Clinical/Care
UK Core Skills Training Framework

Subject Guide
April 2015

Version control

Date	Comments
April 2015	Original release of the Framework.

Acknowledgements

This clinical/care framework builds upon the model and processes provided by the statutory/mandatory UK Core Skills Training Framework, which itself was developed following substantial activity undertaken in the devolved countries and health regions in England in seeking to design and develop common guidance for enhancing the quality and delivery of statutory and mandatory training.

In developing this clinical/care framework, we gratefully acknowledge those subject matter experts who gave their time and expertise and also the many respondents to both the UK Core Skills Training Framework User Survey (March 2014) and the Clinical/Care Framework Consultation Survey (December 2014).

About Skills for Health

Skills for Health is the Sector Skills Council for Health. It helps the whole UK health sector develop a more skilled and flexible workforce. Skills for Health's proven solutions help improve not just productivity but also the quality of health and healthcare. If you would like further information about how Skills for Health might support you with the implementation of this framework or other workforce development issues please visit: www.skillsforhealth.org.uk

Skills for Health, Clinical/Care UK Core Skills Training Framework (April 2015)

Contents

Introduction

Background

In 2013 Skills for Health released the original UK Core Skills Training Framework which set out expected learning outcomes and standards for delivery of training related to the most common statutory and mandatory training subjects within the health sector. The aim was to help ensure the quality and consistency of such training, and to help prevent unnecessary duplication of training. The statutory/mandatory Core Skills Training Framework is now widely regarded as the benchmark for statutory/mandatory training in the health sector and to date over 150 organisations have formally declared their alignment to the Framework (further information about the UK Core Skills Training Framework is available here).

The aim of this Clinical/Care Framework is therefore to build on the model and processes already established by the statutory/mandatory Core Skills Training Framework by providing a suite of additional clinical/care subjects.

It is anticipated that these nine new clinical/care subjects are the beginning of a clinical/care framework which may be further extended in the future.

Development of the Framework

In March 2014 registered users of the Core Skills Training Framework were invited to participate in a survey to obtain feedback on the existing Framework and also to consult on priorities for future developments. There were 83 respondents to the survey and a wide range of new subjects were proposed with the top three subjects requested being:

- Communication
- Consent
- Dementia awareness

In addition, during 2014 development and piloting of the new Care Certificate was being undertaken, providing a focus on provision of compassionate, safe and high quality care and support. A number of the standards within the Care Certificate are already subjects within the statutory/mandatory Core Skills Training Framework (see Appendix 4). The development of new clinical/care subjects was therefore an opportunity to ensure that the Core Skills Training Framework provided core standards relevant across the entire healthcare workforce, whilst also being consistent with the requirements of the Care Certificate (which is targeted specifically at the non-regulated workforce)[1].

Drafts of the new clinical/care subjects were initially developed based on desk research and consultation with subject matter experts. At the end of 2014, all organisations aligned to the Core Skills Training Framework were invited to participate in an on line consultation on the draft subjects and the outcomes of this consultation process were reviewed by the Core Skills Training Framework Reference Group, leading to final drafts of the subjects in early 2015. In addition, individual subjects such as Dementia Awareness and Blood Component Transfusion were developed and reviewed through the work of subject specific expert/working groups (see Appendix 5).

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[1] Further information about the Care Certificate is available here

Structure of the Framework

The Framework is presented in 9 Subjects - each subject comprises:

- context statement

- links to current legal or relevant expert guidance

- target audience

- key learning outcomes

- links to other relevant standards and frameworks.

Appendices include:

- user guide

- suggested standards for training delivery

- proposed frequency of refresher training or assessment

Relevant subjects can be selected from the Framework according to the role of individuals.

The learning outcomes are intended to provide a clear focus on what, a learner should know, understand or be able to do following completion of any learning activity (further explanation of the learning outcomes is provided in Appendix 1).

Skills for Health E-Learning

In parallel to the development of the Clinical/Care subjects, Skills for Health has developed E-Learning courses aligned to the learning outcomes in each new clinical/care subject. Further information about Skills for Health E-Learning is available here.

Benefits of the Framework

The Framework is applicable to healthcare employers and also to educational organisations which train students who will subsequently be employed in healthcare. Use of the Framework will support these organisations to:

- Standardise the interpretation of clinical/care education and training

- Guide the focus and aims of clinical/care education and training delivery

- Ensure the educational relevance of clinical/care training

- Improve the quality and consistency of clinical/care education and training provision.

The Framework also supports the assessment of competence, training needs analysis and provision of minimum standards of performance within performance management systems (e.g. as part of supervision or appraisal). Further guidance on using the Framework is available in Appendix 1.

Subject 1: Your healthcare career

1.1   Context Statement

Each member of healthcare staff needs to understand the requirements and responsibilities of their own role and be aware of how their work contributes to their organisation's objectives. Once in post, continuing professional development is important both for personal career progression and to ensure the quality and safety of service delivery. The importance of team work and partnership working with other key people must be understood. Most organisations will have performance management systems (e.g. supervision and appraisal processes) and staff should be able to understand the purpose of such systems and participate effectively.

1.2   Current Legal or Relevant Expert Guidance

Expert organisations

- Skills for Health
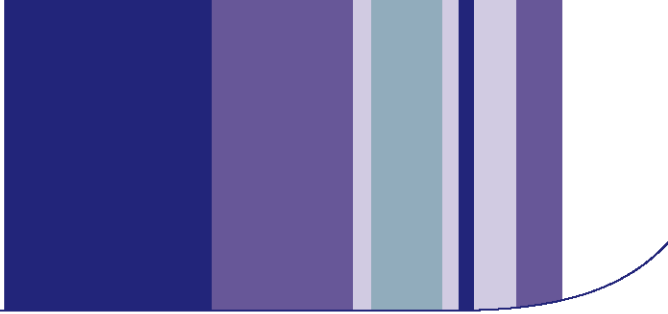- Skills for Care
- Social Care Institute for Excellence

1.3   Target Audience

Any clinical or non-clinical staff.

