

Healthcare Support Worker Education and Career Development Programme

Phase 1 Report

(Levels 3 and 4 Nursing Healthcare Support Workers) 28.01.2022

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Healthcare Support Worker Education and Career Development Programme Phase 1 Report

1. Introduction

This report summarises the outcomes of phase one of the health and social care support worker development programme that took place over eight weeks from 18th October and 10th December 2021. The natural overlap between the phases of the programme has enabled some phase one activities to have potential to be applied in phases two and three. Recommendations as to how these can be taken forward are included in this report.

2. Background

NHS Education for Scotland (NES) was commissioned by the Scottish Government to undertake a review of career pathways for Health Care Support workers (HCSW) working at Levels 2-4 of the NHS Career Framework for Health in health and social care within NHS Scotland. Cognisant of the variation in role, education provision and development for HCSW in nursing, midwifery and the health professions (NMaHP), including health care science, across NHS Scotland, the work aimed to propose a national education and development framework outlining the knowledge, skills and behaviours required to deliver safe, effective, person centred care. This would not only maximise the impact of practice within each level but also maximise the support for registered health care professionals enabling them to practice to their full potential within their level of practice. The need to develop and enhance these roles at pace responds to current pressures in the system and the emergence of new service models. The commission set timelines for the programme of work in three phases.

- Phase 1 Band 4 nursing HCSWs* (Completion required by 10.12.2021)
- Phase 2 Band 2 nursing plus all nursing, midwifery and allied health professions (NMAHPs) Band 2-4
- Phase 3 Healthcare science Bands 2-4

*The Level 4 HCSW role within nursing teams in acute care was given as the priority in phase one. In addition, the Chief Nursing Officer's Directorate requested NES to prioritise level 3 and 4 roles within community nursing within the phase one timeline.

To accompany the proposed education and development framework, the commission also included a review of the extant policy guidance with subsequent recommendations for amendments in line with the outcomes of the commission.

3. Phase 1 methods

A Steering group, Education subgroup and Level 3 and 4 nursing short life working group were set up (Figure 1). All groups met within the first week of the programme and agreed the terms of reference and the work plan. Also, within the first week of the programme, an on-line survey was co-produced with the Education subgroup members to scope current roles, competency frameworks and educational provision across NHS Boards. The survey was circulated via the Scottish Executive Nurse Directors and the Allied Health Professional Directors *Scotland* Groups with a two week return deadline.

Figure 1. Governance and working group structure (membership shown in appendices 2 and 3)



4. Phase 1 results

The scoping survey aimed to collect the information required for Phases one and two, involving nursing, midwifery and allied health professions (NMAHPs). This was more efficient as it avoided requesting information again later, but it would also gain an overview of the relationship between the knowledge, skills and behaviours for NMAHP HCSW roles at all levels of practice in order to determine those for nursing at Level 4 acute and Levels 3 and 4 community.

4.1 Survey response

There were 26 responses to the survey which included all territorial Boards (with multiple responses from some Boards), NHS Golden Jubilee, Scottish National Blood Transfusion Service (SNBTS), British Diabetic Association, Chartered Society of Physiotherapists (CSP) and the Scottish Ambulance Service. The survey generated a large amount of information that required rapid analysis, so an independent research company were recruited for this task. The responses are summarised below, but the more detailed report is available on request.

• In 7 Boards, definitions of NMAHP HCSW roles at levels 2-4 have been agreed for use across the organisation (6 territorial and 1 national Board).

- 12 Boards have skill sets/competencies that are used to define and assess HCSWs (2 for nursing only, 2 for AHPs only and remainder for NMAHPS).
- 7 Boards had no accredited education locally for HCSWs. Examples of accredited programmes for level 4 include professional development Award L8, HND Wellbeing and Enablement, Ambulance Care Assistant Programme.
- Respondents identified Level 4 NMAHP HCSW roles across a diverse range of their services for example,
 - Education Band 4 Associate Practice Educators within Practice Education
 Mental Health -Community, Older Adults, Assessment unit
 AHP SLT, OT, Physio, community, Radiography, Podiatry, Dietetics
 Children's Health Services Nursery Nurses
 - o **GP practices**, District Nursing Teams, Practice nursing, out of hours
 - Maternity MCA, hospital and community Older People Acute medicine Obnor services Acute services Renal, Ophthalmology, Operating department, Children's ward Cancer services Chemotherapy/Oncology, Cancer Support Services Dental Child Smile Learning Disability
 - Rehabilitation & enablement REACH all teams, Wellbeing & enablement
 Practitioners O Patient

transportation

- Thirteen Boards identified clinical areas where they planned to develop the level 4 HCSW role, e.g. unscheduled care, inpatient mental health, district nursing, community nursing, physiotherapy, general medicine, general surgery, urgent care centre, learning disability, national endoscopy training programme and one Board was currently recruiting to 2nd cohort of Wellbeing and Enablement Practitioners.
- Respondents identified barriers to the development of the Level 4 role in their Boards. These included lack of available learning and development, protected time, practice development support; lack of understanding of the role and confidence of registrants to delegate; lack of SVQ assessors. It was also suggested that a culture shift was required to implement new roles without regulatory assurance and professional governance.
- Some Boards were addressing barriers by employing practice development nurses and associate practice educators and adopting Board wide approaches to achieve consistency.

Survey respondents were requested to submit relevant documentation that supported their responses. 184 individual items were received. The items were reviewed, categorised and organised as shown at appendices 5 and 6 and can be accessed for reference on request. Overall, there was a wide variety of items but gaps in clinical areas such as accident and emergency, surgical and acute and general medicine including stroke and respiratory and no well-developed career or education frameworks. Submissions from ten territorial Boards, NHS Golden Jubilee, CSP and SNBTS fell broadly into the following categories.

- Competencies (61)
- Job descriptions (40)
- Courses programmes (26)
- Learning resources (25)
- Guides SOPS (11)
- Roles pathways (11)
- others (10)

NHS Boards recognised a need to develop their HCSW workforce to meet current and future service, financial and workforce challenges. However, the submissions reflected the variation of nursing HSCSW roles and education for practice at Level 3 and 4 in acute and community settings.

There was universal support for a 'Once for Scotland' approach as it was felt that a standardised and consistent approach to education, role development and governance would promote the adoption of professional values, ethical standards and engagement in continuous learning in all HCSW roles. Also, that it could make the role more attractive to applicants considering a career in health care, aid transition for HCSWs moving posts within NHS Boards and add value to the role with recognised accreditation supporting the progression to registered practitioner.

Examples where Boards have developed educational programmes that have the potential to be scaled up for use across Scotland are shown in Appendix 1. NHS Lothian developed a Professional Development Award at SCQF Level 8 to provide the academic and practical learning support required for progression to the Assistant Practitioner role in acute and community care and have provided a case study detailing this in Appendix 1a.

There are examples where NHS Boards have appointed HCSWs to trainee Assistant Practitioner posts and placed them on Agenda for Change Annexe 21 until the required qualifications at SCQF Level 8 have been achieved. An example of this is shown in a recent advertisement on the NHS Scotland Jobs website at. https://apply.jobs.scot.nhs.uk/displayjob.aspx?jobid=56129&source=JobtrainRss

4.2 Proposed Development Framework

Recently published career, education and development frameworks were reviewed to assess their potential to be used as a foundation from which to develop an education and development framework for NMaHP HCSW roles. The NES Perioperative Career Development Framework1 published in March 2020, maps role development for each level from level 2 across clinical practice, facilitation of learning, leadership and service improvement. It was agreed by the Short Life Working Group and subsequently the Steering group that this approach and structure could be used to develop the framework for Levels 3 and 4 HCSW nursing roles. A small subgroup volunteered to draft this and were able to build on the generic elements of the perioperative framework, by using the HCSW levels in Transforming Nursing Roles Paper 3 (CNOD 2018)2 The district nursing role in integrated community nursing teams and relevant documents submitted during the scoping exercise. A separate education framework3 was developed for the perioperative workforce but indicative education preparation for each level of practice has been incorporated into the proposed HCSW framework.

The group applied the following principles in the development of the draft framework which is shown at Appendix 6.

