

**Transferable Roles Template**

**Cross Cutting Role**

**Level 1-Brief Advice and signposting: prevention and lifestyle behaviour change including public health, clinical and wellbeing services**

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## BACKGROUND AND INTRODUCTION

As part of the long-term Making Every Contact Count (MECC) strategy that aims to enable the workforce to use behaviour change skills and competence in normal everyday practice to help us create a healthier population and reduce costs. NHS Yorkshire and the Humber have devised a 'competence framework'. This seeks to equip the workforce - the biggest resource we have - with the skills and knowledge they need to identify and make the most of every opportunity to help people live healthier lives.

The [Prevention and Lifestyle Behaviour Change: a Competence Framework](#) was launched in February 2010 and puts wellbeing and prevention of health problems at the heart of every interaction between NHS employees and patients, the framework encourages frontline staff to offer brief but appropriate advice, including 'signposting' services, as part of their everyday contact with patients.

It describes the generic competences required by NHS staff to enable them to promote healthier lifestyle choices in areas such as long-term conditions, obesity management, smoking cessation and alcohol abuse.

### **NHS Yorkshire and the Humber and Skills for Health-Development of a Transferable Role**

NHS Yorkshire and the Humber have since worked with Skills for Health to undertake the competence mapping of the Framework which informed its version 2. Now both organisations have worked in partnership to continue to extend the national transferability of the framework to a wider workforce to include not only the health sector across a wide number of settings but those working in public health, social care and in local government as well as in the voluntary sector..

To enable this cross sector and national transferability this work has now been further expanded to develop a Transferable Role Template (TRT) of a ***Cross-Cutting Role in Brief Advice and signposting: prevention and lifestyle behaviour change including public health, clinical and wellbeing services*** at Level One of the Framework.

The main benefits of developing this TRT are:

- the competences can be directly used in Job Descriptions, in induction programmes and training with staff, volunteers and across sectors
- raising the profile and national awareness of the Behaviour Change Framework, and demonstrate its transferable good practice
- helping to drive workforce development by providing portability and transferability of learning and development, skills competences and training across regions nationally and across sectors
- reducing duplication by organisations and individuals and this in turn has an impact on productivity and efficiency and a direct impact on public health
- impacting on workforce planning by providing a framework that is transferable across workforces and organisational boundaries
- assisting workforce development with minimum standards to ensure quality provision

## THE ROLE

<b>Named Role</b>	<b>Level One: Brief Advice and signposting: prevention and lifestyle behaviour change including public health, clinical and wellbeing services.</b>
Area of work	Cross-cutting - specific focus on Public Health and Wellbeing
Sample Job Description Available	Subset of existing role or job based on <i>Prevention and Lifestyle Behaviour Change: a Competence Framework</i> developed by NHS Yorkshire and the Humber
Experience Needed	General experience working in a wide number of sectors as well as in health and social care with access to service users and the general public and may be first point of contact..
Career Framework Levels	n/a
National and local requirements and regulations.	n/a

### What is a Cross Cutting Transferable Role?

Skills for Health has developed this Transferable Role Template (TRT) based on an established tried and tested methodology to enable a common understanding and communication of roles or sub sets of roles which can be nationally transferable across a wide range of sectors.

A transferable role (TR) is a named cluster of competences and related activities that are applicable, relevant and replicable across different geographic locations in the UK.

Cross-cutting roles are those which occur at multiple points on the career framework They are usually but not exclusively a sub set of an existing role or job. They may be very specific in nature e.g. delivering a specific intervention or task.