1.4   Key Learning Outcomes

The learner will:

a) know how to identify the requirements of a work role, including the use of relevant standards, codes of conduct and practice

b) understand why it is important to work in ways that are agreed with their employer

c) be aware of the key rights and responsibilities in employment and how a working relationship is different from a personal relationship

d) understand why it is important to work in teams and in partnership with others

e) understand why it is important to work in partnership with key people, advocates and others who are significant to patients/service users

f) know why continuing professional development is important

g) understand the process for agreeing a personal development plan and who should be involved

h) know why feedback from others is important in helping to develop and improve the way they work

i) understand the principles of reflective practice and why it is important

j) know how to identify development needs against relevant standards

k)   understand the purpose and benefits of supervision and appraisal or similar arrangements

l)   be aware of a range of learning opportunities and how they can be used

m)   understand why it is important to be honest and identify where errors may have occurred and to tell the appropriate person

n)   know when to escalate any concerns and the purpose of whistleblowing in an organisation.

Context specific knowledge and understanding

In addition to the core learning outcomes above, learners will be expected to achieve further learning outcomes in the context of their own role i.e.

- the duties and responsibilities of their specific role
- their organisation's policies and procedures relevant to their role
- their agreed personal work objectives
- their current knowledge, understanding and skills
- identified gaps in their knowledge, understanding and skills
- development opportunities and resources available in their organisation
- sources of feedback on performance in their organisation

All staff should on commencement of employment receive induction training including the requirements of their role and an introduction to relevant organisational policies and procedures.

1.5   Links to other relevant standards and frameworks

Relevant Care Certificate Standards

- Standard 1: Understand your role
- Standard 2: Your personal development

Relevant National Occupational Standards

- SCDHSC0023: Develop your own knowledge and practice
- SCDHSC0033: Develop your practice through reflection and learning
- GEN12: Reflect on and evaluate your own values, priorities, interests and effectiveness
- GEN13: Synthesise new knowledge into the development of your own practice

Knowledge Skills Framework

The Learning Outcomes could contribute evidence towards demonstration of the Knowledge Skills Framework Core Dimension *Personal and People Development* **Levels 1 & 2.**

Subject 2: Duty of care

2.1   Context Statement

Duty of care is about always acting in the best interests of others and not acting or failing to act in ways that result in harm. All those working in health and social care have a duty of care to their patients and service users – and also to themselves, colleagues, employers and the public interest. Duty of care means always aiming to provide high quality care whilst working safely and competently.

In recent years a number of high profile cases have highlighted distressing examples where there have been failings in the duty of care as documented in the Francis Report (2013[2]) and the Cavendish Review (2013[3]). These cases serve to highlight the vital importance of raising concerns and acting on them before it is too late. Therefore, healthcare staff must be able to recognise and address any areas of concern and have the confidence to speak out when required.

2.2   Current Legal or Relevant Expert Guidance

Legislation

- Duty of Candour (2014)

Key Guidance

- Social Care Institute for Excellence, Principles for implementing duty of care

2.3   Target Audience

Any clinical or non-clinical staff including unpaid and voluntary staff.
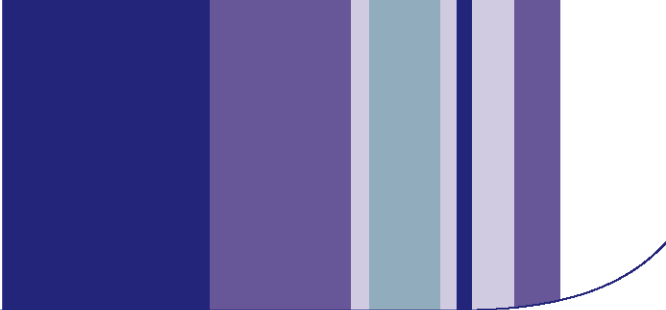
2.4   Key Learning Outcomes

The learner will:

a)   know what is meant by 'duty of care'

b)   understand how duty of care contributes to safe practice

c)   be aware of dilemmas that may arise between the duty of care and an individual's rights

d)   understand the importance of learning from comments and complaints to improve the quality of service

e)   be able to recognise and deal with adverse events, incidents, errors and near misses

f)   be aware of legislation relevant to reporting adverse events, incidents, errors and near misses

g)   be aware of factors and difficult situations that may cause confrontation

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[2] Francis R (2013), Report of the Mid Staffordshire NHS Foundation Trust Public Enquiry, London: The Stationery Office.
[3] Cavendish C (2013), The Cavendish Review: An Independent Review into Healthcare Assistants and Support Workers in the NHS and social care settings.

h) know how communication can be used to solve problems and reduce the likelihood or impact of confrontation

i) know how to assess and reduce risks in confrontational situations

Context specific knowledge and understanding

In addition to the core learning outcomes above, learners will be expected to achieve further learning outcomes in the context of their own role i.e.

- know where to get additional support and advice about resolving dilemmas that may arise about duty of care
- know the organisation's procedures for handling comments and complaints
- know the organisation's procedures for reporting any confrontations

2.5 Links to other relevant standards and frameworks

Relevant Care Certificate Standards

- Standard 3: Duty of Care

Relevant National Occupational Standards

- SCDHSC0024: Support the safeguarding of individuals

- SCDHSC0035: Promote the safeguarding of individuals

- SCDHSC0034: Promote the safeguarding of children and young people

Knowledge Skills Framework

The Learning Outcomes could contribute evidence towards demonstration of the Knowledge Skills Framework Core Dimension *Health and Security* **Levels 1 & 2.**

Subject 3: Person-centred care

3.1   Context Statement

Person-centred care is about understanding and responding to the patient/service user as an individual. It involves considering the whole person, taking into account not just their health condition, but also each individual's unique abilities, interests, preferences and needs. It is about building relationships with patients and their families putting them at the heart of decision making – ensuring the person is an equal partner in their health care.

The values associated with person-centred care include the recognition and promotion of individuality, independence, privacy, partnership, choice, dignity, respect and rights.

