Arrangements for:

Professional Development Award in Telehealthcare

at SCQF level 6

Group Award Code: GE3G 46

Validation date: November 2011

Date of original publication: November 2011

Version: 01

Acknowledgement

History of changes

It is anticipated that changes will take place during the life of the qualification, and this section will record these changes. This document is the latest version and incorporates the changes summarised below.

Version number	Description	Date	Authorised by

Contents

1 Introduction

This is the Arrangements Document for the new Group Award: Professional Development Award (PDA) in Telehealthcare at Scottish Credit and Qualification Framework (SCQF) Level 6 which was validated in November 2011. This document includes background information on the development of the Group Award, its aims, guidance on access, details of Group Award structure, assessment and verification and guidance on delivery.

This new Group Award has been designed to provide a robust and certificated award which seeks to improve the practice of telehealthcare support staff. It allows candidates who wish to further develop their skills in an emerging field of practice an opportunity to gain formal recognition of their knowledge and options for continuing professional development.

2 Rationale for the development of the Group Award

2.1 Defining Telehealthcare

Telehealthcare is a relatively new term in Scotland, and one which is often used interchangeably with the terms telecare and telehealth. For the purposes of this award, the following definitions, developed by the Scottish Centre for Telehealth and Telecare, have been applied:

Telecare is the remote or enhanced delivery of care services to people in their own home or 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.

Telehealth is the provision of health services at a distance using a range of digital technologies. Examples of telehealth include video consultations to support diagnosis and management, clinical networks and health professional education.

Telehealthcare is the convergence of telecare and telehealth to provide a technology-enabled and integrated approach to the delivery of effective, high quality health and care services. It can be used to describe a range of care options available remotely by telephone, mobile, broadband and videoconferencing. There is accelerating convergence between telecare and telehealth technologies, with the introduction and expansion of Long Term Condition's monitoring as part of the 'telehealthcare' package available in a person's home, and as part of falls prevention and management.

2.2   Rationale

The important role of telehealthcare in supporting the delivery of national strategic initiatives such as Shifting the Balance of Care and Better Health and Better Care has been increasingly promoted within the Scottish Government, Health Boards, housing and social care partnerships over the last 5 years. New models of more effective and efficient service delivery which are supported and facilitated by technology are anticipated to become increasingly prevalent.

In August 2006, the Scottish Government's Joint Improvement Team (JIT) announced a national Telecare Development Programme (TDP), and made an initial grant of £8m available to all 32 local health and local authority partnerships across Scotland. The five year Programme ended in March 2011, with a total investment of £20.35 million in the development of telecare services, delivered to 43,655 new users in Scotland.

During this period local authority and health partnerships developed telecare services in ways which targeted localised need and priorities, supporting a wide range of people to remain living safely within their communities with tailored support mechanisms. Many partnerships also reported progressing 'telehealthcare' — ie the use of both telecare and telehealth technologies in, and outwith, the service user's home.

Telehealthcare is now regarded as being particularly effective in supporting:

♦   a reduction in unscheduled admissions to hospital
♦   a reduction in the length of stays within hospitals and care homes
♦   providing equitable services for patients in remote and rural areas
♦   improving access to services
♦   self-management (care of long term conditions)
♦   unpaid carers to continue in their caring role

As part of the development of a national Telehealthcare Education and Training Strategy, published by JIT in March 2010, the need to develop an accredited award for telehealthcare support staff in Scotland was identified following consultation with employers and other key stakeholders. The consultation highlighted that there was no formal award available in the UK relevant to the specific skills required by support staff working in the telehealthcare service sector.

In order to clearly identify the skills and competencies required by the telehealthcare workforce, a Competency Framework for Telehealthcare Support Staff was published by the Joint Improvement Team (JIT) in November 2010 and this was subsequently used to inform the structure and content of this award.

A Qualification Design Team (QDT) was established in February 2011 (see Appendix 1 for details of members) and it undertook further research and consultation in the sector to establish the views of individuals and services on the development of the PDA.

The consultation sought the views of telehealthcare specialist and providers of telehealthcare services across Scotland on the content and structure of

the award. The consultation involved a questionnaire, sent out to 32 Scottish health and social care partnerships in July 2011, and a consultation focus group involving members of the Scottish Telecare Learning Network in August 2011.

The consultation process identified that the PDA in Telehealthcare at SCQF level 6 would be well received and that the structure and content of the award was relevant to the service sector and fit for purpose.

A key point raised in the consultation focus group discussion was the use of the word 'Telehealthcare' for the award title. The focus group considered the alternative title 'Telehealth and Telecare' and the group consensus was that the title 'Telehealthcare' should be retained as it reflects current efforts to integrate telecare and telehealth services in the home.

The need to ensure that the PDA would be accessible to all telehealthcare staff, regardless of their geographical location, was also identified as a key requirement for the delivery options for the Group Award.

The key outcome from the consultation was that service providers were of the view that the PDA would address a priority need for relevant certificated educational opportunities for support staff delivering telehealthcare services.

2.3 Target Groups

This Group Award is aimed at candidates who are experienced in telehealthcare service delivery and who have either no other formal qualifications, or hold qualifications unrelated to this area of service delivery.

Telehealthcare support staff can be categorised into three distinct groups according to their job role:

♦ Equipment Installation and maintenance staff — those individuals who install and maintain telehealthcare equipment, train service users and carers on equipment use.

♦ Call Handlers — those individuals who are the first point of contact for the service user in the event of a telehealthcare alert and who co-ordinate an appropriate response.

♦ Paid Responders — those individuals who attend the service user's home to deal with telehealthcare alerts and/or identify the need for another service intervention, eg ambulance, doctor, etc.

The Group Award will enable support staff working in telehealthcare to evidence knowledge in their respective job roles; provide opportunities for career progression and for continuous professional development.

The QDT acknowledged that some telehealthcare support staff undertake more than one of the above roles, therefore the award has been structured in a way which enables candidates to undertake additional Units as part of their continuous professional development activities.

2.4   Continuous Professional Development (CDP)

The Group Award is intended to promote employment opportunities and job mobility for telehealthcare staff through the acquisition of a qualification which is specific to their job role. Once the candidate has successfully achieved the PDA, they would have the opportunity to undertake the remaining two optional Units as CPD opportunities. The PDA is also designed to offer opportunities for candidates to undertake individual Units in the Group Award as part of certificated professional development.

Achievement of the PDA in Telehealthcare at SCQF level 6 (GE3G 46) may offer an opportunity to candidates to progress to further professional qualifications and to seek some recognition of prior learning from their studies.

Candidates who successfully complete the PDA in Telehealthcare at SCQF level 6 may seek to progress to:

♦   SVQs in Health and Social Care levels 2 and 3
♦   HNC Social Care
♦   HNC Healthcare
♦   Relevant HEI qualification

It should be noted that entry will be at the discretion of the receiving institution and dependent on the individual candidate's circumstances.

2.5 Links to National Standards

The tables below show a mapping of this PDA to Health and Social Care National Occupational Standards.

The mandatory Working in Telehealthcare Unit is based on the generic knowledge that underpins the delivery of a safe and effective telehealthcare service.

Working in Telehealthcare (FX9F 33)	Health and Social Care National Occupational Standards
	♦ **HSC21** Communicate with and complete records for individuals ♦ **HSC22** Support the health safety of yourself and individuals ♦ **HSC24** Ensure your own actions support the care, protection and well being of individuals. ♦ **HSC233** Relate to, and interact with, individuals ♦ **HSC234** Ensure your own actions support the equality, diversity and rights and responsibilities of individuals.

Telehealthcare: Installation, Maintenance and Repair (FX9J 33)	Health and Social Care National Occupational Standards
	♦ **HSC370** Support individuals to communicate using technology ♦ **HSC229** Gain access to, and ensure individuals' homes are secure ♦ **HSC32** Promote, monitor and maintain health, safety and security in the working environment ♦ **HSC343** Support individuals to live at home ♦ **HSC344** Support individuals to retain, regain and develop the skills to manage their lives and environment.

Telehealthcare: Call Handling (FX9H 33)	Health and Social Care National Occupational Standards
	♦ **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.

Telehealthcare: Response (FX9G 33)	Health and Social Care National Occupational Standards
	♦ **HSC233** Relate to, and interact with, individuals ♦ **HSC229** Gain access to, and ensure individuals homes are secure ♦ **HSC242** Receive and pass on messages and information ♦ **HSC240** Contributes to the identification of the risk and danger to individuals and others.

2.6 Links to Other Awards within the Current Framework of Qualifications

All Units within the PDA have been signposted to relevant SVQ Health and Social Care level 2 and 3 Units; therefore by undertaking the PDA candidates may also be gathering evidence for the knowledge components of the SVQ Health and Social Care level 2 and possibly level 3.

