



COMPETENCES FOR HEALTH TRAINERS

Version 1.7

24 April 2006

Document Control Page

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History

Vers #	Date	Author or Technical Contact	Description of version	Email
1.1	1/6/05	Peter Stansbie	1st draft of Competencies produced as a discussion document	Peter.stansbie@skillsforhealth.org.uk
1.2	5/8/05	Maggie Rae & Lindsay Mitchell	2 nd Draft following comments from the project team and from HT workforce working group	lindsay.m@btclick.com
1.3	9/1/06	Lindsay Mitchell	3 rd draft following feedback from Hubs	lindsay.m@btclick.com
1.4	22/02/06	Lindsay Mitchell	4 th draft following feedback from BPS, AfC team and two hubs – produced to assist in the AfC job evaluation process. NOT FOR GENERAL CIRCULATION DUE TO TIMING	lindsay.m@btclick.com
1.5	17/03/06	Lindsay Mitchell	Interim draft for discussion with the hubs – accompanied by other possible competences	lindsay.m@btclick.com
1.6	10/04/06	Lindsay Mitchell	Final draft version – prior to finalising with the Education Regulatory Authorities	lindsay.m@btclick.com
1.7	24/04/06	Lindsay Mitchell	Final draft version – prior to finalising with the Education Regulatory Authorities (amended typo from v1.6)	lindsay.m@btclick.com

COMPETENCES FOR HEALTH TRAINERS FINAL DRAFT VERSION 1.7 – 24 APRIL 2006

Skills for Health has worked with representatives from the British Psychological Society and for the Department of Health to take forward the development of national competences for the role of Health Trainer. The competences (shown in Appendix 1) have been produced to:

- 1 inform those taking forward the implementation of Health Trainers within local services of the nature of the health trainer role
- 2 form the basis of national award(s) for health trainers.

Where have the competences come from?

Skills for Health (the Sector Skills Council for the UK Health Sector) and representatives from the British Psychological Society have drawn up these competences drawing from:

- existing national occupational standards – including those for the Practice of Public Health (Skills for Health, March 2004), Community Development Work (Lifelong Learning UK, 2003) and for Health and Social Care (Skills for Health, 2004)
- evidence of effectiveness in individual behaviour change
- feedback from the Early Adopter sites and others.

Some of the national occupational standards have been used as they stand (ie those labelled as HT1 and HT4) whereas others have been adapted to focus on the specific function of health trainers working with individuals on behaviour change (ie HT2 and HT3)¹. The table below shows the competences that have been identified to date as capturing the main aspects of the health trainer role.

National Occupational Standards (NOS) for the Practice of Public Health		Draft competences relevant to the work of Health Trainers based directly on the NOS	
CDW A1	Make relationships with communities	HT1	Make relationships with communities
PH02.01	Communicate with individuals, groups and communities about promoting their health and wellbeing	HT2	Communicate with individuals about promoting their health and wellbeing
PH02.02	Encourage behavioural change in people and agencies to promote health and wellbeing	HT3	Enable individuals to change their behaviour to improve their own health and wellbeing
HSC 244	Manage and organise time and	HT4	Manage and organise your own time and

¹ Please note that this final draft of the competences has used a more logical numbering system than that used in the initial version ie HT1 focuses on making contact with communities, following by communication with individuals (HT2), to work on behavioural change (HT3) and then finally managing own time and resources (HT4). This is a change in order from those tested with the Early Adopter sites.

Who are the competences aimed at?

The competences describe what a health trainer needs to be able to know and do when they are fully developed in their post. The overall focus is working with individuals to enable them to change their behaviour in relation to health in a general sense ie the competences do not include specialised input in any area (eg smoking cessation, diet etc). Individuals employed as health trainers (either on a paid or unpaid basis) might take a number of months to achieve the competences - this will depend on the knowledge, understanding and skills they have before they take up the post. The competences should inform the recruitment of health trainers although it is to be expected that development opportunities will be made available on recruitment and as individuals develop in post.

Who will health trainers work with?

These competences were initially designed for health trainers working with adults, specifically those individuals who are not in contact with healthcare services. However the competences have been tested with other groups (such as children and young people, those with long-term conditions) and it has been shown that they can also be used with these populations.

Are there any circumstances in which health trainers will work solely with groups?

The way that health trainers were conceptualised in the *Choosing Health* White Paper was in relation to facilitating personal behaviour change. From discussions with the Early Adopter sites and others, it is clear that the health trainer development has been taken up and used in a large number of areas and by a range of different organisations and agencies working with a wide range of communities. The Department of Health wishes to retain the central concept of health trainers being about facilitating personal behaviour change. There is a lack of evidence to date as to whether individual behaviour change can be achieved solely through group work and whether different competences would be needed to achieve this. Organisations that have developed their services as a result of the health trainer initiative, but do not have individual behaviour change as a central focus of this role, are encouraged not to badge these developments as relating to health trainers.

How will health trainers work with groups?

Health trainers will have to find ways of developing relationships with communities and individuals and building their trust before they can effectively undertake work on individual behaviour change. How this is done will depend on the service design that is set up locally and within which the role of health trainers sits. Given that the focus of Health Trainer work is individuals who do not usually access health services / are often excluded from services, health trainers will need to access individuals through engaging and interacting with members of the community such as in community groups. For example, health trainers might have as a part of their role running a community group with the aspect of individual behaviour change being an extension of this role. Alternatively health trainers might link in with local community groups but not take an active role in running those groups themselves. When health trainers are established they might also have individuals referred directly to them by other workers and agencies. This is why it is important that health trainers have skills in engaging with communities.

How do the competences relate to the statements in the White Paper *Choosing Health on health trainers?*

The competences have been directly informed by the guidance in the White Paper on the role of health trainers. This is set out below.

White Paper statements	Competences for health trainers
<ul style="list-style-type: none"> help local people make the changes they want to ... friendly, approachable, understanding and supportive (para 11)	HT3 Enable individuals to change their behaviour to improve their own health and wellbeing
<ul style="list-style-type: none"> offer practical support (not preaching) good connections with advice and support locally practical resource to 'help out' on health choices – guide to those who want help different neighbourhoods, different kinds of health trainers (Para 12)	HT2 Communicate with individuals about promoting their health and wellbeing HT3 Enable individuals to change their behaviour to improve their own health and wellbeing
<ul style="list-style-type: none"> range of approaches grounded in psychological science can help people in changing their habits and behaviours (learning how to watch for things that trigger / reinforce behaviour, set goals and plan how to achieve them, build confidence to make changes) skills to reach out and help people in the round (para 14)	HT3 Enable individuals to change their behaviour to improve their own health and wellbeing HT1 Make relationships with communities
<ul style="list-style-type: none"> individuals should be able to contact health trainers direct / people working in the NHS etc can put people in touch with health trainers (para 16)	HT1 Make relationships with communities
<ul style="list-style-type: none"> If people want it, health trainers will provide: <ul style="list-style-type: none"> Advice and support to develop personal health guide including: defining changes want to make, advice and practical support, explain how to access other services locally Health stock take General advice on improving health and on specific issues (eg stopping smoking) Help access other support (Paras 18-20)	HT1 Make relationships with communities HT2 Communicate with individuals about promoting their health and wellbeing HT3 Enable individuals to change their behaviour to improve their own health and wellbeing
<i>To achieve the above health trainers will also need to:</i>	HT4 Manage and organise your own time and activities

Do health trainers have to use specific models of individual behaviour change?

No, however it is important that the work of health trainers' is informed by the most up-to-date evidence of 'what works' in terms of changing individuals' behaviour. Members of the British Psychological Society who are working with the Department of Health have produced

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Prepared by Skills for Health working with the Department of Health and the British Psychological Society

some helpful guidance on the currently available evidence for existing psychological models and approaches². It is likely that the evidence-base will change more rapidly than the competences themselves. The evidence needs to be used as the basis of competent action in this area of work as it would be in any area. The BPS health psychologists have also developed a handbook of evidence-based behaviour change techniques to guide health trainers. The Department of Health has also commissioned work from the National Institute for Health and Clinical Excellence to develop public health programme guidance on effective practice in supporting knowledge, attitude and behaviour change.

What about broader aspects of competence?

The competences in this document are those that are very specific to the main focus of the health trainer role. Health trainers will also need other competences that are common to a wide range of other workers. For example, communicating effectively with others, maintaining and updating their knowledge and skills, and acting in a way that promotes equality and diversity. A guideline Agenda for Change Knowledge and Skills Framework (NHS KSF) post outline is shown in Appendix 2 and this includes the broader aspects of the job. A KSF post outline needs to be developed and agreed in partnership locally if health trainers are employed in the NHS. The KSF post outline in Appendix 2 should only be used as guidance. Each NHS organisation needs to work in partnership (managers and staff) to decide the exact content of the KSF post outline for health trainers employed in their local service.

Why don't the competences use the term 'health trainer'?

Competences never specify job titles as the competences might be suitable for a range of different jobs and/or people might be doing a similar job but have a different job title. So although these competences have been developed with the post of health trainer in mind, they might well be appropriate for a range of other posts. You are free to use these competences in other posts if you feel they are appropriate to the work.

How will the competences be assessed?

Like all competences, it will be necessary to:

- see that the individual can meet the performance criteria within the competences in practice – sometimes called 'shows how'
- be sure that the individual understands why they are doing something and the basis of their decisions (the knowledge and understanding descriptions in the competences) – sometimes called 'knows how'.

Separate portfolio assessment sheets have been produced to help with the assessment process.

The competences will be assessed when individuals:

- are developing their knowledge and skills during initial training and development (such as on formal training programmes and in work placements)
- are learning to apply their knowledge and skills in practice (such as when health trainers first work with communities and individuals and are receiving supervision)

² Prof Susan Michie & Prof Nichola Rumsey, British Psychological Society secondment, The Health Trainer Role, November 2005

and mentoring)

- are undertaking their post as a health trainer on an ongoing basis (such as during the KSF development review process, during ongoing supervision of practice).

Organisations will need to decide at local level who is best placed to assess the competences at the different stages. This might vary from organisation to organisation. Further guidance on assessment will be issued when the competences are used as the basis for national awards.

Who will assess the competences and support health trainers in the workplace?

It is recognised that health trainers will need support in the workplace to develop and apply their knowledge and skills and be given feedback on their work. This means that there will need to be people in the workplace who have the role of 'workplace tutor' to the new health trainers. Individuals who act as a 'workplace tutor' may already have developed their own competence in this role and might have qualifications / awards in relation to these skills. Those developing the health trainer role need to consider where there is sufficient expertise locally for all aspects of the role (eg in behaviour change techniques grounded in psychological science, effective community engagement). It is possible that such expertise will need to be commissioned from elsewhere to develop local capacity.

When national awards are developed for health trainers there will be specific requirements in relation to the assessment of the awards. Some initial background research has been undertaken to identify who is being used currently to assess health trainers and this will be used to form the basis of decisions when the national awards are designed.

Are health trainers going to get a specific form of award / qualification?

The Department of Health is keen for health trainers to have the opportunity to gain some form of national credit for their achievements. This will support the notion of the skills escalator so that these individuals are able to develop into other areas if they wish to do so. The most likely option for such an award is a Vocationally Related Qualification at level 2/3 in the National Qualifications Framework with the possibility of developing a National Vocational Qualification level 3 at a later stage, probably for a wider role. Skills for Health is working with national awarding bodies to take this development forward with the intention of an award being in place by the end of 2006.

Where health trainers are being developed and employed locally, coordinators are encouraged to make sure that individuals who are training to be health trainers maintain a portfolio of their work. This will enable them to gain credit and recognition for their achievements in the future.

How does this work fit with Agenda for Change?