3.2   Current Legal or Relevant Expert Guidance

Key Guidance

- Department of Health (2011), Information Sheet: Personalised Care Planning
- Healthcare Improvement Scotland, Person-centred care
- NICE Guidelines: Person-centred care
- Royal College of Nursing, First steps for health care assistance: Person-centred care
- The Health Foundation: Person-centred care
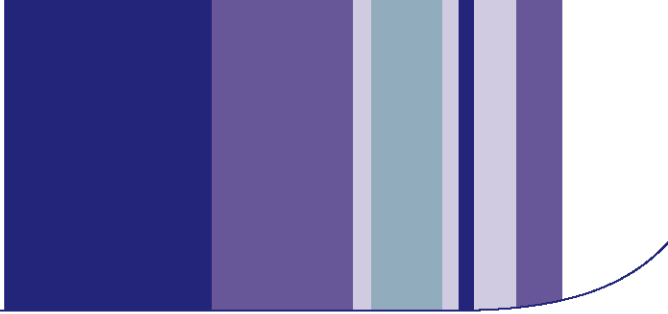- The Point of Care Foundation

3.3   Target Audience

Any clinical or non-clinical staff including unpaid and voluntary staff.

3.4   Key Learning Outcomes

The learner will:

a)   understand the importance of person-centred values in providing on-going care and support to individuals

b)   understand how to work in a person-centred way including:

- o   the importance of finding out the history, preferences, wishes and needs of the individual

- o   why the changing needs of an individual must be reflected in their care and/or support

- o   the importance of supporting individuals to plan for their future wellbeing and fulfilment, including end of life care

c)   be aware of how environmental factors may have the potential to cause discomfort or distress and how to make changes to address such factors

d)   be aware of signs that an individual may be in pain or discomfort and know how to take appropriate action where there is pain or discomfort

e) know how to make others aware of any actions they may be undertaking that are causing discomfort or distress to individuals

f) understand how to support individuals to maintain their identity and self-esteem

g) know how to support individuals using person-centred values including respect for individuality, dignity and choices

h) know how to report any concerns to the relevant person

3.5　Links to other relevant standards and frameworks

Relevant Care Certificate Standards

- Standard 5: Work in a person-centred way

Relevant National Occupational Standards

- SCDHSC0234: Uphold the rights of individuals
- SCDHSC0332: Promote individuals' positive self-esteem and sense of identity
- SCDHSC0350: Support the spiritual well-being of individuals

Knowledge Skills Framework

N/A

Subject 4: Communication

4.1   Context Statement

Good communication is central to delivering effective healthcare and to working safely and effectively with colleagues. Communication is particularly important in healthcare when dealing with patients/service users who may be vulnerable, anxious, confused and sometimes challenging. Communication needs to be handled effectively and sensitively, especially when dealing with potentially difficult situations such as conveying bad news, dealing with complaints or resolving disputes. Approaches may also need to be adapted to reduce barriers to communication and in response to the needs, preferences and abilities of individuals.

4.2   Current Legal or Relevant Expert Guidance

Key Guidance

- Department of Health (2014) Duty of Candour

- Department of Health (2010), Essence of Care: Benchmarks for Communication

- Royal College of Nursing, First steps for healthcare assistants: Communication

4.3   Target Audience

Any clinical or non-clinical staff including unpaid and voluntary staff.

4.4   Key Learning Outcomes

The learner will:

a)   understand the importance of effective communication at work

b)   understand the different ways that people communicate

c)   know how to meet the communication and language needs, wishes and preferences of individuals

d)   know how to promote effective communication, including how to reduce barriers to communication and the importance of active listening

e)   know how and when to use appropriate verbal and non-verbal communication

f)   be aware of environments and approaches for communicating effectively about difficult, complex and sensitive issues

g)   understand the importance of effective communication in preventing or diffusing conflict or challenging behaviour

h)   understand the reasons for being open and transparent with service users about their care and treatment

i)   understand the principles and practices relating to confidentiality

j)   know how to support the use of appropriate communication aids/ technologies.

Context specific knowledge and understanding

In addition to the core learning outcomes above, learners will be expected to achieve further learning outcomes in the context of their own role e.g.

Learners will:

- know where to find information and support services to help them communicate more effectively
- know who to ask for advice and support about confidentiality
- understand organisational policies, procedures and codes of conduct relevant to their responsibilities when communicating about complex and sensitive issues
- be aware of communication aids/technologies available in their organisation

See also CSTF Subjects on Information Governance and Conflict Resolution.

4.5   Links to other relevant standards and frameworks

Relevant Care Certificate Standards

- Standard 6: Communication

Relevant National Occupational Standards

- GEN97: Communicate effectively in a healthcare environment

- GEN98: Promote effective communication in a healthcare environment

- SCDHSC0031: Promote effective communication

- SCDHSC0021: Support effective communication

Knowledge Skills Framework

The Learning Outcomes contribute evidence towards demonstration of the Knowledge Skills Framework Core Dimensions *Communication* at **Levels 1, 2 & 3.**

Subject 5: Consent

5.1   Context Statement

Consent to treatment is based on the important principle that a person must give their permission before they receive any type of medical treatment or examination. Consent can be given verbally or in writing, often dependent upon the type of intervention involved.

Valid consent is voluntary (i.e. made without undue influence from others) and informed (i.e. based on sufficient information regarding what is involved including benefits, risks and reasonable alternatives). In order to give informed consent, a person must also have the capacity to consent i.e. they can understand information given to them and can use it to make an informed decision.

Healthcare staff need to understand the principles of valid consent and to recognise the range of circumstances and responses where an individual may lack capacity to consent.

5.2   Current Legal or Relevant Expert Guidance

Legislation – England and Wales

- Children Act 1989

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2010

- Mental Capacity Act 2005

- Mental Health Act 1983

Legislation – Northern Ireland

- Mental Health (Northern Ireland) Order 1986

Legislation - Scotland

- Adults with Incapacity (Scotland) Act 2000

- Age of Legal Capacity (Scotland) Act 1991

Key Guidance - UK

- General Medical Council (2008), Consent, patients and doctors making decisions together

- NHS Choices, Consent to treatment

- Nursing & Midwifery Council, Regulation in Practice: Consent

- Royal College of Nursing, First steps for healthcare assistants: Consent

Key Guidance - England

- Department for Constitutional Affairs (2007), Mental Capacity Act 2005: Code of Practice

- Department of Health (2009), Reference guide to consent for examination or treatment (Second edition)

- NSPCC, Gillick competency and Fraser Guidelines

- Office of the Public Guardian (2009), Making decisions: A guide for people who work in health and social care

Key Guidance - Scotland

- The Scottish Government (2008), Communication and Assessing Capacity: A guide for social work and health care staff.