It is important to note that the PDA in Telehealthcare at SCQF level 6 does not provide automatic certification of skills and is dependent on the evidence produced by individual candidates. Similarly, candidates who have already completed the SVQ Health and Social Care level 2 may be able to use components of their portfolio towards the achievement of the PDA Units. Candidates should speak to their assessor/tutor if they would like to seek Recognition of Prior Learning (RPL).

3 Aims of the Group Award

The overall aim of this award is to provide an opportunity for telehealthcare support staff to attain a qualification that is wholly relevant to their job role, skills and competencies.

3.1 General aims of the Group Award

The general aims of the award are to:

♦ Develop core/transferrable skills in Communication, Problem Solving, Working with Others and Information and Communication Technology

♦ Develop skills in telehealthcare assessment, problem solving and reviewing

♦ Enhance employability in the telehealthcare services sector

♦ Enable progress within the Scottish Credit Qualification Framework (SCQF)

♦ Strengthen personal effectiveness, learning and study skills

♦ Improve the standard and consistency of telehealthcare service delivery

3.2 Specific aims of the Group Award

The specific aims of the award relate to the Outcomes identified below. Candidates who successfully complete the award will have shown clear evidence of their ability to:

♦ Demonstrate specific knowledge of telehealthcare service delivery

♦ Demonstrate specific skills in telehealthcare installations and/or call handling and/or response

♦ Show awareness of risk, legislation and professional values in relation to telehealthcare service delivery

♦ Demonstrate knowledge and compliance in relation to policies, procedures and best practice relevant to telehealthcare service delivery

♦ Improve individual professional effectiveness in telehealthcare service delivery

♦ Improve telehealthcare service standards and delivery

4 Access to Group Award

Candidates are not required to have any formal qualifications prior to embarking on the PDA; however some candidates may possess qualifications from a wide variety of settings. Ultimately, entry on to the award is at the discretion of centres delivering the Group Award.

Centres must ensure that candidates are in an appropriate job role to be able to meet the Evidence Requirements in the Units.

They will, however, be expected to meet the following requirements before embarking on the award:

♦ Candidates wishing to undertake this award should be able to demonstrate effective communication and interpersonal skills. They should be able to use these skills to give an account of their experiences, reflect on them, make valid conclusions and express strengths and development needs, both personal and organisational. Good communications skills, both written and oral. This could be evidenced by the achievement of a Communication Unit at SCQF Level 4; or alternatively an employer's reference

♦ Candidates should have prior knowledge, skills and experience of telehealthcare service delivery

♦ Candidates should be aware that evidence of work or practice cited towards establishing entry criteria, or used towards assessment at any level, should not be outdated and should have acceptable currency

5 Group Award(s) structure

5.1 Conditions of the Award

The Group Award is achieved on the successful attainment of one mandatory Unit and one of three optional Units which are listed in table 5.2. The Group Award comprises of a total of 16 SCQF credits at SCQF Level 6.

5.2 Framework

The PDA will be awarded on successful completion of a total of 16 SCQF credits. The PDA carries 16 SCQF credit points at SCQF level 6.

Mandatory Unit

8 SCQF credits must be selected

Unit title	Code	SCQF credit points	SCQF level	SQA credit value
Working in Telehealthcare	FX9F 33	8	6	1

Optional Units

8 SCQF credits must be selected

Unit title	Code	SCQF credit points	SCQF level	SQA credit value
Telehealthcare: Installation, Maintenance and Repair	FX9J 33	8	6	1
Telehealthcare: Call Handling	FX9H 33	8	6	1
Telehealthcare: Response	FX9G 33	8	6	1

5.3 Recognition of Prior Learning

It is expected that centres delivering the award implement Recognition of Prior Learning (RPL) mechanisms and policies. The document entitled Recognition of Prior Informal Learning (PPL): guidance and resources for mentors and learners, SSSC 2007 provides guidance on the mechanisms, policies and support. Implementation of the guidelines helps ensure consistent RPL policies across Scotland. The purpose of the guidelines is to assist providers in developing and operating processes of recognising prior learning within the suite of Health and Social Care Qualifications.

6   Development of Core/Transferable Skills

The mandatory Unit Working in Telehealthcare has the Problem Solving Component of Critical Thinking at SCQF level 5. This means that that when candidates achieve the Unit, their Core Skills profile will also be updated to show they have achieved Critical Thinking at SCQF level 5 embedded within.

