Purpose: To work in support of registered health care professionals to facilitate patient care throughout their pathway while promoting independence, protecting choice, dignity, privacy and safety. Ensure high standards are maintained in a safe environment which promotes equality and sensitivity for all individuals.

Pay Band: Reporting To: Departmental Manager or Ward Sister/Charge Nurse

<table>
<thead>
<tr>
<th>Dimension Type</th>
<th>Dimension Number</th>
<th>Dimension Name</th>
<th>Second Gateway (Full Outline)</th>
<th>Foundation Gateway (Subset Outline)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Core</td>
<td>C1</td>
<td>Communication</td>
<td>3 A, B, C, D, E, F</td>
<td>2 A, B, C, D, E</td>
</tr>
<tr>
<td>Core</td>
<td>C2</td>
<td>Personal and People Development</td>
<td>2 A, B, C, D, E, F</td>
<td>2 A, B, C, D, E, F</td>
</tr>
<tr>
<td>Core</td>
<td>C3</td>
<td>Health Safety and Security</td>
<td>2 A, B, C, D, E, F</td>
<td>2 A, B, C, D, E, F</td>
</tr>
<tr>
<td>Core</td>
<td>C4</td>
<td>Service Improvement</td>
<td>2 A, B, C, D, E, F</td>
<td>1 A, B, C, D, E</td>
</tr>
<tr>
<td>Core</td>
<td>C5</td>
<td>Quality</td>
<td>2 A, B, C, D, E, F</td>
<td>2 A, B, C, D, E</td>
</tr>
<tr>
<td>Core</td>
<td>C6</td>
<td>Equality and Diversity</td>
<td>2 A, B, C, D</td>
<td>2 A, B, C, D</td>
</tr>
<tr>
<td>Specific</td>
<td>HWB2</td>
<td>Assessment and Care planning to meet health and wellbeing needs</td>
<td>2 A, B, C, D, E, F</td>
<td>2 A, B, C, D, E, F</td>
</tr>
<tr>
<td>Specific</td>
<td>HWB5</td>
<td>Provision of Care to meet health and wellbeing needs</td>
<td>2 A, B, C, D, E, F, G</td>
<td>2 A, B, C, D, E, F, G</td>
</tr>
<tr>
<td>Specific</td>
<td>HWB7</td>
<td>Interventions and Treatments</td>
<td>2 A, B, C, D, E, F, G</td>
<td>2 A, B, C, D, E, F, G</td>
</tr>
<tr>
<td>Specific</td>
<td>IK1</td>
<td>Information Processing</td>
<td>2 A, B, C, D, E, F, G</td>
<td>2 A, B, C, D, E, F, G</td>
</tr>
</tbody>
</table>
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 (e.g. 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)
COMMUNICATION - Level: 3

**Level Indicators:**

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

ii) 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

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

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

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

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

Foundation Gateway (Subset Outline)
COMMUNICATION - Level: 2

**Level Indicators:**

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

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

iii) constructively manages barriers to effective communication

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

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

- Communication differences might be in relation to:
  - contexts and cultures of the different parties
  - degree of confusion or clarity
  - first/preferred language
  - levels of familiarity with the subject of the communication / context in which the communication is taking place
  - level of knowledge and skills
  - sense of reality.

- 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.

- Purpose of communication might include:
  - asserting a particular position or view
  - breaking bad news
  - encouraging and supporting people
  - explaining issues in formal situations (such as courts)
  - explaining outcomes of activities / interventions
  - exploring difficult issues
  - facilitating meetings
  - helping people make difficult decisions
  - making scripted presentations
  - presenting and discussing ideas
  - providing technical advice to non-technical specialists
  - representing views
  - seeking consent
  - sharing decision making with others including users of services
  - sharing information
- supporting people in difficult circumstances.

- Barriers to communication may be:
  - environmental (e.g. noise, lack of privacy)
  - personal (e.g. the health and wellbeing of the people involved)
  - social (e.g. conflict, violent and abusive situations, ability to read and write in a particular language or style).