<b>Prevention and Lifestyle Behaviour Change: A Competence Framework</b>	<b>The Generic Competences: Level 1</b>	<b>Skills for Health Mapping and National Occupational Standards (NOS)</b>
<b>Level 1</b> The worker is able to engage with individuals and use basic skills of awareness, engagement, and communication to <b>introduce</b> the idea of lifestyle behaviour change and to <b>motivate</b> the individual to consider/think about making changes to their lifestyle behaviour(s).	<b>1.1:</b> Ensure individuals are able to make informed choices to manage their self care needs*	No direct NOS mapping- see locally developed competences in Appendix 1
	<b>1.2:</b> Support and enable individuals to access appropriate information to manage their self care needs	NOS SCDHSC0026 Support individuals to access information on services and facilities
	<b>1.3:</b> Communicate with individuals about promoting their health and wellbeing	NOS HT2 - Communicate with individuals about promoting their health and wellbeing
	<b>1.4</b> Provide opportunistic brief advice	No direct NOS mapping- see locally developed competences in Appendix 1

\*In the Framework Self Care is defined as:

‘The actions people take for themselves, their children and their families to stay fit and maintain good physical and mental health; meet social and psychological needs; prevent illness or accidents; care for minor ailments and long-term conditions; and maintain health and well-being after an acute illness or discharge from hospital (Department of Health 2005)’.

## **Scope of the Role:**

This is a cross-cutting role for anyone working in a wide number of sectors as well as in health and social care who have access to service users and the general public. It is intended to engage with individuals to introduce the idea of prevention, lifestyle behaviour and behaviour change. The role will also start to motivate individuals to consider and think about making changes to their lifestyle and behaviour(s). It will contribute to making every contact count and towards the creation of better health, a better health service for clients and patients and across sectors.

It is intended to be a generic role and it utilises the competences required by the entire workforce to ensure that opportunities to introduce, or bring about, lifestyle behaviour changes are recognised and acted upon. It can also be used wider than just in the health sector with existing engagement with local authorities, voluntary and community sector and private sector organisations.

The role covers the Level 1 intervention of the *Prevention and Lifestyle Behaviour Change: a Competence Framework* developed by NHS Yorkshire and the Humber.

The Framework has been based on the Principles of Self Care Standards, developed by Skills for Health and Skills for Care and existing National Occupational Standards (NOS). Locally adapted competences were also developed and these have been mapped to NOS and to the NHS Knowledge and Skills Framework (KSF). Care was taken in development to use recognised competences and other frameworks to avoid duplication.

## **Definition of Brief Advice**

“Brief advice describes a short intervention (usually from 30 seconds to 3 minutes) delivered opportunistically in relation to a client’s reason for seeking help. It can be used to raise awareness of, and assess a person’s willingness to engage in further discussion about healthy lifestyle issues.

Brief advice is less in depth and more informal than a brief intervention and usually involves giving information about the importance of behaviour change and simple advice to support behaviour change”

Ref; Powell, K and Thurston, M. (2008) *“Commissioning training for behaviour change interventions. Guidelines for best practice”*

## **National Occupational Standards (NOS)- (also known as competences)**

Skills for Health seeks to provide some consistency of approach to defining skills and competences. The competences are National Occupational Standards (NOS) and in this work are also supplemented by locally developed competences.

NOS have been developed by expert groups, have undergone a rigorous nationally determined process to achieve their status and are approved for use in vocational qualifications by the UK Commission for Employment and Skills. Because of this they cannot be changed in terms of content or wording. They focus on what a person needs to be able to do, as well as what they must know and understand to work effectively. They are not themselves levelled. Some may be more appropriate to a specific level on the career framework others will span all levels. They are all indicatively linked to the NHS Knowledge and Skills Framework.

Each NOS is listed by its code and title, they are all underpinned by knowledge requirements and performance criteria.

The competences (NOS) in this template are divided into the following sections:

1. Core to the level – the core is intended to be relevant to any role in the health sector, whether it is clinical or not and therefore is broad based in terms of the NOS it contains.
2. Specific to the role
3. Locality Specific – The locally developed competences are listed here to bridge the gaps in the NOS..

## 1.Common/Core Competences

All cross cutting roles will have the following common/core competences which have been identified by Skills for Health over many years of experience working on workforce development within the health sector. They are competences all staff require to undertake any cross-cutting role in the sector whether it is clinical or not and are therefore broad based. These are nationally transferable and could already be included in a Job Description where an individual has one.

The specific competences to the role which have been identified are listed after the common/core.