The Department of Health has been working with the NHS Staff Council to take forward the job evaluation aspect of Agenda for Change through the development of a national job evaluation profile for the post of health trainer. Until this is available it will be necessary for NHS organisations to have their job descriptions evaluated through the Job Evaluation scheme at local level.

In relation to the Knowledge and Skills Framework (KSF) aspect of Agenda for Change and its ongoing use in the development review process, Appendix 2 of this document provides a draft KSF post outline for a health trainer post. There are no national KSF post outlines as the

purpose of the KSF is to inform the development of individuals in post within local services. The draft outline in Appendix 2 is purely intended as a starter guide for local organisations to develop and adapt in partnership so that it is fit for purpose for their own Health Trainer posts.

Those leading the health trainer initiative at local level should link in with the Agenda for Change leads in their organisation to understand the processes more fully (eg to understand how the Foundation Gateway and Second Gateway are used within the development and use of a KSF post outline).

How do the detailed health trainer competences fit with the KSF post outline?

Every NHS post that comes under the Agenda for Change pay system needs to have a KSF post outline. KSF post outlines are used as the basis of career and pay progression for individuals within Agenda for Change. The KSF post outline sets out the knowledge and skills that individuals need to apply in their post when they are fully developed. As the KSF applies to the very wide range of posts in the NHS it is broad and generic in nature. A KSF outline for a particular post sets out in more detail the particular ways in which the KSF has to be applied in that post (eg for health trainers).

The competences for health trainers provide in more detail the specific things that health trainers need to be able to know and do. The competences will be of particular use in the training and development of individuals and in enabling them to gain credit for their achievements.

The KSF post outline will be of specific use in the ongoing development and review of health trainers and in identifying how the health trainer role contributes to the overall delivery of services.

Skills for Health is working closely with the KSF Group of the NHS Staff Council to link their national competences into the NHS KSF and make these links widely available.

The next pages set out the detailed competences for health trainers – Appendix 1 – and the draft KSF post outline – Appendix 2.

APPENDIX 1 COMPETENCES FOR HEALTH TRAINERS

COMPETENCE

HT1 **Make relationships with communities**

About this competence

This competence is important because it is concerned with helping to develop joint working relationships between people, organisations and groups in the community.

When you build relationships within communities and organisations you will need to:

- Make contacts within communities
- Help develop working relationships within communities.

This competence is about making contact with individuals and developing an understanding of the context of their lives. When this competence is used by health trainers, they are likely to make use of information held by other people working in the community. They will need knowledge of, and relationships with, organisations, networks and workers in the community in order to support their role as a health trainer as they will not be doing this work in isolation.

Links (draft)

This competence links with the following dimensions and levels of the NHS Knowledge and Skills Framework, 2004:

KSF Dimension Core 1 Communication level 2.

Origins

This competence is taken from the National Occupational Standards for Community Development Work where it appears as number A1.

Key words, concepts and scope of this workforce competence

Scope

- 1 People: a) community leaders
(any two b) community activists
of) c) individual professionals
d) people who may be interested.

- 2 Groups: a) community groups based on locality
(any two b) based on common interests
of) c) based on issues.

Performance criteria

You need to

Make contacts within communities

- 1 Identify people within your community to work with, and make contact with them
- 2 Explain your role and / or that of your group to contacts
- 3 Help collect accurate and up-to-date information on the roles and responsibilities of the people, organisations or groups you contact
- 4 Help record names and contact details of individuals, community groups and organisations, in a form that may be used by yourself and others

Help develop working relationships within communities

- 5 Show respect for others and their potential contribution to community action
- 6 Agree ways of keeping in contact
- 7 Take opportunities to share skills, values and experience
- 8 Outline and agree your own contribution to joint activity
- 9 Refer matters beyond your competence or area of responsibility to more experienced colleagues
- 10 Make commitments that are realistic and can be met by you
- 11 Ensure your own behaviour promotes effective working relationships

Knowledge and understanding

You need to know and understand:

- K1 the benefits and importance of making contact with different people, organisations and groups
- K2 different methods and styles of making appropriate contact with different people, organisations and groups
- K3 ways of identifying the most appropriate person to contact
- K4 how to maintain effective working relationships
- K5 how to record findings in a way that can be used in future work
- K6 how to check that information is up to date and accurate
- K7 the importance of regularly updating information and methods for achieving this
- K8 the importance of systematic and accurate record keeping
- K9 local sources of information relevant to the community
- K10 issues around handling confidential and sensitive information
- K11 the importance of clearly agreeing ways of keeping in contact
- K12 the significance of resources within communities
- K13 the importance of demonstrating respect for others and the contributions they can make to effective community action
- K14 what might be a barrier to people taking part
- K15 the importance of gathering information on the roles and responsibilities of the contacted person, organisation and group
- K16 the importance of fulfilling commitments
- K17 ways of referring matters beyond own competence to a more experienced person
- K18 the importance of reporting findings to community groups.

COMPETENCE

HT2 Communicate with individuals about promoting their health and wellbeing

About this competence

This competence is about communicating with individuals about how they can improve their health and wellbeing so they can develop healthy behaviours and lifestyles. This includes:

- providing information to individuals about health and wellbeing
- providing information to individuals about the relationship between behaviours and health
- enabling individuals to develop their knowledge and skills about health and wellbeing.

This competence will help individuals move from the pre-contemplative to the contemplative stage ie help them be ready to change their behaviour (as described in competence HT2).

Links (draft)

This competence links with the following dimensions and levels of the NHS Knowledge and Skills Framework, 2004:

KSF Dimension HWB1 Promotion of health and wellbeing and prevention of adverse affects on health and wellbeing Level 1

Origins

This is a specific presentation of workforce competence PH02.01 developed by Skills for Health 2004 - National Occupational Standards for the Practice of Public Health.

Key words, concepts and scope of this workforce competence

Key words and concepts

Health and wellbeing	a state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity. Health is a resource for everyday life, not the object of living. It is a positive concept emphasising social and personal resources as well as physical capabilities.
Lifestyle	a way of living based on identifiable patterns of behaviour. An individual's lifestyle is normally a combination of: their personal characteristics, their behaviours, the people they live with and relate to, and their socio-economic and environmental living conditions
Behaviour	The things that people do eg eating high fat foods, physical activity, attendance for health screening, following health advice
Things that affect health and wellbeing	are any features that may cause harm to individuals eg the ways that people live their lives, their behaviours, interactions between individuals, aspects of the environment that affect individuals (eg pollution, poor living conditions).
A basic awareness	a generalised understanding that something exists, but without knowledge of details
A factual knowledge	knowledge that is detailed on a factual level, but does not involve more than a superficial understanding of principles or theories
A working knowledge	the application of factual knowledge in a manner that takes account of widely understood principles or theories and implications within the field of practice

Scope

Information provided to individuals may include:	a) health and wellbeing b) things that affect health and wellbeing.
Information might be provided:	a) face-to-face b) through various forms of media (eg leaflets, videos).

Performance criteria

You need to

- 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 it
 - b) access appropriate support.

Knowledge and understanding

You need to apply:

HEALTH AND WELLBEING

- K1 A basic awareness that health and illness is affected by people's perceptions and is different in different societies and groups
- K2 A factual knowledge of the kinds of misinformation that people may have about health and wellbeing and the affect of this on their behaviour
- K3 A factual knowledge of the things that affect health and wellbeing – individual determinants (eg behaviour and lifestyle) and the wider determinants on health (eg poverty, employment etc)

PROMOTING HEALTH AND WELLBEING

- K4 A factual knowledge of the different ways in which the health and wellbeing of individuals is promoted
- K5 A basic awareness of the evidence about how individuals can promote their own health, including by changing behaviour
- K6 A factual knowledge of the contributions of different agencies to promoting individuals' health and wellbeing and how to contact these agencies
- K7 A factual knowledge of the different arguments that people have against promoting health and wellbeing and how to use counter-arguments
- K8 A working knowledge of how to apply negotiating and influencing skills in working with others to promote health and wellbeing and reduce inequalities
- K9 A basic awareness of the financial and social costs of poor health and wellbeing and the need to identify the benefits of improving health

EFFECTIVE SECTOR AND AGENCY WORKING

- K10 A factual knowledge of the legislation that relates to own work and how it affects own work
- K11 A factual knowledge of the policies and procedures of the employing organisation (including those relating to confidentiality, health and safety, equality and diversity)
- K12 A factual knowledge of the data storage and retrieval systems in own organisation
- K13 A working knowledge of the principles of effective communication with:
 - a. communities
 - b. people in own and other agencies

IMPROVING OWN KNOWLEDGE, SKILLS AND PRACTICE

- K14 A factual knowledge of own role and responsibilities and from whom assistance and advice should be sought if necessary
- K15 A factual knowledge of the principles of equality, diversity and anti-discriminatory practice to work and how to apply these in own work

K16 A working knowledge of how to develop your own competence and the benefits of doing this.

COMPETENCE

HT3 Enable individuals to change their behaviour to improve their own health and wellbeing

About this competence

This competence is about enabling individuals to change their behaviour so that they can improve their own health and wellbeing. It covers:

- helping individuals to identify how their way of life and specific behaviours might affect their health and wellbeing
- helping individuals to develop a personal action plan to make the changes they want to
- helping individuals to change their behaviour and maintain the change.

This competence relies on other earlier work with individuals so that they are ready, willing and motivated to change (eg that carried out in HT1 and HT3).

Links (draft)

This competence links with the following dimensions and levels of the NHS Knowledge and Skills Framework, 2004:

KSF Dimension HWB1 Promotion of health and wellbeing and prevention of adverse affects on health and wellbeing Level 1

Origins

This is a specific presentation of workforce competence PH02.02 developed by Skills for Health 2004 - National Occupational Standards for the Practice of Public Health.

Key words, concepts and scope of this workforce competence

Key words and concepts

Health and wellbeing	a state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity. Health is a resource for everyday life, not the object of living. It is a positive concept emphasising social and personal resources as well as physical capabilities.
A basic awareness	a generalised understanding that something exists, but without knowledge of details
A factual knowledge	knowledge that is detailed on a factual level, but does not involve more than a superficial understanding of principles or theories
A working knowledge	the application of factual knowledge in a manner that takes account of widely understood principles and theories and implications within the field of practice

Scope

Individuals' behaviour change might be in relation to:	<ul style="list-style-type: none">a) eatingb) physical activityc) smokingd) use of drugs and alcohole) sexual activityf) mental health and wellbeingg) risk taking / personal safetyh) the wider determinants of health (eg housing, income, education).
Who will support the behaviour change might include:	<ul style="list-style-type: none">a) the worker him/herselfb) others in the workers agency (eg smoking cessation services, psychology services)c) workers in other agencies (eg voluntary sector)d) significant others.

Performance criteria

You need to

- 1 communicate in a manner that
 - a) is appropriate to the individuals
 - b) encourages an open exchange of views and information
 - c) minimises any constraints to communication whilst maintaining confidentiality
 - d) is free from discrimination and oppression
 - e) respects people as individuals

- 2 encourage individuals to
 - a) assess how their behaviour is affecting their health and wellbeing
 - b) identify the changes that might benefit their health and wellbeing
 - c) identify their motivation to change their behaviour
 - d) identify the situations that will help them change
 - e) identify barriers to change and ways of managing them

- 3 assist individuals to
 - a) identify specific, measurable, achievable, realistic and timely goals for changing their behaviour
 - b) identify one easily-achievable goal to start working on
 - c) identify any skills that need to be learnt to achieve this goal
 - d) develop a personal action plan that will help them achieve their goals
 - e) identify who and what will help them achieve their plan
 - f) make sure they get the support they need in achieving their plan
 - g) record their progress in achieving their plan
 - h) identify when and how their plan will be reviewed

