

Higher National Unit specification: general information

Unit title: Telehealthcare: Response

Unit code: FX9G 33

Superclass: PA

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Unit purpose

This Unit examines the role and function of Telehealthcare Responders who manage and respond to emergency health, social and environmental needs of individuals. The Unit also reflects the broad areas of the Telehealthcare competency framework and is specifically designed to enable candidates to develop and advance their knowledge, skills and abilities to undertake their job role.

On completion of the Unit the candidate should be able to:

- 1 Examine the role and function of a Telehealthcare Responder.
- 2 Explore the types of Telehealthcare equipment used and the Responders role in sustaining the use of Telehealthcare.
- 3 Explain how to respond to the needs of individuals who use Telehealthcare.

Recommended prior knowledge and skills

It is recommended that candidates should have completed the *Working in Telehealthcare* Unit (FX9F 33) prior to undertaking this Unit. Candidates should have good communication skills, both written and oral; this could be evidenced by the achievement of a communication Unit at SCQF level 4, or equivalent. Alternatively, this could be evidenced by an employer's reference or the process of application and/or pre-course interview. Candidates should also be in a work situation that allows them to demonstrate the Evidence Requirements for this Unit through real work activities.

General information (cont)

Credit points and level

1 Higher National Unit credit at SCQF level 6: (8 SCQF credit points at SCQF level 6*)

*SCQF credit points are used to allocate credit to qualifications in the Scottish Credit and Qualifications Framework (SCQF). Each qualification in the Framework is allocated a number of SCQF credit points at an SCQF level. There are 12 SCQF levels, ranging from Access 1 to Doctorates.

Core Skills

There are opportunities to develop the Core Skill of *Communication* at SCQF level 5 and the Core Skills component of Planning and Organising at SCQF level 6 SCQF in this Unit, although there is no automatic certification of Core Skills or Core Skills components.

Context for delivery

If this Unit is delivered as part of a Group Award, it is recommended that it should be taught and assessed within the subject area of the Group Award to which it contributes.

Higher National Unit specification: statement of standards

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The sections of the Unit stating the Outcomes, Knowledge and/or Skills, and Evidence Requirements are mandatory.

Where evidence for Outcomes is assessed on a sample basis, the whole of the content listed in the Knowledge and/or Skills section must be taught and available for assessment. Candidates should not know in advance the items on which they will be assessed and different items should be sampled on each assessment occasion.

Outcome 1

Examine the role and function of a Telehealthcare Responder.

Knowledge and/or Skills

- ♦ Responder's role and function
- ♦ Communication skills
- Process of responding to a call
- ♦ Telecare and Telehealth local policy and procedures
- ♦ Telecare Responder Performance Indicators
- Managing and protecting information in adherence with legislative frameworks
- ♦ Key holding and local response protocols

Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can:

- Describe the process and communication skills used to respond to Telehealthcare calls.
- Consider the legislative frameworks that govern the use and protection of information.
- Explore the potential risks and control measures to employees responding to health, social and technological issues.

Outcome 2

Explore the types of Telehealthcare equipment used and the Responders role in sustaining the use of Telehealthcare.

Higher National Unit specification: statement of standards (cont)

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Knowledge and/or Skills

- First, second and third generation telehealthcare categorisation
- ♦ Use and function of local telehealthcare products
- Installation and repairs processes

Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can:

- ♦ Explain the role and function of first, second and third generation telehealthcare equipment/devices.
- Identify how to modify a telehealthcare equipment package to meet the needs of an individual.
- Recognise when to provide support and seek guidance in the use/modification of Telehealthcare equipment.

Outcome 3

Explain how to respond to the needs of individuals who use Telehealthcare.

Knowledge and/or Skills

- ♦ Emergency and planned responses to care needs
- ♦ Preparation and adaption to the use of Telecare and Telehealth equipment
- ♦ Behavioural theories
- Life experiences and transitions of user
- Approaches to supporting behaviour change, motivation and concordance with telehealthcare

Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can:

- Explain the differences between emergency and planned situations and the responder's role and function in both situations.
- ♦ Explore the needs of individuals as they prepare and adapt to the use of Telehealthcare in their life.
- ◆ Describe the life experiences and transitions that could disrupt an individual's use of Telehealthcare equipment.
- Describe the approaches used to understand and support people to use Telehealthcare in their life.

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This part of the Unit specification is offered as guidance. The support notes are not mandatory.

While the exact time allocated to this Unit is at the discretion of the centre, the notional design length is 40 hours.