Underpinning Principle	Reference Function	Competence
1.Communication	1.2 Communicate effectively	GEN97 Communicate effectively in a healthcare environment (Note: this competence supports the individual to communicate effectively with a number of people in a variety of situations including social care and is appropriate cross sector)
2. Personal and People Development	2.1.1 Develop your own practice	SDHSC0022 Develop your own knowledge and practice <a href="https://tools.skillsforhealth.org.uk/external/SCDHSC0023.pdf">https://tools.skillsforhealth.org.uk/external/SCDHSC0023.pdf</a>  GEN 13 Synthesise new knowledge into the development of your own practice.
3. Health, Safety & Security	3.5.1 Ensure your own actions reduce the risks to health and safety.	IPC2.2012 Perform hand hygiene to prevent the spread of infection SCDHSC0022 Support the health and safety of yourself and individuals <a href="https://tools.skillsforhealth.org.uk/external/SCDHSC0022.pdf">https://tools.skillsforhealth.org.uk/external/SCDHSC0022.pdf</a>  ENTO WRV1 Make sure your actions contribute to a positive and safe working culture.
5. Quality	5.1.1 Act within the limits of your competence	SCDHSC0024 Support the safeguarding of individuals <a href="https://tools.skillsforhealth.org.uk/external/SCDHSC0024.pdf">https://tools.skillsforhealth.org.uk/external/SCDHSC0024.pdf</a>

		and authority	GEN63 Act within the limits of your competence and authority
6. Equality & Diversity	6.1	Ensure your own actions support equality of opportunity, and diversity	SCDHSC0234 Uphold the rights of individuals <a href="https://tools.skillsforhealth.org.uk/external/SCDHSC0234.pdf">https://tools.skillsforhealth.org.uk/external/SCDHSC0234.pdf</a> SCDHSC0234 Uphold the rights of individuals
H. Management and Administration.	H1.3.1	Contribute to the effectiveness of teams.	SCDHSC0241 Contribute to the effectiveness of teams. <a href="https://tools.skillsforhealth.org.uk/external/SCDHSC0241.pdf">https://tools.skillsforhealth.org.uk/external/SCDHSC0241.pdf</a> SCDHSC0241 Contribute to the effectiveness of teams

## 2. Specific Competences:

The main and specific competences of the Brief Advice role are underpinned by the common/core competences above, however, the explicit competences are

The NOS below demonstrate the competences required specific to providing and accessing information, and the communication skills to do this. They have been mapped to the *Prevention and Lifestyle Behaviour Change: a Competence Framework*. An example of application would be individuals in a pre-contemplative stage are unlikely to respond to advice to change their behaviour but may be receptive to information about the risks related to their lifestyle as part of a 'healthy chat'.<sup>1</sup> Brief Advice is adhoc and positive about where the individual is. People generally regard contact with health and social care staff as credible sources of advice including about health risks and it really is about 'making every contact count'.

It is important to read the content of each competence.

Underpinning Principle	Reference Function	Competence
1.Communication	1.5 Provide information, advice and guidance	SCDHSC0026 Support individuals to access information on services and facilities <a href="https://tools.skillsforhealth.org.uk/external/SCDHSC0026.pdf">https://tools.skillsforhealth.org.uk/external/SCDHSC0026.pdf</a>
C Health Promotion and Protection	C2.2 Provide information to individuals, groups and communities about promoting health	<a href="#">HT2 - Communicate with individuals about promoting their health and wellbeing</a>

<sup>1</sup> Prochaska, J.O. & DiClemente, C.C. (1983) Stages and processes of self-change of smoking: Toward an integrative model of change  
*Journal of Consulting and Clinical Psychology*, 51, 390-395

### **3. Locally Developed Competences**

The *Prevention and Lifestyle Behaviour Change: a Competence Framework* developed by NHS Yorkshire and the Humber has been based on existing national occupational standards and the Principles of Self Care Standards, developed by Skills for Health and Skills for Care. The approach adopted to develop the competences within the framework followed traditional testing routes, thus ensuring that the competences are robust and fit for the purpose for which they have been developed.