- The levels of practice described in the NHS Career Framework for Health are used to reflect role development and progression and not the Agenda for Change pay bands
- A generic framework would encompass all clinical areas NMAHP professions
- The generic framework would be applied within a clinical and professional context with examples only to assist in the users understanding
- The language throughout the framework supports a person-centred ethos
- Consistency of terminology e.g., the term registered practitioner denotes registered NMAHP practitioners.
- Technical skills for specialist areas are not addressed in the clinical practice pillar. Context specific knowledge, skills and behaviours would be developed to

¹ NHS Education for Scotland (2020) Perioperative NMaHP Career Framework https://learn.nes.nhs.scot/27778/nursing-midwifery-and-health-professions-nmahp-perioperative-nursing-midwifery-and-health-professions-careerdevelopment-framework

The Scottish Government (2018) Transforming Nursing, Midwifery and Health Professions' (NMaHP) Roles: *The district nursing role in integrated community nursing teams* Paper 3. https://www.gov.scot/publications/transforming-nursing-midwifery-health-professionals-roles-districtnursing-role-integrated/

³ NHS Education for Scotland (2020) Perioperative NMaHP Education Development Framework https://learn.nes.nhs.scot/27781/nursing-midwifery-and-health-professions-nmahp-perioperative-nmahp-education-development-framework

cover specialist knowledge and skill development. This may need further work and has the potential for national specialist groups to develop to reduce duplication and create national consistency.

4.3 Extant policy guidance review

A review of the extant Scottish Government policy guidance for HCSWs has been undertaken in the light of Phase one activity and will be taken forward to ensure it aligns with the outcomes of the next phases. The recommendations will be included in the final commission report.

The Code of Conduct for Healthcare Support Workers and Healthcare Support Worker Induction Standards and Codes were published in 2009 and circulated with guidance in a Chief Executives Letter (CEL 23)4 in June 2010. Review of these documents has commenced in line with the phase one work and will continue in the next phases. The NES Guide to Health Care Support Worker Education and Role Development (NES 2010)5 is under review and will be updated and there are plans to review and revise the NES Delegation resource6 to include a decision support framework.

Code of Conduct for Healthcare Support Workers

https://www.webarchive.org.uk/wayback/archive/3000/https://www.gov.scot/Resource/Doc/288853/00 88360 pdf

Healthcare Support Worker Induction Standards and Codes

https://www.webarchive.org.uk/wayback/archive/3000/https://www.gov.scot/Resource/Doc/288863/00 88362.pdf

5 NHS Education for Scotland (2010) A Guide to Health Care Support Worker Education and Role Development

https://test1.nes.digital/media/261013/revised_guide_to_healthcare_support_worker_education_mar_ 2010.pdf

6 NHS Education for Scotland (2018) Making delegation safe and effective: a learning resource for nurses, midwives, allied health professionals and health care support workers https://learn.nes.nhs.scot/3652/nmahp-repository/making-delegation-safe-and-effective-a-learningresource-for-nurses-midwives-allied-health-professionals-and-health-care-support-workers

⁴ CEL 23: Healthcare support workers – mandatory induction standards and code of conduct for healthcare support workers and mandatory code of practice for employers of healthcare support workers

5. Recommendations from Phase 1

- The proposed Career Development and Education Framework is adopted for Level 4 HCSW within nursing teams in acute care and Level 3 and 4 roles within community nursing teams. Where context specific knowledge and skills are required, national special interest groups should develop these additions.
- 2. NHS Boards are encouraged to share resources already in place to develop education programmes at pace for level 4 nursing HCSW and level 3 and 4 nursing HCSW in community. Examples are given in Appendix 1 and contacts are available from NES at hcsw@nes.scot.nhs.uk
- 3. Steering group and subgroup membership is reviewed and revised to ensure midwifery, AHP and healthcare scientist representation is in place for the next phases of the commission.
- 4. The proposed framework forms the basis for further development to a comprehensive framework for nursing, midwifery, allied health profession and healthcare scientist HCSWs and enables profession specific and specialist knowledge, skills and behaviours to be added.

6. Recommendations for consideration in the next phases

- 1. The Career Development and Education Framework is designed in a digital format for hosting on the NES TURAS platform.
- Further explore the current provision of accredited qualifications and the potential to develop a Once for Scotland approach to the education and development of NMAHP HCSW roles.
- 3. An implementation plan is developed that includes identified support for managers and supervisors.
- 4. Service and learning needs analysis will be required to be undertaken within each Board to determine service and education requirements.
- 5. Work with further and higher education institutions continues to develop articulation routes for all HCSWs to articulate to degree-level courses with advanced standing.
- 6. A strategic lead for HCSW should be in place in each Board.

- 7. Associate Practice Educators should be appointed in all Boards to support all elements of the pathway.
- 8. Funding should be made available to support identified qualifications on the development pathway.
- 9. A national approach would need to be supported by equity of access to education and development including Recognition of Prior Learning (RPL) in all parts of the country.
- 10. Robust and nationally consistent approach to preparation for roles at all levels.
- 11. Amendments to extant policy and guidance documents to reflect the commission outcomes.

7. Future Policy Considerations

- 1. The potential to regulate HCSWs. This would include setting national standards for education and practice, accreditation of education programmes, maintenance of a register and fitness to practise.
- 2. Standardising HCSW titles across NHS Scotland, e.g.,
 - Healthcare support worker (Level 2)
 - Senior healthcare support worker (Level 3)
 - Assistant practitioner (Level 4)

Appendix 1 NHS Board examples of Level 4 Development

Board	Development	Details
NHS	Professional Development Award (PDA) Acute and Community Care*	Time to complete: 36 weeks
Lothian	The award consists of two core units: • Leadership, Team Working and Accountability in Care (2 credits) • Evidence Based practice and Decision Making. The optional units undertaken by acute staff: • The Acutely III Adult Unit (2 credits) • Community staff undertake • Developing Effective practice in Community care (1 credit) • The Policy Legislation and Standards in Community Care (1 credit) All candidates undertake: • Pharmacology in Care (1 credit) Unit • Promoting Nutrition and Hydration (1 credit)	Prerequisite: previous study at SCQF Level 7 for example SVQ or PDA Study time: candidates attending one day a week of 270 hours taught sessions between Edinburgh College and NHS Lothian. An additional 10 days (75 hours) study leave was allocated to support students to complete academic assignments. Information sessions were delivered to the service areas prior to recruitment and subsequent application to the B4 programme. * NHS Lothian Case Study: Assistant Practitioner /Band 4 Development is shown at Appendix 1a
NHS Borders	Professional Development Award (PDA) Acute and Community Care	
	Run in collaboration with NHS Lothian (see details under NHS Lothian)	

NHS Grampian

Diploma in Higher Education (DipHE) Wellbeing & Enablement

https://www4.rgu.ac.uk/coursedb/disp_cours e info.cfm

Stage 1

3 modules and 2 placements.

Modules include:

- concepts of health and wellbeing
- personal and professional development
- health through the lifespan.

Placement 1 is 4 weeks and placement 2 is 8 weeks in length.

Stage 2

There are 4 modules and 1 placement.

Modules include:

- healthcare and community support
- principles of health and wellbeing promotion
- promoting health and wellbeing in practice
- quality improvement in practice.

The placement is for 8 weeks.

The wellbeing and enablement role was developed in partnership with the Robert

Gordon University and will provide NHS Grampian with a HCSW workforce, who are capable of working across traditional boundaries and with a broader skill set that incorporates skills in health improvement, enablement, prevention, and quality improvement. The new roles were introduced to address the need to provide new models of care, that support NHS Grampian to deliver safe and sustainable services which ensure the best possible patient experience and health outcomes. In addition, the introduction of these band 4 support worker roles will support teams to continue to deliver high quality care in the face of sustained vacancies for both unregistered and registered staff.

Robert Gordon University have developed and validated a twoyear Diploma of Higher Education (DipHE) course in Wellbeing and Enablement. The course will provide HCSWs with the skills and knowledge of preventative health, public health, wellbeing, enablement and quality service delivery alongside developing their competencies, personal and interpersonal skills, that will be crucial for the delivery of sustainable and effective services and creating a more flexible, well qualified workforce.

The course is a blend of on campus study days, online learning and clinical practice placement time. Each year students:

Board	Development	Details
NHS Golden Jubilee	Ophthalmology Outpatient Department HCSW Band 4 Competency Pack	 attend 12 on-campus study days study a set number of modules through online learning complete periods of practice placement – 12 weeks in stage 1, 8 weeks in stage 2 undertake and submit assessments related to the modules of study. As well as study time to attend learning from the University, candidates will be entitled to one day study (7.5 Hours) per month, to be negotiated with their line manager. Personal study time required to undertake the course is estimated to be 8-12 hours per week. First 4 weeks supernumerary, allocated a named preceptor during this time, working with the mentor a minimum of 75% The education team and SCN meet with the support worker and their mentor at the end of week 3 to discuss progress and assess education needs. They also assess competency achieved or competencies to be achieved. After the supernumerary period as per NHS Golden Jubilee hospital preceptor policy the support worker is rostered to work with their mentor: Month 2 & 3 - 50% of shifts The support worker is supported to attend appropriate study days to assist their learning.