- Modifies communication through, for example:
  - deciding what information / advice to give / not give as the communication proceeds
  - modifying the content and structure of communication
  - modifying the environment
  - modifying the methods of communicating
  - using another language
  - using different 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)
PERSONAL AND PEOPLE DEVELOPMENT - Level: 2

Level Indicators:
- a) assesses and identifies:
  - feedback from others on own work
  - how s/he is applying knowledge and skills in relation to the KSF outline for the post
  - own development needs and interests in the current post
  - what has been helpful in his/her learning and development to date
- b) takes an active part in the development review of own work against the KSF outline for the post with their reviewer and suggests areas for learning and development in the coming year
- c) takes responsibility for own personal development and takes an active part in learning opportunities
- d) evaluates the effectiveness of learning opportunities and alerts others to benefits and problems
- e) keeps up-to-date records of own development review process
- f) offers information to others when it will help their development and/or help them meet work demands.

Foundation Gateway (Subset Outline)
PERSONAL AND PEOPLE DEVELOPMENT - Level: 2

Level Indicators:
- a) assesses and identifies:
  - feedback from others on own work
  - how s/he is applying knowledge and skills in relation to the KSF outline for the post
  - own development needs and interests in the current post
  - what has been helpful in his/her learning and development to date
- b) takes an active part in the development review of own work against the KSF outline for the post with their reviewer and suggests areas for learning and development in the coming year
- c) takes responsibility for own personal development and takes an active part in learning opportunities
- d) evaluates the effectiveness of learning opportunities and alerts others to benefits and problems
- e) keeps up-to-date records of own development review process
- f) offers information to others when it will help their development and/or help them meet work demands.
Examples Of Application: 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.

• 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.

• Offering information to others might be:
  - during induction
  - during ongoing work
  - when changes are being made to work practices.

Examples of Application: 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.

• 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.

• Offering information to others might be:
  - during induction
  - during ongoing work
  - when changes are being made to work practices.
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)
HEALTH, SAFETY AND SECURITY - Level: 2

<table>
<thead>
<tr>
<th>Level Indicators:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) identifies and assesses the potential risks involved in work activities and processes for self and others</td>
</tr>
<tr>
<td>b) identifies how best to manage the risks</td>
</tr>
<tr>
<td>c) undertakes work activities consistent with:</td>
</tr>
<tr>
<td>- legislation, policies and procedures</td>
</tr>
<tr>
<td>- the assessment and management of risk</td>
</tr>
<tr>
<td>d) takes the appropriate action to manage an emergency summoning assistance immediately when this is necessary</td>
</tr>
<tr>
<td>e) reports actual or potential problems that may put health, safety and security at risk and suggests how they might be addressed</td>
</tr>
<tr>
<td>f) supports others in maintaining health, safety and security.</td>
</tr>
</tbody>
</table>

Foundation Gateway (Subset Outline)
HEALTH, SAFETY AND SECURITY - Level: 2

<table>
<thead>
<tr>
<th>Level Indicators:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) identifies and assesses the potential risks involved in work activities and processes for self and others</td>
</tr>
<tr>
<td>b) identifies how best to manage the risks</td>
</tr>
<tr>
<td>c) undertakes work activities consistent with:</td>
</tr>
<tr>
<td>- legislation, policies and procedures</td>
</tr>
<tr>
<td>- the assessment and management of risk</td>
</tr>
<tr>
<td>d) takes the appropriate action to manage an emergency summoning assistance immediately when this is necessary</td>
</tr>
<tr>
<td>e) reports actual or potential problems that may put health, safety and security at risk and suggests how they might be addressed</td>
</tr>
<tr>
<td>f) supports others in maintaining health, safety and security.</td>
</tr>
</tbody>
</table>
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)  
SERVICE IMPROVEMENT - Level: 2

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.

Foundation Gateway (Subset Outline)  
SERVICE IMPROVEMENT - Level: 1

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: 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.

- Evaluating own and other’s work might be through:
  - audit
  - appraising own and team practice in the light of research findings
  - comparisons of own services against those of others following benchmarking exercises
  - satisfaction surveys.

- Constructive suggestions might be related to:
  - bright ideas
  - feedback from users
  - good practice elsewhere
  - how to apply changes in legislation, policies and procedures
  - how to implement recommendations
  - how to respond effectively to evaluations
  - own reflections and observations
  - team discussion.