It was not possible to map many of the locally adapted competences to NOS because behaviour change is not condition or subject specific whereas many NOS are written to reflect this and as currently written these NOS do not allow for the person centred approach that underpins *The Prevention and Lifestyle Behaviour Change: a Competence Framework*.

The perspective of the employee coming from 'where the individual is at' and embracing the government commitment that public health is everyone's business

Whilst undertaking the detailed comparison of the content of the competences within the framework the following underpinning principles were adhered to:

- It 'comes from where the individual is'
- Many people have multiple or complex lifestyle issues
- Primary and secondary prevention
- The competences are intended to be generic and applicable for the whole workforce
- Not built around the functions delivered by any specific professional
- Lifestyle issues are not condition specific
- Behaviour change as a function of a role and not just a specific defined role
- The framework is a service and workforce change model

All locally developed competences are cross referenced to the NHS Knowledge and Skills Framework (KSF).

The summary of each of the locally developed competences at Level 1 are listed in Appendix.1.below.

The full Framework and competences at Level 1 can be found at:

[www.makingeverycontactcount.co.uk](http://www.makingeverycontactcount.co.uk)

### **Indicative Learning and Development**

Transferable roles may be underpinned by a range of learning and development activities to ensure both competence and role confidence. The learning and development included within the template is by nature indicative. In some cases it is endorsed by professional bodies and/or special interest groups and accredited by an awarding body.

In public health there are numerous generic short brief information training programmes and e-learning packages available nationally and locally. Some are generic and others more specific to individual areas eg smoking cessation or alcohol. The main ones which meet the requirements of the *Prevention and Lifestyle Behaviour Change: a Competence Framework* are listed below but this list is not exhaustive.

**These are listed in APPENDIX 2**

## **APPENDIX 1**

### **Summary of Level 1 *Prevention and Lifestyle Behaviour Change: a Competence Framework* and Locally developed Competences**

#### **1.1 Ensure individuals are able to make informed choices to manage their self care needs**

##### **Performance Criteria**

- 1 Ensure that practice is person-centred and empowers individuals to make informed choices
- 2 Know and understand that an empowering approach to practice has the following elements: dignity and control for individuals - information and education - mutually respectful relationships - choice - motivation - development of self esteem - development of individuals' confidence and skills
- 3 Develop skills in supporting self care and self management and a practice style that is non-judgmental and respects the rights, privacy and dignity of individuals, promoting choice and independence
- 4 Understand that by becoming central to the discussion and decision-making about their needs, individuals feel more confident, independent and empowered
- 5 Demonstrate the ability to find out the history, preferences, wishes and needs of individuals
- 6 Recognise the importance of being sensitive to personal, religious and cultural beliefs, and understand their impact on individuals' choices
- 7 Understand and reflect upon the impact that own beliefs have on practice and ability to support individuals' wishes and choices
- 8 Enable and support individuals to assert their views, control their own lives and make informed choices about the services they receive
- 9 Understand the potential impact that loss and change have on individuals and carers, and on their ability to engage in active participation and collaborative relationships with a range of professionals, and support them to cope with change where appropriate
- 10 Ensure that individual preferences about who takes decisions about different aspects of their needs are respected
- 11 Support individuals to manage change and make informed decisions about the support they require, and how to meet the outcomes they have identified
- 12 Support individuals to find motivation to participate in self care
- 13 Work in partnership, fully involve and consult with individuals to plan their care and sustain care plans to manage their needs. This should include, where appropriate, the agreement of specific goals
- 14 Support individuals to involve family members, carers and others in self care, where appropriate
- 15 Work in partnership with other relevant services to maximise self care opportunities.

#### **1.2 Support and enable individuals to access appropriate information to manage their self care needs**

##### **Performance Criteria**

- 1 Understand that more informed individuals are more empowered people
- 2 Understand that individuals need access to good quality and comprehensive information they can understand, as and when they want it

- 3 Understand the importance of giving guidance and advice on the status and evidence-based quality of information available
- 4 Support individuals by promoting self care, helping them feel more in control of their lives through appropriate information, enabling problem solving and self confidence
- 5 Find out what information and support individuals want, in what formats and languages they need it and enable access to the right type of information to meet needs
- 6 Review the information already provided and consider what will be needed in the future to meet needs
- 7 Provide information about specific needs, and support on how to access it so that individuals feel confident enough to use it
- 8 Make good use of local/area resources to help with the sharing and distribution of information, and find ways to make it available to individuals
- 9 Involve individuals, user organisations, lay experts and appropriate local professionals in identifying best practice in approaches to information.