Board	Development	Details
NHS Tayside	Wellbeing & Enablement Practitioner Core Competencies Training Pack (Support Workers Band 4)	No details available
	Booklet consists the following sections: Underpinning knowledge and skills Communication Vision Cognition Tone/ Upper Limb Emotional Impact Moving and Handling Goal Setting Personal Activities of Daily Living (PADLS) Kitchen Activities Transfers/Functional Mobility Minor adaptations Falls Prevention Mobility & Gait Exercises Normal Movement Medical Conditions Baseline Assessment Professional Skills Communication/Documentation Continence Care Wound Care Pressure Ulcer Care & Prevention	
NHS Greater Glasgow & Clyde	 Competency frameworks: Oncology & Haematology Core Care Competencies Orthopaedic Inpatient Core Care Competencies Orthopaedic Outpatient Core Care Competencies Spinal Core Care Competencies Inpatient Core Care Competencies Vital Signs Core Care Competencies 	No detail of Level of practice for these competency frameworks

Board	Development	Details
NHS Highland	PDA Health & Social Care: Promoting Enhanced Professional Practice https://www.sqa.org.uk/sqa/74537.html	The award gives those aspiring (or already in) Assistant Practitioner and paraprofessional roles across health and social care
	This group award is made up of 4 SQA units. It comprises 32 SCQF credit points of which 8 are at Level 7 and 24 are at Level 8 Units:	areas a robust and measurable skill training to provide safe effective service delivery and to enable workers to cope with developing demands and inherent risk of their role.
	 Principles of Professional Practice Team Working in Care Settings Leadership and Decision Making Quality Improvement: Audit in a Health or Social Care Setting 	Prerequisite: Previous SCQF award such as a relevant HNC and learners should be working at or working towards the role of an advanced support worker within health or social care
		This award is delivered as a distance learning course (through Glasgow Clyde College), units are delivered over one year.

Appendix 1a

By permission of NHS Lothian

NHS Lothian Case Study: Assistant Practitioner /Band 4 Development

Introduction

Due to the changes in workforce, demographics, and the changing requirements of care there is a need to ensure HCSW training is robust, fit for purpose and enables career progression.

In 2017 a clinical healthcare support worker education and training strategy was created to promote the development of a career progression for support workers and in turn to support the promotion of a competent flexible and adaptive workforce. This provides a robust structure outlining the level of education and training required for band 2,3,4 HCSW roles within the organisation.

Method

- As part of the wider workforce planning to introduce the Assistant Practitioner/Band
 4 role a steering group was formed to explore the role and its implementation initially within community settings.
- Subgroups were also formed as short life working groups to look at organisational and governance requirements in conjunction with partnership representation focusing on job descriptions & personal specifications for the posts.
- Following review by workforce organisational change a governance process was created for recruiting staff into a Band 4 post. Services considering the band 4 roles need to undertake a service needs analysis (SNA) to fully plan for this role within their workforce, in conjunction with communication with the lead for advancing roles.
- A service job description is created and agreed by Joint Evaluation Support Group (JESG) for the individual to be recruited into an annexe 21 post.
- The application process for the PDA L8 programme is then completed and facilitated by the programme coordinator once the governance process has been completed.

- Another group reviewed current skills/competencies undertaken within the existing band 3 and band 5 roles which led to the identification of a list of competencies being suitable for the B4 assistant practitioner role. This included a medicine group exploring priorities for medication administration and training based on the NHSL framework for HCSWS to support people with medication.
- A masterclass with NES was also undertaken with service utilising the HCSW learning framework and the 4 pillars of practice to identify elements within the scope of the band 4 role.
- In conjunction with this work in consultation with the Scottish Qualifications
 Authority (SQA), the PDA" Acute and Community Care" was developed. Existing
 SCQF level 8 units were updated, and new units were written to tailor the PDA for
 the acute and community settings.

NHS Lothian development opportunities

NHS Lothian has had a successful Professional Development Programme for HCSW education at SCQF level 7 "Developing Professional Practice in Health and Social Care" in collaboration with Edinburgh College since 2012. This PDA is delivered over 20 weeks on a day release basis and is designed to provide HCSWs working at Band 2 and Band 3 with the underpinning theoretical knowledge to support their practice and provide them with a recognised accredited qualification.

Due to the success of the level 7 course, it was felt that a PDA programme at SCQF level 8 could be developed to provide the academic and practical learning support required for progression to the Band 4 /Assistant Practitioner role. In consultation with the Scottish Qualifications Authority the PDA" Acute and Community Care" was developed.

PDA Acute and Community Care

- The award consists of two core units:
 Leadership, Team Working and Accountability in Care (2 credits) Evidence
 Based practice and Decision Making.
- The optional units undertaken by acute staff is: The Acutely III Adult Unit (2 credits)
- Community staff undertake

The Developing Effective practice in Community care (1 credit) The Policy Legislation and Standards in Community Care (1 credit)

All candidates undertake:

The Pharmacology in Care (1 credit) Unit

The Promoting Nutrition and Hydration (1 credit)

The course was developed to run over 36 weeks with candidates attending one day a week of 270 hours taught sessions between Edinburgh College and NHS Lothian. An additional 10 days (75 hours) study leave was allocated to support students to complete academic assignments. Information sessions were delivered to the service areas prior to recruitment and subsequent application to the B4 programme.

Results

- The first cohort ran from January 2019 and all 11 candidates successfully completed in February 2020.
- There has subsequently been one more group who had delayed completion due to the pandemic in June 2021.
- As of September 2021, there will be two cohorts running a year, as interest
 has increased with mental health recruiting into B4 posts.
- Due to the interest from mental health a new unit Approaches to Mental Health (2 credits) was introduced as an optional unit for the PDA L8 and will be run for the first time in September 2021.

Opportunities/Challenges

It is essential for the success of the B4 role that from the service needs analysis there is a clearly defined role and responsibilities. The specific competencies for the band 4 role and the number of competencies undertaken may vary depending on the priorities in each service and the requirements of the patients and the challenge is to ensure these are identified and governance is established prior to completion of band 4 programme.

Opportunities for HCSWs career progression to B4 from B3 has increased and with that the maximisation of the B4 role to meet the needs of the patient alongside the registered practitioner.

Evaluation

Having gathered feedback from HCSW's who have completed the course and are now working in Assistant Practitioner / Band 4 roles, as well as the staff they work alongside, we can see clearly the impact having the qualification has had on them and their job satisfaction, as well as the beneficial impact this new role has had on their team and the area they work.

A District Nurse was asked of their experience of working alongside a Band 4 practitioner:

"We have two band 4 practitioners. I have a lot of experience working with one of them in particular. My initial thinking when I heard we were being staffed extra with a band 4 was 'what else can s/he offer'. It did not take long before I realised that actually he was of great value to the team.

The B4 was able to take on smaller dressings that the DN had seen previous and follow care plans effectively. He is also able to assist with palliative care and assess skin integrity, follow up diabetics i.e. taking BGL / supervising of self-administration of insulin. The B4 would make decisions regarding patient's care and inform the DN of the decision made or when at the patient's house would call the nurse in charge that day to ensure making the correct choice before going ahead instead of waiting until the end of the day before consulting someone. The B4 is able to anticipate what was needed before even I knew what I was looking for i.e. when assisting with palliative care or managing compression bandaging".