Guidance on the content and context for this Unit

'Telecare is the remote or enhanced delivery of care services to people in their own home or in a community setting by means of telecommunications and computerised services. Telecare usually refers to sensors and alerts which provide continuous, automatic and remote monitoring of care needs, emergencies and lifestyle changes, using information and communication technology (ICT) to trigger human responses, or shut down equipment to prevent hazards' (Joint Improvement Team 2011).

This Unit forms part of the optional section of the PDA in Telehealthcare at SCQF level 6. This Unit is suitable for candidates who are currently working in the field of Telehealthcare, who seek to consolidate their work/learning experience.

Candidates will have the opportunity to develop their knowledge and skills in a variety of ways by reflecting on practical activities, through work experience and coursework.

This Unit refers to the core competencies and skills relevant to a candidate working as a Telehealthcare Responder. This Unit is not intended to standardise the work of individuals employed as Responders. It acknowledges that there will be geographical differences and similarities in terms of service delivery and meeting the needs of individuals. This should be taken into account when tutors and approved centres are assessing and working alongside candidates.

This Unit provides opportunities to develop underpinning knowledge for the following National Occupational Standards in Health and Social Care. This does not provide automatic certification of skills and is dependent on the information produced by the candidate.

- ♦ HSC 233 Relate To, and Interact With, Individuals
- ♦ HSC 229 Gain access to, and ensure individuals homes are secure
- ♦ **HSC 242** Receive and Pass on Messages and Information
- ♦ HSC 240 Contributes to the Identification of the Risk and Danger to Individuals and Others

Outcome 1

The emphasis of this Outcome is on describing the role and function of a Responder. Local policy and procedures should be examined in terms of undertaking the role and function of a Responder. Candidates may benefit from broadly exploring the relevant policy and procedures relating to Telehealthcare and Responders as outlined by the Telecare Standards Association. Candidates should be aware of their local policy and procedures in relation to telecommunication regulations to store, retrieve and manage information. Emphasis should be placed on privacy, security and confidentiality of information held and used appropriately. The candidate should be encouraged to explore the principles outlined in the Data Protection Act 1998 in terms of data access, storage and retrieval.

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Responding to multiple complex variables is one of the roles of a Telehealthcare Responder, therefore it is important for the candidate to reflect on the use of appropriate communication, questioning and listening skills to respond timely and appropriately to each situation. It is recommended that candidates take the opportunity to reflect on the end users experience of using a responder service; this could be achieved by reflection on recorded calls (where applicable). This provides the candidate with an opportunity to reflect on their own skills safely and the skills of listening and questioning over the telephone.

Responsibilities in terms of key holding and lone working should be emphasised in terms of protecting information and the safety of self and others. This is an opportunity for the candidate to explore the potential risks and control measures to employees responding to health, social and technological issues and reflect on their health and safety responsibilities under the law as outlined in the Working in Telehealthcare Unit (FX9F 33). Candidates should examine their local policy and procedures and reflect on their implementation in practice. This will enable candidates to consolidate their knowledge and skills from the mandatory Unit of the PDA in Telehealthcare at SCQF level 6 and/or work experience.

Outcome 2

The emphasis of this Outcome is on the types of equipment used to assist daily living and the Telehealthcare Responders role in sustaining the use of Telehealthcare. It is recommended that the candidate explores the types of equipment outlined under the first, second and third generation Telehealthcare categorisation. First generation Telehealthcare refers to equipment and devices that are activated by the user, eg push button, pendant or pull cord to signify an emergency. Activation of these devices triggers an alarm call to a control centre where an appropriate response is implemented.

Second generation Telehealthcare involves the use of sensors such as smoke alarms and flood detectors. These devices can monitor the home environment, vital signs, physiological measures, and lifestyle. They can collect and transmit information continuously about door opening, bathwater running, the use of electrical appliances, and movement both in and out of the home. This information is gathered within the user's home and transferred remotely to provide care professionals and carers with detailed information around behaviour patterns of individuals. This is a more sophisticated approach to support managing risk and promoting independence.

Third generation Telehealthcare involves the use of broadband, wireless and audio-visual technology. Lifestyle monitoring using advanced sensors and monitors is used to capture real time data and transfer this remotely to a health care professional to assess and make a decision regarding care management. Patterns and predictions can be made about an individual's behaviour and lifestyle leading to reduced incidences of falls, hospital admissions and/or doctor visits. Responding using a wireless device enables the Telehealthcare Responder to communicate with the individual, assess their needs and respond appropriately and timely to the situation identified. Alternatively, non use or altered patterns of use can be signalled to the Telehealthcare Responder or data manager to prompt a response to assess the needs of an individual. Candidates are encouraged to explore the new and emerging technologies in the field of telehealthcare.