There may be opportunities in the award to gather evidence at SCQF Level 5 for each of the Core Skills of *Communication, Working with Others, Information and Communication Technology, Problem Solving* and the component of Planning and Organisation.

Candidates participating in the award will develop a range of core and transferable skills to improve professional competencies, confidence and performance in their telehealthcare role. It is envisaged that as candidates progress through the award they will have the opportunity to develop specific Core Skills as outlined below.

Communication (at SCQF level 5) — could be developed through written and oral reporting and the use of effective communications with individuals and colleagues.

Working with Others (at SCQF level 5) — could be evidenced through observation of mutuality when dealing with individuals.

Information and Communication Technology (at SCQF level 5) — could be developed through the use of technology in a telehealthcare setting. Alternative evidence could be gathered through the input, storage, organisation and retrieval of pre-recorded oral or video data to submit course.

Problem Solving (at SCQF level 5) — could be developed through simulated case scenarios and/or reviewing and evaluation of interventions to demonstrate critical thinking.

Planning and Organising (at SCQF level 5) — could be developed by the candidate undertaking a practical activity such as assessing the suitability of telehealthcare equipment. The activity should involve multiple unfamiliar variables in relation to the planning, organising and carrying out of a telehealthcare activity.

7 Approaches to Delivery and Assessment

7.1 Delivery

This PDA has been designed to be delivered by SQA approved centres. This Group Award will be available to individuals across Scotland therefore it should be delivered in an accessible and flexible manner without any candidate being disadvantaged due to their geographical location or other structural factors. The delivery mechanisms adopted for each approved centre should be flexible and adopt a widening access approach to recruiting candidates. Delivery approaches such as distance learning, e-learning and workplace learning are actively encouraged and where possible used to enrich all candidates experiences of the Group Award, and not just for those individuals living and working at a distance.

Face to face and other forms of directed/self directed learning can also be facilitated via video conferencing or other web applications (as appropriate) to the candidates and approved centres needs/capabilities.

All Units in the Group Award have the option to be delivered purely online for candidates living and working at a distance from approved centres.

It is recommended that approved centres should make candidates aware of the requirements of the Group Award for example the need to gather evidence based on their workplace experience, gather evidence in a variety of formats and provide written and oral reports (where applicable). It is anticipated that at the outset of each Unit the candidates will be orientated to the learning Outcomes and Evidence Requirements. This is an opportunity for the candidates to reflect on their previous learning and take forward any learning plans they may have developed to enhance their educational experience. Some assessment methods, eg reflection may be unfamiliar to candidates therefore it is recommended that approved centres provide examples and additional tutorials either face to face or via web based discussions. Overall, each approved centre should make suitable arrangements to support and guide candidates throughout the Group Award.

Verification of work undertaken may be required at assessment points in the award by workplace supervisors. It is recommended that approved centres clarify and/or provide guidance and support to the candidate's employer (where appropriate/applicable) on how to authenticate workplace examples.

The PDA comprises one mandatory and three optional Units, from which the candidate selects one. It is recommended that each candidate completes the mandatory Unit prior to undertaking their selected optional Unit. It is important that candidates gain an understanding of the theoretical concepts, legislation, care values and principles of assessment governing their practice prior to moving onto to choose an optional Unit. It is anticipated and recommended that the candidate will choose an optional Unit relevant to their job role and progress onto undertaking the additional Units to advance their career or meet future CPD requirements.

The Unit specifications provide the approved centres with details of the learning Outcomes, Evidence Requirements and detailed guidance on the content, context, method of delivery and assessment requirements for each Unit.

Centres are urged to seek opportunities to use expert speakers with experience of operational telehealthcare service delivery.

7.2 Assessment

The underpinning pedagogy for this PDA is based on work-based learning. It is recommended that candidates demonstrate their knowledge and understanding by drawing upon their work place skills and experience and use the technique of reflection (and other assessment methods) to develop new learning and confidence to undertake workplace activities.

The PDA is at SCQF level 6 and it is recommended that the assessment weighting for each Unit does not exceed a word limit of 3,000 words or equivalent.

A variety of assessment strategies are utilised to assess the candidate's knowledge and understanding of the Units' learning Outcomes. Approved centres are provided with the flexibility and discretion to modify an assessment for individual's with recognised learning development plans, for example the use of oral recordings to submit a reflection on practice or the use of a scribe during exams.

Assessment methods used within this PDA include:

♦ Reflection (written and or oral)
♦ Portfolio of evidence
♦ Open-book exam
♦ Verification from workplace supervisor

Evidence gathered from the candidate's workplace should be based on naturally occurring circumstances during the course of their day to day activities. Simulated activities can be used at the discretion of the approved centres in areas where the candidate has limited exposure to an activity or there are organisational/structural challenges that prevent the candidate achieving these Outcomes. This approach should encourage the candidate to imbed reflection as a learning tool in the workplace.

Approved centres should advise candidates about the Evidence Requirements and encourage them to seek opportunities to generate evidence that could cover more than one learning Outcome and/or more than one Unit. Combining evidence demonstrates to the candidate the interconnectedness of theory with practice.

Assessment exemplars will be made available via SQA to approved centres to standardise the marking criteria and feedback to candidates. Examples of reflective accounts and models of reflection will be provided to guide and support approved centres. It is recommended that examples provided are not prescriptive and approved centres highlight the importance of flexibility in how reflection and feedback is provided.

Assessment feedback is vital to support the candidate's learning experience and it is recommended that the approved centres adopt a holistic approach in terms of candidate feedback covering both strengths and areas for development.

Assessment exemplars will be provided to approved centres to illustrate a variety of methods to provide feedback and engage the candidate in the feedback process.

Approved centres should aim to provide all assessment requirements and candidate feedback in electronic format.

8 General information for centres

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**.

Internal and external verification

All instruments of assessment used within this/these Group Award(s) should be internally verified, using the appropriate policy within the centre and the guidelines set by SQA.

External verification will be carried out by SQA to ensure that internal assessment is within the national guidelines for these qualifications.

Further information on internal and external verification can be found in *SQA's Guide to Assessment* **(www.sqa.org.uk)**.

9 General information for candidates

Professional Development Award in Telehealthcare (SCQF Level 6)

This information is intended to give potential candidates a brief overview of the main aspects of this Group Award. For further information, please do not hesitate to contact your approved learning provider or SQA direct.

Who is this award for?

The Professional Development Award in Telehealthcare at SCQF Level 6 is for:

♦ Learners who have prior knowledge, skills and experience of telehealthcare service delivery
♦ Those who wish to enhance their career prospects in a telehealthcare role
♦ Continuing professional development (CPD) for those currently employed in a telehealthcare role.

Who can undertake this award?

The award may be undertaken by individuals who are experienced in telehealthcare service delivery and who have either no other formal qualifications, or hold qualifications unrelated to this area of service delivery.

Units from the Group Award may also be undertaken for purposes of continuing professional development.

What can this award lead to?

Successful completion of this Group Award may lead to increased personal and professional competence as well as increased self confidence. It may also help provide evidence of competence in a telehealthcare support role or increased capacity to take on such a role. It thus may assist in securing a promoted post, although obviously cannot guarantee this. The SCQF credits from this award may also contribute to securing access to higher level Group Awards.

How will it be assessed?

The assessment tools used is at the discretion of the centre therefore these may differ from centre to centre. You may be assessed by:

♦ reflection (written and or oral)
♦ portfolio of evidence
♦ open-book exam
♦ verification from workplace supervisor

How long will it take?

The Group Award is made up of two Units each of which requires about 40 hours of study.

This will mainly be undertaken in group learning sessions (such as lectures and tutorials) as well as individual research and study via distance learning, e-learning and workplace learning. You should also be prepared to make a commitment to studying in your own time as well as the time you spend 'in class'.

Below is a chart which summarises the mandatory and optional Units which make up this Group Award. The PDA will be awarded on successful completion of a total of 16 SCQF credits. The PDA carries 16 SCQF credit points at SCQF Level 6.

Mandatory Unit

8 SCQF credits must be selected

Unit title	Code	SCQF credit points	SCQF level	SQA credit value
Working in Telehealthcare	FX9F 33	8	6	1

Optional Units

8 SCQF credits must be selected

Unit title	Code	SCQF credit points	SCQF level	SQA credit value
Telehealthcare: Installation, Maintenance and Repair	FX9J 33	8	6	1
Telehealthcare: Call Handling	FX9H 33	8	6	1
Telehealthcare: Response	FX9G 33	8	6	1

These notes are intended for general guidance only. Please discuss any aspects of this course you may be unsure of with your SQA approved Learning Centre.

