



Higher National Unit specification: general information

Unit title: Telehealthcare: Call Handling

Unit code: FX9H 33

Superclass: PA

Publication date: October 2011

Source: Scottish Qualifications Authority

Version: 01

Unit purpose

This Unit has been developed to support Scotland's National Telehealthcare Education and Training Strategy and workplace competencies. The Unit reflects the areas of Call Handler Competencies outlined in the Telehealthcare Support Staff Competency Framework. It is designed to enable the candidate to apply their knowledge in the context of communication, call management and administration in relation to community alarm, telecare and telehealth service delivery.

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

- 1 Prepare to and practice the skill of call handling.
- 2 Outline the role and function of the alarm receiving centre.
- 3 Outline the call handler's role and responsibilities in relation to the management of information.

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(s) of *Communication* at SCQF level 5, and the Core Skills component of *Planning and Organising* at SCQF level 6 SCQF 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

Unit title: Telehealthcare: Call Handling

Unit code: FX9H 33

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

Prepare to and practice the skill of call handling.

Knowledge and/or Skills

- ◆ Communication skills
- ◆ Call handling techniques
- ◆ Telecommunication regulations
- ◆ Information security management
- ◆ Equality and diversity legislation
- ◆ Health and safety policies and procedures
- ◆ Telecare Services Association Code of Practice — Call Handling
- ◆ Good Practice Guidance on call handling

Evidence Requirements

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

- ◆ Establish, support and end communication with individuals using telephone/telecare/telehealth equipment.
- ◆ Outline the importance of call control and call structure when communicating using telecare and telehealth technology.
- ◆ Outline the techniques used to manage challenging, abusive or inappropriate telephone calls.
- ◆ Describe the process involved in managing calls in the event of an emergency or disaster.

Higher National Unit specification: statement of standards (cont)

Unit title: Telehealthcare: Call Handling

Outcome 2

Outline the role and function of the alarm receiving centre.

Knowledge and/or Skills

- ◆ Role and function of the alarm receiving centre
- ◆ Call Handler responsibilities
- ◆ Types of alarm receiving centres
- ◆ Key Holding and Response Service Code of Practice
- ◆ Local IT policies and procedures
- ◆ Suppliers and manufacturers equipment guidelines
- ◆ Telecare Services Association Code of Practice — Safeguarding
- ◆ Freedom of Information legislation and guidance

Evidence Requirements

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

- ◆ Describe the role and function of the alarm receiving centre and the responsibilities of the call handler.
- ◆ Explain the different types of alarm receiving centres and the associated responsibilities of the call handler.
- ◆ Recognise and adhere to organisational standards for access and use of IT equipment when receiving calls for telecare and telehealth equipment.
- ◆ Explain the process and procedure for the installation of community alarm, telecare and telehealth equipment.

Outcome 3

Outline the call handler's role and responsibilities in relation to the management of information.

Knowledge and/or Skills

- ◆ Caldicott Principles
- ◆ Telecare Services Association Code of Practice — Privacy and Data Protection
- ◆ Data Protection Legislation
- ◆ Data sharing with partnership agencies
- ◆ Protection of Vulnerable Adults legislation
- ◆ Local policies and procedures in relation to access, storage and handling of information
- ◆ Good practice procedures in relation to the handling and processing of confidential information

Higher National Unit specification: statement of standards (cont)

Unit title: Telehealthcare: Call Handling

Evidence Requirements

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

- ◆ Describe the process and procedures in relation to the access, storage and handling of information.
- ◆ Describe how they effectively manage and update active call information.
- ◆ Identify the process and procedures involved in sharing information with colleagues, other organisations and agencies in line with current legislation and guidance.

Higher National Unit specification: support notes

Unit title: Telehealthcare: Call Handling

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

Telehealthcare is the convergence of Telecare and Telehealth to provide a technology-enabled and integrated approach to the delivery of care and health services. Telecare is the continuous, automatic and remote monitoring of real time emergencies and lifestyle changes over time in order to manage the risks associated with independent living.

'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).

Telehealth refers to the use of monitoring and measuring devices which collect information about vital signs (temperature, blood pressure, blood sugar level etc), symptoms or health conditions in the patient's home, and is then sent on from or collected directly from a special device in the home. Clinicians can then be alerted to significant changes in a patient's condition, and the patient advised, or reassured, appropriately. (Joint Improvement Team 2008)

Telehealth is the provision of health services at a distance using a range of technologies. It offers the potential to deliver a range of care options remotely via telephone, mobile phone and broadband, eg involving videoconferencing. Deployed effectively, telehealth improves access to appropriate high quality and effective care, which meets clinical and service standards and enhances the patient's experience of care. Examples of Telehealth include telephone or video consultations to support diagnosis and management, clinical networks and health professional education. (Joint Improvement Team, 2010).