Examples of Application: Tasks related to evaluating services might include:
- attending ward meetings and making constructive suggestions on how to improve service
- participating in audits and quality initiatives
- 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:
  - Trust policies and procedures
  - DPA
  - FIA
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)
QUALITY - Level: 2

Level Indicators:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a)</td>
<td>acts consistently with legislation, policies, procedures and other quality approaches and encourages others to do so</td>
</tr>
<tr>
<td>b)</td>
<td>works within the limits of own competence and levels of responsibility and accountability in the work team and organisation</td>
</tr>
<tr>
<td>c)</td>
<td>works as an effective and responsible team member</td>
</tr>
<tr>
<td>d)</td>
<td>prioritises own workload and organises own work to meet these priorities and reduce risks to quality</td>
</tr>
<tr>
<td>e)</td>
<td>uses and maintains resources efficiently and effectively and encourages others to do so</td>
</tr>
<tr>
<td>f)</td>
<td>monitors the quality of work in own area and alerts others to quality issues.</td>
</tr>
</tbody>
</table>

Foundation Gateway (Subset Outline)
QUALITY - Level: 2

Level Indicators:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a)</td>
<td>acts consistently with legislation, policies, procedures and other quality approaches and encourages others to do so</td>
</tr>
<tr>
<td>b)</td>
<td>works within the limits of own competence and levels of responsibility and accountability in the work team and organisation</td>
</tr>
<tr>
<td>c)</td>
<td>works as an effective and responsible team member</td>
</tr>
<tr>
<td>d)</td>
<td>prioritises own workload and organises own work to meet these priorities and reduce risks to quality</td>
</tr>
<tr>
<td>e)</td>
<td>uses and maintains resources efficiently and effectively and encourages others to do so</td>
</tr>
<tr>
<td>f)</td>
<td>monitors the quality of work in own area and alerts others to quality issues.</td>
</tr>
</tbody>
</table>
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.

Examples of Application: Legislation, policies and procedures may be international, national or local and may relate to:
- Trust policies and procedures
- DPA
- FIA

- Being an effective team member would include such aspects as:
  - working effectively during agreed hours
  - being aware of the complaints procedure for informal complaints at ward level
  - demonstrating awareness of monitoring compliments within the ward environment
  - developing the necessary knowledge and skills needed by and in the team
  - identifying issues and reporting them appropriately
  - presenting a positive impression of the team and the service
  - supporting other team members

- Resources would include:
  - environments
  - equipment and tools
  - information
  - materials.

- Quality issues might relate to:
  - complaints
  - health, safety and security
  - incidents
  - lack of knowledge or evidence on which to base the work
  - mistakes and errors
  - poor communication
  - resources
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)
EQUALITY AND DIVERSITY - Level: 2

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)
EQUALITY AND DIVERSITY - Level: 2

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: 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
Overview

This dimension relates to assessing the health and wellbeing needs of people - individuals and groups (including families). This assessment focuses on the whole person in the context of their community, family, lifestyle and environment. It may take place in any setting.

In undertaking this work staff will need to be aware of their legal obligations and responsibilities, the rights of the different people involved, and the diversity of the people they are working with.

Progression through the levels in this dimension is characterised by:

- increasing complexity of health and wellbeing needs and an understanding of how these can be addressed
- increasing demands for interagency and interprofessional working
- increasing involvement in the planning, monitoring and review of programmes of care (as contrasted with making a contribution to the assessment).
### Second Gateway (Full Outline)
**ASSESSMENT AND CARE PLANNING TO MEET HEALTH AND WELLBEING NEEDS - Level: 2**

<table>
<thead>
<tr>
<th>Level Indicators:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) explains the purpose of assessing health and wellbeing needs to the people concerned</td>
</tr>
<tr>
<td>b) respects people’s dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent</td>
</tr>
<tr>
<td>c) assists in the assessment of people’s health and wellbeing and related needs and risks as agreed with the care team and consistent with legislation, policies and procedures</td>
</tr>
<tr>
<td>d) records and reports back accurately and fully on the assessments undertaken and risks identified</td>
</tr>
<tr>
<td>e) offers to the team his/her own insights into the health and well-being needs and wishes of the people concerned</td>
</tr>
<tr>
<td>f) makes suggestions on the care, protection and support that will be needed and how this might relate to his/her own work</td>
</tr>
</tbody>
</table>