5.3   Target Audience

Any clinical or care staff.

NB. Staff involved in specialist roles (e.g. involving research, communicable diseases and the removal, storage, use and disposal of human tissue) will require additional learning to fulfil their responsibilities.

5.4   Key Learning Outcomes

The learner will:

a)   understand the requirements for seeking valid consent

b)   know about different ways a person may give (or refuse) consent

c)   know the types of circumstance where a written record of consent (or refusal) must be obtained

d)   be able to communicate effectively about proposed treatment or care to enable individuals to make informed choices

e)   be aware of potential implications of providing insufficient information about proposed treatment or care

f)   understand the right of individuals to refuse consent and ways to respond to refusal of consent

g)   understand the types of circumstances in which adults may lack capacity to consent

h)   understand types of action that may be taken in emergency situations where an individual may be temporarily unable to consent

i)   know how advanced decisions can be used to provide information about the wishes of an individual

j)   be aware of the protocols and legislation for obtaining consent for children and young people

k)   be aware of the protocols and legislation regarding consent for people who are mentally incapacitated

l)   understand how 'best interests' decisions may need to be made for those lacking capacity

m)   be aware of key principles in legislation relevant to mental capacity and consent.

Context specific knowledge and understanding

In addition to the core learning outcomes above, learners will be expected to achieve further learning outcomes in the context of their own role e.g.

Learners will

- know the local procedures for maintaining and storing records
- know where and how to obtain legal or professional advice on consent in complex situations.

See also CSTF Subjects on Safeguarding Adults and Safeguarding Children.

5.5   Links to other relevant standards and frameworks

Relevant Care Certificate Standards

- N/A

Relevant National Occupational Standards

- CHS167: Obtain valid consent or authorisation
- HPC1: Obtain valid consent for healthcare interventions in a custodial setting

Knowledge Skills Framework

N/A

Subject 6: Privacy and dignity

6.1   Context Statement

Preserving people's privacy and dignity is fundamental to the provision of quality care. It is about the way healthcare staff approach the patient/service user including giving them time, attention and respect. As far as possible healthcare staff should be mindful of maintaining the privacy of the individual when providing personal care, and also the privacy of an individual's personal information. Dignity is also about treating the patient/service user as an individual, giving them choices and involving them in decisions.

6.2   Current Legal or Relevant Expert Guidance

Key Guidance

- Royal College of Nursing: Dignity
- Royal College of Nursing, First steps for healthcare assistants: Dignity
- Social Care Institute for Excellence, Dignity in Care

6.3   Target Audience

Any clinical or non-clinical staff including unpaid and voluntary staff.

6.4   Key Learning Outcomes

The learner will:

a)   understand the principles that underpin privacy and dignity in care

b)   know how to maintain privacy and dignity of individuals when providing personal care

c)   understand why it is important not to disclose information that an individual may wish to be kept private, unless it is appropriate to do so

d)   understand an individual's right to make choices (including choices about their care) and how to support individuals to make their own decisions

e)   know how risk assessment processes may be used to support the right of individuals to make their own decisions

f)   understand how to support the active participation of individuals in their care

g)   know how to report any concerns to the relevant person.

See also CSTF Subjects on Safeguarding Adults and Safeguarding Children.

6.5   Links to other relevant standards and frameworks

Relevant Care Certificate Standards

- Standard 7: Privacy and dignity

Relevant National Occupational Standards

- SCDHSC0234: Uphold the rights of individuals
- SCDHSC3111: Promote the rights and diversity of individuals

Knowledge Skills Framework

N/A

Subject 7: Fluids and nutrition

7.1   Context Statement

The provision of fluids and nutrition is integral to the care and well-being of patients/service users. Proper nutrition is not only essential for life but also represents a source of pleasure, often with social, cultural or religious associations.

Patients/service users needs for fluids and nutrition, including their appetite and ability to eat may be affected over time by their medical condition and level of activity. A lack of appropriate fluid and nutrition may delay an individual's recovery and increase the risk of complications. Provision of good quality food, fluid and nutritional care can be an integral part of therapeutic care.

7.2   Current Legal or Relevant Expert Guidance

Legislation – UK Wide

- Human Rights Act 1998

Key Guidance

- CQC (2013), Time to Listen in Hospitals: Dignity and Nutrition Inspection Programme 2012

- Department of Health (2010), Essence of Care 2010, Benchmarks for Food and Drink

- NICE (2006), Nutrition Support in adults: Oral nutrition support, enteral tube feeding and parenteral nutrition

Key Guidance – Scotland

- NHS Quality Improvement Scotland (2003), Clinical Standards: Food, Fluid and Nutritional Care in Hospitals

7.3   Target Audience

Any staff groups, including unpaid and voluntary staff whose role involves supporting individuals with their routine fluid and nutritional needs.

NB. Staff involved in particular roles such as provision of intravenous fluids or artificial nutrition will require additional specific training to fulfil their responsibilities.

7.4   Key Learning Outcomes

The learner will:

a)   understand the importance of good hydration and nutrition in maintaining health and wellbeing

b)   know the signs and symptoms of poor hydration and nutrition

c)   understand the importance of food safety, including hygiene, in the preparation and handling of food

d)   know how to promote adequate hydration and nutrition

e)   understand the effects of culture and religion on individuals' dietary requirements and preferences

f)   know how individuals can be supported and encouraged to access fluids in accordance with their preferences, requirements and/or plan of care

g)   know how individuals can be supported and encouraged to access food and nutrition in accordance with their preferences, requirements and/or plan of care

h)   know how to report any concerns to the relevant person.

Context specific knowledge and understanding

In addition to the core learning outcomes above, learners will be expected to achieve further learning outcomes in the context of their own role e.g.

Learners will need to be aware of:

- local protocols or processes for ordering and delivering food/fluid
- meal and snack times
- procedures for ordering missed meals.

