

About this Unit

This standard covers undertaking the screening of hearing in new born infants. This screening might take place in a variety of settings, including hospital, the baby's home, a clinic or a Health Visitor's surgery, GP surgery or audiology clinic. It will involve the use of specific equipment, and the liaison with parents, other staff and health professionals.

Because of the nature of the investigation this function will only be undertaken by designated individuals who must always work within agreed protocols.

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 obtain information, check identity and confirm the activity before undertaking the screening process. ◆ Professional discussion: Describes your actions in a particular situation and reflect on the reason(s) why you practice that way. For example, how you keep the parents involved and informed throughout the screening.
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 The current European and National legislation, national guidelines, organisational policies and protocols in accordance with Clinical/Corporate Governance which affect your work practice in relation to undertaking a newborn hearing screen.	
2 Your responsibilities and accountability in relation to the current European and National legislation, national guidelines and local policies and protocols and Clinical/Corporate Governance.	
3 The duty to report any acts or omissions in care that could be detrimental to yourself, other individuals or your employer.	
4 The importance of working within your own sphere of competence and seeking advice when faced with situations outside your sphere of competence.	
5 The importance of applying standard precautions and the potential consequences of poor practice.	
6 The following regarding consent: (a) the concept of informed choice (b) rationale for consent and who can give it (c) valid consent and parental responsibility	
7 Your role in the maintenance of a safe environment	
8 Security issues relevant to the newborn hearing screening process and care of the newborn.	
9 The general rationale behind screening programmes.	
10 The typical interventions for children with hearing impairment.	
11 The appropriate use of interpreters.	
12 The structure of the ear and physiology of hearing.	
13 Common types and causes of hearing impairment.	
14 What is a family history and how to obtain it.	
15 The value of new born hearing screening for the baby and family.	
16 The roles of others directly involved at the identification and management of a child diagnosed with hearing impairment.	
17 All personnel involved in the general care and support of newborn babies and parent/s.	
18 The Deaf Community in terms of potentially differing expectations and language use.	
19 The equipment required in terms of function and maintenance.	

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You need to show that you know, understand and can apply in practice:	Enter Evidence Numbers
20 The screening protocols.	
21 The equipment protocols.	
22 What screening is and the limitations of screening.	
23 The newborn hearing screening process.	
24 The possible outcomes of screens and how you will deal with these.	
25 The next stages of the screening, including referral, if no clear responses are obtained.	
26 Why you must document all details, including outcomes.	
27 Why and how you maintain confidentiality.	
28 Family-friendly issues.	
29 The information provided for the procedure.	
30 How and when to use the information.	
31 The importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff.	

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Performance Criteria		DO	RA	EW	Q	P	WT	PD
1	Obtain all the necessary information about the mother and baby before approaching the parent/s.							
2	Check the individual's identity and confirm the planned activity.							
3	Check whether it is appropriate/convenient to undertake the screen with the appropriate staff, where necessary.							
4	Check that it is convenient to conduct the screen with the parent(s) and establish a rapport with the baby's parents in order to give reassurance and to gain their trust and confidence.							
5	Introduce the newborn hearing screening and check if it is convenient with the parent/s to discuss the screen and try to establish a rapport, establishing your identity.							
6	Provide parent/s with all information, including: (a) an explanation of the procedure (b) why it is being offered (c) steps involved in the screening process (d) any potential further action							
7	Answer any questions about the screen as promptly as possible within your role.							
8	Refer all questions outside your responsibility or knowledge, or any concerns you may have in relation to the mother and babies health and wellbeing, to a relevant member of staff immediately.							
9	Obtain valid consent/decline from the parent(s) following agreed protocols: (a) for the screening to take place (b) for data access and transfer							
10	Ensure security, privacy and quiet as much as possible when the screen is taking place.							
11	Handle the baby in a comfortable and safe manner at all times.							
12	Ensure the baby's clothing is adjusted as appropriate before and after the screening.							
13	Screen the baby's hearing using the equipment and screen protocols appropriately.							

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Performance Criteria	DO	RA	EW	Q	P	WT	PD
14 Accurately document all appropriate parent and baby details, including screen outcomes when completed, in the appropriate records, including IT systems where used, maintaining confidentiality at all times.							
15 Inform the parent(s) what is happening throughout the procedure where possible and involve them throughout the procedure as appropriate.							
16 Give appropriate information to parents at the end of the procedure and remind them of the next steps in the process.							
17 Follow the appropriate procedures when you have obtained the results from the screen for: (a) clear responses from both ears (b) no clear responses from one or both ears (c) follow procedures for follow-up appointments as required							

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: