

About this Unit

This standard is about drawing on the resources of primary, secondary and community teams for the benefit of individuals who prefer to receive their treatment away from a hospital setting, usually at home. Some individuals may be fairly self-governing with their treatments but will require the support of these teams to enable them to remain independent.

Users of this standard will need to ensure that practice reflects up to date information and policies.

Your **knowledge and understanding** will be specifically related to legal requirements and codes of practice and conduct applicable to your job, and the NHS Knowledge and Skills Framework. This will relate to your work activities; the job you are doing, and the setting, eg in hospital and community, domiciliary, residential care, and the individuals you are working with.

Values — the values underpinning this Unit are embedded within the 2009 NHS Code of Conduct for Health Care Support Workers. These are stated in full within the Assessment Strategy and Guidance document for the awards.

Key Words and Concepts — a glossary of definitions, key words and concepts used in this Unit is contained in the Assessment Strategy and Guidance document.

In occupational standards it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the standards, may be used in a very particular way. **You should read the Assessment Strategy and Guidance document before you begin working with the standards and refer to it if you are unsure about anything in the Unit.**

Specific Evidence Requirements for the Unit

It is essential that you adhere to the Evidence Requirements for this Unit

SPECIFIC EVIDENCE REQUIREMENTS FOR THIS UNIT
Simulation:
<ul style="list-style-type: none"> ◆ Simulation is NOT permitted for any part of this Unit. ◆ The following forms of evidence ARE mandatory: ◆ Direct Observation: Your assessor or expert witness must observe you in real work activities. Their confirmation of your practice will provide evidence for a significant amount of the performance criteria in this Unit. For example, how you ensure consistent, up to date and accurate information is available to all teams and individuals. ◆ Professional discussion: Describes your actions in a particular situation and reflect on the reason(s) why you practice that way. For example, how you obtain and pass on information to all necessary individuals and teams.
Competence of performance and knowledge could also be demonstrated using a variety of evidence from the following:
<ul style="list-style-type: none"> ◆ Reflective Account: These are written pieces of work which allow you to reflect on the course of action you took in a specific situation to identify any learning from the piece of work and to describe what you might do differently in the light of your new knowledge. ◆ Questioning/professional discussion: May be used to provide evidence of knowledge, legislation, policies and procedures which cannot be fully evidenced through direct observation or reflective accounts. In addition your assessor/mentor or expert witness may also ask questions to clarify aspects of your practice. ◆ Expert Witness: A designated expert witness, eg a senior member of staff, may provide a direct observation of your practice, or record a professional discussion they have held with you on a specific piece of practice. ◆ Witness Testimony: Can be a confirmation or authentication of the activities described in your evidence which your assessor or mentor has not seen. ◆ Products: These can be any record that you would normally use within your normal role, eg you should not put confidential records in your portfolio; they can remain where they are normally stored and be checked by your assessor and internal verifier. ◆ Prior Learning: You may be able to use recorded prior learning from a course of training you have attended within the last two years. Discussion on the relevance of this should form part of your assessment plan for each Unit. ◆ Simulation: There may be times when you have to demonstrate you are competent in a situation that does not arise naturally through your work role, eg dealing with violent or abusive behaviour. The Evidence Requirements in each Unit provide specific guidance regarding the use of simulation.
GENERAL GUIDANCE
<ul style="list-style-type: none"> ◆ Prior to commencing this Unit you should agree and complete an assessment plan with your assessor which details the assessment methods you will be using, and the tasks you will be undertaking to demonstrate your competence. ◆ Evidence must be provided for ALL of the performance criteria, ALL of the knowledge. ◆ The evidence must reflect the policies and procedures of your workplace and be linked to current legislation, values and the principles of best practice within the Health Care sector. This will include the National Service Standards for your areas of work. ◆ All evidence must relate to your own work practice.

KNOWLEDGE SPECIFICATION FOR THIS UNIT

Competent practice is a combination of the application of skills and knowledge informed by values and ethics. This specification details the knowledge and understanding required to carry out competent practice in the performance described in this Unit.

When using this specification **it is important to read the knowledge requirements in relation to expectations and requirements of your job role.**

You need to provide evidence for ALL knowledge points listed below. There are a variety of ways this can be achieved so it is essential that you read the ‘knowledge evidence’ section of the Assessment Guidance.

You need to show that you know, understand and can apply in practice:	Enter Evidence Numbers
1 What equipment and materials are needed by the individual who is receiving treatment at home.	
2 The common problems related to equipment and materials which individuals may encounter when carrying out treatment at home and how they should deal with these.	
3 The effects of dependence and independence on the individual, carers and the provision of the service.	
4 The significance of an individual’s care plan.	
5 How the individual can adapt the treatment to their personal needs and lifestyle without compromising the treatment.	
6 How individuals should obtain the materials and equipment they need.	
7 The role and capability of primary, secondary and community and teams.	
8 Ways of contacting teams available to specific individuals.	
9 The preferences of individuals (eg in the way they like to be supported, how much of the procedure they take charge of themselves).	
10 The safe conditions required for effective treatment in a setting outside of the hospital environment.	
11 Organisational policy and procedure for dealing with emergency calls from individuals and carers.	
12 The communication skills required in complicated and sensitive situations.	
13 How to obtain and record accurate information about individuals.	
14 Recording and communication of agreements and other information between members of the multidisciplinary teams in the two locations.	
15 The different features services must have to meet people’s gender, culture, language or other needs.	

FN99 04 (GEN44) Liaise between primary, secondary and community teams

Performance Criteria		DO	RA	EW	Q	P	WT	PD
		1	Ensure that all teams and individuals dealing with the individual have information that is consistent, up-to-date and accurate.					
2	Seek and gain permission from individual and carer where appropriate, to provide relevant information about them to teams that can provide support.							
3	Ensure that the individual is aware of the variety of people that are supporting and may contact them.							
4	Make sure that teams involved are aware of the individual's needs, goals and aspirations and the expectations they have of remaining independent.							
5	Pass on to other teams important information from the individual about the detail, sources and manner of the support they wish to receive.							
6	Contact teams to obtain their help in dealing with changes in the individual's circumstances.							
7	Identify and agree: (a) arrangements for contact in order to establish and maintain relationships (b) who has lead responsibility for supporting the individual (c) the roles and responsibilities of other individuals and teams (d) the arrangements for working with the individual (e) the potential opportunities and benefits that can arise from the co-operation between the teams							
8	Ensure collaborative working arrangements comply with legal, regulatory and organisational policies and practices.							
9	Explore any potential conflicts between those who are providing services and develop strategies to deal with them.							

DO = Direct Observation
EW = Expert Witness
PD = Professional Discussion

RA = Reflective Account
P = Product (Work)

Q = Questions
WT = Witness Testimony

To be completed by the candidate

I SUBMIT THIS AS A COMPLETE UNIT

Candidate's name:

Candidate's signature:

Date:

To be completed by the assessor

It is a shared responsibility of both the candidate and assessor to claim evidence, however, it is the responsibility of the assessor to ensure the accuracy/validity of each evidence claim and make the final decision.

I CERTIFY THAT SUFFICIENT EVIDENCE HAS BEEN PRODUCED TO MEET ALL THE ELEMENTS, PCS AND KNOWLEDGE OF THIS UNIT.

Assessor's name:

Assessor's signature:

Date:

Assessor/Internal verifier feedback

To be completed by the internal verifier if applicable

This section only needs to be completed if the Unit is sampled by the internal verifier

Internal verifier's name:

Internal verifier's signature:

Date: