



Support worker framework for the prosthetic and orthotic workforce



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- Dr Nicky Eddison, Vice Chair of BAPO and Consultant Orthotist/Associate Professor
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3. Funding

This framework has been funded and supported by Health Education England, now part of NHS England.

4. Context

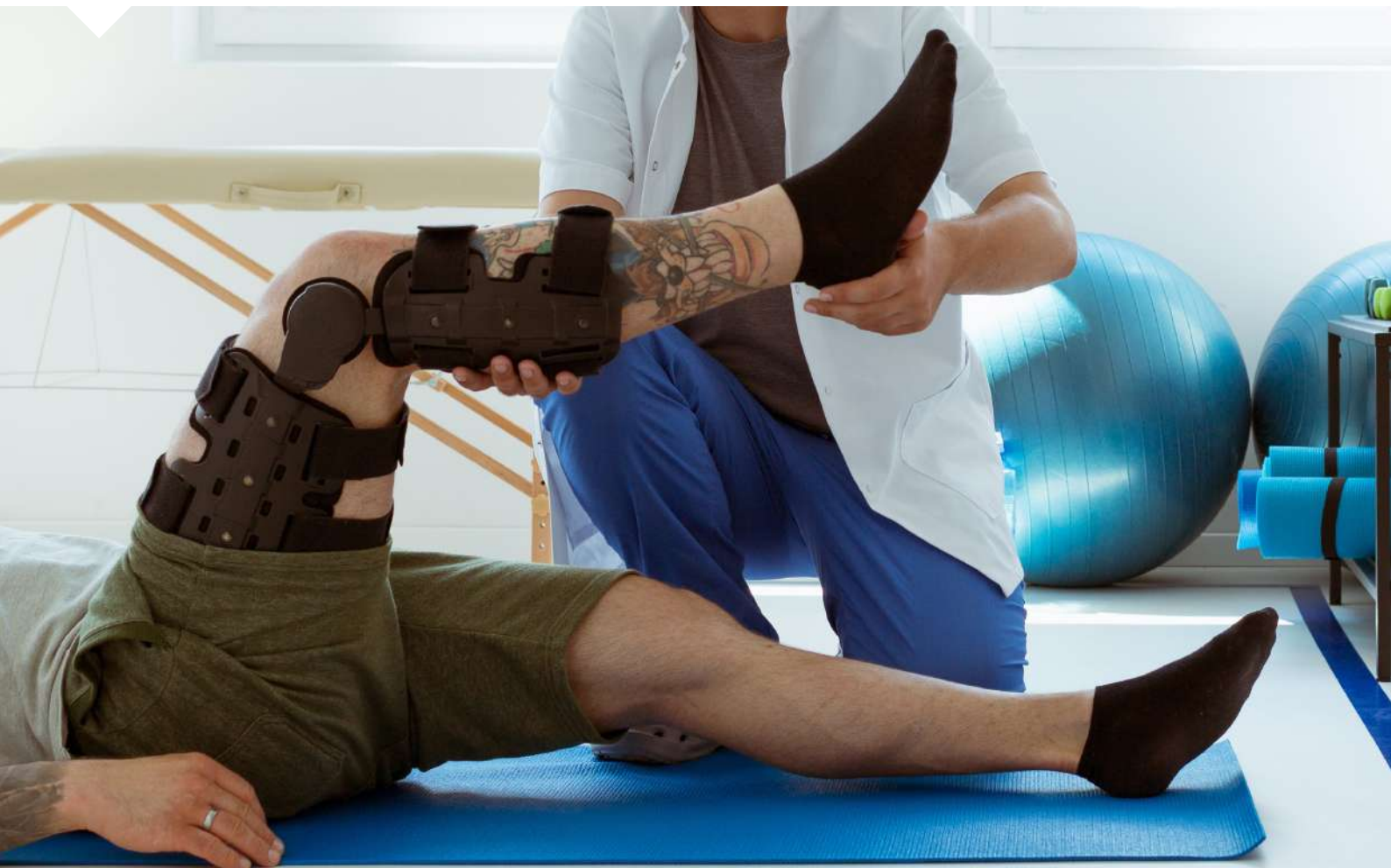
Prosthetists and orthotists form a small, yet vital part of the Health and Care Professions Council (HCPC) regulated Allied Health Professions (AHP) workforce in the United Kingdom. They are supported by prosthetic and orthotic (P&O) support workers and technicians. This project is concerned with the non-registered sector of P&O support workers providing supervised support services to the registered sector of the profession.

The British Association Prosthetists and Orthotists (BAPO) is the UK membership organisation and professional body, offering membership services to prosthetists, orthotists, and associate members such as P&O support worker technicians and assistants.