7.5   Links to other relevant standards and frameworks

Relevant Care Certificate Standards

- Standard 8: Fluids and nutrition

Relevant National Occupational Standards

- SCDHSC0213: Provide food and drink to promote individuals' health and well being
- SCHSSC0214: Support individuals to eat and drink

Knowledge Skills Framework

N/A

Subject 8: Dementia awareness

8.1   Context Statement

With an aging population, the number of people in the UK living with, or at risk of dementia is continuing to rise. In 2009, the government responded with a National Dementia Strategy[4] which included the priority to improve dementia awareness. Building on this strategy, the Prime Minister's Dementia Challenge launched in 2012 focused on areas of action to make a difference to those affected by dementia and in 2015 the Department of Health published the Prime Minister's challenge on dementia to 2020[5] which renewed the commitment to provision of dementia awareness training.

Dementia awareness is therefore a key priority for the entire health and care workforce. In addition to those providing clinical care or support for people living with dementia, a large proportion of the health and care workforce, including support staff, come into contact with people living with dementia and need to have an awareness of the specific needs of people living with dementia and those of their carers.

8.2   Current Legal or Relevant Expert Guidance

Legislation – England and Wales

- Mental Capacity Act 2005
- Care Act (2014)

Legislation – Northern Ireland

- Mental Health (Northern Ireland) Order 1986

Legislation - Scotland

- Adults with Incapacity (Scotland) Act 2000

Key Guidance

There are numerous publications and guidance documents on the subject of dementia. A sample of organisations and key documents are suggested below as an indicative list:

- Alzheimer's Society
- Dementia UK
- Dementia Partnerships
- Dementia UK, A Curriculum for UK Dementia Education; Developed by the Higher Education for Dementia Network (HEDN)
- Department of Health (2013), Making a Difference in Dementia: Nursing Vision and Strategy
- Department of Health (2009), Living Well with Dementia: A National Dementia Strategy, Chapter 3: Raising awareness and understanding

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[4] Department of Health (2009), Living Well with Dementia: A National Dementia Strategy
[5] Department of Health (2015) Prime Minister's challenge on dementia 2020

- Department of Health (2015) Prime Minister's challenge on dementia 2020

- Norfolk & Suffolk Dementia Alliance, A practical guide to Fundamental Care for People with Dementia

- Royal College of General Practitioners and Alzheimer's Society, Dementia Road Map

- Skills for Care & Skills for Health (2011), Common Core Principles for Supporting People with Dementia: A guide to training the social care and health workforce

- The Scottish Government (2011), Promoting Excellence: A framework for all health and social services staff working with people with dementia, their families and carers

- Worcestershire Health and Care NHS Trust (2011), Stand by me: Promoting good communication with people living with dementia and their families

8.3   Target Audience

The entire health and care workforce

8.4   Key Learning Outcomes

The learner will:

a)   know what is meant by the term 'dementia'

b)   be aware of the prevalence of dementia in the UK population

c)   be able to recognise signs of dementia and also be aware that these signs may be associated with other conditions or circumstances

d)   know what actions individuals can take to reduce their risk of dementia, or to delay onset

e)   know why early diagnosis of dementia is important

f)   know the actions that people affected by dementia can take in order to live as well as possible after diagnosis

g)   understand the importance of recognising the person with dementia as a unique individual

h)   be aware of the impact of dementia on individuals, families and society

i)   be able to communicate effectively and compassionately with individuals who have dementia

j)   understand reasons why a person with dementia may exhibit signs of distress and how behaviours seen in people with dementia may be a means for communicating unmet needs

k)   be able to signpost individuals, families and carers to dementia advice, support and information

NB. These core learning outcomes for Dementia Awareness may be supplemented by additional outcomes to take account of factors such as type of role, location, service need and risk analysis. Dementia awareness also needs to be understood in conjunction with related statutory and mandatory subjects as appropriate to role e.g. CSTF Subjects on Safeguarding Adults, Equality, Diversity and Human Rights.

Context specific knowledge and understanding

In addition to the core learning outcomes above, learners will be expected to achieve further learning outcomes in the context of their own role i.e.

Learners will need to be aware of:

- local sources of dementia advice and information
- how individuals can access local assessment and support services

8.5 Links to other relevant standards and frameworks

Relevant Care Certificate Standards

- Standard 9: Awareness of mental health, dementia and learning disability

Relevant National Occupational Standards

- SCDHSC0419 Provide advice and information to those who enquire about health and social care services
- SCDHSC0026 Support individuals to access information on services and facilities
- SFHCHS177 Advise on access to and use of services
- MH14.2013: Identify potential mental health needs and related issues

Dementia Education Principles and Standards

- Principle 3. Collaboration Level 1
- Principle 5. Recognition Level 1

HEDN: A Curriculum for UK Dementia Education

- Core Topic 1. Prevention and keeping well
- Core Topic 2. Identification and assessment of dementia
- Core Topic 3. Understanding the experience of and communicating with people with dementia

Dementia Core Skills & Knowledge Framework

The Dementia Core Skills & Knowledge Framework comprises the following subjects:

1. Dementia awareness
2. Dementia identification, assessment and diagnosis
3. Dementia risk reduction and prevention
4. Person-centred dementia care
5. Communication, interaction and behaviour in dementia care
6. Health and well-being in dementia care
7. Pharmacological interventions in dementia care
8. Living well with dementia and promoting independence
9. Families and carers as partners in dementia care
10. Equality diversity and inclusion in dementia care
11. Law, ethics and safeguarding in dementia care
12. End of life dementia care
13. Research and evidence-based practice in dementia care
14. Leadership in transforming dementia care

Subject 9: Blood component transfusion

9.1 Context Statement

Blood Transfusion is an effective and essential part of numerous clinical treatments and can save lives. However, any error or incorrect management during the transfusion process has the potential for catastrophic consequences for the patient. The Serious Hazards of Transfusion (SHOT) Scheme has identified the nature and frequency of significant adverse events and reactions associated with blood transfusion. It is imperative for patient safety that clinical staff must be familiar with the aspects of the transfusion process relevant to their role and all the associated risks.

While the use of blood transfusion represents a significant therapeutic intervention, care is needed to ensure that it is used appropriately and all alternatives explored where appropriate. This is both in terms of patient care and recognising that donated blood is a finite resource and it is therefore essential that blood component stocks are preserved and avoidable blood component waste is prevented.

