced
-    understanding the context in which services are to be improved – local politics, national policy imperatives, the local environment and the people in it
-    understanding the characteristics of the people involved and building on their diversity.

Progression through the levels in this dimension is characterised by:
-    moving from implementing agreed changes to setting the context which guides and informs service improvements
-    an increasing role in, and understanding of, direction, policies and strategies at a macro level
-    increasing knowledge and skills in leading others, managing change and partnership working
-    an increasing ability to identify direction in the longer term over a number of years rather than in the immediate to short term

Second Gateway (Full Outline)	**Foundation Gateway (Subset Outline)**
Level : 2 Contribute to the improvement of services	Level : 1 Make changes in own practice and offer suggestions for improving services

Level Indicators: a) discusses and agrees with the work team - the implications of direction, policies and strategies on their current practice - the changes that they can make as a team - the changes s/he can make as an individual - how to take the changes forward b) constructively makes agreed changes to own work in the agreed timescale seeking support as and when necessary c) supports others in understanding the need for and making agreed changes d) evaluates own and other's work when required to do so completing relevant documentation e) makes constructive suggestions as to how services can be improved for users and the public f) constructively identifies issues with direction, policies and strategies in the interests of users and the public.	**Level Indicators:** a) discusses with line manager / work team the changes that need to be made in own practice and the reasons for them b) adapts own practice as agreed and to time seeking support if necessary c) effectively carries out tasks related to evaluating services when asked d) passes on to the appropriate person constructive views and ideas on improving services for users and the public e) alerts line manager / work team when direction, policies and strategies are adversely affecting users of services or the public

Examples Of Application: Benchmarking i.e. comparison of own service against new recommendations

Change process (flowchart, team meeting minutes, gannt charts)

Evidence Based Practice

Interpretation of local statistics

Comments on consultation documents

Contribute to operation of policies and procedures

Audits

Customer Satisfaction Surveys

Risk Assessment

Staff Questionnaires

Departmental/practice evaluations

Minutes

Personal timetable demonstrating a flexible approach to meet service needs

Network rep e.g CSP, SIG, groups external to Trust

CPD portfolio

Reflective Diary

Examples of Application: Tasks related to evaluating services might include:
- audits (eg clinical, financial, resource)
- customer satisfaction surveys
- risk assessments
- staff questionnaires.

Direction, policies and strategies might relate to any aspect of the NHS and the activities within it including:
- buildings, structures and grounds
- cleaning and catering
- development and innovation
- education, training and development
- equality and diversity
- financial services
- financial management
- health and social care services
- health and wellbeing
- health, safety and security
- human resources – selection, recruitment, retention, deployment
- information and knowledge
- public relations and marketing
- other services that effect people's health and wellbeing (eg transport, education, housing)
- procurement and commissioning
- promotion of equality and diversity
- resource use
- service effectiveness
- systems and equipment
- transport and logistics
- user involvement.

C5   QUALITY

Overview:

This dimension relates to maintaining high quality in all areas of work and practice, including the important aspect of effective team working. Quality can be supported using a range of different approaches including: codes of conduct and practice, evidence-based practice, guidelines, legislation, protocols, procedures, policies, standards and systems.

This dimension supports the governance function in organisations - clinical, corporate, financial, information, staff etc.

Progression through the levels in this dimension is characterised by:
-      increasing scope – from own activities to the work of others and then broader areas
-      greater proactivity in improving quality and addressing quality issues.

Second Gateway (Full Outline)

Level : 2 Maintain quality in own work and encourage others to do so

Level Indicators:

a)   acts consistently with legislation, policies, procedures and other quality approaches and encourages others to do so

b)   works within the limits of own competence and levels of responsibility and accountability in the work team and organisation

c)   works as an effective and responsible team member

d)   prioritises own workload and organises own work to meet these priorities and reduce risks to quality

e)   uses and maintains resources efficiently and effectively and encourages others to do so

f)   monitors the quality of work in own area and alerts others to quality issues.

Foundation Gateway (Subset Outline)

Level : 2 Maintain quality in own work and encourage others to do so

Level Indicators:

a)   acts consistently with legislation, policies, procedures and other quality approaches and encourages others to do so

b)   works within the limits of own competence and levels of responsibility and accountability in the work team and organisation

c)   works as an effective and responsible team member

d)   prioritises own workload and organises own work to meet these priorities and reduce risks to quality

e)   uses and maintains resources efficiently and effectively and encourages others to do so

f)   monitors the quality of work in own area and alerts others to quality issues.

Examples Of Application: HPC registration
Qualifications
Feedback to others – peer review ,other team members
Teamwork – minutes of meetings, collaborative case notes, presentations
Mandatory training/matrix
Incident forms/risk assessment
Complaints handling & compliments
Supervisory Records
Performance Management documentation e.g. PDR
Evidence based practice
Identify the need for Audit and lead project
Record, collate and present statistics
Clinical outcomes
Time management
CPD portfolio
Reflective Diary

Examples of Application: Legislation, policies and procedures may be international, national or local and may relate to:
- accident/incident reporting
- anti-discriminatory practices.
- building regulations and standards
- children
- clinical negligence
- corporate identity
- criminal justice
- data and information protection and security (including the specific provisions relating to access to medical records)
- emergencies
- employment
- equality and diversity
- harassment and bullying
- hazardous substances
- health, safety and security
- human rights
- infection control
- ionising radiation protection measures
- language
- mental health
- moving and handling
- protection of vulnerable adults
- public interest
- risk management
Being an effective team member would include such aspects as:
 - arriving and leaving promptly and working effectively during agreed hours
 - developing the necessary knowledge and skills needed by and in the team
 - enabling others to solve problems and address issues
 - identifying issues at work and taking action to remedy them
 - presenting a positive impression of the team and the service
 - reacting constructively to changing circumstances.
 - recognising, respecting and promoting the different roles that individuals have in the team
 - recognising, respecting and promoting the diversity of the team
 - seeking and reflecting on feedback from the team and adapting as necessary
 - supporting other team members
 - taking a shared approach to team work
 - understanding own role in the team and the wider organisation.
Resources would include:
 - environments
 - equipment and tools
 - information
 - materials.
Quality issues might relate to:
 - complaints
 - data and information gaps
 - health, safety and security
 - incidents
 - lack of knowledge or evidence on which to base the work
 - mistakes and errors
 - poor communication
 - resources
 - team working

- workload

C6   EQUALITY AND DIVERSITY

Overview:

It is the responsibility of every person to act in ways that support equality and diversity. Equality and diversity is related to the actions and responsibilities of everyone – users of services including patients, clients and carers; work colleagues; employees; people in other organisations; the public in general.

Successful organisations are ones that reflect the richness of diversity that exists in society and will include people of different: abilities; ages; bodily appearances; classes; castes; creeds; cultures; genders; geographical localities; health, relationship, mental health, social and economic statuses; places of origin; political beliefs; race; religion; sexual orientation; and those with and without responsibilities for dependents.

Where diversity and equality are not integral to an organisation, discrimination may occur.

Progression through the levels in this dimension is characterised by:
- moving from own practice to the consideration of team and organisational cultures
- an increasing understanding of the nature and complexity of equality and diversity
- being more proactive and challenging in the promotion of equality and diversity
- increasing knowledge about the legislation, policies and procedures relating to equality and diversity from awareness, knowing where to obtain information, having a working knowledge of the legislation, policies and procedures and being able to interpret them to others, to an extended knowledge of the legislation, policies and procedures and monitoring their effectiveness in organisations

Second Gateway (Full Outline)

Level : 2 Support equality and value diversity

Level Indicators:

a)   recognises the importance of people's rights and acts in accordance with legislation, policies and procedures

b)   acts in ways that:
-    acknowledge and recognise people's expressed beliefs, preferences and choices
-    respect diversity
-    value people as individuals

c)   takes account of own behaviour and its effect on others

d)   identifies and takes action when own or others' behaviour undermines equality and diversity.

Foundation Gateway (Subset Outline)

Level : 2 Support equality and value diversity

Level Indicators:

a)   recognises the importance of people's rights and acts in accordance with legislation, policies and procedures

b)   acts in ways that:
-    acknowledge and recognise people's expressed beliefs, preferences and choices
-    respect diversity
-    value people as individuals

c)   takes account of own behaviour and its effect on others

d)   identifies and takes action when own or others' behaviour undermines equality and diversity.

Examples Of Application: Models good practice.

Identifies and takes action to counter behaviour of others who may be undermining equality and diversity through Human Resource Policy, incident reporting and complaints/compliments.

Monitors Incident forms that relate behaviours that undermines equality and diversity

Undertaking KSF reviewer role

Performance management document

Mandatory Training

Customer Care Training

Signed awareness of Equal Opportunities Policy

Use of interpreters, signers and communication aids.

Use of technology e.g. amplified phones, speaker phones and appropriate IT software

User information presented in different languages and/or modalities

Obtains consent

CPD portfolio

Reflective Diary

Examples of Application: Legislation, policies and procedures may be international, national or local and may relate to:
- age
- complaints and issue resolution (including harassment and bullying)
- employment
- equality
- dependents – people who have caring responsibilities and those who do not
- diversity – age, gender, marital status, political opinion, racial group, religious belief, sexuality
- disability
- gender
- human rights (including those of children)
- language
- marital status
- mental health
- mental incapacity
- political opinion
- racial group
- religious belief
- sexual orientation

People's expressed beliefs, preferences and choices might relate to:
 - food and drink
 - how they like to be addressed and spoken to
 - personal care - living or deceased
 - privacy and dignity
 - the information they are given
 - the support they would like
 - their faith or belief.

Identifying and taking action when others' behaviour undermines equality and diversity would include on a day-to-day basis being prepared to:
 - recognise when equality and diversity is not being promoted and doing something about it
 - recognise when someone is being discriminated against and doing something about it

HWB6   ASSESSMENT AND TREATMENT PLANNING

Overview:

This dimension is about assessing physiological (eg autonomic nervous system, cardio-vascular, gastro-intestinal, musculo-skeletal, respiratory) and/or psychological functioning and any treatment planning associated with this, within the context of that person as an individual. It includes clinical history taking and examination, and a range of tests and investigations, including various forms of imaging and measurement of body structures, and tests of physiological and psychological functioning. It also includes diagnosis and treatment planning.

It involves interactions using a variety of communication methods with individuals and carers (either face to face or at a distance, eg by telephone) and may require the use of equipment and technology, including computer assisted tools.

Progression through the levels in this dimension is characterised by:
-    the move from tasks or specific activities to more complex procedures with higher levels of associated risk
-    the move from undertaking delegated tasks to planning assessment, informing diagnoses and the planning of treatment, making diagnoses planning treatment
-    increasing levels of clinical, technical and interpretive skills and knowledge
-    greater complexity in presenting cases and/or the ability to make diagnoses of undifferentiated abnormalities, diseases and disorders.

Second Gateway (Full Outline)

Foundation Gateway (Subset Outline)

Level : 3 Assess physiological and/or psychological functioning and develop, monitor and review related treatment plans

Level : 3 Assess physiological and/or psychological functioning and develop, monitor and review related treatment plans

Level Indicators:

a)   evaluates relevant information to plan the range and sequence of assessment required and determines:
-    the specific activities to be undertaken
-    the risks to be managed
-    the urgency with which assessments are needed

b)   selects appropriate assessment approaches, methods, techniques and equipment, in line with
-    individual needs and characteristics
-    evidence of effectiveness
-    the resources available

c)   respects people's dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent

d)   prepares for, carries out and monitors assessments in line with evidence based practice, and legislation, policies and procedures and/or established protocols / established theories and models

e)   monitors individuals during assessments and takes the appropriate action in relation to any significant changes or possible risks

f)   evaluates assessment findings/results and takes appropriate action when there are issues

g)   considers and interprets all of the information available using systematic processes of reasoning to reach a justifiable assessment and explains the outcomes to those concerned

Level Indicators:

a)   evaluates relevant information to plan the range and sequence of assessment required and determines:
-    the specific activities to be undertaken
-    the risks to be managed
-    the urgency with which assessments are needed

b)   selects appropriate assessment approaches, methods, techniques and equipment, in line with
-    individual needs and characteristics
-    evidence of effectiveness
-    the resources available

c)   respects people's dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent

d)   prepares for, carries out and monitors assessments in line with evidence based practice, and legislation, policies and procedures and/or established protocols / established theories and models

e)   monitors individuals during assessments and takes the appropriate action in relation to any significant changes or possible risks

f)   evaluates assessment findings/results and takes appropriate action when there are issues

g)   considers and interprets all of the information available using systematic processes of reasoning to reach a justifiable assessment and explains the outcomes to those concerned

h) determines and records diagnosis and treatment plans according to agreed protocols / pathways / models and that are:
- consistent with the outcomes of the assessment
- consistent with the individual's wishes and views
- include communications with other professions and agencies
- involve other practitioners and agencies when this is necessary to meet people's health and wellbeing needs and risks
- are consistent with the resources available
- note people's wishes and needs that it was not possible to meet

i) monitors and reviews the implementation of treatment plans and makes changes within agreed protocols / pathways / models for clinical effectiveness and to meet people's needs and views

j) identifies individuals whose needs fall outside protocols / pathways / models and makes referrals to the appropriate practitioners with the necessary degree of urgency.