(NHS Lothian)

Appendix 2

Healthcare Support Worker Commission Steering Group Membership

Name	Organisation	Representing Group Scottish Executive Nurse Directors
Anne-Marie Cavanagh (Chair)	NHS Golden Jubilee NHS Education for Scotland (NES)	(SEND)
Karen Wilson (Deputy Chair)		
` · ·	NES (NMAHP Post-registration	
Jane Harris	Education)	
Linda Tripney	NES (HCSW)	
David Wylie	NES (Allied Health Professions)	
Tom McEwan	NES (Women, Children, Families and Young People)	
	NES (pre-registration nursing and	
Irene McDade	midwifery)	
	NES (NMAHP Commissioning	
Sheila Findlay	Unit)	
Andy Dune	NES (Healthcare Science)	
Claire Cameron	NES (Healthcare Science)	
Kevin Kelman	NHS Scotland Academy	
	Scottish Government Chief Nursing	
Caluma I lam da raam	Officer's Directorate (CNOD)	
Calum Henderson Jessica McPherson	Scottish Government CNOD	
Anne Armstrong	Scottish Government CNOD	
Mhairi Hastings	Scottish Government CNOD	
Donna O'Boyle	Scottish Government CNOD	
Nigel Robinson	Scottish Government CNOD	
Jo Vaughn	Scottish Government CNOD	
Eileen McKenna	Royal College of Nursing	
Fiona Gibb	Royal College of Midwives	
Wilma Brown	UNISON Scotland	
Ali Upton	Scottish Social Services Council	
Jane Douglas	Scottish Care	
Anne-Marie Sturrock	College Development Scotland	
Authoritiano Starrosit	College Bevolopinioni Cochana	Allied Health
		Professional Directors Scotland Group
Lynn Mann	NHS Dumfries & Galloway	(ADSG)
Amanda Wong	NHS Fife	ADSG
Alice Wilson	NHS Dumfries & Galloway	ADSG
Paul Williams	NHS Borders	ADSG
10	NEC LICCUM Commission Final Re	

Caroline Craig		SEND
Callum Thomson	NHS National Services Scotland	SEND
Debbie McCarthy	NHS 24	SEND
Tracey Hunter	NHS Fife	SEND
David Lamont	NHS Greater Glasgow and Clyde	SEND
Sylvia Campbell	NHS Orkney	SEND
Ailsa Connelly	NHS Lanarkshire	SEND
Jen Pennycook	NHS Ayrshire & Arran	SEND
Elaine Dickson	NHS Borders	SEND
Fiona Mackenzie	NHS Western Isles	SEND
Louise McKay	NHS Forth Valley	SEND
		Education Sub-group
Margot Russell	NHS Lanarkshire	representative
		Education Sub-group

Sarah Whyte

Pam Napier

NHS Grampian

NHS Tayside

representative

Education Sub-group

representative

Appendix 3

Healthcare Support Worker Commission Education subgroup membership

Name	Board	* denotes HCSWs ** denotes Short life
Jen Pennycook	NHS Ayrshire & Arran	working group
Joanne Anderson	NHS Ayrshire & Arran	**
Linda Robinson	NHS Ayrshire & Arran	
Kim Smith	NHS Borders	**
Jan Turnbull	NHS Borders	
Laura Stewart	NHS Borders	
Margaret Wylie	NHS Dumfries & Galloway	*
Kirsty Paton	NHS Dumfries & Galloway	*
Christina Hoare	NHS Dumfries & Galloway	
Lesley Johnstone	NHS Dumfries & Galloway	
Julie Carruthers	NHS Dumfries & Galloway	
Victoria McDade	NHS Dumfries & Galloway	
Lynn McCourtney	NHS Dumfries & Galloway	
Eileen Sharp	NHS Forth Valley	
Catriona Phin	NHS Forth Valley	
Ross Hume	NHS Fife	*
Gillian Hutchison	NHS Fife	
Elizabeth Adamson	NHS Fife	
Linda Ewen	NHS Grampian	*
Sarah Whyte	NHS Grampian	**
Rachel Hitchcock	NHS Grampian	
Denise Johnson	NHS Grampian	
Suzanne Christie	NHS Grampian	
Sarah Whyte	NHS Grampian	**
David McLaughlin	NHS Greater Glasgow and Clyde	*
Jane Dudgeon	NHS Greater Glasgow and Clyde	
David Lamont	NHS Greater Glasgow and Clyde	
Larry Callary	NHS Greater Glasgow and Clyde	
Marie Paton	NHS Greater Glasgow and Clyde	
Lindsay King	NHS Greater Glasgow and Clyde	
Craig Robinson	NHS Greater Glasgow and Clyde	
Lynn McLaughlin	NHS Greater Glasgow and Clyde	
Moira MacDonald	NHS Greater Glasgow and Clyde	
Jennifer Poulton	Glasgow Blood Donor Centre	
Angela Rodden	NHS Golden Jubilee	*/**

Angela McGlade	NHS Golden Jubilee	*
Lynn Wilson	NHS Golden Jubilee	^^
Eleanor Lang	NHS Golden Jubilee	
Pamela Firth	NHS Golden Jubilee	
Joanna Taylor	NHS Highland	**
Claire MacAskill	NHS Highland	
Doleen Beagent	NHS Highland	**
Joanne Smith	NHS Highland	
Heather Lyle	NHS Lanarkshire	
Marion Malone	NHS Lanarkshire	**
Margot Russell	NHS Lanarkshire	**
Gillian Flannigan	NHS Lothian	*
Janet McLean	NHS Lothian	
Ailidh Hunter	NHS Lothian	
Claire Matheson	NHS Lothian	
Claire Smyth	NHS Lothian	
Mhairi MacKay	NHS Lothian	
Slyvia Campbell	NHS Orkney	
Graeme Bartlett	NHS Orkney	
Kendal Pyke	NHS Orkney	
Sally Hall	NHS Orkney	
Kim Anderson	NHS Shetland	
Nicola Stewart	NHS Tayside	*
David Wilson Wynne	NHS Tayside	*
Angela Nicholls	NHS Shetland	
Pamela Napier	NHS Tayside	**
Judith Golden	NHS Tayside	
Fiona Reid	NHS Tayside	
Gemma Walker	NHS Tayside	
Audrey Fleming	NHS Tayside	**
Bernadette McCormick	NHS Western Isles	
Calum Thomson	NHS National Services Scotland	
	NHS State Hospitals Board for	
Michelle McKinlay	Scotland	
Carolin Walker	NHS State Hospital Board for Scotland	
Lorraine Malcolm	Open University	**
Liz Sturley	Open University	
Fiona MacKinnon	Open University	
Angela Boyle	Royal College of Midwives	
Jennifer Underwood-		
Mackie	Royal College of Nursing	
Alison Manners	Royal College of Nursing	**
Donna Craig	NHS Education for Scotland	

Angela Shepherd NES **

Anne Marie Sturrock Edinburgh College

Rosemary Stewart Glasgow Clyde College

Ann Kirkwood College Development Network
Jane Finlayson Scottish Social Services Council
Joanna Duff Scottish Social Services Council

Morven Pritchard Scottish Funding Council

Claire Fordham Chartered Society of Physiotherapy
Sara Conroy Chartered Society of Physiotherapy

Sue Johnson Society of Radiographers

Nikki Daniels Royal College of Occupational Therapy

Royal College Speech & Language

Paul O'Meara Therapy

Sue Elliot British & Irish Orthoptic Society
Fiona Audley British Dietetic Association

Royal College of Occupational

Paul Cooper Therapists
Celeste Laporte UNISON

Appendix 4

Documents received in the scoping survey by type/NHS Board/Level

- · Documents received varied greatly in content and quality
- Some duplication and some not relevant to the topic (so not included) and others
 were combined if part of the same information (e.g., job description and
 specification or separate parts of the same programme)
- Some individual documents and some groups reposted as individual where possible
- Some filed as emails and reformatted in Teams files where possible
- With regards to level of practice, some were stated, some could be identified/ assumed, and others were unclear
- Some documents indicated they were competencies but in fact were information sheets or handouts
- Some learning resources and competency documents are single topic, and some are full packages
- Some documents were not Board documents but NES or HEI programmes

A summary is provided in the following tables.

Table 1 Documents received by type/NHS Board Table 2 Documents received by level of practice /type Table 3 Documents received by type/clinical setting

Table 1 Documents received by type/NHS Board

NHS Board	Competencies	Job descriptions	Learning resources	Guides/ SOPs	Roles/ pathways	Courses/ programmes	Other	Total
NHS Ayrshire & Arran	3	4	6	9		3		25
NHS Borders			10		4	7		21
NHS Fife	5		1					6
NHS Forth Valley	5		7			3	1	16
NHS Golden Jubilee Hospital	8							8

NHS Grampian		2				5		7
NHS Greater Glasgow and Clyde	13	13			1		1	28
NHS Highland	1					1	3	5
NHS Lanarkshire	1	15		1	1		1	19
NHS Lothian	5				4	3		10
NHS Tayside	10	2	1	1	1	4	1	
The State Hospitals Board for Scotland	10	2						
NHS National Services Scotland		3						
Total	61	41	25	11	11	26	7	182

Plus 3 Non-NHS board documents (NHS Wales and CSP)

Table 2 Documents received by level of practice /type

	Level 2	Level 3	Level 4	Not clear or applicable to all
Competencies	6	10	16	27
Job descriptions	5	8	26	2
Learning resources	3	8	2	12
Guides/ SOPs			1	10