### **1.3 Communicate with individuals about promoting their health and wellbeing**

#### **Performance Criteria**

##### **1. Communicate in a way that:**

- a. is appropriate to the individuals
- b. encourages an open and frank exchange of views
- c. minimises any constraints
- d. is free from discrimination and oppression
- e. is open to the range of issues that individuals wish to explore
- f. acknowledges their right to make their own decisions
- g. helps them to make their own decisions

##### **2. Provide clear, up-to-date and relevant information to individuals about:**

- a. health and wellbeing
- b. things that might affect their health and wellbeing
- c. the things they can do to improve their health and wellbeing
- d. other people and agencies who might be able to help them improve their health and wellbeing

##### **3. Encourage individuals to:**

- a. identify the things that are affecting their health and wellbeing
- b. identify their views about health and wellbeing
- c. identify their knowledge and skills about health and wellbeing and any gaps in these
- d. take responsibility for changing their own behaviour
- e. learn how to change their behaviour

##### **4. Enable individuals to:**

- a. get hold of up-to-date appropriate information and advice when they need
- b. access appropriate support

## 1.4 Provide opportunistic brief advice

### Performance Criteria

- 1 Be alert to opportunities for brief advice
- 2 Identify cues from individuals' expressed needs or concerns
- 3 Observe individual for any signs of lifestyle health related issues
- 4 Explore, in a non-threatening manner, the individuals' views and feelings about their lifestyle and health behaviours
- 5 Assess whether the individual is willing to engage in further discussion about the issue
- 6 When an individual is not willing to engage at that moment, invite them to return and ask questions at any time in the future
- 7 When an individual is willing to engage, provide general health information in an empathetic, non-confrontational manner
- 8 Maintain up-to-date and accurate information about additional sources of support
- 9 Signpost the individual to appropriate additional support according to the individual's needs

### Indicative Knowledge and Skills: Level 1

- Concepts of empowerment and person-centred practice
- Identification of factors that affect health and wellbeing including individual determinants (e.g. behaviour and lifestyle) and the wider determinants of health (e.g. poverty, employment etc)
- Communication skills including ensuring that the individual, not the worker, controls the progress and content of discussions and how to make suggestions and offer advice in a manner that is supportive and non-directive
- The different arguments that people have against promoting health and wellbeing and how to use counter-arguments
- How to identify and use opportunities for providing opportunistic brief advice
- Differences between brief advice and brief interventions as distinct techniques for lifestyle behaviour change
- How to respect and acknowledge others' priorities in relation to their health and wellbeing and their right to refuse advice and information
- Understand the impact that individuals' level of knowledge, needs, cultural, religious and personal beliefs and preferences, experiences and use of services, and life context may have on their choices and wishes
- Be able to identify the support groups and services available locally and sources of further information about them and what they do

## Mapping of Competences against Source and Indicative Reference to NHS KSF

	Title	Source	Indicative Reference to NHS KSF
<b>Level 1</b>			
1.1	Ensure individuals are able to make informed choices to manage their self care needs	Skills for Care and Skills for Health: Common Core Principles to Support Self Care: A Guide to Support Implementation	HWB4 (Levels 1-4); HWB1 (Levels 1-2); Core 6 (Levels 1-4), plus occurs as a common indicator in all levels (1-4) of: HWB2; HWB5; HWB6; HWB7
1.2	Support and enable individuals to access appropriate information to manage their self care needs	Skills for Care and Skills for Health: Common Core Principles to Support Self Care: A Guide to Support Implementation	HWB4 (Levels 1-4); HWB1 (Levels 1-2)
1.3	Communicate with individuals about promoting their health and wellbeing	Skills for Health: Public Health Competence Suite - HT2	HWB1 Promotion of health and wellbeing and prevention of adverse effects on health and wellbeing. Level 1: Contribute to promoting health and wellbeing and preventing adverse effects on health and wellbeing
1.4	Provide opportunistic brief advice	Adapted from the following NOS: HT1, HT2, HT3, CMG4, CMC3, PHP41	HWB1: Promotion of health and wellbeing and prevention of adverse effects to health and wellbeing. Level 1: Contribute to promoting health and wellbeing and preventing adverse effects on health and wellbeing