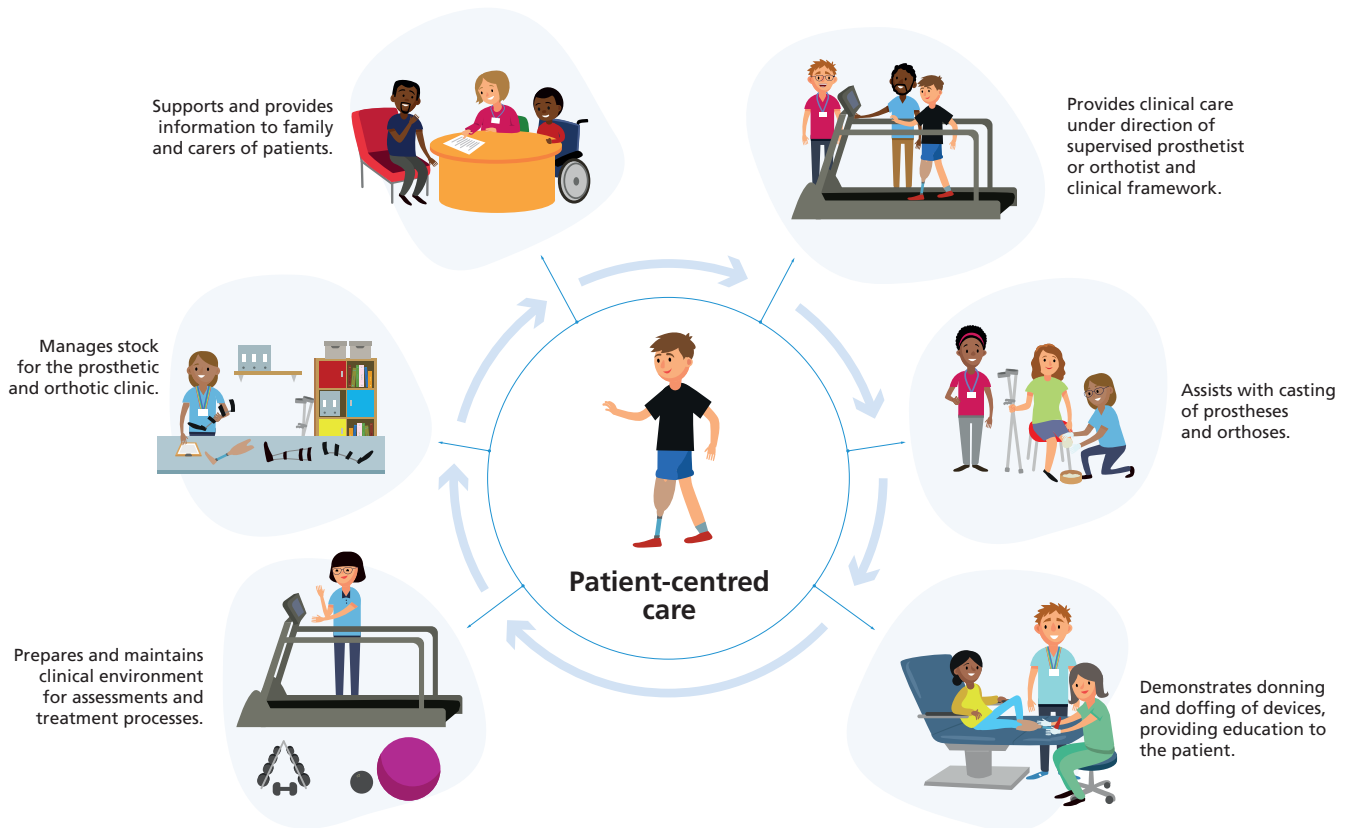
NHS England (NHSE) is working with AHP professional bodies to maximise the contribution and development of support workers. BAPO was commissioned to design and develop resources that support the National AHP Support Workforce Programme. This work will help foster and enable a shift in thinking, providing guidance to aid a greater understanding of the opportunities for the development of the P&O Support workforce.

5. List of abbreviations

AHP	Allied health professionals
BAPO	The British Association of Prosthetists and Orthotists
GYO	Grow Your Own
HCPC	Health and Care Professions Council
KSB	Knowledge, skills, and behaviours
NHS	National Health Service
NHSE	National Health Service England
NOS	National Occupational Standard
P&O	Prosthetics and Orthotics
RQF	Regulated Qualifications Framework
SfH	Skills for Health
SWF	Support Worker Framework
WHO	World Health Organization
WOL	Work Out Loud



6. Defining prosthetic and orthotic support workers



Support worker roles

Prosthetic and Orthotic Support Worker Roles.
Some tasks that may be included as part of your role alongside registered prosthetists and orthotists.