- 4 give individuals the specific support they need to achieve their plan by
 - a) taking appropriate actions to help them achieve their goals
 - b) providing them with clear and relevant information on other services
 - c) reviewing their progress in achieving their goals
 - d) providing feedback, support and encouragement
 - e) helping them recognise and value their achievements
 - f) developing their confidence in bringing about change and maintaining change

- 5 take the necessary actions to link the individual in with other workers and agencies when they have agreed you can do this

- 6 help individuals to
 - a) evaluate the changes they have made to their behaviour and their effects on their health and wellbeing
 - b) identify their broader learning and development
 - c) decide how they will take their learning forward
 - d) feedback to you on yours and others' work
 - e) make suggestions as to how services can be improved in the future

- 7 keep accurate and complete records of your work with individuals as required by your agency
- 8 tell your manager about
 - a) any problems that individuals have experienced with different services
 - b) any concerns you have about the individual
- 9 work within your own role and competence.

Knowledge and understanding

You need to apply:

HEALTH AND WELLBEING

- K1 A basic awareness that health and illness is affected by people's perceptions and behaviour and is different in different societies and groups
- K2 A factual knowledge of the kinds of misinformation that people may have about health and wellbeing and the affect of this on their behaviour
- K3 A factual knowledge of the things that affect health and wellbeing – individual determinants (eg behaviour and lifestyle) and the wider determinants on health (eg poverty, employment etc)
- K4 A factual knowledge of inequality, discrimination and abuse and their impact on health and wellbeing
- K5 A basic awareness of how culture and social context affect how individuals think and feel about their behaviour and changing it

INDIVIDUAL BEHAVIOUR CHANGE

- K6 A factual knowledge of theories of changing behaviour and maintaining behaviour change, including how to promote personal control and responsibility for behaviour change
- K7 A working knowledge of how measures of behaviour are used in monitoring behaviour change
- K8 A working knowledge of how to assess readiness to change:
 - a) importance of change (benefits and disadvantages of changing)
 - b) confidence in ability to change
- K9 A working knowledge of how to ensure that goals for behaviour change are SMART (specific, measurable, achievable, realistic and timely) and how to select a specific goal to work on at any one time
- K10 A working knowledge of how to identify aspects (eg situations, consequences of behaviour, past experiences, prompts and rewards) that make desired behaviour more likely to happen
- K11 A working knowledge of how to develop detailed personal action plans to achieve goals, including when, where, how and with whom
- K12 A working knowledge of how to use a range of techniques to support individuals in achieving their personal action plan (eg the worker and others supporting behaviour change, demonstrations, modelling by others, small steps at a time, encouragement and praise and stress management)
- K13 A working knowledge of how to help individuals record their behaviour change and the achievement of their action plan

MAINTENANCE OF BEHAVIOUR CHANGE

- K14 A working knowledge of how to help individuals to maintain their behaviour change (eg avoiding difficult situations, having a realistic expectation of rate of progress, highlighting and rewarding progress, learning from lack of progress or setbacks, reviewing records and

- amending action plans, building routines, setting tasks, reducing frequency of contact as progress is made)
- K15 A working knowledge of how to collect outcome data for evaluation purposes

EFFECTIVE SECTOR AND AGENCY WORKING

- K16 A factual knowledge of the legislation that relates to own work and how it affects own work
- K17 A factual knowledge of the policies and procedures of the employing organisation (including those relating to confidentiality, health and safety, equality and diversity)
- K18 A factual knowledge of the local resources – facilities and services – that can support individuals' behaviour change and how individuals can access them
- K19 A factual knowledge of the data collection, storage and retrieval systems in own organisation
- K20 A working knowledge of the principles of effective communication with:
- a. communities
 - b. people in own and other agencies
 - c. significant others

IMPROVING OWN KNOWLEDGE, SKILLS AND PRACTICE

- K21 A factual knowledge of own role and responsibilities and from whom assistance and advice should be sought if necessary
- K22 A factual knowledge of the principles of equality, diversity and anti-discriminatory practice and how to apply these in own work
- K23 A working knowledge of how to develop your own competence and the benefits of doing this.

COMPETENCE

HT4 Manage and organise your own time and activities

About this competence

This competence is about managing and organising your own time and activities so that you can carry out your responsibilities. It is appropriate for anyone who is responsible for organising their own diary.

Links

This competence links with the following dimensions and levels within the NHS Knowledge and Skills Framework (October 2004) Dimension: Core 5 Quality Level 1.

Origin

This is a reference competence developed by Skills for Health 2006.

Key words, concepts and scope of this workforce competence

Key words and concepts

Individuals The people you are working with.

A basic awareness A generalised understanding that something exists, but without knowledge of details

A factual knowledge Knowledge that is detailed on a factual level, but does not involve more than a superficial understanding of principles or theories

A working knowledge The application of factual knowledge in a manner that takes account of widely understood principles and theories and implications within the field of practice.

Scope

Risks to:

- a) the worker
- b) individuals that the worker is working with
- c) the work team
- d) others.

Performance Criteria

You need to:

1. agree with your manager and/or work team
 - a) who you will be working with
 - b) when
 - c) where
2. plan your work and time so that you can meet the commitments you have made with individuals and the requirements of your organisation
3. identify the risks of the work and how you can best manage the risks
4. prepare for your work commitments in advance
5. undertake your work to time as far as it is possible to do so
6. learn from what happens and change your plans accordingly
7. seek help and support from your manager and/or work team when you have difficulties meeting your commitments
8. complete records of your work activities according to legal and organisational requirements.