### Foundation Gateway (Subset Outline)
**ASSESSMENT AND CARE PLANNING TO MEET HEALTH AND WELLBEING NEEDS - Level: 2**

<table>
<thead>
<tr>
<th>Level Indicators:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) explains the purpose of assessing health and wellbeing needs to the people concerned</td>
</tr>
<tr>
<td>b) respects people’s dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent</td>
</tr>
<tr>
<td>c) assists in the assessment of people’s health and wellbeing and related needs and risks as agreed with the care team and consistent with legislation, policies and procedures</td>
</tr>
<tr>
<td>d) records and reports back accurately and fully on the assessments undertaken and risks identified</td>
</tr>
<tr>
<td>e) offers to the team his/her own insights into the health and well-being needs and wishes of the people concerned</td>
</tr>
<tr>
<td>f) makes suggestions on the care, protection and support that will be needed and how this might relate to his/her own work</td>
</tr>
</tbody>
</table>
Examples Of Application:

a) able to clearly explain to the patient/relative any care activities that may be carried out by them and why they are doing them
   - give accurate and appropriate information to patients/relatives within own competence
   - seek appropriate senior advice to ensure complete information if required
   - undertake training/supervised practice to improve skills in information-gathering and explanation

b) respects people's dignity, wishes and beliefs, involving them in shared decision making
   - asks patient/carers consent before carrying out any care activity
   - follow Trust policies related to patient care e.g. safeguarding adults
   - take into account own behaviour and its effects on others
   - take appropriate action when the effects of others undermines equality and diversity

c) assist in the assessment of people's health and well being, meeting legislation, policies and procedures
   - carry out assessment of care required for a defined group of patients, within sphere of competence, in accordance with legislation, Trust polices and guidelines
   - understand and clarify the tasks and activities that need to be carried out e.g. patient observations, preparation for specific activities and tests
   - contribute to the planning and implementation of activities to raise awareness of health and wellbeing e.g. health promotion activities
   - meet patient safety requirements as per minimum skill set 1

d) records and reports back accurately on assessments undertaken and risks identified
   - accurately records patient information/observations in a timely manner e.g. test results, patient data, using patient notes/care plans
   - provide accurate verbal report of assessment to supervising registered practitioner inform senior practitioner of any risk identified on assessment
   - inform registered practitioner if there is a deterioration or improvement in the patients condition or if the patients reactions/behaviour has changed

e) contribute own insights regarding the health and well being of patients to team
   - inform qualified staff of any wishes/needs of the patient which they have identified through discussion or observation with the patient, relatives or carer e.g. cultural or religious wishes in life or end of life care
   - contribute to any team initiatives to meet specific care wishes/needs


Examples Of Application:

a) able to clearly explain to the patient/relative any care activities that may be carried out by them and why they are doing them
   - give accurate and appropriate information to patients/relatives within own competence
   - seek appropriate senior advice to ensure complete information if required
   - undertake training/supervised practice to improve skills in information-gathering and explanation

b) respects people's dignity, wishes and beliefs, involving them in shared decision making
   - asks patient/carers consent before carrying out any care activity
   - follow Trust policies related to patient care e.g. safeguarding adults
   - take into account own behaviour and its effects on others
   - take appropriate action when the effects of others undermines equality and diversity

c) assist in the assessment of people's health and well being, meeting legislation, policies and procedures
   - carry out assessment of care required for a defined group of patients, within sphere of competence, in accordance with legislation, Trust polices and guidelines
   - understand and clarify the tasks and activities that need to be carried out e.g. patient observations, preparation for specific activities and tests
   - contribute to the planning and implementation of activities to raise awareness of health and wellbeing e.g. health promotion activities
   - meet patient safety requirements as per minimum skill set 1

d) records and reports back accurately on assessments undertaken and risks identified
   - accurately records patient information/observations in a timely manner e.g. test results, patient data, using patient notes/care plans
   - provide accurate verbal report of assessment to supervising registered practitioner inform senior practitioner of any risk identified on assessment
   - inform registered practitioner if there is a deterioration or improvement in the patients condition or if the patients reactions/behaviour has changed

e) contribute own insights regarding the health and well being of patients to team
   - inform qualified staff of any wishes/needs of the patient which they have identified through discussion or observation with the patient, relatives or carer e.g. cultural or religious wishes in life or end of life care
   - contribute to any team initiatives to meet specific care wishes/needs
f) make suggestions on any care, protection and support needed related to own work
   - discuss with qualified staff any suggestions related to assessment of care needs e.g. mobility, family issues
   - discuss with qualified staff appropriate information to share with other departments from assessment, on transfer of care e.g. identification of bruising on admission, awareness that the patient lives alone, mobility, disability
HWB5 PROVISION OF CARE TO MEET HEALTH AND WELLBEING NEEDS