6.1 Guiding Principles

Stakeholder conversations designed to foster discussion around defining the role of the support workforce in prosthetics and orthotics took place in the early lifespan of the project. These conversations revealed that the non-regulated sector of the P&O workforce falls broadly in two categories:

- Those roles are primarily technical, focusing mainly on the manufacturing of devices. Prosthetic or orthotic technicians design and manufacture custom made devices to meet the specification/prescription determined by the prosthetist/orthotist. In prosthetics, these are artificial limbs (prostheses). In orthotics it can be a range of devices from diabetic footwear to spinal bracing (orthoses). Technicians are highly skilled individuals able to work with many different types of materials and processes to manufacture their devices using the appropriate materials and technologies.
- Those roles that are patient facing, working directly with patients in a supervised role, alongside registered prosthetists and orthotists. Prosthetic and orthotic support workers work with prosthetists and orthotists to deliver patient care, working under a range of supervisory arrangements which sometimes include guidelines and frameworks. The role is predominantly patient facing but may also involve some manufacturing.

Prosthesis, prosthetic device or product: externally applied device used to replace wholly, or in part, an absent or deficient limb segment (ISO, 2020).

Orthosis, orthotic device or product: externally applied device used to compensate for impairments of the structure and function of the neuro-muscular and skeletal systems (ISO, 2020).

Reference:

ISO (2020) ISO 8549-1: Prosthetics and orthotics — Vocabulary — Part 1: General terms for external limb prostheses and external orthoses.

The role of prosthetic and orthotic technician is well established, with a clear route to training and a well-defined role descriptor. The training of technicians is supported by established training routes, most recently with the level 3 technician apprenticeship route offered by the University of Derby. However, there is less clarity around the prosthetic and orthotic support worker patient facing role, with routes to training and education yet to mature. While the role of the prosthetic/orthotic assistant practitioner has been defined in the BAPO Standards for Best Practice (BAPO, 2024), this role is not yet clearly framed as a support worker.

Support workers may work with a range of health care professionals to provide care to patients in distinct clinical settings and/or care pathways. However, in P&O the majority of patient facing support worker roles, work directly with prosthetists and orthotists in supervised roles with a delegated caseload. Their work is always delegated and supervised by a registered healthcare professional, usually a prosthetist or orthotist who retains responsibility for patient care.

Across the NHS AHP landscape the support workforce is undergoing reform and development.^{1,2,3} NHS England has worked with services, individuals, and organisations culminating with the publication of the AHP support worker competency, education, and career development framework.⁴ Alongside its publication are a large volume of resources that can be utilised free of charge, to facilitate the development of this important sector of the NHS workforce.⁵ The support worker learning and development road map provides further information.⁶

This framework is a guide predominantly focusing on support worker development in patient facing roles. However, it should be recognised that in a global context support workers and technicians are referred to differently. For example, in the 2017 World Health Organization (WHO) Standards document⁷, terms such as associate prosthetists and orthotists and prosthetic and orthotic technicians as well as clinicians and non-clinicians are used. When support worker is referred to within this document – the term refers to those non-registered clinical staff who work in patient facing roles alongside prosthetists and orthotists. Some support worker roles may also be dual and hybrid roles involving some manufacturing, and therefore manufacturing and fitting competencies are included within the framework.

The framework was developed utilising a collaborative approach by embedding a method based on the 'Work Out Loud Method'⁸. Engagement was via a Microsoft Teams channel where the group was able to share and collaborate on ideas, documents, and content ideas. In addition to this asynchronous method there were virtual meetings held periodically. The purpose of these meetings was to consolidate progress and finalise decisions on feedback and exchanges on the Teams channel. The group comprised a total membership of 15 professionals from a mix of backgrounds and settings, including P&O education providers, prosthetists and orthotists employed within the NHS, and private commercial companies, and members from BAPO. Interviews with P&O support workers helped to inform the content and context of the framework development.

1. <https://www.england.nhs.uk/publication/nhs-long-term-workforce-plan/#:~:text=The%20first%20comprehensive%20workforce%20plan,drive%20in%20health%20service%20history>
2. <https://www.england.nhs.uk/2023/06/record-recruitment-and-reform-to-boost-patient-care-under-first-nhs-long-term-workforce-plan/>
3. <https://www.hee.nhs.uk/our-work/allied-health-professions/enable-workforce/developing-role-ahp-support-workers>
4. https://www.hee.nhs.uk/sites/default/files/documents/AHP_Framework%20Final_0.pdf
5. <https://www.hee.nhs.uk/our-work/allied-health-professions/enable-workforce/developing-role-ahp-support-workers>
6. <https://www.hee.nhs.uk/our-work/talent-care-widening-participation/support-worker-help-resources/support-worker-learning-development-roadmap>
7. World Health Organization. Standards for Prosthetics and Orthotics Part 1: Standards.; 2017.
8. Stepper J. (2020). Working out loud. Page Two Books

To further enhance the cocreation element of the work, a second stakeholder group was set up comprising of support workers from a diverse range of settings from both the commercial and NHS sectors. Support workers were representative of the roles occupied by P&O support workers including patient facing and non-patient facing technical roles, as well as a diverse range of experience and qualifications. This group also engaged in one-to-one interviews discussing a range of topics such as role development opportunities, role descriptors, career progression and supervision.