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It is recommended that candidates identify how to modify, customise and adapt Telehealthcare equipment to meet the changing needs of individuals. Case scenarios can be used to enable the candidate to reflect on the different types of products and in adherence with the manufacturing guidelines on how to adjust a product to meet the needs of an individual, eg moving a chair sensor from old chair to a new chair; adjusting the volume on a device; fault reporting or resetting a faulty product.

Familiarisation with the different product types can assist the individual and carer to receive the right package of care, facilitate repairs and or contribute to changes in the individual's care plan.

Sustaining the use of the Telehealthcare product is another role and function of the Responder, this involves teaching the user how to operate the equipment and support the use of the device throughout its life cycle. Local policy and procedures should be considered here to determine the local requirements on maintenance inspections and upgrades of products. Removal can result from a number of variables, common examples include the death of the individual or withdrawal of the service as the user requires additional care needs. Case scenarios can be used to enable the candidate to reflect on when to seek guidance and advice on modifying or removing a Telehealthcare device.

Outcome 3

Candidates are encouraged to explore the differences between emergency and planned visits and reflect on the role and function of the Telehealthcare Responder. Consideration should be given to local policy and procedures and candidates should be signposted to previous reading and learning in relation to risk assessment. Key points to raise, in terms of the differences in emergency versus planned, is the exposure to multiple variables requiring the candidate to plan, organise and carry out a task. Using case study examples based on real work activities will enable the candidate to draw upon previous learning and tutors should facilitate discussion around the skills developed and learned from these activities.

Understanding and supporting the needs of individuals is another feature of the responder's role and it is recommended that the candidate reflects on the emotional, physical and social needs of individuals as they prepare and adapt to the use of Telehealthcare in their life. It is suggested that candidates explore briefly behavioural psychological theories, eg preventing and managing stress, life span and stages of development, and behaviour modification. This will enable the candidate to understand the life experiences, transitions and coping mechanisms individuals use when living with long term health conditions or complex physical/social needs.

Case examples can be used to enable the candidate to reflect on some of the issues affecting the individuals they are working with. For example, excessive use or frequent use of equipment/devices is a potential indicator that the equipment is unsuitable for the needs of the individual and/or the individual may require additional support needs to minimise the frequency of use. Candidates should also reflect on workplace examples with other candidates and consider the complex needs of individuals and their relationship with technology.

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Guidance on the delivery of this Unit

This Unit is part of a Professional Development Award in Telehealthcare at SCQF level 6. It is recommended that this Unit is completed following completion of the Working in Telehealthcare Unit (FX9F 33). Alternatively the Unit can be undertaken as a standalone Unit for candidates to support their continued professional development.

Guidance on the assessment of this Unit

It is recommended that candidates are asked to submit three assessments to demonstrate their knowledge, skills and understanding. These assessments should include one voice/oral recording and one portfolio of learning. Assessment for this Unit should involve the use of technology to communicate with and by the candidate.

Tutors should provide feedback electronically to the candidate to encourage them to develop their ICT literacy and communication using technology.

Assessment Guidelines

Outcome 1

It is recommended that the candidate provides evidence that they have met the Evidence Requirements by submitting voice recordings or simulated call recordings from their workplace activities that illustrates them undertaking the role of Telehealthcare Responder. Alternatively in areas where this is not possible to achieve, tutors could provide witness testimony or an observation of practice to support the achievement of the Evidence Requirements. Centres should develop guidance on the content of the voice recording based on the Evidence Requirements for this Outcome. Submission and Assessment feedback by/to the student should be in an electronic format. Examples could be made available to the candidates to guide and prepare them for assessment.

Tutors should provide feedback electronically to the candidate to encourage them to develop their ICT literacy and communication using technology.

All assessment submissions should adhere to the principles of safe storage, access, consent and retrieval of information. No identifiable patient/service information should be presented by the student.

Outcomes 2 and 3

It is recommended that a portfolio of learning is used to assess the Evidence Requirements for Outcome 2 and 3. The candidate could provide a synopsis of the different types of equipment/devices used in the field of telehealthcare and reflect on how it can be modified customised or adapted to meet the needs of individuals. A variety of tools can be used to illustrate this evidence from the use of photographs, brochures, voice or video recording(s) demonstrating the use of the equipment.