9 Glossary of terms

Candidate: The person undertaking the PDA

Case Study: An assignment in which you give an account of work you have undertaken based on real work practice in which you identify and explain the knowledge used through the use of reference to reading and research.

Evidence Requirements: Details of specific evidence that is required for a Unit in the award in order for a candidate to meet the Outcomes. Evidence Requirements are mandatory.

Outcome: The description of an Outcome to be achieved by candidates in an SQA Unit.

PDA: Professional Development Award, a vocational qualification contributing to continuous professional development for employed participants.

RPL: Recognition of Prior Learning.

SCQF: Scottish Credit and Qualification Framework, which is a new way of speaking about qualifications and how they inter-relate. We use SCQF terminology throughout this guide to refer to credits and levels. For further information on the SCQF please visit **www.scqf.org.uk**

SCQF credits: One SQA HN credit is equivalent to eight SCQF credit points. This applies to all HN Units, irrespective of their level.

SCQF levels: The SCQF covers 12 levels of learning. PDA's are available at SCQF levels 6 to 12 and will normally be made up of Units at SCQF levels 6 to 12.

SSSC: Scottish Social Services Council.

Qualification Design Team (QDT): The QDT works in conjunction with a Qualification Manager/Development manager to steer the development of the PDA from its inception/revision through to validation. The group is made up of key stakeholders representing the interests of centres, employers, further education colleges, training providers and other relevant organisations.

Unit: Units contain vocational/subject content and are designed to test a specific set of knowledge and skills.

Telehealth: is the provision of health services at a distance using a range of digital technologies.

Telecare: The remote or enhanced delivery of care services to people in their own home or a community setting.

Telehealthcare: The convergence of telecare and telehealth to provide a technology-enabled and integrated approach to the delivery of effective, high quality and care services.

10 Appendices

Appendix 1: Qualification Design Team Membership

Appendix 1:   Qualification Design Team Membership

Donna Henderson - Lead Consultant (Antara Consulting)

Donna has worked as an occupational therapist, resource manager in health and social services and a strategic planner in social care. She is currently an independent consultant specialising in telehealth and telecare strategic service development. She developed the national Telehealthcare Education and Training Strategy for Scotland and is now leading on the implementation of its Action Plan.

Fiona Fraser (RRHEAL)

Fiona is the Project Lead for the Remote and Rural Healthcare Educational Alliance (RRHEAL). Fiona's post specifically relates to the ongoing progression of the RRHEAL education platform and championing distributed education. Fiona has a broad ranging career in the NHS in both clinical acute care delivery as well as undergraduate and post graduate multi disciplinary education.

Donna Fleming (City of Edinburgh Council)

Donna Fleming has developed and managed services in the health and social care field for the past 19 years, including managing the training service for Release in London. She was chair of Rowan Alba for five years and currently manages the Telecare Service for City of Edinburgh Council.

John Honeyman (Fife Council)

John's background is in IT and Assistive Technology and their application in support of learning and teaching. He now works in social care developing a Telecare service in Fife and delivering training to health and social care professionals.

Polly Wright (Middlesbrough Council)

Polly has managed social care services, and worked as a strategic planner in social care. She is currently developing telehealthcare services across Middlesbrough.

Audrey Cund (Strathclyde University)

Audrey is a registered Mental Health Nurse and Lecturer (HEI and FE). She has extensive clinical, academic (HEI and FE) and research experience with a particular interest in work based learning, curriculum design and CPD to support health and social care professionals to use health technology to compliment care delivery. Audrey is keen to develop and collaborate with others in the field and enhance the strong network of professionals dedicated to using technology in their everyday practice. Audrey is currently employed by the University of Strathclyde and teaches evening classes at Kilmarnock College.

Doreen Watson (JIT Action Team)

Doreen previously worked for 23 years in Social Work, as a service manager providing a range of 24 hour care and services which included community alarm, telecare and telehealth, rapid response (joint service health and social work), overnight home care and out of hours home care services. She is currently an independent consultant and recently became a member of the joint improvement

team's action group providing consultancy support to the telecare action plan. Last year Doreen was the first recipient of the telecare services association crystal award for excellence in telecare and telehealth.

Marisa Ferguson (SQA)

Marisa is one of the Qualification Officers at Care Scotland. During her time with the team she has been involved the development and revision of several qualifications.