Examples Of Application: Patient records**:**
Evidence of discussion regarding the purpose of assessment to service user, carers, assistants, students and other health care professionals
oIdentify assessment(s), methods/techniques required
oInterpretation of assessment
oAssessment outcomes
oFormulate agreed plan of intervention
oAssessment evaluation
oEvidence of consent
oMDT meetings, case conferences, inter-agency meetings
Evidence of acting as care coordinator or key worker.
Evidence of joint goal setting (signed care plans, signed reviews)
Evidence of complete and contemporaneous documentation (case notes, clinical documentation, IT systems e.g. PARIS, CPA, PMS, JONAH)
Evidence of referral to other agencies (case notes, CPA documentation, PARIS)
Evidence of risk assessment and actions taken to counter risk (CPA documentation case notes, departmental files, collaboration with team members, POVA and Child protection training records, manual handling & lone worker)
Evidence of highlighting unmet need
Evidence of following care pathways where they exist (documentation, care pathways, documentation of variances).
Documentation meets agreed professional standards. (audit results, correlation with list of agreed abbreviations)
Appropriate environment for assessment to take place including consideration of privacy/confidentiality
Knowledge of legislation pertaining to work area (risk assessments, professional conduct, data protection, POVA,)
Adheres to departmental policy and procedures that relates to assessment activities (departmental files, induction checklist, home visit book, lone worker practices, mandatory training records)
Recording and collating statistical data
CPD portfolio
Reflective Diary

Examples of Application: Risks might arise from:
- abuse
- incidents/accidents
- neglect
- rapid deterioration of condition or situation
- self-harm
- the complexity and range of contributory factors
- the environment.
Assessment approaches, methods, techniques may include
 - taking case history
 - examinations
 - obtaining images
 - tests and measurements
 and may be carried out
 - with others
 - by self
 - by others on request
Legislation, policies and procedures may be international, national or local and may relate to:
 - carers
 - children
 - consent
 - criminal justice
 - disability
 - equality and diversity
 - health and safety
 - information
 - ionising radiation
 - medicines
 - mental health
 - mental incapacity
 - technology and equipment
 - the practice and regulation of particular professions
 - vulnerable adults.

HWB7 INTERVENTIONS AND TREATMENTS

Overview:

This dimension is about intervening and treating individuals' physiological and/or psychological needs in the context of the whole person. The interventions and treatments that are undertaken are within an overall treatment plan - the development and monitoring of the overall treatment plan is covered in dimension HWB6. Interventions and treatments may take a variety of forms including ongoing monitoring of the individual's condition to identify a need for possible intervention at a later date.

Progression through the levels in this dimension is characterised by:
- the move from routine tasks or specific activities to more complex procedures with higher levels of associated risk
- increasing levels of clinical and technical skills and knowledge
- greater complexity in /seriousness of the conditions being treated.

Second Gateway (Full Outline)

Level : 3 Plan, deliver and evaluate interventions and/or treatments

Level Indicators:

a) respects individuals' dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent

b) identifies with the individuals concerned:
- goals for the specific activities to be undertaken within the context of the overall treatment plan and the individual's physiological and/or psychological functioning
- the nature of the different aspects of the intervention / treatment
- the involvement of other people and/or agencies
- relevant evidence-based practice and/or clinical guidelines
- any specific precautions or contraindications to the proposed interventions / treatments and takes the appropriate action

c) prepares appropriately for the intervention / treatment to be undertaken

d) undertakes the intervention / treatment in a manner that is consistent with:
- evidence-based practice and/or clinical guidelines / established theories and models
- multidisciplinary team working
- his/her own knowledge, skills and experience
- legislation, policies and procedures and/or established protocols

e) monitors individuals' reactions to interventions/treatment and takes the appropriate action to address any issues or risks

f) reviews the effectiveness of the interventions/treatments as they proceed and makes any necessary modifications

g) provides feedback to the person responsible for the overall treatment plan on its effectiveness and the health and wellbeing and needs of people

h) makes accurate records of the interventions/treatment undertaken and outcomes

i) responds to, records and reports any adverse events or incidents relating to the intervention/treatment with an appropriate degree of urgency.