## APPENDIX 2

### Indicative Learning and Development

Transferable roles may be underpinned by a range of learning and development activities to ensure both competence and role confidence. The learning and development included within the template is by nature indicative. In some cases it is endorsed by professional bodies and/or special interest groups and accredited by an awarding body.

In public health there are numerous generic short brief information training programmes and e-learning packages available nationally and locally. Some are generic and others more specific to individual areas eg smoking cessation or alcohol.

In addition NHS Yorkshire and the Humber have also developed additional e-learning resources called “Health Chats for Wellbeing” to assist people working in healthcare and the public sector in delivering appropriate health advice.

[www.makingeverycontactcount.co.uk](http://www.makingeverycontactcount.co.uk)

The main learning and development which meet the requirements of the *Prevention and Lifestyle Behaviour Change; a Competence Framework* are listed below but this list is not exhaustive.

Transferable role	
Informal learning	‘Healthy Chat’-Based on the Healthy Chat Train the Trainer Course developed by Stockport NHS Foundation Trust
Summary of learning and development including aims	<ul style="list-style-type: none"> <li>• This training course prepares frontline staff across the wider public health workforce to confidently raise lifestyle issues with members of the public, briefly assess their readiness to change and signpost them to support services. It builds motivation and confidence training and meets HWB1</li> <li>• Participation in Healthy Chat training equips staff to undertake a brief intervention which is a Level 1 competence according to the <i>Prevention and Lifestyle Behaviour Change; a Competence Framework</i> developed by NHS Yorkshire and The Humber.</li> <li>• The course focuses on building confidence to have a ‘health chat’, using practical exercises and simple tools. It clarifies the role and expectations of frontline staff in relation to lifestyle and behaviour change.</li> <li>• Local information on the impact of lifestyle choices on health and available support services is incorporated into the training and candidates need to follow up post training to implement.</li> </ul>

	<ul style="list-style-type: none"> <li>There is an emphasis on implementation and links into practice with practical scenarios to build confidence, skills on assessing the individual's motivation.</li> </ul>
Duration	Half day- approx 3 hours as participant –can be broken down into smaller packages 'Train the Trainer' requires additional 3 hours
National Occupational Standards used	Training meets: <ul style="list-style-type: none"> <li>Level 1 <i>Prevention and Lifestyle Behaviour Change: a Competence Framework</i> (which is mapped to NOS)</li> <li>Level 1 Principles for Self Care developed by Skills for Health and Skills for Care' (2008).</li> <li>NHS Knowledge and Skills Framework (KSF) HWB1:</li> </ul>
Credits (including framework used)	N/A
Accreditation	N/A
APEL and progression	-
Programme structure	Scenario based training building skills and confidence in assessing the individual's motivation
Resources required, e.g. placement learning, preceptors, accredited assessors etc	Protected study time Candidates issued with KISS card-'Keep It Short and Simple!'-with summary of training and guide on assessing Motivation on Scale 1-10
Quality Assurance	MECC Assessment Tool Training standardised, tried and tested and evaluated Post training follow up survey
Policies included in programme documentation	HR related policies and links to Health & Safety
Funding	To be agreed: Healthy Chat- can be commissioned from Stockport NHS Foundation Trust who can deliver where required for organisations: Enquiries to: Amanda Huddleston Tel 0161 4265901 Email <a href="mailto:amanda.huddleston@stockport.nhs.uk">amanda.huddleston@stockport.nhs.uk</a>
Leading to registration or membership with:	NA

<b>Transferable role</b>	
Formal Training	Level 2 Award in Understanding Behaviour Change (Health and Wellbeing)
Summary of learning and development including aims	The aim of this qualification is to provide the learner with the knowledge and confidence to offer opportunistic brief advice to, and engage in brief interventions with, individuals about behaviour change which could improve their health and well being.
Duration	16 Guided Learning Hours
National Occupational Standards used	Training based on Skills for Health NOS.