9.2 Current Legal or Relevant Expert Guidance

Legislation – UK Wide

- The Blood Safety and Quality Regulations 2005

Key Guidance – UK Wide

- JPAC, Good Manufacturing Practice (GMP)

- MHRA (2014), Rules and Guidance for Pharmaceutical Manufacturers and Distributors

- National Blood Service (2013), Guidelines for the Blood Transfusion Service in the United Kingdom

- United Kingdom Blood Services (2014), Handbook of Transfusion Medicine

Key Guidance – England

- Department of Health (2007), Health Service Circular: Better Blood Transfusion Safe and Appropriate Use of Blood

Expert Organisations

- Advisory Committee for the Safety of Blood, Tissues and Organs

- Joint United Kingdom Blood Transfusion and Tissue Transplantation Services Professional Advisory Committee (JPAC)

- Medicines and Healthcare Products Regulatory Agency

- National Institute for Health and Care Excellence

- NHS Blood and Transplant

- Northern Ireland Blood Transfusion Service

- Scottish National Blood Transfusion Service

- Serious Hazards of Transfusion (SHOT)
- The British Committee for Standards in Haematology
- Welsh Blood Service

9.3 Target Audience

All staff involved in the blood transfusion process which includes decision to transfuse, transfusion blood sampling, collection of blood components from storage, administration and monitoring of a transfusion. This could include: Nurses, Midwives, Doctors, Phlebotomists, Student Nurses/Midwives, Medical Students, Health Care Assistants, Porters, Assistant Theatre Practitioners, Operating Department Practitioners and Perfusionists (note this is not an exhaustive list).

9.4 Key Learning Outcomes

The following learning outcomes reflect a minimum standard which should be incorporated into blood transfusion training for staff involved in those aspects of the transfusion process relevant to their role.

Decision to Transfuse

The learner will:

a) understand transfusion issues

b) be able to identify the blood components available and know the indications for their use

c) have an understanding of the available alternatives to transfusion

d) know the expected benefits, risks and anticipated outcomes of transfusion

e) understand the importance and the factors considered as part of undertaking an effective patient assessment

f) understand the importance of providing and documenting the reason for transfusion

g) understand the importance of providing patient's with the required information to enable the patient's understanding for blood transfusion and respond to their concerns

h) understand the importance of and know the procedure for obtaining and documenting informed consent for blood transfusion

i) know the processes required for the safe and appropriate ordering of blood components, including special requirements

j) know where local policies are available

k) know the processes to authorise (prescribe) blood components.

Blood Sampling

The learner will:

a) know which equipment and materials are needed for blood sampling including protective clothing for yourself and/or individual

b) understand the importance of obtaining positive confirmation of individuals' identity and consent before starting the procedure - and effective ways of getting positive identification

c) know the processes required for obtaining and labelling a transfusion sample

d) understand the importance of correctly completing a transfusion request with all relevant clinical information

e) identify the possible consequences of confusing samples or incorrect labelling

f) know the procedure for safe disposal of equipment and material used

g) understand the importance of communication with the transfusion laboratory for urgent requests

h) know where local policies are available.

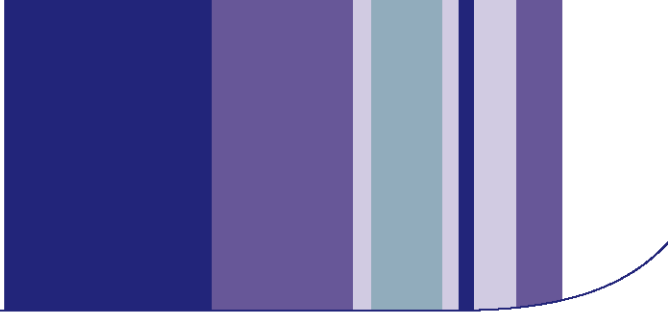**Collection of Blood Components from Storage and Delivery to the Clinical Area**

The learner will:

a) be able to identify the common errors related to the collection of blood components and know how to reduce the potential risks

b) know the correct checking procedures and understand the rationale underpinning them

c) understand the importance of obtaining positive confirmation of patient identity before starting the procedure - and effective ways of getting positive identification

d) understand the importance of clear documentation and communication and be aware of the information required to collect blood components

e) understand and know the correct procedures, conditions and documentation required for receiving/delivering or returning blood components

f) know where local policies are available.

Administration of blood components

The learner will:

a) be able to identify the common errors related to the administration of blood transfusion and know how to reduce the potential risks

b) understand the importance of obtaining positive confirmation of patient identity before starting the blood transfusion procedure - and effective ways of getting positive identification

c) understand the importance of informed consent and indication of blood transfusion

d) know the procedure for correct blood component checks prior to administration, and understand the rationale underpinning them

e) know the frequency and importance of patient monitoring, transfusion rates and relevant documentation of transfusion episodes

f) know how and where blood components are stored

g) understand the importance and legal implications of traceability for blood components

h) know, recognise and understand the potential common complications of blood transfusion together with the appropriate management

i) know the process for management of massive blood loss

j) know how to raise concerns or report incidents / regarding the administration of components

k) know the procedure for safe use and disposal of equipment and materials

l) know where local policies are available.

9.5 Proposed Frequency of Refresher Training or Assessment

Proposed Refresher Training Periods

Based on available guidance it is recommended that all staff involved in the blood transfusion process should receive training relevant to their role at induction to ensure awareness of local procedures and thereafter refresher training **at least** once every 3 years.

Organisational Implications: Each healthcare organisation will need to determine the required refresher training periods, ensuring that any agreed training schedule is incorporated into their local policy. Refresher training will be indicated for all staff if there is a change in Blood Transfusion legislation nationally or an organisation has amended its policy locally.

Assessment of Competence

- Staff should not participate in the blood transfusion process until they have completed any locally used and agreed assessments.
- Where a staff member or learner does not meet the required level of current knowledge and understanding, they should repeat the refresher training and any associated locally used and agreed assessments.

9.6   Suggested Standards for Training Delivery

The employing organisation should be assured that learning facilitators who are involved in the delivery of Blood Transfusion training and education have the appropriate experience, background and qualifications to deliver training to a satisfactory standard. This must include the following:

- Hold a current and relevant professional healthcare qualification and/or work within the transfusion support service.

- Possess a current and thorough knowledge of blood transfusion, legislation and guidelines together with an understanding of its application to practice.

- Have experience in teaching and the ability to adapt or plan teaching methods to provide the best opportunity for developing and educating learners.