Foundation Gateway (Subset Outline)

Level : 3 Plan, deliver and evaluate interventions and/or treatments

Level Indicators:

a) respects individuals' dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent

b) identifies with the individuals concerned:
- goals for the specific activities to be undertaken within the context of the overall treatment plan and the individual's physiological and/or psychological functioning
- the nature of the different aspects of the intervention / treatment
- the involvement of other people and/or agencies
- relevant evidence-based practice and/or clinical guidelines
- any specific precautions or contraindications to the proposed interventions / treatments and takes the appropriate action

c) prepares appropriately for the intervention / treatment to be undertaken

d) undertakes the intervention / treatment in a manner that is consistent with:
- evidence-based practice and/or clinical guidelines / established theories and models
- multidisciplinary team working
- his/her own knowledge, skills and experience
- legislation, policies and procedures and/or established protocols

e) monitors individuals' reactions to interventions/treatment and takes the appropriate action to address any issues or risks

f) reviews the effectiveness of the interventions/treatments as they proceed and makes any necessary modifications

g) provides feedback to the person responsible for the overall treatment plan on its effectiveness and the health and wellbeing and needs of people

h) makes accurate records of the interventions/treatment undertaken and outcomes

i) responds to, records and reports any adverse events or incidents relating to the intervention/treatment with an appropriate degree of urgency.

Examples Of Application: Record of the purpose of treatment/intervention to service user, carers, assistants, students and other health care professionals
Patient Notes
oIdentifies precautions or contraindications from assessment results
oFrom assessment outcomes formulates treatment/intervention plan
oEvidence of consent and shared decision making
oClinical reasoning & analysis
oIdentify methods/techniques required
oTreatment/intervention evaluation
oRecord of information provided to the patient
oMDT meetings, case conferences, inter-agency meetings
Preparing the appropriate environment for treatment/intervention to take place including consideration of privacy/confidentiality (checklists, team meetings, timetables care plans, personal schedules)
Records treatment/intervention activities (case notes, clinical documentation, IT systems e.g. PARIS, UA/CPA, PMS, JONAH)
Evidence of acting as care coordinator or key worker.
Evidence of joint goal setting (signed care plans, signed reviews)
Evidence of complete and contemporaneous documentation (case notes, clinical documentation, IT systems e.g. PARIS, CPA, PMS, JONAH)
Evidence of referral to other agencies (case notes, CPA documentation, PARIS)
Evidence of risk assessment and actions taken to counter risk (CPA documentation case notes, departmental files, collaboration with team members, POVA and Child protection training records)
Evidence of prioritisation of clinical need
Evidence of positive risk taking (case notes, CPA documentation, MDT, POVA and Child Protection training records)
Verbal or written record of specific information including risks associated with changes in clinical presentation of service user (risk assessment, case notes, clinical documentation, telephone message book, referral book, attendance registers, and reflections)
Evidence of enabling people to manage their conditions, advice, support (case notes, CPA documentation, PARIS)
Evidence of highlighting unmet need (CPA documentation)
Evidence of following care pathways where they exist (documentation, care pathways, documentation of variances).
Documentation meets agreed professional standards. (audit results, correlation with list of agreed abbreviations)
Adheres to departmental policy and procedures that relates to delegated treatment/intervention activities (departmental files, induction checklist, home visit book, lone worker practices, mandatory training records)
Evidence based practice for optimum results. [research, NICE guidelines, NSF recommendations, theories and models]
Recording statistical data
CPD portfolio
Reflective Diary

Examples of Application: Interventions and treatments may relate to physiological and/or psychological functioning and might include:
- advice, explanation and reassurance
- application of energy (eg radiation)
- application of materials and substances
- exercise
- extraction/removal
- manual treatments
- medicines
- modification
- ongoing monitoring
- palliation
- psychotherapeutic approaches
- rehabilitative approaches
- replacement
- restoration
- supporting and supplementing body functioning
- surgery
- therapeutics (not included above).
Legislation, policies and procedures may be international, national or local and may relate to:
 - carers
 - children
 - consent
 - counselling and therapeutic regulation
 - criminal justice
 - disability
 - equality and diversity
 - health and safety
 - information
 - ionising radiation
 - medicines
 - mental health
 - mental incapacity
 - the practice and regulation of particular professions
 - vulnerable adults.
Risks might be from:
 - abuse
 - incidents/accidents
 - neglect
 - rapid deterioration of condition or situation
 - self-harm
 - the complexity and range of contributory factors
 - the environment.

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