Overview

This dimension relates specifically to working with individuals who are dependent on others for meeting some or all of their health and wellbeing needs, and with their carers whose own needs might affect what happens to those individuals. This dependence might be short-term, long term, or intermittent to meet carers’ needs dependent on the support structures available.

The areas of care that would address this dependence include such aspects as:
- personal care
- administration and monitoring of medications
- application of dressings
- caring for individuals after death
- ensuring individual’s comfort and need for rest
- monitoring individual’s safety and wellbeing
- palliative and terminal care
- providing social stimulation and interaction
- respite care
- supporting individuals with their nutritional needs
- supporting people during specific life transitions
- supporting women during pregnancy, labour, childbirth and the postnatal period
- the management of pain
- the provision of equipment, aids and products.

Progression through the levels in this dimension is characterised by:
- increasing complexity of needs and associated risks
- increasingly complex forms of care to address those needs and the associated knowledge and skills
- increased accountability for whole plans of care rather than aspects within them.
### Level Indicators:

- **a)** discusses individuals’ care plans and their health and wellbeing needs with the care team and understands his/her own role in delivering care to
- **b)** meets those needs offers information to the team on how to meet people’s needs and effective ways of doing this based on observations and own experience
- **c)** respects people’s dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent for the care to be undertaken
- **d)** prepares for, undertakes and records care activities as delegated and consistent with legislation, policies and procedures and the management of risk
- **e)** supports and monitors people throughout enabling them to address their own health and wellbeing as far as it is possible for them to do so
- **f)** promptly alerts the relevant person when there are unexpected changes in individuals’ health and wellbeing or risks
- **g)** provides information to the team on how individuals’ needs are changing and feedback on the appropriateness of the care plan for the people concerned.

---

### Level Indicators:

- **a)** discusses individuals’ care plans and their health and wellbeing needs with the care team and understands his/her own role in delivering care to
- **b)** meets those needs offers information to the team on how to meet people’s needs and effective ways of doing this based on observations and own experience
- **c)** respects people’s dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent for the care to be undertaken
- **d)** prepares for, undertakes and records care activities as delegated and consistent with legislation, policies and procedures and the management of risk
- **e)** supports and monitors people throughout enabling them to address their own health and wellbeing as far as it is possible for them to do so
- **f)** promptly alerts the relevant person when there are unexpected changes in individuals’ health and wellbeing or risks
- **g)** provides information to the team on how individuals’ needs are changing and feedback on the appropriateness of the care plan for the people concerned.
- Examples Of Application:
e) discuss individuals care plans with the team, understanding own role in delivery of care/tasks
- meet minimum skill set 5-10
- understand tasks/care activities delegated
- work within sphere of competence
- work under supervision of qualified nurse
- work in collaboration with team and Trust colleagues e.g. Physio, medical staff, X-ray
- delegate work to HCSW Band 2 as appropriate

f) feedback to the team effective ways to meet patient's care needs
- evaluate and discuss observations and assessments made with registered practitioner
- recognise the needs of families, carers, close friends e.g. during end of life care

- Examples of Application:
a) discuss individuals care plans with the team, understanding own role in delivery of care/tasks
- meet minimum skill set 5-10
- understand tasks/care activities delegated
- work within sphere of competence
- work under supervision of qualified nurse
- work in collaboration with team and Trust colleagues e.g. Physio, medical staff, X-ray
- delegate work to HCSW Band 2 as appropriate

b) feedback to the team effective ways to meet patient's care needs
- evaluate and discuss observations and assessments made with registered practitioner
- recognise the needs of families, carers, close friends e.g. during end of life care

c) informs the patient of the care activities that need to be performed and why
- asks the patients consent prior to any activities
- respects patient's dignity, wishes and beliefs
- adapts information giving to meet needs of diverse patient group e.g. disability, deafness, elderly