- Be able to demonstrate the ability to deliver and maintain effective learning and assess competency of effective learning.

Where the training is provided by a person who is not an expert in the subject the organisation must put in place quality mechanisms which assure accuracy of the content and effectiveness of the teaching delivery. This must be subject to periodic review.

9.7   Links to other relevant standards and frameworks

Relevant National Occupational Standards

- CHS101 Organise the collection and receipt of blood/blood products for transfusion

- CHS102 Prepare to administer transfusion of blood/blood products to patients

- CHS103 Administer blood transfusion

- GEN57 Collect blood / blood products from storage for transfusion

- CHS131 Obtain and test capillary blood samples

- CHS132 Obtain venous blood samples

Knowledge Skills Framework

The Learning Outcomes identified in 1.4 could contribute evidence towards demonstration of the NHS Knowledge & Skills Framework Specific Dimension: Health and Wellbeing

- HWB6- Assessment and Treatment Planning – all levels

- HWB7 - Interventions and Treatment – all levels.

Appendix 1: User Guide

Learning outcomes

The learning outcomes aim to describe what the learner will know, understand or be able to do as a result of their learning. This approach is derived from Bloom's Taxonomy[6] i.e.

- Knowledge: Remember previously learned information
- Comprehension: Demonstrate an understanding of the facts
- Application: Apply knowledge to actual situations
- Analysis: Break down objects or ideas into simpler parts and find evidence to support generalisations
- Synthesis: Compile component ideas into a new whole or propose alternative solutions
- Evaluation: Make and defend judgements based on internal evidence or external criteria.

The majority of learning outcomes describe knowledge, comprehension/understanding and application, although there are some learning outcomes which may include analysis, synthesis and evaluation.

The learning outcomes for each subject should together indicate the minimum content for the design and delivery of teaching and learning in that subject. However, it is important to reiterate that this is a *core* skills and knowledge framework i.e. the scope of the framework is that which is common and applicable to all relevant settings. Additional content may also be required for some roles and contexts.

The learning outcomes are written as broad statements e.g. 'The Learner will: be aware of / know / understand / be able to…' This provides scope for the Framework to be applicable across a wide range of contexts and settings.

Training and assessment

The Framework does not prescribe a training/teaching method. This will be developed according to the particular context or setting. Similarly, the Framework does not seek to prescribe assessment methods.

For application in a specific context, relevant learning objectives or assessment criteria may be developed to measure achievement of the learning outcomes. In a given context, more specific verbs may be applied to each learning outcome e.g. 'The Learner will: explain / describe / demonstrate / discuss / identify / etc…'

For example, in different organisations or contexts learning outcomes may be assessed by a range of methods e.g. E-assessment, group discussion, observation of performance, products of work, testimony from witnesses, project/case study work etc. The learning outcomes in the Framework are intended to be adaptable to this variety of assessment methods.

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[6] *Bloom B (1956), Taxonomy of educational objectives*

Target audience

The Core Skills & Knowledge Framework provides a focus on the skills, knowledge and behaviours expected for the delivery of the relevant clinical/care subjects. This should be of particular value to:

Individuals and teams

The Framework sets out clear expectations for learners and in particular, the core learning outcomes that they should be able to demonstrate. This supports individuals and teams to:

- be clear about the requirements of their roles and to recognise their own transferable skills
- conduct formal or informal training needs analysis, comparing current skills and knowledge with required skills and knowledge
- plan future training requirements to enable continuing professional development and career progression.

Subject matter experts / trainers

The Framework helps those who design education and training opportunities to focus on the key knowledge and skills that learners need to achieve, which in turn will guide the content to be included and the use of appropriate teaching strategies.

The specific learning outcomes also support the effective evaluation of training. Approaches to evaluation can include:

- Evaluating whether learners have achieved the required learning outcomes immediately following a learning intervention (e.g. through assessment of knowledge and/or competence)
- Evaluating whether the learning is being applied in the workplace (e.g. through longer-term evaluation of impact on practice, possibly as part of supervision or appraisal processes)
- Evaluating the impact on quality of care (e.g. measuring patient outcomes and/or levels of satisfaction from individuals and their families). Such evaluation will require data collection to measure what changes.

Assessors of occupational standards

References to relevant national occupational standards and national skills frameworks indicate how the Framework relates to national standards. For example, a learner working towards the requirements of a national occupational standard could use the Framework as a guide to the skills and knowledge they would need to demonstrate in achieving the national occupational standard.

Managers in organisations / commissioners of training

The Framework enables managers and commissioners to be clear about the specific outcomes required from staff development interventions. Use of the Framework within an organisation enables managers to demonstrate that core clinical/care training has been planned and delivered in accordance with a nationally recognised Framework. Similarly, commissioners can use the Framework to provide training providers with a quality assurance specification for core clinical/care training.

Education providers

Universities, Colleges and private training providers can use the Framework to underpin the design of education and training curricula, ensuring that required core clinical/care learning outcomes are integrated appropriately and/or mapped to overall achievement of curriculum aims. This will help ensure that those learners undertaking healthcare programmes are given the opportunity to acquire core knowledge and skills which are relevant to the requirements of employing organisations.

Regional and national implementation

A further aspiration in providing this Framework is that organisations will be able to review their current arrangements for defining and delivering core clinical/care training and through the adoption of the Framework align their approaches. Such alignment should then have benefits in ensuring consistent approaches, promoting quality and delivery of training which, through the use of learning outcomes, should be more educationally focused and valued. This has the potential to promote organisational and system wide efficiencies by encouraging the health sector to recognise training which meets recognised standards and in doing so help to prevent unnecessary duplication of training delivery.

Mapping and Alignment to the Learning Outcomes of the Framework

Demonstrating how any local training delivery meets or exceeds the Core Skills Training Framework will be a key quality assurance process that organisations will need to undertake if they are to confirm alignment with the framework.

To support this, a content mapping tool has been developed. This will enable organisations to conduct a self-assessment. This tool will help organisations to:

- Undertake a mapping of local learning outcomes against the learning outcomes for each Subject within the framework.
- Assess whether local learning facilitators meet the expected standards to support training delivery.
- Identify any potential gaps and develop an action plan to address any gaps identified.

Further information about mapping and alignment to the Core Skills Training Frameworks is available from the Skills for Health web site here.