Roles/ pathways				11
Courses/ programmes	3	1	15	7
Other				7
Total	14	25	60	75

Table 3 Documents received by type/clinical setting

	Acute	Community	Midwifery	Not clear or applicable to all
Competencies	53	7	1	
Job descriptions	25	10	4	
Learning resources	18	2	1	4
Guides/ SOPs	1	6	4	
Roles/ pathways				11
Courses/ programmes	8	2 (including 1 mental health)		16
Other			1	9
Total	105	27	11	40

Appendix 5

Summary of competency documents received in the scoping survey

NHS	Name	Description	Level of	Area of
Board			Practice	Practice
NHS	Cardiology Nursing		2	Acute
Golden	Assistant Band 2			
Jubilee	Competency Pack			
NHS	Cardiothoracic Nursing		2	Acute
Golden	Assistant			
Jubilee	Band 2 Competency Pack			
NHS	Cardiothoracic Nursing		2	Acute
Golden	Assistant			
Jubilee	Band 2 Extended Role			
	Competency			
NHS	Cardiology Senior Nursing		3	Acute
Golden	Assistant band 3			
Jubilee	Competency Pack			
NHS	Cardiothoracic Senior		3	Acute
Golden	Nursing Assistant and			
Jubilee	Specific Competency Pack			
NHS	Cardiothoracic Nursing		3	Acute
Golden	Assistant			
Jubilee	Band 3 New to			
	Organisation			
	Competency Pack			
NHS	Ophthalmology Outpatient		3	Acute
Golden	Department HCSW Band 3			
Jubilee	Competency Pack			
NHS	Ophthalmology Theatres		3	Acute
Golden	HCSW Band 3			
Jubilee	Competency Pack			
Tayside	Competency Framework for		3	Acute
	Band 3 staff in Clinical			
	investigation Unit,			
	Ninewells			
Fife	Venepuncture Competency		4	Acute
	Framework			
NHS	Ophthalmology Outpatient		4	Acute
Golden	Department HCSW Band 4			
Jubilee	Competency Pack			
NHS	Ophthalmology Theatres		4	Acute
Golden	HCSW Band 4		•	
Jubilee	Competency Pack			

NHS Lothian	Occupational Therapy assistant practitioner competencies		4	Acute
NHS Tayside	Radiography assistant training booklet	Radiography	4	Acute
NHS Tayside	Drawing up for MRI contrast agent	Radiography	4	Acute
NHS Tayside	Enhanced Communication Tutorial	Radiography	4	Acute
NHS Tayside	CT – Filling the Injector Pump	Radiography	4	Acute
NHS Tayside	Assisting in Ultrasound guided FNA	Radiography	4	Acute
NHS Tayside	Removal of IV cannula	Radiography	4	Acute
NHS Tayside	Trainee Assistant Theatre Practitioner Pre & Post- Operative Competency Portfolio		4	Acute
NHS Tayside	Assistant Theatre Practitioner: Governance and Competency Framework		4	Acute
NHS Tayside	Trainee Assistant Theatre Practitioner Scrub competencies		4	Acute
NHS Forth Valley	Competency Based Training for Enteral Tube Feeding		unclear	Acute
NHS Fife	Urinary Catheterisation Competency Framework		3 & 4	Acute
NHS Fife	Medicine management competencies	Medicine management for health care support workers competency framework	all	Acute
NHS Fife	Self-Assessment Competency Checklist for Non-registered Staff		all	Acute
NHS Fife	Vital signs competency framework		all	Acute
NHS GGC	NHSGGC 114	Nursing HCSW Oncology Haematology	all	Acute

		Competencies		
NHS GGC	NHSGGC 115	Nursing HCSW	all	Acute
		Orthopaedic competencies		
		competencies		
NHS GGC	NHSGGC 116	Nursing HCSW	all	Acute
		Coronary care band		
		3 competencies		_
NHS GGC	NHSGGC 117	Nursing HCSW	all	Acute
		Orthopaedic		
		Outpatient Competencies		
NHS GGC	NHSGGC 118	Nursing HCSW	all	Acute
11110 000	1410000 110	Spinal	an	riodio
		Competencies		
NHS GGC	NHSGGC 119	Nursing HCSW	all	Acute
		Acute core		
		competencies		
NHS GGC	NHSGGC 120	Recording of	all	Acute
		temperature		
NII 10 000	NII 100000 404	competency	- 11	A
NHS GGC	NHSGGC 121	Recording a respiratory rate	all	Acute
		competency		
NHS GGC	NHSGGC 122	Recording a pulse	all	Acute
		rate competency	<u> </u>	, touto
NHS GGC	NHSGGC 123	Recording a blood	all	Acute
		pressure		
		competency		
NHS GGC	NHSGGC 124	Performing Pulse	all	Acute
		oximetry monitoring		
NUIC CCC	NII 10000 405	competency	all	A 242
NHS GGC	NHSGGC 125	Blood Glucose Monitoring	all	Acute
		competency		
NHS GGC	NHSGGC 126	Vital Signs	all	Acute
		competencies		
		information pack		
NHS	Health Care Support Worker		all	Acute
Highland	Competency			
Lothion	Workbook		oll oll	Aguta
Lothian	peripheral venous cannulation		all	Acute
	Carmulation		<u> </u>	

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NHS	Prime+™ Portable Bladder		all	Acute
Lothian	Ultrasound comps			
NHS	specimen collection		all	Acute
Lothian				
NHS	vital signs monitoring		all	Acute
Lothian				
NHS	ICT TI4	Technical	4	Community
Ayrshire &		Instructors		
Arran		(Band 4)		
		Competencies		
NHS Forth	Band 4 TAP competencies		4	Community
Valley				
NHS	Matrix of comps	outline of all levels	all	Community
Ayrshire &				
Arran				
NHS	Integrated Healthcare		all	Community
Lanarkshire	Support Worker			
NHS Forth	Competencies for the	guidance and	all	Community
Valley	Provision of OT Equipment	competency sign-off		
		but competencies		
		not clear/ shown		
NHS Forth	Healthcare Support Worker	guidance and	all	Community
Valley	Competencies for the	competency sign-off		
	Provision of Mobility Aids	but competencies		
		not shown		
NHS Forth	Maternity Care Assistants in	NES resource	4	Midwifery
Valley	Scotland			
NHS	Competencies for	Technology enabled	5	Community
Ayrshire &	technology enabled care	care: Generic		
Arran		competency		
		framework		



Healthcare Support Worker Education and Career Development Programme

Career Development and Education Framework

for Levels 3 and 4 Nursing Healthcare Support Workers

Career Development and Education Framework for Levels 3 and 4 Nursing Healthcare Support Workers

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Career Development and Education Framework for Levels 3 and 4 Nursing Healthcare Support Workers

Introduction

This first phase of the framework's development reflects the nursing HCSW role at level 3 and 4 only. On completion of phases one to three of the Health Care Support Worker review commissioned by the Scottish Government, this Career Development and Education Framework will provide an infrastructure to support the career development, and the learning and development needs of the nursing, midwifery and allied health professions (NMAHP) healthcare support workforce. The next phases of the commission will develop the framework for all NMAHP HCSWs Level 2-4.

The levels expressed are those of the NHS Career Framework for Health (Appendix 1) which reflect role development and progression, and not those of Agenda for Change which is related to remuneration. It is underpinned by the Career Framework for Health and reflects the education and career development pathways model set out in the Transforming Roles programme.

Career development can happen in different ways. Practitioners may wish to develop higher levels of responsibility, knowledge and skills (vertical progression) or to remain at the same level of the career framework but build on existing knowledge and skills.

Support Workers can use this framework to:	Managers may use this framework to:
 Benchmark current level of practice Guide professional development Identify evidence to support personal development planning Continue to develop within their current level of practice 	 Support discussions that take place as part of professional development reviews Inform development opportunities Inform succession planning Support workforce forecasting, service redesign and skill mix

Structure

This framework has been developed using NES NMAHP Development Framework¹ to develop a series of templates which map development through Levels 2-4 of the Career Framework for Health (Appendix 1) using the four pillars of practice: Clinical Practice; Facilitation of Learning; Leadership; Service Improvement.

The information presented in each of the four Pillars of Practice is generic to any professional group and should be applied to the context that the practitioner is working in.

The Clinical Practice Pillar includes some generic aspects of practice; however, it is this pillar which provides information which defines the specific nature of working in health and care environments. The emphasis on each pillar, at a level of the Career Framework will vary according to the context of the role – clinically and professionally.

The overview pages for each Career Framework Level provide detail of the broad sphere of responsibility/ role, recommended educational/ professional requirements and the qualifications and the Scottish Credit and Qualifications Framework (SCQF) levels that might be expected. The learning required at each level may vary according to professional groups and the context into which the role falls alongside the KSF outline for each role.