Knowledge and understanding

You need to apply:

MANAGING TIME AND ACTIVITIES

- K1 A working knowledge of the best ways to work with individuals so that they have confidence in you
- K2 A working knowledge of how to plan, manage and organise your own time to enable you carry out work activities effectively
- K3 A factual knowledge of the risks that might occur in different situations
- K4 A working knowledge of how to assess and manage risks to you and others in different situations

EFFECTIVE SECTOR AND AGENCY WORKING

- K5 A factual knowledge of the legislation that relates to your own work and how the legislation should affect how you carry out your work
- K6 A factual knowledge of the policies and procedures of your employing organisation (including those relating to confidentiality, health and safety, equality and diversity)
- K7 A factual knowledge of the data collection, storage and retrieval systems in own organisation
- K8 A working knowledge of the principles of effective communication with:
 - a) communities
 - b) people in own and other agencies
 - c) significant others

IMPROVING OWN KNOWLEDGE, SKILLS AND PRACTICE

- K9 A factual knowledge of own role and responsibilities and from whom assistance and advice should be sought if necessary
- K10 A factual knowledge of the principles of equality, diversity and anti-discriminatory practice and how to apply these in own work
- K11 A working knowledge of how to develop your own competence and the benefits of doing this.

APPENDIX 2

DRAFT NHS KSF POST OUTLINE FOR THE ROLE OF HEALTH TRAINER

This is draft post outline that has been developed as a starter-for-ten for local developments. It is important that each NHS organisation develops in partnership its own KSF post outline for a Health Trainer which reflects how the post fits with services at local level and to inform individuals' ongoing development and review in the post.

In the table below, an overview of the full KSF post outline is shown using the symbol 'X' – this reflects the knowledge and skills that a fully developed health trainer needs to apply in their post (ie after a number of years in post). This forms the basis of the second gateway under Agenda for Change. The complete KSF post outline is given in the pages that follow (using plain and/or bold typeface).

Suggestions for the subset of the full KSF post outline (ie that which will form the Foundation Gateway after one year of employment in the post) is shown using italicised text and the symbol (F) in the table below.

Title of Post – HEALTH TRAINER

NHS KSF DIMENSIONS	Level for post				
	1	2	3	4	Foundation outline
CORE DIMENSIONS - relates to all NHS posts					
1 Communication		X			<i>Same level with fewer areas of application</i>
2 Personal and people development		X			<i>Same level with fewer areas of application</i>
3 Health, safety and security		X			<i>The same</i>
4 Service improvement	(F)	X			<i>At level 1 with reduced areas of application</i>
5 Quality	(F)	X			<i>At level 1 with reduced areas of application</i>
6 Equality and diversity		X			<i>The same</i>
SPECIFIC DIMENSIONS					
HEALTH AND WELLBEING					
HWB1 Promotion of health and wellbeing and prevention of adverse effects to health and wellbeing	X				<i>Same level with fewer areas of application</i>
HWB3 Protection of health and wellbeing	X				<i>The same</i>
HWB4 Enablement to address health and wellbeing needs		(F)	X		<i>At level 2 with reduced areas of application</i>

DRAFT FULL NHS KSF POST OUTLINE FOR THE ROLE OF HEALTH TRAINER

Dimension	Level	Indicators	Areas of application for this post
1. Communication	Level 2 Communicate with a range of people on a range of matters	a) communicates with a range of people on a range of matters in a form that is appropriate to them and the situation b) improves the effectiveness of communication through the use of communication skills c) constructively manages barriers to effective communication d) keeps accurate and complete records consistent with legislation, policies and procedures e) communicates in a manner that is consistent with relevant legislation, policies and procedures	Communicates with: <ul style="list-style-type: none"> • people in the community identified by others in own employing agency who need to change their behaviour • others in immediate work team • workers in related services which individuals are recommended to attend (eg smoking cessation services). Forms of communication will include: <ul style="list-style-type: none"> • oral • written • electronic (eg emails, records). Nature of communication: <ul style="list-style-type: none"> • listening • questioning • understanding • responding to what is communicated • enabling • use of appropriate language • manner of speaking • body language Communication will be: <ul style="list-style-type: none"> • in one-to-one situations • in groups. Purpose of communication: <ul style="list-style-type: none"> • providing information on health and wellbeing and what affects it, including behaviours • encouraging individuals to promote their own health and

Dimension	Level	Indicators	Areas of application for this post
			<p>wellbeing by changing their behaviour</p> <ul style="list-style-type: none"> • enabling individuals to access other services • exchanging information and ideas with the team. <p>Legislation, policies and procedures will include:</p> <ul style="list-style-type: none"> • confidentiality • security of information and data protection • equality and diversity <p>In addition for the full outline, the following purposes are needed:</p> <ul style="list-style-type: none"> • helping individuals to assess different courses of action and understand the consequences of each • enabling individuals to change their behaviour and sustain healthier lifestyles.
<p>2. Personal and People development</p>	<p>Level 2</p> <p>Develop own knowledge and skills and provide information to others to help their development.</p>	<p>a) assesses and identifies:</p> <ul style="list-style-type: none"> - feedback from others on own work - how s/he is applying knowledge and skills in relation to the KSF outline for the post - own development needs and interests in the current post - what has been helpful in his/her learning and development to date <p>b) takes an active part in the development review of own work against the KSF outline for the post with reviewer and suggests areas for learning and development in the coming year</p> <p>c) takes responsibility for own personal development and takes an active part in learning opportunities</p>	<p>Develop own knowledge and skills through:</p> <ul style="list-style-type: none"> • participating in off-job learning and development opportunities • learning on the job • keeping up-to-date with developments in knowledge, skills and techniques (linked to the evidence base) • attending supervision • being mentored in the workplace. <p>Providing information to others will include:</p> <ul style="list-style-type: none"> • explaining to people how to promote their own health and wellbeing. <p>In addition for the full outline, the areas of providing information to others are needed:</p> <ul style="list-style-type: none"> • contributing to the development of other more recently appointed health trainers • explaining to others about the role of the health trainer.