This Unit provides opportunities to develop underpinning knowledge for the following Units in SVQ 2 Health and Social Care. This does not provide automatic certification of skills and is dependent on the information produced by the candidate:

- ◆ **HSC21** — Communicate with, and Complete Records for Individuals
- ◆ **HSC26** — Support Individuals to Access and Use Information
- ◆ **HSC233** — Relate to, and Interact with, Individuals
- ◆ **HSC234** — Ensure Your Own Actions Support the Equality, Diversity, Rights and Responsibilities of Individuals
- ◆ **HSC242** — Receive and Pass on Messages and Information

Higher National Unit specification: support notes (cont)

Unit title: Telehealthcare: Call Handling

The alarm receiving centre for Telecare and Telehealth ensures the delivery of 24 hours, 7 days a week call response/call handling to all activations from community alarms, telecare and telehealth equipment. The call handler at the alarm receiving centre is the first point of contact for the service user, and due to the nature of the service they will be dealing with vulnerable people sometimes in life threatening situations. They would have responsibility for taking essential details about the service user's condition and location, making the decision on the type of assistance and/or response needed. The call handler needs to be able to communicate effectively on complex and sensitive issues. They should be able to record information, understand the significance of what they record and how it is recorded in maintaining the data base for each service user. Call handlers may have other associated duties, such as ensuring routine and regular testing, programming equipment and dealing with any faults and/or repairs of equipment.

There are variations in the role and responsibilities for Alarm Receiving Centres (ARCs) they are not all dedicated to the provision of a Community Alarm/Telecare/Telehealth Service. The ARC which are not dedicated will provide a call handling service for all out of hours emergency calls, for all or most council services (ie housing repairs, roads help lines, environmental health, and monitoring local CCTV screens) as well as Community Alarm, Telecare and Telehealth Services.

Outcome 1

The emphasis of this Outcome is to explain how a call handler would communicate and provide assistance to a service user, using telecare or telehealth equipment. Candidates may benefit from broadly exploring the relevant policy and procedures relating to Telecare, Call Handling as outlined by the Telecare Services Association Code of Practice. Candidates should be aware of their local policy and procedures in relation to Telecommunications regulations to monitor and record calls. They should also consider the relevant national, local and organisational requirements relating to equality and diversity, discrimination, challenging behaviour, health and safety, information security, telecommunications regulations, communication and call handling techniques.

Higher National Unit specification: support notes (cont)

Unit title: Telehealthcare: Call Handling

The role of call handler requires good communication, interpersonal skills, a competent level of keyboard skills and a good working knowledge of information technology/database systems. Emphasis should be placed on the candidates skills to gather information effectively using empathetic listening and questioning skills. Consideration should be given to the ability of the call handler to remain in control of the call by providing reassurance to the caller to ensure that the most difficult and/or distressed caller can be progressed to a quick and satisfactory conclusion. When concluding the call/interaction the call handler should ensure they provide clear information/reason for ending the call and they advise the individual/service user of action taken. The call handler should be able to identify the type of telecare or telehealth trigger or device used to establish the call, eg pendant, smoke alarm, door contacts, bed monitor, etc and provide the appropriate assistance and/or response protocols. Consideration should be given to the type of response or action required when the service user is unable to communicate. It is important that the call handler understands the limit of their role responsibilities and know when to escalate the call. The alarm receiving centre has processes and procedures in place to deal with emergencies, ie the telephones lines going down, emphasis should be placed on the call handler taking the appropriate action in the event of an emergency or disaster.

Outcome 2

Candidates should explore the role and function of the alarm receiving centre; ensuring consideration is given to the organisational standards for access and use of IT equipment. Candidates may benefit from firstly looking at the legal, organisational and policy requirements relevant to the suppliers and manufacturers equipment guidance. They should also consider the relevant national, local, professional and organisational requirements relating to the responsibilities of alarm receiving centre for call handling, IT policies and procedures, suppliers and manufacturers equipment guidance, freedom of information and keyholding and response. Candidates may benefit from broadly exploring the relevant policy and procedures for Telecare Safeguarding outlined in the Telecare Services Association Code of Practice.