The career level templates, which follow the overview page, provide the generic aspects of the sphere of responsibility/role associated with a particular level, and the key knowledge and skills required. The consolidation of existing knowledge and skills, and the acquisition of new ones, are reflected in the incremental nature of the career framework levels.

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¹ NHS Education for Scotland (2021) NES Nursing, Midwifery and Allied Health Professions Development Framework https://www.nmahpdevelopmentframework.nes.scot.nhs.uk/

Abbreviations

НСРС	Health and Care Professions Council	NMC	Nursing and Midwifery Council
HNC	Higher National Certificate	NMAHPs	Nursing, Midwifery and Allied Health Professions
HND	Higher National Diploma	NPA	National Progression Award
NC	National Certificates	Registered Practitioner	Registered Nurse, Registered Midwife, Registered AHP
PDA	Professional Development Award	svQ	Scottish Vocational Qualification

Role Definitions²

Level of Practice	Role Title	Definition
Level 3	Senior Healthcare Support Worker	The Senior HCSW can evidence previous experience and/or consolidation of practice as a HCSW or can evidence an appropriate level of knowledge. They will have the understanding and ability to deliver delegated care under the direction and supervision of healthcare professionals and support the multidisciplinary team in the delivery of high-quality care. The Senior HCSW will possess or have the opportunity to attain within an agreed timeframe, education at SCQF level 7.
Level 4	Assistant Practitioner	The Assistant Practitioner can evidence previous experience and consolidation of practice as a Senior HCSW and/or has the appropriate skills and knowledge and demonstrates the depth of understanding and ability required to participate in the planning and carrying out of holistic, protocol-based care under the direction and supervision of healthcare professionals. They will assist and support the multidisciplinary team in the delivery of high-quality care. The Assistant Practitioner will possess or have the opportunity to attain within an agreed timeframe, education at SCQF level 8.

² NHS Education for Scotland (2010) A Guide to Health Care Support Worker Education and Role Development https://test1.nes.digital/media/261013/revised_guide_to_healthcare_support_worker_education_mar_2010.pdf

LEVEL 3

Senior Healthcare Support Worker

Career Development Framework Level 3 – Overview

Career Framework Level	Pillars of Practice	Broad Sphere of Responsibility/role	Qualifications expected for practitioners at this level of career framework	SCQF
LEVEL 3 Senior Healthcare Support Worker	Clinical Practice Facilitation of Learning Leadership Service Improvement	 Deliver assigned care under the direction and supervision (direct and indirect) of a registered practitioner or Level 4 Assistant Practitioner Support the multidisciplinary/ multi-agency team in the delivery of high-quality care Work within local policies and guidelines 	 Can evidence previous knowledge and relevant experience of working within a caring role /environment using Recognition of Prior learning (see appendix 2). Normally at or working towards a SCQF Level 6 or 7 qualification in a health or social care related subject (see appendix 3). Numeracy and literacy qualifications are required at this level of practice (see appendix 3). 	Level 6-7

Career Development Framework Level 3

Career Framework Level	Pillars of Practice	Aspects of Practice	Examples of Sphere of Responsibility/role	Key Knowledge, Skills and Behaviours
LEVEL 3 Senior Healthcare Support Worker	Clinical Practice	Person centred, Safe and effective care	Following initial assessment by a registered practitioner can, plan, prioritise and take responsibility for assigned activities, including defined clinical or therapeutic interventions within the plan of care / care plan and limits of their competence, guided by standard operating procedures, protocols or systems of work Work under the direction and supervision (direct and indirect) from registered practitioners and/or assistant practitioners in the delivery of personcentred care Demonstrate effective infection prevention and control measures as per local and national policies and procedures Communicate both routine and complex/sensitive information to people receiving care, carers, relatives and other health care professionals/services / agencies Work as part of a multidisciplinary/multiagency team Provide accurate information and support to people receiving care/carers that enables informed choice Understand factors that contribute to and impact on mental health and wellbeing Possess an awareness and relative understanding of what is 'usual' concerning an	Will have a broad skill base related to their practice Has a breadth and depth of understanding of role and related activities beyond that of a level 2 Support Worker Has all the attributes, skills and knowledge required for a Support Worker and: Ability to: Apply knowledge and demonstrate appropriate understanding of: - † health and safety † standard infection control precautions † COSHH regulations † risk management † equality and diversity policies Recognise risk in relation to care provision and further develop risk assessment skills Act on findings within role boundaries to ensure a person's safety Develop knowledge of infection prevention and control Able to effectively reflect on practice Comply with the Data Protection Act, Caldicott Guidelines and local policies

individual's wellbeing and report any concerns to regarding confidentiality and access to medical registered practitioners records. Able to problem solve and take action regarding person centred care Monitor individual's observations, reporting any variance/concerns to the registered practitioner Able to carry out all aspects of personal care as detailed in the individuals' plan of care Demonstrate knowledge and understanding and can contribute to nutritional assessments Record, document, and report on individual's vital signs utilising Early Warning Score charts Work in partnership with individuals/carers and other healthcare professionals to promote health and support positive behaviour change Demonstrate knowledge and skills in caring for people with dementia and their families and carers Where appropriate and in line with local, national, and regulatory guidelines and policy, administer and record medication³ Carry out repetitive, routine and familiar care interventions during the working day. This may include but is not limited to e.g. care and management of urinary catheters e.g., infection control, bag changing care and management of stoma e.g., different types of stoma, stoma bag changing

³ Resource guide to support the safe administration of medicines by HCSWs and Carers in health and social care settings (CNOD Dec 21).

- Understand principles and practice for promoting continence
- Possess knowledge and skill in pressure area care and wound care e.g., wound assessment and management appropriate to context of practice
- assist with and/or perform routine investigations e.g., specimen/blood collection
- understand risk factors and can demonstrate the procedure for safe venepuncture/cannulation

Understand the impact of long-term conditions on individuals/family/carers and can discuss the importance of supporting self-management

Can discuss end of life care, understanding its impact on the individual and family/carers and the importance of individualised care based on the individuals wishes.

Maintain full, accurate and legible records

Is able to utilise and support others to use digital systems and platforms e.g., email, electronic patient records

Understand and follow local process and procedure in reporting incidents and adverse effects

Understand risk and adhere to local policies, protocols and guidelines e.g., Workforce policies, clinical policies and guidance

Demonstrate knowledge and understanding of administrative activities required in the practice area e.g., maintaining stock levels, ordering equipment

Career Framework Level	Pillars of Practice	Aspects of Practice	Examples of Sphere of Responsibility/role	Key Knowledge, Skills and Behaviours
LEVEL 3 Senior Healthcare Support Worker	Facilitation of Learning	Learning, Teaching and Assessment	Within own practice area: Ensure person centred, safe and effective care is at the forefront of learning by sharing knowledge and information with those new to the practice area and/ or new to role e.g., other healthcare professionals, students Is able to reflect on and in practice to identify areas of personal development Within the boundaries of role and seeking support where necessary, facilitate learning for individuals, families and carers Support the practice and development needs of Level 2 Healthcare Support Workers by mentoring and facilitating learning e.g., skills development such as personal care	Ability to: Develop and maintain own knowledge and skills to provide person centred, safe and effective care with support from a registered practitioner or Level 4 Assistant Practitioner Has an awareness of methods to ensure learning has taken place, e.g., 4-stage approach to teaching a clinical skill, or use of Chunk & Check/Teach back

Career Framework Level	Pillars of Practice	Aspects of Practice	Examples of Sphere of Responsibility/role	Key Knowledge, Skills and Behaviours
LEVEL 3 Senior Healthcare Support Worker	Leadership	Teamwork and Development	Within own practice area: Act as a positive role model at all times Contribute to the teams' vision, values and objectives Undertake assigned activities and use own initiative within the context of role and remit Give, seek out and receive feedback in an open, honest and constructive manner Plan and prioritise own work and activities Contribute to effective team working by influencing, negotiating and communicating with others Demonstrate organisational and time management skills	Ability to: Recognise and understand role boundaries and limitations whilst working Participate in multidisciplinary team development Demonstrate critical thinking in relation to problem-solving and taking appropriate action Demonstrate awareness of equality and diversity needs of individuals and colleagues Has an awareness of the impact of leadership activities in relation to compassion, civility, kindness and human factors
LEVEL 3 Senior Healthcare Support Worker	Service Improvement	Guidelines and evidence-based practice	Within own practice area: Contribute to the development of local protocols and guidelines Undertake data collection and feedback results e.g., audits or surveys Assist with quality improvement or research initiatives Suggest ideas for quality and / or service improvement within scope of practice	Ability to: Apply knowledge and skills in using information technology systems to access resources e.g., clinical guidelines and policies, relevant publications Effectively reflect on and discuss own practice Identify risk in relation to care provision and service improvement Has an awareness of quality improvement methodologies