Draft versions of the framework were shared via 'critical friend'⁹ reviews at the project board interim meetings and with the BAPO Education and Training Network. Following feedback, amendments were made until the final version was accepted.

7. Why was the framework developed?

In prosthetics and orthotics services, understanding the support workforce, what support workers can offer as well as the depth and breadth of services that can be provided is less mature than for some of the larger AHP professions. The latest workforce data reports that the support workforce in P&O is small with the NHS employing approximately 40 P&O support workers with the majority working in orthotic practice. By following this support worker framework, employers can help to improve access to P&O support workers so that patients and service users have access to skilled and consistently well-trained support workers who have a defined role within their team, service, and organisation.

Other benefits from doing this work include:

- Current and prospective AHP support workers have access to accurate and up to date role descriptions and standardised career/development structures that provide opportunities to follow a richer and more rewarding career pathway.
- Support worker roles can be at the heart of improvements in service delivery and transformation, including new models of care and expanding role boundaries to enable sustainable growth within the profession.
- Services can address current unwarranted variation in support worker roles, banding, and progression.

The development of this framework is based on the most up to date and current workforce data (Eddison et al 2023)¹⁰ that is available to the profession and the wider NHS. It also takes account of recommendations made by the wider global P&O community¹¹. These reports suggest there is a need to significantly grow the P&O support workforce, and for there to be training routes available to both P&O technicians and support workers, to progress and develop their careers.

Recruitment to the regulated sector is also essential and is supported by the latest workforce data. Growing the support workforce and developing training routes for this group could facilitate increases in the pipeline to the regulated sector. The latest workforce data provided by the support workforce indicates that a lack of career development and progression are factors when deciding whether to remain or to leave the workforce. Moreover, support workers who participated in the latest workforce survey cite skills in person-centred care, effective communication, and public health knowledge and understanding were needed to fulfil their future roles. Regarding prosthetic specific skills, 60% of respondents considered that skills relating to the application of P&O technologies (such as microprocessor-controlled joints or socket liner technologies) were required to fulfil their future role.

To meet the needs of the WHO¹¹ recommendations there would need to be significant growth with the P&O technical and support worker sector to meet future demand, with approximately a further 1,133 to 1,803 P&O technicians and support workers required to meet the WHO recommendation of two support staff to every prosthetist/orthotist.

9. Balthasar. Critical Friend Approach: Policy Evaluation Between Methodological Soundness, Practical Relevance, and Transparency of the Evaluation Process. *Ger Policy Stud.* 2011;7(3):187-231.

10. Eddison, Healy, Leone, Jackson, Pluckrose, Chockalingam. Profile of the UK Prosthetic and Orthotic Workforce and Mapping of the Workforce for the 21st Century. The British Association of Prosthetists and Orthotists.; 2023. https://issuu.com/staffordshire_university/docs/bapo_workforce_report_2023.

11. <https://apps.who.int/iris/bitstream/handle/10665/259209/9789241512480-part2-eng.pdf?sequence=2&isAllowed=y>

In a report published in 2020¹², BAPO acknowledged that training for the support workforce (NHS agenda for change band 4) is usually provided locally on an adhoc basis, with no formal qualification. However, the profession does endorse the level 5 apprenticeship¹³. BAPO expects all clinical assistants to be trained to the standards of this curriculum, regardless of whether they have achieved this as a formal apprenticeship or through other local training means.

With the Grow Your Own (GYO) model and the level 3 and 5 apprenticeship routes available¹⁴ to aid support worker career development and service provision, it is now the time to provide clearer guidance on developing the P&O support workforce. The GYO model guide provides an overview of workforce strategies designed to attract, train, and retain the AHP support workforce.

BAPO hopes this work will complement and enhance other work being completed by the organisation around raising awareness of career development opportunities, education and training opportunities through the apprenticeship programs and ensuring that staff are deployed consistently across systems and organisations.

8. Who is the framework for?

- Prosthetic and orthotic support workers who are interested in developing their career in roles where some or all their role include delegated prosthetic or orthotic duties and responsibilities.
- Existing prosthetic and orthotic support staff including technicians who may wish to develop in their career in clinical support worker (patient facing) or in dual patient facing and manufacturing roles.
- Existing prosthetic or orthotic support workers who wish to progress their career to registered prosthetic or orthotic practice.
- Service and team leaders, managers, and employers who wish to develop the support workforce with delegated prosthetic and orthotic activities and duties in patient facing roles.
- Service and team leaders and managers wishing to develop local career development pathways for support workers.
- The public as well as other allied health and care professions may also find this resource helpful when wanting to understand what prosthetic and orthotic support workers do and the scope of their roles.
- NHS commissioners looking at skill mix and workforce development and service provision.