Dimension	Level	Indicators	Areas of application for this post
		d) evaluates the effectiveness of learning opportunities and alerts others to benefits and problems e) keeps up-to-date records of own development review process f) offers information to others when it will help their development and/or help them meet work demands.	
3. Health Safety and Security	Level 2 Monitor and maintain health, safety and security of self and others in own work area.	a) identifies and assesses the potential risks involved in work activities and processes for self and others b) identifies how best to manage the risks c) undertakes work activities consistent with: - legislation, policies and procedures - the assessment and management of risk d) takes the appropriate action to manage an emergency summoning assistance immediately when this is necessary e) reports actual or potential problems that may put health, safety and security at risk and suggest how they might be addressed f) support others in maintaining health, safety and security.	Monitoring and maintaining health, safety and security will include: <ul style="list-style-type: none"> • own health, safety and security whilst working in the community, possibly alone (ie lone worker policy) • the health, safety and security of the individuals with whom one is working • the immediate work team. The worker needs to know how to: <ul style="list-style-type: none"> • ensure their own safety and the safety of colleagues and the individuals with whom they work • take appropriate action in the event of emergencies • move and handle items safely • manage conflict.
4. Service Improvement	Level 2 Contribute to the	a) discusses and agree with the work team - the implications of direction, policies and strategies on their current practice	Contributing to the implementation of services will include: <ul style="list-style-type: none"> • identifying when changes need to be made to own practice • agreeing when the approach taken by health trainers in the

Dimension	Level	Indicators	Areas of application for this post
	implementation of services.	<ul style="list-style-type: none"> - the changes that they can make as a team - the changes s/he can make as an individual - how to take the changes forward <p>b) constructively makes agreed changes to own work in the agreed timescale seeking support as and when necessary</p> <p>c) supports others in understanding the need for and making agreed changes</p> <p>d) evaluates own and other's work when required to do so completing relevant documentation</p> <p>e) makes constructive suggestions as to how services can be improved for users and the public</p> <p>f) constructively identifies issues with direction, policies and strategies in the interests of users and the public</p>	<p>local area needs to change and changing own practice</p> <ul style="list-style-type: none"> • supporting other health trainers when there are changes • enabling others – individuals with whom one is working and people in other agencies – to understand the need for change • taking part in any agreed audits etc • attending regular team meetings.
<i>Foundation outline – Core 4</i>	<i>Level 1 Make changes in own practice and offer suggestions for improving services</i>	<p>a) <i>discusses with line manager/work team the changes that need to be made in own practice and the reasons for them</i></p> <p>b) <i>adapts own practise as agreed and to time seeking support if necessary</i></p> <p>c) <i>effectively carries out tasks related to evaluating services when asked</i></p> <p>d) <i>passes on to the appropriate person constructive views and ideas on improving services for users and the public</i></p> <p>e) <i>alerts line manager/work team when direction, policies and strategies are adversely affecting</i></p>	<ul style="list-style-type: none"> • <i>having regular meetings with the work team to discuss own working methods, and how they could be changed and improved</i> • <i>providing any information requested for service audit</i> • <i>reporting to line manager any aspects of the service that are causing problems for users</i>

Dimension	Level	Indicators	Areas of application for this post
		<i>users of services or the public</i>	
5. Quality	Level 2 Maintain quality in own work and encourage others to do so.	f) acts consistently with legislation, policies, procedures and other quality approaches and encourages others to do so g) works within the limits of own competence and levels of responsibility and accountability in the work team and organisation h) works as an effective team member i) prioritises own workload and organises own work to meet these priorities and reduce risks to quality j) uses and maintains resources efficiently and effectively and encourages others to do so k) monitors the quality of work in own area and alerts others to quality issues	Maintaining quality of own work and encouraging others will include working effectively as a member of the health trainer team including: <ul style="list-style-type: none"> • taking an effective part in quality systems and processes • supporting others to deliver effective services • taking part in supervision • attending regular team meetings.
<i>Foundation outline – core 5</i>	Level 1 <i>Maintain the quality of own work</i>	a) <i>complies with legislation, policies and procedures and other quality approaches relevant to the work being undertaken</i> b) <i>works within the limits of own competence and responsibility and refers issues beyond these limits to relevant people</i> c) <i>acts responsibly as a team member and seeks help if necessary</i> d) <i>uses and maintains resources efficiently and effectively</i> e) <i>reports problems as they arise, solving them if possible</i>	<ul style="list-style-type: none"> • <i>working within the scope of own job description/responsibilities and informing line manager about any issues that may arise in the course of work that fall outside these limits</i> • <i>managing work load as agreed seeking support from line manager</i> • <i>attending team meetings and asking appropriate members of the work team for help when necessary</i> • <i>following policies and procedures and reporting to manager where there is variation.</i>
6. Equality and diversity	Level 2	a) recognises the importance of people's rights and in accordance with legislation, policies and procedures	It is important that health trainers recognise that the population with which they work will be diverse and have different beliefs and

Dimension	Level	Indicators	Areas of application for this post
	Support equality and value diversity	b) acts in ways that: <ul style="list-style-type: none"> - acknowledge and recognise people's expressed beliefs, preferences and choices - respect diversity - value people as individuals c) takes account of own behaviour and its effect on others d) identifies and takes action when own or others' behaviour undermines equality and diversity	choices including: <ul style="list-style-type: none"> • what they believe is appropriate to eat and drink • what it is appropriate to wear • the appropriate actions for children and young people of different sex • how people like to be addressed and spoken to • the information they are given • the forms of support they consider to be appropriate. Health trainers are expected to identify and take action when others behaviour undermines equality and diversity and this means being prepared on a day-to-day basis to: <ul style="list-style-type: none"> • recognise when equality and diversity is not being promoted and doing something about it • recognise when someone is being discriminated against and doing something about it • informing line manager when systems and structures fail to promote equality and diversity.
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	a) identifies factors which have a positive and negative affect on health and wellbeing and how it can be promoted and adverse effects prevented b) enables people to view health and wellbeing as a positive aspect of their lives c) enables people to be involved in activities and make their own decisions about them consistent with people's views and beliefs d) undertakes planned activities with people with their agreement consistent with legislation, policies and	The promotion of health and wellbeing will be with: <ul style="list-style-type: none"> • individuals • others who work with the individuals. Communicating with individuals about how to promote their own health and wellbeing specifically: <ul style="list-style-type: none"> • communicating effectively with the individuals concerned • establishing rapport and respectful trusting relationships • arranging for individuals and others to receive relevant