LEVEL 4

Assistant Practitioner

Career Development Framework Level 4 – Overview

Career Framework Level	Pillars of Practice	Broad sphere of Responsibility/ role	Qualifications expected for practitioners at this level of career framework	SCQF
LEVEL 4 Assistant Practitioner	Clinical Practice Facilitation of Learning Leadership Service Improvement	 The most senior support worker role available in NHS Scotland Has developed clinical skills which are more specialised than senior support worker and specific to an area of practice Actively involved in supporting others to learn, for example for Level 2 or 3 healthcare support workers and undergraduate students Expected to have stronger leadership and service improvement skills, for example working on improvement projects such as information for people receiving care and liaising with other departments and services Deliver specific care for people receiving care in support of and supervised (direct or indirect) by registered practitioners as part of a multiprofessional/ multi-agency team 	related subject. (See appendix 3) Numeracy and literacy qualifications are required at this level of practice (see appendix 3)	7-8

Career Development Framework Level 4

Career Framework Level	Pillars of Practice	Aspects of Practice	Examples of Sphere of Responsibility/role	Key Knowledge, Skills and Behaviours
LEVEL 4 Assistant Practitioner	Clinical Practice	Person-centred safe, effective and care	Following the initial assessment by a registered practitioner, take responsibility for planned, assigned care including defined clinical or therapeutic interventions within the care environment, recognising and understanding their role boundaries and limitations Working within current evidence base, agreed protocols and guidelines, can modify approaches and activities regarding care interventions and programmes under the direction and supervision (direct or indirect) of a registered practitioner Carry out routine elements of an individual's assessment following protocols and evidence-based practice, guidelines/protocols and evaluate outcomes (actual or potential) Within the boundaries of their role, are able to work using their own initiative and utilise clinical knowledge and skills at a more advanced level than a Senior Support Worker Demonstrate critical thinking and problem-solving skills related to needs and activities and take action within the agreed parameters of the role Work as part of a multidisciplinary/multi-agency team	Will have an in-depth knowledge and understanding of their job role and related activities Will have a comprehensive skill base related to their practice. Interventions carried out will be achieved through additional, focused training and education Ability to: Apply knowledge and demonstrate appropriate understanding of: - + health and safety + standard infection control precautions + COSHH regulations + risk management + equality and diversity policies Develop knowledge on how and why their care provision and that of others in the multidisciplinary/multi-agency team, impacts on the person's journey Demonstrate risk assessment skills in relation to the person receiving care Demonstrate application of best practice within the practice setting Demonstrate underpinning knowledge that enables integration of theory relating to practice in relevant settings

Recognise the need for and / or modify vital sign monitoring according to individuals' condition and local guidelines

Apply knowledge of infection prevention and control, leading by example and supporting others to comply with infection prevention and control policies

Apply knowledge and skill related to undertaking/assisting as directed with specific complex investigations and procedures e.g., wound care, urinalysis, specimen/blood collection

Develop and maintain own knowledge and skills to provide safe and effective care with direction from a registered practitioner and can support others to do so

Provide accurate information and support to individuals that enables informed choices

Understand and act on factors that can contribute to and impact on mental health and well being

Recognise change in a person's condition and report observations to registered practitioners

Communicate both routine and complex/sensitive information to individuals, carers, relatives and other healthcare professionals/services /agencies

Plan and prioritise activities and duties in consultation with registered practitioners and use a framework to support decision making when assigning interventions and activities

Provides person centred, safe and effective care, that is responsive to individual preferences, needs and values, ensuring authorisation is given to proceed.

Understand and apply the concepts of accountability and responsibility and be confident to accept assigned responsibility from a registered practitioner

Comply with the Data Protection Act, Caldicott Guidelines and local policies regarding confidentiality and access to medical records.

Monitor and evaluate an individual's observations, reporting any variance/concerns to the registered practitioner

Able to problem solve and take action regarding individuals care through awareness/understanding of policy and legislation

Where appropriate and in line with local, national, and regulatory guidelines and policy, administer and record medication⁴

Demonstrates knowledge and understanding and can undertake/record nutritional assessments

Understand and report on indicators of the deteriorating person e.g., vital signs using Early Warning Score charts

Demonstrate knowledge and skills in caring for people with dementia and their families and carers

Identify and measure the impact of long-term conditions on individuals/family/carers and can support the implementation of strategies/tools to facilitate effective self-management

Works in partnership with individuals/families/carers to promote health and support positive behaviour change

Maintain full, accurate and legible records and is able to utilise and support others to use digital systems and platforms e.g., email, electronic patient records

⁴ Resource guide to support the safe administration of medicines by HCSWs and Carers in health and social care settings (CNOD Dec 21).

General workload is likely to increase in complexity where familiar but less routine activities and interventions are delegated.

This will be dependent on an individual's needs and area of practice and may include but is not limited to e.g.

- care and management of urinary catheters
- care and management of stoma e.g., different types of stoma, stoma bag changing
- understand principles and practice the promote continence
- Deliver person centred care that embodies the principles of effective prevention, management and treatment of pressure areas.
- knowledge and skill in wound care e.g., wound assessment and management appropriate to context of practice
- understand the risks and demonstrates the procedure for safe venepuncture and cannulation

Can discuss and carry out person centred end of life care, understanding its impact on individuals and family/carers based on the individuals wishes

Understand, follow and apply local process and procedure in reporting incidents and adverse effects

Understand risk and adhere to local policies, protocols and guidelines e.g., Workforce policies, clinical policies and guidance

Demonstrate knowledge and understanding of administrative activities required in the practice area

Career Framework Level	Pillars of Practice	Aspects of Practice	Examples of Sphere of Responsibility/role	Key Knowledge, Skills and Behaviours
LEVEL 4 Assistant Practitioner	Facilitation of Learning	Learning, Teaching and Assessment	Within own practice area: Be responsible and accountable for keeping own knowledge and skills up to date through reflective practice and continuing professional development Within the boundaries of role and seeking support where necessary, facilitate learning for individuals, families and carers Promote a positive learning environment by participating in the support and experience of students, new members of staff and other Support Workers Act as a positive role model to others Give, seek out and receive feedback in an open, honest and constructive manner to facilitate learning and development	Ability to: Use reflection to enhance self-awareness, gain new insights and develop resilience when facing adverse situations Recognise the personal impact of any difficult situations and have strategies to enable personal learning and development, recognising the limits of their competence and personal strengths Demonstrate application of a variety of methods to ensure learning has taken place, e.g., 4 stage approach to teaching a clinical skill, or use of Chunk & Check/Teach back

Career Framework Level	Pillars of Practice	Aspects of Practice	Examples of Sphere of Responsibility/role	Key Knowledge, Skills and Behaviours
LEVEL 4 Assistant Practitioner	Leadership	Teamwork and Development	Within own practice area: Act as a positive role model at all times Contribute to multi-professional/multi agency working actively promoting, participating and respecting the contribution of others Develop effective team working skills and is able to negotiate with and influence others Contribute to team objectives in relation to leading service development initiatives	through an awareness of policy and legislation

Career Framework Level	Pillars of Practice	Aspects of Practice	Examples of Sphere of Responsibility/role	Key Knowledge, Skills and Behaviours
LEVEL 4 Assistant Practitioner	Service Improvement	Guidelines and evidence-based practice	Within own practice area: Contribute to the design, development, implementation and evaluation of service and quality improvement initiatives and range of quality assurance activities, including involvement in data collection Access, assess and apply relevant guidelines Apply knowledge and skills in using information technology systems	Ability to: Understand and apply evidence-based practice and identify and assesses risk in relation to care provision and quality care outcomes Demonstrate and apply knowledge of relevant guidelines Recognise the importance of responding to and resolving complaints timeously and effectively at local level, escalating as appropriate
				Demonstrate effective application of quality improvement methodologies and tools

Appendix 1: Career Framework Model

Taken with Permission from the Scottish Government Workforce Directorate "Guidance to NHS Boards on the Career Framework for Health" 11 March 2009 (Annex 2).