d) prepares for, undertakes and records care activities consistent with legislation, Trust policies and procedures
- prepare and maintain environments and equipment required for care activity specific to work area, before, during and after intervention
- promotes high standards of care at all times
- ensure correct materials are available e.g. gloves, aprons, clean sheets, clothes
- prepare patient for specific procedure e.g. cleaning of wound, moving patient to correct position
- prepare self in accordance of Trust policies/guidelines e.g. infection control, moving and handling aids
- carry out specific tasks/procedures as delegated and within sphere of competence e.g aseptic wound dressings, use of specialised equipment, elimination care
- expand practice following competency training, to include specific activities related to work area e.g. x-ray, critical care
e) supports and monitors patients to enable them to meet own care activities/needs as able
- promote patient independence as able e.g. enabling them to wash themselves
- provide support and encouragement to patient
- participate in the education of others to support patient independence if appropriate e.g. relatives, carers, prior to discharge
- collaborate with other trust colleagues to achieve more independent care e.g. stoma care
- enable patients to eat and drink e.g. making beakers available, ensuring food is within easy reach, use of red tray system

f) inform qualified staff of any changes/deteriorations/improvements in patient condition being able to clearly identify what has changed
- is able to respond in an emergency e.g. using correct procedures for emergency bell, telephone numbers for cardiac arrest
- supports senior and junior colleagues during emergency situations
- is able to promptly collect any emergency equipment/items required by MDT e.g. blood, resus trolley, suction
- is familiar with the checking and assembly of emergency equipment used in department, to support qualified practitioners in its use e.g. use of suction apparatus, oxygen flow meters

g) be aware of the care plan and be able to feedback to qualified staff information on the patient and how the care plan may need to change to meet the patients needs
- evaluate care given to patient e.g status of simple wounds, pressure sores, specific procedures
- participate in future care planning with registered practitioner
- carry out changes in care within sphere of competence following discussion with registered practitioner, setting targets for re-evaluation
- record evaluation of care and any changes in care
**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.
Level Indicators:

a) discusses the individual’s treatment plan and their related condition/illness with the care team and understands his/her own role in delivering interventions and/or treatments within the plan
b) respects individuals’ dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent for the interventions and/or treatments to be undertaken
c) identifies any specific precautions or contraindications to the proposed interventions / treatments and takes the appropriate action
d) prepares for, undertakes and records interventions/treatments correctly, and in line with legislation, policies and procedures and/or established protocols
e) supports and monitors people throughout promptly alerting the relevant person when there are unexpected changes in individuals’ health and wellbeing or risks
f) provides information to the team on how individuals’ needs are changing and feedback on the appropriateness of the individual’s treatment plan when there are issues
g) responds to, records and reports any adverse events or incidents relating to the intervention/treatment with an appropriate degree of urgency.

Level Indicators:

a) discusses the individual’s treatment plan and their related condition/illness with the care team and understands his/her own role in delivering interventions and/or treatments within the plan
b) respects individuals’ dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent for the interventions and/or treatments to be undertaken
c) identifies any specific precautions or contraindications to the proposed interventions / treatments and takes the appropriate action
d) prepares for, undertakes and records interventions/treatments correctly, and in line with legislation, policies and procedures and/or established protocols
e) supports and monitors people throughout promptly alerting the relevant person when there are unexpected changes in individuals’ health and wellbeing or risks
f) provides information to the team on how individuals’ needs are changing and feedback on the appropriateness of the individual’s treatment plan when there are issues
g) responds to, records and reports any adverse events or incidents relating to the intervention/treatment with an appropriate degree of urgency.
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

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
IK1 INFORMATION PROCESSING
Overview

This dimension relates to the processing and management of data and information for specific functional purposes which do not involve analysis or interpretation.

The data/information may be text-based or numerical/statistical and may be processed and managed via a wide range of systems, including computer-based applications (e.g., word processing, spreadsheets, patient information systems), other electronic systems (such as photocopiers) or paper-based systems (e.g., patient records).