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In addition, for Outcome 3, candidates could provide written or oral reflections (voice recordings) and workplace examples which take account of how they responded to the needs of individuals in a variety of situations, eg planned Telehealthcare Responder visit or an emergency response. Candidates should be encouraged to reflect on their workplace learning and knowledge development from this assessment.

Tutors should meet with candidates on at least one occasion to verify that the portfolio is their own work. Alternatively, assessors could provide witness testimony or an observation of practice to support the achievement of the Evidence Requirements. Centres should develop guidance on the content of the portfolio based on the Evidence Requirements for this Outcome. Submission and Assessment feedback by/to the student should be in an electronic format.

All assessment submissions should adhere to the principles of safe storage, access, consent and retrieval of information. No identifiable patient/service information should be presented by the student.

Online and Distance Learning

The emphasis for delivery of this Unit should be on blended learning, this should include options for distance learning, delivery/support by video conferencing, e-learning and face to face contact within SQA approved centres. To meet the needs of the Telehealthcare workforce this Professional Development Award should be delivered on a part-time flexible basis.

Opportunities for developing Core Skills

Candidates will have the opportunity to develop the Core Skill of *Communication* and the Core Skills component of Planning and Organising, although there is no automatic certification of the Core Skills.

Communication (at SCQF Level 5) could be developed through written, oral and technological reporting on the use of effective communication with service users, carers and other professionals.

Planning and Organising (at SCQF level 6) could be developed through a reflective account of responding to an emergency call, modifying and customising equipment to meet the needs of individuals. These scenarios involve exposure to multiple variables requiring the candidate to plan, organise and carry out a task.

Disabled candidates and/or those with additional support needs

The additional support needs of individual candidates should be taken into account when planning learning experiences, selecting assessment instruments, or considering whether any reasonable adjustments may be required. Further advice can be found on our website www.sqa.org.uk/assessmentarrangements

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Indicative Reading

Brownsell, S. (2003) Assitive Technology and Telecare: forging solutions for independent living, Policy Press.

Kerr, B., Cunningham, C., Martin, S. (eds) (2010) Telecare and Dementia: Using Telecare effectively in the support of people with dementia, University of Stirling, Dementia Services development centre.

Kerr, B. and Murray, A. (eds) (2011) Telehealthcare and falls: using telehealthcare effectively in the support of people at risk of falling, University of Stirling, Dementia Services development centre.

Wooton, R., Dimmick, S.L., Kvedar, J.C. (eds) (2006) Home Telehealth: connecting care with the community, Royal Society of Medicine Press.

Web pages

Joint Improvement Team website **www.jitscotland.org.uk** provides a range of up to date resources and guidelines in relation to Telecare.

Telecare Standards Association **www.telecare.org.uk** provides guidance to subscribed organisations and training materials to support service delivery.

History of changes to Unit

Version	Description of change	Date

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General information for candidates

Unit title: Telehealthcare: Response

'Telecare is the remote or enhanced delivery of care services to people in their own home or in a community setting by means of telecommunications and computerised services. Telecare usually refers to sensors and alerts which provide continuous, automatic and remote monitoring of care needs, emergencies and lifestyle changes, using information and communication technology (ICT) to trigger human responses, or shut down equipment to prevent hazards' (Joint Improvement Team 2011).

The purpose of this Unit is to enable you to examine the role and function of Telehealthcare Responders who manage and deal with emergency health, social and environmental needs of individuals. The Unit also reflects on the broad areas of the Telehealthcare competency framework and is specifically designed to enable you to develop and advance your knowledge, skills and abilities to undertake their job role.

It is recommended that you complete the Working in Telehealthcare Unit (FX9F 33) prior to undertaking this Unit. You should also have current work experience as a Telehealthcare Responder.

On completion of the Unit you should be able to:

- 1 Examine the role and function of a Telehealthcare Responder.
- 2 Explore the types of Telehealthcare equipment used and the Responders role in sustaining the use of Telehealthcare.
- 3 Explain how to respond to the needs of individuals who use Telehealthcare.

By undertaking this Unit, you will have the opportunity to develop the Core Skill of *Communication* at SCQF level 5, and the Core Skills component of Planning and Organising, at SCQF level 6 in this Unit, although there is no automatic certification of Core Skills or Core Skills components.

Assessment for this Unit involves you submitting a portfolio of learning and one voice/oral recording regarding your workplace learning as a Telehealthcare Responder. There is an opportunity for you to develop your ICT skills by communicating with your tutor regularly using a computer.