12. <https://www.bapo.com/wp-content/uploads/2020/07/AHP-B4-Assistant-Practitioners-Professional-Bodies-Consultation.pdf>

13. <https://www.instituteforapprenticeships.org/apprenticeship-standards/assistant-practitioner-health-v1-1>

14. https://www.hee.nhs.uk/sites/default/files/documents/AHP_Guide_GYO_Acc.pdf

9. The structure of the framework

The framework is focused on key areas that can be utilised in the development of the support worker development journey. The framework supports the AHP support worker competency, education, and career development framework. This framework references and maps to the eight domains, which are summarised below. The accompanying education and training resources complete the framework provision.

- 1. Formal knowledge and experience:** Formal qualifications and experience expected of a new candidate (including functional skills) on recruitment.
- 2. Supporting service users:** Supporting service users and their families and providing care throughout their care and care pathways.
- 3. Clinical, technical, and scientific roles and responsibilities:** The underpinning knowledge and practice, support, and interventions required of support workers to safely assist service users in meeting their optimum potential.
- 4. Communication and information:** The ability to communicate clearly, respectfully, and effectively using a range of methods – written, verbal, and non-verbal. Maintaining confidentiality and protection of data and overcoming physical, sensory, cognitive, and language barriers to understanding.
- 5. Safe and inclusive environments:** The principles of equality, diversity, and inclusion, safeguarding, protection, personal wellbeing, and safety, along with the importance of duty of care and candour.
- 6. Research and service improvement:** Participation in research, audit, evaluation, and service improvement projects.
- 7. Leadership:** The importance of being a role model, identifying areas for self-improvement and supervising others and leading on service user safety, improvements, and support for others.
- 8. Personal and professional values and behaviours:** Understanding and demonstration of the values in the NHS Constitution and NHS People Promise, as well as self-development and personal wellbeing.

This framework aligns to differing levels of educational attainment from level 3 to level 5, following the level 3 and level 5 apprenticeship routes available with an NHS setting¹⁵.

Support worker competencies and capabilities are mapped to six core functions¹⁶, and five specific functions: These are:

9.1 Core

1. Communication
2. Personal and people development
3. Health, safety, and security
4. Service improvement
5. Quality
6. Equality and diversity

9.2 Specific

1. Assessment
2. Health intervention
3. Health promotion and protection
4. Information management/information and communication technology
5. Medical devices, products, and equipment

15. <https://www.hee.nhs.uk/our-work/allied-health-professions/enable-workforce/developing-role-ahp-support-workers/apprenticeships-ahp-support-workers>

16. <https://tools.skillsforhealth.org.uk/>

Table 1: Where the AHP Support worker competency, education and career development framework domains map to the Skills for Health (SfH) and National Occupational Standard (NOS) for prosthetists and orthotists

AHP SWF ► SfH NOS ▼	Formal knowledge & experience	Supporting service users	Clinical technical and scientific	Communication and information	Safe inclusive environments	Research and service improvement	Leadership	Personal and professional values
Communication		★		★	★	★	★	★
Personal and people development	★	★	★	★	★		★	★
Health, safety and security			★		★	★	★	★
Service improvement				★	★	★	★	★
Quality	★	★	★	★	★	★	★	★
Equality and diversity		★		★	★		★	★
Assessment	★	★	★	★	★			★
Health intervention	★	★	★	★	★			★
Health promotion and protection	★	★	★	★	★			★
Information and management	★	★	★	★	★			★
Medical device products and equipment	★	★	★		★			

10. Roles, responsibilities, and competencies

In developing support worker roles and responsibilities, existing job descriptions have been reviewed and content for inclusion developed by the WOL group. The current WHO guidelines and sample job descriptions are situated in appendix 1 Support worker competencies and capabilities.

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
Formal knowledge and experience	<p>RQF Level 2 qualification (for example GCSE grade 4/C or above). Level 2 functional skills. Once employed, the Care Certificate and potentially the Healthcare Support Worker apprenticeship standard, as well as statutory and mandatory in-house training.</p> <p>Moving up to: RQF Level 3 qualifications or demonstrated ability to achieve a relevant RQF level 3 qualification on employment (e.g., possesses good Level 2 qualification grades). Level 2 functional skills. Once employed, the Care Certificate and potentially the Senior Healthcare Support Worker apprenticeship, as well as statutory and mandatory in-house training.</p>	<p>RQF Level 3 health or care related qualification. Level 2 functional skills. Care Certificate. Once employed, the level 5 Healthcare Assistant Practitioner apprenticeship, as well as statutory and mandatory in-house training.</p>

**Domain and relevant
NOS standards**
▼

Supporting service users
*GEN 63, GEN 5, GEN 8,
CHS19*
Educational level 2/3

1. Adhere to legislation, protocols and guidelines relevant to your role and field of practice.
2. Work within organisational systems and requirements as appropriate to your role.
3. Recognise the boundary of your role and responsibility and seek supervision when situations are beyond your competence and authority.
4. Maintain competence within your role and field of practice.
5. Use relevant research-based protocols and guidelines as evidence to inform your practice.
6. Always promote and demonstrate good practice as an individual and as a team member.
7. Identify and manage potential and actual risks to the quality and safety of practice.
8. Evaluate and reflect on the quality of your work and make continuing improvements.