Progression through the levels in this dimension is characterised by increasing complexity of:
- the data and information being processed
- the outputs required
- the activities involved (from basic data input, through more complex manipulation and presentation of information, to the development of models and processes for managing data and information)

Second Gateway (Full Outline)
INFORMATION PROCESSING - Level: 2

<table>
<thead>
<tr>
<th>Level Indicators:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) inputs, amends, deletes and modifies data and information accurately and completely consistent with legislation, policies and procedures</td>
</tr>
<tr>
<td>b) establishes requirements and finds requested data/information using agreed procedures and appropriate sources</td>
</tr>
<tr>
<td>c) collates, structures and presents data/information as requested using agreed systems and formats</td>
</tr>
<tr>
<td>d) maintains the integrity of data/information consistent with legislation, policies and procedures</td>
</tr>
<tr>
<td>e) assures the quality of data during modification, structuring and presentation</td>
</tr>
<tr>
<td>f) stores data and information safely and in a way that allows for retrieval within appropriate timescales</td>
</tr>
<tr>
<td>g) keeps the data/information system up to date.</td>
</tr>
</tbody>
</table>

Foundation Gateway (Subset Outline)
INFORMATION PROCESSING - Level: 2

<table>
<thead>
<tr>
<th>Level Indicators:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) inputs, amends, deletes and modifies data and information accurately and completely consistent with legislation, policies and procedures</td>
</tr>
<tr>
<td>b) establishes requirements and finds requested data/information using agreed procedures and appropriate sources</td>
</tr>
<tr>
<td>c) collates, structures and presents data/information as requested using agreed systems and formats</td>
</tr>
<tr>
<td>d) maintains the integrity of data/information consistent with legislation, policies and procedures</td>
</tr>
<tr>
<td>e) assures the quality of data during modification, structuring and presentation</td>
</tr>
<tr>
<td>f) stores data and information safely and in a way that allows for retrieval within appropriate timescales</td>
</tr>
<tr>
<td>g) keeps the data/information system up to date.</td>
</tr>
</tbody>
</table>
Examples Of Application: Data and information might be processed for:
- assessment, diagnosis, care and treatment of patients/clients ie data and information about patients and clients
- buildings and environments
- development and innovation
- education, training and development
- effectiveness of specific treatments, forms of care, lifestyles that promote health and wellbeing etc ie information for the public and users of services
- financial services
- health and wellbeing
- health, safety and security
- management of finances, people, projects or services
- marketing and public relations
- prescribing patterns
- procurement and commissioning
- promotion of equality and diversity
- resource use
- service effectiveness
- systems, vehicles and equipment
- transport and logistics
- workforce analysis

Data and information may be in the following formats:
- electronic (eg spreadsheets, databases, word processing packages)
- printed/written (eg paper based files and records)

Data and information may be:
- raw
- intermediate
- processed

Legislation, policies and procedures may be international, national or local and may relate to:
- accreditation
- clinical negligence
- controls assurance
- data protection and confidentiality
- information
- freedom of information
- records management
- tax and revenue

Actions to keep the data/information system up to date may include:
- making a record of data/information entered into or withdrawn from the system
- recalling data/information which is due for entry/return to the system
- withdrawing data/information from current use when no longer required
- archiving/disposing of withdrawn data/information

Examples of Application: Data and information might be processed for:
- assessment, diagnosis, care and treatment of patients/clients ie data and information about patients and clients
- buildings and environments
- development and innovation
- education, training and development
- effectiveness of specific treatments, forms of care, lifestyles that promote health and wellbeing etc ie information for the public and users of services
- financial services
- health and wellbeing
- health, safety and security
- management of finances, people, projects or services
- marketing and public relations
- prescribing patterns
- procurement and commissioning
- promotion of equality and diversity
- resource use
- service effectiveness
- systems, vehicles and equipment
- transport and logistics
- workforce analysis.

Data and information may be in the following formats:
- electronic (eg spreadsheets, databases, word processing packages)
- printed/written (eg paper based files and records)

Data and information may be:
- raw
- intermediate
- processed

Legislation, policies and procedures may be international, national or local and may relate to:
- accreditation
- clinical negligence
- controls assurance
- data protection and confidentiality
- information
- freedom of information
- records management
- tax and revenue

Actions to keep the data/information system up to date may include:
- making a record of data/information entered into or withdrawn from the system
- recalling data/information which is due for entry/return to the system
- withdrawing data/information from current use when no longer required
- archiving/disposing of withdrawn data/information