The diagram outlines the Career Framework Levels, the appropriate clinical level title (in brackets), a brief clinical level descriptor and, for illustration, some possible non-clinical role examples

Note: This diagram is an adaptation of the version on the Skills for Health website and from the one formally launched in 2006. These adaptations are simply to reflect generally recognised terms in Scotland, which may differ from those used elsewhere in the UK. They do not affect the substance of the Career Framework or represent a departure from the Career Framework launched in 2006.

Key Elements of the Career Framework



- Career Framework Level
 - Recols working at level 0 require knowledge at the most advanced frontier of the field of work and at the interface between fields. They will have responsibility for the development and delivery of a service to a population, at the highest level of the engenication. Indicative or florence wittle. Director
 - Career Framework Level 8
 - People at level 8 of the career framework require highly specialized knowledge, some of which is at the foretrost of loowledge in a field of work, which they use as the basis for original thinking another research. They are landows with considerable responsibility, and the attribly to assess the areatype complete processions. They have responsibility for service in hypotherization of development. They may have considerable chical another management responsibilities, be accountable for service delivery or have a landing adjustion or commissioning role.
- Caneer Framework Level 7
 Feeple at least 7 of the cases in three for the state of an extraordise assets in the delt and at the interface between different fields. They are innovative, and have a responsibility for developing and drawinging gradies and/or any time in a complex and unpredictable and/ormans. I indicately or Reference title: Advanced Pracel/Senior.
- Carrier Framework Level 8
 People at level 8 require a critical understanding of datated theoretical and practical knowledge, are specialist and 6 repaired and practical knowledge, are specialist and 6 repaired and leadership proported bittles. They demonstrate inhibitions and are creative in finding solutions to problems. They new some responsibility for four performance and service development and they consideredly understate and development. Indicative or indersence tittles depended representations.
- Catreer Framework Leviet a

 Feeb of two with here a comprehensive, specialized, lectual and theoretical knowledge within a field of work and
 as seasons of the boundarise of that knowledge. They are able to use knowledge to solve problems on affectly, make
 judgements which require analysis are of interpretation, and actively constitute to sore to and set development. They may
 have responsibility for augory blain of staff or fallings. Indicative or References State Precitionser.
- Career Framework Level 4

 People at level 4 require fectual and theoretical involvinge in broad contexts within a field of work. Work is guided by standard operating procedures, protocols or systems of work, but the worker makes judgaments, plans activities, contributes to service development and clamonistates as if development. They may have responsibility for supervision of some staff. Indicative or Publication 2550-2561 procedure in the Career Staff Section Procedures.
- Courses restriction on a current and the person working at level 2, and will have more responsibility, with guidance and supportation available when read up. They will contribute to sent the observation available when read up. They will contribute to sent the observation available with near up. They will contribute to sent the observation available or self development. Interfaction or Reference Utile Senter Need these A satisfaction for the other sections.
- Carrier Framework Level 2
 People at twil 2 require basic factual knowledge of a third of work. They may carry out clinical, scientific or administrative during according to established protocols or procedures, or systems of work. Indicative or Paterosce title: Support Worker
- Carrier Framework. Devel 1

 People at level 1 are at entry level, and require basic general knowledge. They undertake a limited number of straightforward taxes under direct supervision. They could be any saw sturier towork in the Health sector, and progress repidly to Lavel 2. Indicative or Reference title: Codet

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Appendix 2: RPL Guiding Principles



RECOGNITION OF PRIOR LEARNING

TRANSFORMING LIVES THROUGH LIFELONG LEARNING



Recognition of Prior Learning (RPL) means that you can get recognition for learning done in a work-based environment and learning from life experience to support your career development. These Guiding Principles provide a consistent approach to Recognition of Prior Learning for NHSScotland Boards, and are underpinned by the Scottish Credit and Qualifications Framework (SCQF) and NHSScotland Staff Governance Standards.

Guiding Principles for NHSScotland

Person / Learner-centred

NHSScotland managers, supervisors and reviewers will provide support for staff to recognise learners' prior knowledge, skills and understanding, and the value of recognising learning gained from experience in their life and workplace. RPL is voluntary and helps to meet learners' needs, in line with their goals and aspirations in a way that is fair and treats learners with dignity and respect.

Collaborative and Quality Assured

NHSScotland learning and development leads will work in partnership with learning providers to enhance learners' access to formal learning

Standardised & Transparent

NHSScotland managers, supervisors and reviewers will adopt the RPL 5 Step Process (see below), to ensure transparency and consistency across NHSScotland.

Accessible to all

RPL will be accessible, inclusive, easy to understand and applicable to all learners, considering their preferred learning style.

assessment, to address the diversity of learners' needs and requirements when seeking RPL, at any point throughout a learner's career.

These Principles were created by an NHSScotland RPL Short Life Working Group, led by NHS Education for Scotland, in 2019.

RPL is a Five Step Process:



Further information to support this process is available by contacting: asktheteam@nes.scot.nhs.uk

Recognition of Prior Learning can be used for:

- Recruitment, induction and Personal Development Planning and Review (PDPR) purposes, valuing learning from experience (skills, knowledge, values and understanding) within the lifelong learning culture in NHSScotland
- ► The award of SCQF credit points from a credit rating body e.g. college / university, to gain credit and entry into, or articulation onto, a formal learning programme
- Workers who move to Scotland, who wish to gain recognition for evidenced learning and learning from experience gained outside of Scotland.

Benefits of RPL for Learners:

- Providing opportunities to reflect on learning gained through experience, raising an awareness of an ability to learn, leading to an increase in confidence to improve practice
- Helps to benchmark to demonstrate learning level, identify gaps in knowledge and plan a learning programme to fulfil their potential in line with career aspirations
- ► Enables a learner to continually build on their previous learning, avoiding duplication and receive recognition for previous learning, reducing the amount of time it takes to gain a qualification.

Benefits of RPL for NHSScotland:

- Values employees' skills and identifies learning gaps within the workforce, leading to improved delivery of safe, effective, person-centred care and encourages people at every level
- Improves staff retention. This means reduced staff turnover, minimised duplication of learning and reduced costs
- Supports and widens access to learning and development opportunities across NHSScotland within a supportive environment, where careers are flexible and full of possibilities, to attract and retain the workforce needed for a healthier Scotland.



Additional Resources

- Scottish Credit and Qualifications Framework Toolkit RPL Toolkit
- ▶ NHS Education For Scotland RPL Guide for Learners and A Guide to Support Staff Through the RPL Process



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This resource may be made available, in full or summary form, us on 0131 656 3200 or email altformats@nes.scot.nhs.uk to discuss how we can best meet your requirements.

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Appendix 3: SCQF Level related qualifications

SCQF 6

- SVQ
 Healthcare
 Support
 (clinical)
- SVQ Social Services & Healthcare

Modern
Apprenticeships

- -Health Care Support (Clinical)
- -Social Services & Healthcare

SCQF 7

- SVQ Healthcare Support (Clinical)
- SVQ Social Services & Healthcare
- HNC Healthcare Practice
- Certificate of Higher Education Maternity Care Assistant Programme
- PDA Rehabilitation Technologies
- HNC Occupational Therapy Support
- PDA Promoting Positive Behaviour
- PDA Promoting Excellence in Dementia Skilled Practice
- PDA Developing Professional Practice in Health & Social Care
- PDA Certificate in Supporting Individuals with Autistic Spectrum Disorder
- PDA Brief Interventions for Substance Misuse
- PDA Health and Social Care: Administration of Medicine
- OU K102 -Introducing Health and Social Care
- OU Certificate of Higher Education in Healthcare Practice
- OU K104, Introduction to healthcare practice

Modern Apprenticeships

- Health Care Support (Clinical)
- Social Services & Healthcare

SCQF 8

- PDA Occupational Therapy Support
- PDA Perioperative Practice
- PDA Acute and Community
 Care
- PDA Health and Social Care:
 Personalisation in Practice
- PDA Health and Social Care:
 Promoting Enhanced
 Professional Practice
- PDA Healthcare
 Professionals: Facilitating
 Learning, Training and
 Assessment in the
 Workplace
- PDA Podiatry Support
- OU Diploma of Higher Education in Health and Social Care
- Higher Education Diploma
 Wellbeing & Enablement

Literacy & Numeracy

Career Framework Level 2

Numeracy and literacy qualifications are desirable at this level of practice

Career Framework Level 3

 Numeracy and literacy qualifications are required at this level of practice -Normally at or working towards Maths / Numeracy at SCQF Level 5 as well as Literacy / English / Communication qualifications are required at SCQF level 6

Career Framework Level 4

 Numeracy and literacy qualifications are required at this level of practice -Normally achieved Maths / Numeracy at SCQF Level 5 as well as Literacy / English / Communication qualifications are required at SCQF Level 6