**Educational level 5
level 3 competencies and
the following level 5**

1. Work within your level of competence, responsibility and accountability and respond in a timely manner to meet individual's needs.
2. Confirm the identity of the individual and check valid consent has been obtained.
3. Identify the nature of support that the individual needs and respect their privacy, dignity, wishes and beliefs when working with them.
4. Ensure the individual is positioned correctly for the procedure and where appropriate assist the individual to move into the required position.
5. Support and monitor the individual during and following the clinical/therapeutic activity and respond to their needs in accordance with clinical governance.
6. Apply standard precautions for infection control and other necessary health and safety measures during and following the clinical/therapeutic activity.
7. Give clear, concise and accurate information where this is within your scope of practice.
8. Correctly answer any questions which are within your area of responsibility, at a level and pace appropriate to the individual, and refer any questions that you cannot answer to the appropriate person.
9. Ensure the individual is provided with the appropriate facilities and support for the period of recovery from the clinical/therapeutic activity.
10. Inform individuals and relevant others of the next steps and where appropriate any arrangements for transport and escorts when these services are required by the individual.
11. Keep accurate, complete and legible records of your actions and the individual's condition in accordance with local policies and procedures within information governance.

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
Supporting service users <i>GEN 63, GEN 5, GEN 8, CHS19</i>		<ol style="list-style-type: none"> 12. Take prompt appropriate action in response to any problems which occur during or following the clinical/therapeutic activity in accordance with local policies and procedures. 13. Ensure you always maintain the confidentiality of information in accordance with information governance. 14. Ensure effective infection control at all times 15. Respond promptly to requests and directions from the practitioner leading the clinical or therapeutic intervention. 16. Carry out delegated activities following the protocols and procedures related to the clinical/therapeutic intervention in accordance with the individual's care/treatment plan and your own scope of practice in accordance with clinical governance. 17. Collaborate effectively and proactively during actions that require close team working. 18. Communicate required information to others clearly, accurately and in a timely fashion. 19. Take appropriate and prompt action in line with relevant protocols and guidelines where other colleagues' actions give you cause for concern. 20. Give the individual relevant information, support and reassurance in a manner which is sensitive to their needs and concerns. 21. Gain valid consent to carry out the planned measurement. 22. Take the measurement at the prescribed time and in the prescribed sequence. 23. Use the appropriate equipment in such a way as to obtain an accurate measurement.

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Supporting service users <i>GEN 63, GEN 5, GEN 8, CHS19</i></p>		<p>24. Reassure the individual throughout the measurement and answer questions and concerns from the individual clearly, accurately and concisely within own sphere of competence and responsibility.</p> <p>25. Refer any questions and concerns from or about the individual relating to issues outside your responsibility to the appropriate member of the care team.</p> <p>26. Seek a further recording of the measurement by another staff member if you are unable to obtain the reading or if you are unsure of the reading.</p> <p>27. Observe the condition of the individual throughout the measurement.</p> <p>28. Identify and respond immediately in the case of any significant changes in the individual's condition.</p> <p>29. Recognise and report without delay any measurement which falls outside of normal levels.</p> <p>30. Record your findings accurately and legibly in the appropriate documentation.</p> <p>31. Clean used equipment and return to usual place of storage after use.</p> <p>32. Dispose of waste and disposable equipment appropriately</p>
<p>Clinical, technical and scientific <i>RT15, RT16, SCDHSC0023, RT5, RT6, SFLWS17, SFLWS34, GEN 6, GEN 7, GEN 95, SSR B247</i></p>	<p>1. Clarify with others the skills, knowledge and values required to carry out your job role.</p> <p>2. Clarify with others the areas of your work where literacy, numeracy and information technology skills are necessary.</p> <p>3. Actively seek feedback from individuals, key people and others on your use of skills, knowledge and values in your practice.</p> <p>4. Agree with others the areas of strength in your practice.</p>	<p>1. Apply standard precautions for infection control and take other appropriate health and safety measures.</p> <p>2. Operate equipment: Correctly for the procedure concerned. Safely and in a manner that is consistent with manufacturers' instructions and local procedures.</p> <p>3. Handle all resources in a safe manner, consistent with infection control techniques and other statutory requirements appropriate to the procedure and setting.</p>