Appendix 2: Suggested standards for training delivery

The employing organisation should be assured that Learning Facilitators have the appropriate experience and background to deliver training to a satisfactory standard. For guidance, this may include the following:

- A current and thorough knowledge of the relevant subject.

- Experience of teaching and learning, including the ability to meet the competences expected for LSILADD04 Plan and prepare specific learning and development opportunities.

The organisation should also ensure that they have put in place a quality assurance mechanism, whereby the accuracy of the content and the effectiveness of its delivery has been quality assured and is subject to periodic observation.

The Quality Mark standard is available for health sector organisations seeking external endorsement for the quality of their learning and training delivery.

Where E-learning is used, the organisation must ensure the accuracy of the content and its coverage of the required learning outcomes. Skills for Health has developed E-Learning courses aligned to the learning outcomes in each new clinical/care subject. Further information about Skills for Health E-Learning is available here.

The Education Outcomes Framework (Department of Health 2013) provides further guidance on the quality of training with a focus on improvements in patient care, health outcomes and addressing variation in standards.

Appendix 3: Proposed frequency of refresher training or assessment

Unless otherwise specified, each organisation will determine any required refresher periods according to local needs and risk assessment, ensuring that any agreed training schedule is incorporated into local policy.

Refresher training will be indicated if staff changes role, there is a change in relevant legislation, national guidelines, organisational protocols or new technologies become available.

Assessment of Competence

- Where a staff member or learner can demonstrate through robust pre-assessment, including where relevant, practical assessment, the required level of current knowledge, understanding and practice, then this can be used as evidence that knowledge and skills have been maintained and the staff member may not need to repeat refresher training.

- Where a staff member or learner does not meet the required level of current knowledge and understanding and practice through pre-assessment, they should complete the refresher training and any associated assessments required.

Appendix 4: Related occupational standards, skills frameworks and qualifications

National Occupational Standards (NOS)

National Occupational Standards (NOS) are statements of the standards of performance for individuals when carrying out functions in the workplace, together with specifications of the underpinning knowledge and understanding.

NOS are developed for employers by employers through the relevant Sector Skills Council or Standards Setting Organisation.

All national occupational standards are available from the NOS Directory

Competence search tools are also available from the Skills for Health Tools web site.

Statutory/Mandatory UK Core Skills Training Framework

Skills for Health has previously developed the UK Core Skills Training Framework which sets out the expected learning outcomes and standards for delivery of training related to the most common statutory and mandatory training subjects within the health sector. The aim is to help ensure the quality and consistency of such training, and to help prevent unnecessary duplication of training.

In order to access the UK Core Skills Training Framework, individuals must first register to use the Skills for Health Tools portal at: http://tools.skillsforhealth.org.uk/login/core_skills_training_framework/.

Once registered, it is possible to download the Framework documents. A number of tools and resources are available from the web site to help organisations map their training to the Framework.

Care Certificate Standards

Following the Francis Inquiry, Camilla Cavendish was asked by the Secretary of State to review and make recommendations on the recruitment, learning and development, management and support of healthcare assistants and social care support workers.

The resulting report, published in July 2013, found that the preparation of healthcare assistants and social care support workers for their roles within care settings was inconsistent, and one of the recommendations was the development of the Care Certificate.

Skills for Health, Health Education England, and Skills for Care, have worked together to develop and pilot the draft Care Certificate documents.

The Care Certificate was formally launched in April 2015, replacing both the National Minimum Training Standards and the Common Induction Standards. Further information about the Care Certificate is available from Skills for Health and Skills for Care.

Indicative mapping of Care Certificate Standards to the Core Skills Training Framework subjects

Care Certificate Standards	CSTF Subjects	CSTF Framework
1. Understand Your Role	Your healthcare career	Clinical/Care
2. Your Personal Development		
3. Duty of Care	Duty of care	Clinical/Care
4. Equality and Diversity	Equality, diversity and human rights	Statutory/Mandatory
5. Work in a Person Centred Way	Person-centred care	Clinical/Care
6. Communication	Communication	Clinical/Care
7. Privacy and Dignity	Privacy and dignity	Clinical/Care
8. Fluids and Nutrition	Fluids and nutrition	Clinical/Care
9. Awareness of mental health, dementia and learning disability	Dementia awareness Dementia Tier 2 subjects	Clinical/Care Dementia
10. Safeguarding Adults	Safeguarding adults	Statutory/Mandatory
11. Safeguarding Children	Safeguarding children	Statutory/Mandatory
12. Basic Life Support	Resuscitation	Statutory/Mandatory
13. Health and Safety	Health, safety & welfare Fire safety Moving and handling	Statutory/Mandatory
14. Handling Information	Information governance	Statutory/Mandatory
15. Infection Prevention and Control	Infection prevention and control (Level 1)	Statutory/Mandatory

Appendix 5: Summary of key sources and subject matter experts consulted

Relevant source documents have been identified and reviewed. Subject matter experts have been consulted, and where appropriate their advice has been incorporated into the guidance.

Subjects	Key sources / experts consulted
Your healthcare career Duty of care Person-centred care Communication Privacy and dignity Fluids and nutrition	Review of drafts and piloting of the Care Certificate standards, led by Skills for Health, Skills for Care and Health Education England (2014). Skills for Health on line consultation (December 2014) UK Core Skills Training Framework Reference Group (January 2015)
Consent	Review and mapping of national standards e.g. National Occupational Standards, CQC standards, NMWC guidance, GMC guidance. Skills for Health on line consultation (December 2014) UK Core Skills Training Framework Reference Group (January 2015)
Dementia awareness	Development and consultation through the Dementia Core Skills & Knowledge Framework Expert Group (June 2014 to March 2015), led by Skills for Health and Health Education England. Skills for Health on line consultation (December 2014)
Blood component transfusion	Development and consultation through the Transfusion Training Passport Working Group (2013/2014), led by Mandy Hobson, Transfusion Practitioner, Barnet and Chase Farm NHS Trust. Stakeholder groups engaged during 2014 include: National Regional Transfusion Committee (RTC) The British Blood Transfusion Society (BBTS) Transfusion Practitioner (TP) group NHS Blood & Transplant Customer Services Patient Blood Management Team

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