Credits (including framework used)	2
Accreditation	Ofqual Qualification Number 600/6614/3 45 minute multiple choice examination
APEL and progression	-
Programme structure	
Resources required, e.g. placement learning, preceptors, accredited assessors etc	Protected study time Ongoing supervision and mentorship
Quality Assurance	Ofqual Accredited
Policies included in programme documentation	-
Funding	In addition the RSPH offer various short courses related to Making Every Contact Count and the <i>Prevention and Lifestyle Behavioural Change: a Competence Framework</i> For further details contact RSPH direct)  Fees direct to RSPH Enquiries to: RSPH Training Solutions John Snow House, 59 Mansell Street, London E1 8AN Tel: 020 7265 7300 <a href="http://www.rsph.org.uk/trainingsolutions">www.rsph.org.uk/trainingsolutions</a>
Leading to registration or membership with:	N/A

<b>Transferable role</b>	
Informal learning	e-learning programme "Making Every Contact Count - an Introduction to Behaviour Change". Level 1  The resource has been developed in collaboration with HM Partnerships, NHS North West and the public health networks and launched by CHAMPS.  There is also additional e-learning available via the Yorkshire and the Humber website: <a href="http://www.makeeverycontactcount.co.uk">www.makeeverycontactcount.co.uk</a> called "Health Chats for Wellbeing".
Summary of learning and development including aims	The programme assists with the key health messages and how to use the key principles of health chats (brief advice) within the learner's own sphere of work The programme covers major lifestyle health problems that affect the North West but is generic for use by any individual elsewhere in the UK including: <ul style="list-style-type: none"> <li>- smoking</li> <li>- alcohol</li> <li>- sexual health</li> <li>- mental health and wellbeing</li> </ul>

	<ul style="list-style-type: none"> <li>- healthy weight</li> <li>- physical activity</li> <li>- healthy eating</li> </ul>
Duration	Approximately 40 minutes
National Occupational Standards used	Training based on the NOS and locally developed competences mapped to the <i>Prevention and Lifestyle Behaviour Change; a Competence Framework Level 1</i>
Credits (including framework used)	N/A
Accreditation	N/A
APEL and progression	-
Programme structure	On-line e-learning and designed to be used as part of a blended approach to learning and development in behaviour change. The learner is able to complete a short self-assessment as part of the programme
Resources required, e.g. placement learning, preceptors, accredited assessors etc	<p>Protected study time Access to a computer and via the following:</p> <ul style="list-style-type: none"> <li>• <b>Open internet access</b> – The programme can be accessed by visiting: <a href="http://walkgroveonline.com/healthchats">http://walkgroveonline.com/healthchats</a></li> <li>• <b>Scorm package for internal LMS delivery</b> – Organisations with their own e-learning platform which can accommodate Scorm Objects, can request the package for internal delivery. To obtain the relevant files please contact <a href="mailto:alison.farrar@champs.nhs.uk">alison.farrar@champs.nhs.uk</a> In seeking to use this package for internal delivery organisations will be expected to periodically report key usage statistics.</li> <li>• <b>Access via the OLM e-learning functionality (NLMS)</b> – For NHS North West organisations the package has been placed on the regional server and can be linked for delivery through the OLM E-learning Functionality (NLMS). Please contact <a href="mailto:vleadadmin@liverpoolch.nhs.uk">vleadadmin@liverpoolch.nhs.uk</a> for access.</li> </ul>
Quality Assurance	
Policies included in programme documentation	-
Funding	Free to access as above and additional information from <a href="mailto:alison.farrar@champs.nhs.uk">alison.farrar@champs.nhs.uk</a> or <a href="mailto:helen.unsworth@champs.nhs.uk">helen.unsworth@champs.nhs.uk</a>
Leading to registration or membership with:	NA