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Clinical, technical and scientific <i>RT15, RT16, SCDHSC0023, RT5, RT6, SFLWS17, SFLWS34, GEN 6, GEN 7, GEN 95, SSR B247</i></p>	<ol style="list-style-type: none"> 5. Reflect with others on the way your values, personal beliefs and experiences may affect your work with individuals. 6. Plan to develop your knowledge and practice. 7. Seek support from others to identify areas for development within your practice that would help you to carry out your work activities more effectively. 8. Seek advice on development opportunities to achieve development. 9. Agree a personal development plan with others. 10. Secure opportunities for development. 11. Apply acquired knowledge and skills in your work. 12. Use opportunities with others to reflect on your learning from development opportunities to continuously improve your practice. 13. Review how the newly acquired skills and knowledge can be applied in your practice. 14. Confirm with others that it is safe and within your job role before applying new skills and knowledge. 15. Apply new skills and knowledge that have been agreed as appropriate to your job role. 16. Evaluate with others how far your new skills and knowledge have enhanced your work. 17. Accurately position the components of the device in the specified location on the model and confirm: <ol style="list-style-type: none"> a) their fit b) their security c) their compliance with the functional and aesthetic requirements of the prescription. 	<ol style="list-style-type: none"> 4. Regularly monitor environmental conditions and maintain them at the correct levels to ensure individual comfort and as required by the procedure. 5. Monitor the operation of equipment regularly and confirm it is in good working order. 6. Where equipment faults or breakdowns occur during use, take appropriate action to remedy or minimise damage to resources and ensure the safety of the individual. 7. Monitor consumable materials used in the clinical activity correctly and safely and replenish and replace in accordance with protocols. 8. Clean fixed items effectively after use with the appropriate materials 9. Return unopened, unused and surplus resources to the correct location for storage. 10. Clean re-useable items effectively after use and make them safe prior to storage. 11. Handle and dispose of wastes and by-products in a safe manner using the correct, designated waste routes. 12. Deal promptly, safely and effectively with any problems that are within your scope of practice. 13. Report any problems with resources or the environment that you cannot solve to the relevant person to deal with them. 14. Produce accurate, legible and complete records of maintenance activities. 15. Work within your level of competence, responsibility and accountability throughout all clinical activities and respond in a timely manner to meet individual's needs. 16. Ensure effective infection prevention and control at all times.

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Clinical, technical and scientific <i>RT15, RT16, SCDHSC0023, RT5, RT6, SFLWS17, SFLWS34, GEN 6, GEN 7, GEN 95, SSR B247</i></p>	<p>18. Mount the model and articulate it correctly and consistently with any available anatomical information and record the necessary information correctly.</p> <p>19. Modify, position and attach the prescribed components in a manner that:</p> <ol style="list-style-type: none"> produces the required aesthetic appearance achieves the function as detailed in the prescription meets the manufacturers specification shape and contour the appropriate components to the model. <p>20. Check the manufactured device to confirm that it:</p> <ol style="list-style-type: none"> complies with the prescription and design is clean is free of defects. <p>21. Make any adjustments which are required.</p> <p>22. Use working methods and systems throughout the process which:</p> <ol style="list-style-type: none"> promote health and safety reduce the risk of infection and contamination are consistent with the assessed risks. <p>23. Clearly and accurately identify devices with the service user's unique reference and date of production.</p> <p>24. Make complete, accurate and up-to-date records relating to identification, components and manufacture of the device and store records in the correct location consistent with relevant legislation.</p> <p>25. Effectively clean the device, prepare and package it safely for despatch and return it to the relevant person at the agreed time.</p> <p>26. Analyse the prescription and model and identify:</p> <ol style="list-style-type: none"> the materials that will be needed to produce the components 	<p>17. Ensure all essential resources are available in advance of planned healthcare activities and report any shortfalls.</p> <p>18. Check and confirm that all resources are in a suitable, safe condition for the activity to be carried out.</p> <p>19. Check that relevant equipment and medical devices are functioning within required parameters prior to use.</p> <p>20. Take appropriate action, where faults or breakdowns occur in equipment and medical devices.</p> <p>21. Handle resources in a safe and correct manner in accordance with health and safety and infection prevention and control, local and national policies, and guidelines</p> <p>22. Prepare resources in the appropriate manner and time for the activity to be carried out in accordance with any clinical governance.</p> <p>23. Make sure that environmental conditions within the immediate environment are set to appropriate levels to maintain individual comfort throughout the activity.</p> <p>24. Promptly investigate any problems with the environment and resources and report any which you cannot solve to the relevant person to deal with them.</p> <p>25. Clean re-useable items in accordance with national and local policies after use and make them safe prior to storage.</p> <p>26. Dispose of any used, damaged or out of date items in an appropriate safe place in accordance with local procedures.</p> <p>27. Return un-opened, unused and surplus resources to the correct location for storage.</p> <p>28. Monitor available levels of consumable materials used in clinical activities and replenish and replace in accordance with protocols.</p>