The alarm receiving centre may have associated responsibilities and not be dedicated to call handling for community alarm, telecare and telehealth equipment; therefore, consideration should be given to the candidate's knowledge of the policies and procedures to provide appropriate outcomes relevant to the needs of all service user calls. The alarm receiving centre must provide a 24 hour 7 days a week response to all community alarm, telecare and telehealth equipment. Call handlers are required to deal with emergency calls from service users, contact emergency services, contact local responder teams/next of kin/carers and families/keyholders, programme equipment, fault reporting, complaints, security monitoring, lone worker monitoring, repairs reporting for housing associations and out of hours calls for other organisations. Calls received from community alarm, telecare and telehealth equipment are treated as potential emergencies until the underlying call reason is established as a non-emergency or an outcome is known. Emphasis should be placed on offering practical and emotional support as well as immediate emergency assistance. The call handler should use equipment controls and interpretation services where applicable to allow communication to be quickly established and the call reasons determined. Understanding the protocols associated in answering calls from and programming telecare and telehealth equipment is an essential part of the call handler role.

Higher National Unit specification: support notes (cont)

Unit title: Telehealthcare: Call Handling

Outcome 3

The emphasis of this Outcome is on describing the call handler's responsibility in relation to the management of information. Candidates may benefit from firstly looking at the relevant national, local, and organisational requirements relating to the protection of vulnerable adults, Caldicott Principles, privacy and data protection, data sharing, confidentiality, access, storage and handling of information. The call handler is required to update and maintain service user information when dealing with the call. As the information will be used when contacting the emergency services/local responder teams/family/next of kin/carers it is important that they both record and pass on information accurately to ensure the service user receives the appropriate response/outcome. Emphasis should be placed on managing the information appropriately when sharing the data with other agencies or partners to avoid duplication. The information should be accurate, accessible and readable.

The Caldicott Report set out a number of general principles that health and social care organisations should use when reviewing its use of client information and these are set out below:

Principle 1: Justify the purpose(s) — every proposed use or transfer of personally identifiable information within or from an organisation should be clearly defined and scrutinised, with continuing uses regularly reviewed by the appropriate guardian.

Principle 2: Do not use personally identifiable information unless it is absolutely necessary — personally identifiable information items should not be used unless there is no alternative.

Principle 3: Use the minimum personally identifiable information — where the use of personally identifiable information is considered to be essential, each individual item of information should be justified with the aim of reducing identifiably.

Principle 4: Access to personally identifiable information should be on a strict need to know basis — only those individuals who need access to personally identifiable information should have access to it.

Principle 5: Everyone should be aware of their responsibilities — action should be taken to ensure that those handling personally identifiable information are aware of their responsibilities and obligations to respect patient/client confidentiality.

Principle 6: Understand and comply with the law — every use of personally identifiable information must be lawful. Someone in each organisation should be responsible for ensuring that the organisation complies with legal requirements.

Higher National Unit specification: support notes (cont)

Unit title: Telehealthcare: Call Handling

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 to support candidates' continued professional development.

It is recommended that candidates who are using this Unit as a standalone Unit, and have not undertaken the Mandatory Unit in relation to this award should consider briefly exploring communication skills, methods of communication and barriers to communication.

Guidance on the assessment of this Unit

Candidates should be encouraged to present their assessment using a format that suits their individual learning style, ie written or oral recording/video evidence (eg video diary).

Tutors should provide feedback electronically to the candidate to encourage them to develop their ICT literacy and communication using technology. Supporting evidence for the candidate's workplace mentor/supervisor could be used to verify the activity.

Assessment Guidelines

Outcome 1

It is recommended that the candidate provides evidence that they have met the evidence requirements by submitting a voice recordings or simulated call recordings from their workplace activities that illustrates them undertaking the role of a Call Handler. Alternatively in areas where this is not possible to achieve, tutors could provide witness testimony or direct observation of practice to support the achievement of the evidence requirements. Call review documents could also be used as evidence. Verification is recommended from a workplace supervisor/mentor. Guidance should be provided for the candidate, workplace verifier and tutor to meet the requirement for this assessment.

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.

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.

Higher National Unit specification: support notes (cont)

Unit title: Telehealthcare: Call Handling

Outcome 2

It is recommended that a reflective account of no more than 1,000 words or equivalent could be used to gather evidence to describe the role and function of the alarm receiving centre, detailing their responsibilities as a Call Handler. In addition evidence could be gathered using the voice recording or simulated voice recording within the workplace to demonstrate the candidate's ability to perform the role of a call handler. Verification is recommended from a workplace supervisor/mentor. 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 are encouraged to develop guidance on the content of the reflective account and the voice recordings based on the Evidence Requirements for this Outcome. Submission and Assessment feedback by/to the student should be in electronic format. Examples could be made available to the candidates to guide and prepare them for assessment. 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.