Dimension	Level	Indicators	Areas of application for this post
		<p>procedures</p> <p>e) records and reports back fully on the activities undertaken and alerts others in the team to any issues that arise during the activities.</p>	<p>information</p> <ul style="list-style-type: none"> enabling individuals and others to access other services (eg leisure, primary care, specific health promotion services such as smoking cessation, GUM clinics). <p>In addition for the full outline, the following areas of communication are needed:</p> <ul style="list-style-type: none"> providing information about: growth and development; health and wellbeing; things that affect health and wellbeing; risk behaviours; local services enabling individuals and others to develop their own knowledge and skills and make their own decisions enabling individuals to change their behaviours and maintain the change.
HWB3 Protection of health and wellbeing	<p>Level 1</p> <p>Recognise and report situations where there might be a need for protection</p>	<p>a) identifies signs that people are at risk and that there might be a need for protective measures</p> <p>b) reports any suspicions of risk to the appropriate people and/or organisations consistent with legislation, policies and procedures</p> <p>c) records and reports any information that is available on the risks.</p>	<p>Signs that individuals are at risk might relate to:</p> <ul style="list-style-type: none"> those who are in danger of / are being harmed and/or abused (eg domestic violence, abuse) those who are in danger of / are neglecting or harming themselves (eg mental health issues, depression, self-harming, lack of food) aspects in the environment that put people at risk (eg lack of safe housing). <p>The worker will get information on possible risks from what they see, hear or are told.</p>
HWB4 Enablement to address health and	<p>Level 3</p> <p>Enable people to</p>	<p>a) respects people's dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent</p>	<p>Enabling individuals to change their own behaviour and lifestyle so that it promotes their health. The behaviour</p>

Dimension	Level	Indicators	Areas of application for this post
wellbeing needs	address specific needs in relation to health and wellbeing	<p>b) identifies with the people concerned:</p> <ul style="list-style-type: none"> - goals for the specific activities to be undertaken within the context of their overall care plan and their health and wellbeing needs - the forms the activities should take - the involvement of other people and/or agencies - relevant evidence-based guidelines <p>c) enables people to address their specific needs consistent with legislation, policies and procedures acting as a resource as and when they need it</p> <p>d) takes the appropriate action to address any issues or risks</p> <p>e) reviews the effectiveness of specific activities as they proceed and makes any necessary modifications</p> <p>f) provides feedback to the person responsible for the overall care plan on its effectiveness and the health and wellbeing and needs of people</p> <p>g) makes accurate records of the activities undertaken and any risks</p>	<p>change might relate to:</p> <ul style="list-style-type: none"> • eating • physical activity • smoking • use of drugs and alcohol • sexual activity • mental health and wellbeing • risk taking / personal safety • the wider determinants of health (eg their housing). <p>The people who might support the behaviour change are:</p> <ul style="list-style-type: none"> • friends of the individuals / peer groups • relatives • the health trainer her/himself • others in the worker's agency (eg healthy living activities, smoking cessation services, psychological services) • other agencies (eg in the voluntary sector). <p>Supporting behaviour change will include:</p> <ul style="list-style-type: none"> • agreeing with individuals what behaviour change they wish to make and their overall goals • agreeing with individuals how they want to change

Dimension	Level	Indicators	Areas of application for this post
			<p>their behaviour</p> <ul style="list-style-type: none"> • assisting individuals to set specific, measurable, achievable, realistic and timely goals and ways of achieving them • assisting individuals to identify situations that make it more likely they will change their behaviour • assisting individuals to identify barriers to behaviour change and helping them to reduce those barriers • drawing up and using a behavioural contract • agreeing specific tasks for the individuals to achieve • supporting the change • providing feedback and encouragement • helping individuals build new routines to encourage behaviour change.
<p><i>Foundation outline – HWB4</i></p>	<p><i>Level 2</i></p> <p><i>Enable people to meet ongoing health and wellbeing needs</i></p>	<p>a) <i>offers information to the team on how to meet people’s health and wellbeing needs and effective ways of doing this based on observations and experience</i></p> <p>b) <i>respects people’s dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent</i></p> <p>c) <i>effectively prepares for and undertakes activities to enable people to meet their ongoing needs consistent with the care plan, legislation, policies and procedures</i></p> <p>d) <i>promptly alerts the team to any risks</i></p> <p>e) <i>reports and records activities undertaken and</i></p>	<p><i>Health and wellbeing needs may be related to</i></p> <ul style="list-style-type: none"> • <i>eating</i> • <i>physical activity</i> • <i>smoking</i> • <i>use of drugs and alcohol</i> • <i>sexual activity</i> • <i>mental health and wellbeing</i> • <i>risk taking / personal safety</i> • <i>the wider determinants of health (eg their housing).</i> <p><i>Activities to enable people to meet their ongoing needs may include</i></p> <ul style="list-style-type: none"> • <i>acting as a ‘buddy’ to help people take part in leisure</i>

Dimension	Level	Indicators	Areas of application for this post
		<p><i>how health and wellbeing needs are changing and feeds back on the appropriateness of the activities for the people concerned.</i></p>	<p><i>activities</i></p> <ul style="list-style-type: none"> • <i>peer support groups</i> • <i>encouraging people to change their behaviour to try to achieve a healthier lifestyle</i> • <i>signposting people to relevant services</i> • <i>enabling people to access relevant services (eg by accompanying them, by demonstrating how to approach people etc).</i>

LM 09/01/06