Outcome 3

It is recommended that the candidate provides evidence that they have met the Evidence Requirements by undertaking a reflective account of no more than 1,000 words or equivalent of a simulated scenario/or actual scenario where they have demonstrated the process and procedures for the management of individuals information, examples of documentation could be included. Verification is recommended from a workplace supervisor/mentor. Guidance should be provided for the candidate, workplace verifier and tutor to meet the requirement for this assessment.

Centres should develop guidance on the content of the reflective account and the voice recordings based on the Evidence Requirements for this Outcome. Submission and Assessment feedback by/to the student should be in electronic format. Examples could be made available to the candidates to guide and prepare them for assessment. 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.

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.

Higher National Unit specification: support notes (cont)

Unit title: Telehealthcare: Call Handling

Opportunities for developing Core Skills

Candidates will have the opportunity to develop the Core Skills 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 answering and dealing with 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

Indicative Reading

Brownsell, S. (2003) *Assistive 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.

Scottish Centre for Telehealth and Telecare www.sctt.scot.nhs.uk provides support and advice to NHS boards and help evaluate the potential benefits of new technologies.

History of changes to Unit

Version	Description of change	Date

© Scottish Qualifications Authority 2011

This publication may be reproduced in whole or in part for educational purposes provided that no profit is derived from reproduction and that, if reproduced in part, the source is acknowledged.

Additional copies of this Unit specification can be purchased from the Scottish Qualifications Authority. Please contact the Business Development and Customer Support team, telephone 0303 333 0330.

General information for candidates

Unit title: Telehealthcare: Call Handling

Telehealthcare is the convergence of Telecare and Telehealth to provide a technology-enabled and integrated approach to the delivery of care and health services. Telecare is the continuous, automatic and remote monitoring of real time emergencies and lifestyle changes over time in order to manage the risks associated with independent living.

'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).

Telehealth refers to the use of monitoring and measuring devices which collect information about vital signs (temperature, blood pressure, blood sugar level, etc), symptoms or health conditions in the patient's home, and is then sent on from or collected directly from a special device in the home. Clinicians can then be alerted to significant changes in a patient's condition, and the patient advised, or reassured, appropriately. (Joint Improvement Team, 2008)

Telehealth is the provision of health services at a distance using a range of technologies. It offers the potential to deliver a range of care options remotely via telephone, mobile phone and broadband eg involving videoconferencing. Deployed effectively, telehealth improves access to appropriate high quality and effective care, which meets clinical and service standards and enhances the patient's experience of care. Examples of Telehealth include telephone or video consultations to support diagnosis and management, clinical networks and health professional education. (Joint Improvement Team, 2011)

The alarm receiving centre for Telecare and Telehealth ensures the delivery of 24 hours, 7 days a week call response/call handling to all activations from community alarms, telecare and telehealth equipment. The call handler at the alarm receiving centre is the first point of contact for the service user, and due to the nature of the service they will be dealing with vulnerable people sometimes in life threatening situations. They would have responsibility for taking essential details about the service user's condition and location, making the decision on the type of assistance and/or response needed. The call handler needs to be able to communicate effectively on complex and sensitive issues. They should be able to record information, understand the significance of what they record and how it is recorded in maintaining the data base for each service user. Call handlers may have other associated duties, such as ensuring routine and regular testing, programming equipment and dealing with any faults and/or repairs of equipment.

There are variations in the role and responsibilities for Alarm Receiving Centre (ARC) they are not all dedicated to the provision of a Community Alarm/Telecare/Telehealth Service. The ARC which are not dedicated will provide a call handling service for all out of hours emergency calls, for all or most council services (ie housing repairs, roads help lines, environmental health, and monitoring local CCTV screens.) as well as Community Alarm, Telecare and Telehealth Services.

General information for candidates (cont)

Unit title: Telehealthcare: Call Handling

This Unit has been designed and developed to support Scotland's National Telecare Strategy and workplace competencies in relation to Telehealthcare. The Unit reflects the areas of Call Handler Competencies outlined in the Telehealthcare Support Staff Competency Framework, it consolidates the knowledge gained from the core Unit of the Group Award and is designed to enable you to apply your knowledge in the context of communication, call management and administration in relation to community alarm, telecare and telehealth.

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 call handler.

On completion of the Unit you should be able to:

- 1 Prepare to and practice the skill of call handling
- 2 Outline the role and function of the alarm receiving centre
- 3 Outline the call handler's role and responsibilities in relation to the management of information.

By undertaking this Unit, you will have the opportunity to develop the Core Skill (s) 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 should involve the use of technology to communicate with and by the tutor. Assessments will examine your workplace experience of working as a call handler within a telehealthcare alarm receiving centre.