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Clinical, technical and scientific <i>RT15, RT16, SCDHSC0023, RT5, RT6, SFLWS17, SFLWS34, GEN 6, GEN 7, GEN 95, SSR B247</i></p>	<ul style="list-style-type: none"> b) the components that will be needed to achieve the required function c) the manufacturing process(es) that will be required to produce the components d) the optimum position and form of components e) the need for any non-routine components. <p>27. Design a device that:</p> <ul style="list-style-type: none"> a) has the potential to achieve the required function for the service user b) incorporates sufficient retention and support c) achieves the best possible balance between function, aesthetics and cost. <p>28. Contact the relevant person without delay if it is not feasible to produce the components and propose alternative options for the design of the components and the device.</p> <p>29. Evaluate whether the model needs to be modified to design and manufacture the required components.</p> <p>30. Evaluate the model and design and decide based on the prescription, cost, time and function:</p> <ul style="list-style-type: none"> a) where pre-formed components can be used within the device b) which components will need to be custom-made. <p>31. Identify and select any pre-formed components which are required, make any modifications to them that are allowable and necessary to ensure that they will perform the correct function, and confirm that they are fit for purpose.</p> <p>32. Select material for and form the custom-made components to the required design and size.</p> <p>33. Check components during preparation to confirm that:</p> <ul style="list-style-type: none"> a) they fit to the model b) they will not damage surrounding tissues c) they comply with the prescription and design. 	<p>29. Ensure you record all information accurately and timely in accordance with information governance.</p>

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Clinical, technical and scientific <i>RT15, RT16, SCDHSC0023, RT5, RT6, SFLWS17, SFLWS34, GEN 6, GEN 7, GEN 95, SSR B247</i></p>	<ul style="list-style-type: none"> 34. Make any adjustments which are required. 35. Use working methods and systems throughout the process which: <ul style="list-style-type: none"> a) promote health and safety b) reduce the risk of infection and contamination c) are consistent with the assessed risks. 36. Confirm which resources are available to complete the stock check. 37. Confirm that colleagues taking part in the stock check know their individual roles and responsibilities. 38. Communicate the progress of the stock check to the relevant colleagues. 39. Confirm that the results of the stock check are recorded and collated in accordance with organisational procedures. 40. Compare the findings of the stock check against stock records to identify any discrepancies. 41. Identify and respond to problems/ discrepancies identified by the stock check. 42. Identify security issues relating to the stock check and the actions arising from them. 43. Produce and distribute your stock check report to relevant colleagues. 44. Comply with organisational procedures and all relevant legal, safety and operating requirements relating to a stock check. 45. Work within your level of competence, responsibility and accountability. 46. Apply appropriate health and safety measures and standard precautions for infection prevention and control in respect of monitoring the suitability and decontamination of stock held. 	

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Clinical, technical and scientific <i>RT15, RT16, SCDHSC0023, RT5, RT6, SFLWS17, SFLWS34, GEN 6, GEN 7, GEN 95, SSR B247</i></p>	<ol style="list-style-type: none"> 47. Ensure items are stored in suitable locations and conditions to minimise risk of damage, theft or deterioration. 48. Record demand levels and monitor trends for stock requests against held stock. 49. Ensure sufficient numbers or stock items are available for issue to meet expected demand. 50. Check stock levels at regular intervals in line with local policies and protocols. 51. Observe stock rotation and expiry date requirements and report unusual stock movement or any stock deterioration to relevant others. 52. Where appropriate, check the condition of returned stock items and take appropriate action to ensure used equipment is fit for re-issue. 53. Inform relevant individuals of any damaged stock, remove from the storage facility and dispose of in the appropriate manner. 54. Initiate action to maintain supply of equipment, medical devices and consumables to meet demand. 55. Maintain full, accurate and legible records of information and store in the correct location in line with current legislation, guidelines, local policies and protocols. 	
<p>Communication and Information <i>GEN 97, SCDHSC0023, GEN 23, CHS 169</i></p>	<ol style="list-style-type: none"> 1. Acknowledge and respond to communication promptly. 2. Communicate with the individual and key people at a pace, in a manner and at a level appropriate to the individual's understanding, preferences and needs. 3. Select the most appropriate method of communication for the individuals. 4. Ensure that the environment for communication is as conducive as possible for effective communication. 	<ol style="list-style-type: none"> 1. Keep other members of the team informed of your activities to an appropriate level of detail. 2. Ensure your behaviour to others in the team supports the effective functioning of the team. 3. Offer relevant ideas and information to team members who would benefit from them. 4. Accept suggestions and information offered by others and use them constructively to improve practice.

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Communication and Information <i>GEN 97, SCDHSC0023, GEN 23, CHS 169</i></p>	<ol style="list-style-type: none"> 5. Adapt your communication style to suit the situation. 6. Identify any communication barriers with the individuals and take the appropriate action. 7. Clarify points and check that you and others understand what is being communicated. 8. Actively listen and respond appropriately to any questions and concerns raised during communications. 9. Establish lines of communication which enable you to communicate with individuals in other locations in times of need or emergency. 10. Maintain confidentiality of information where appropriate to do so. 11. Work within your level of competence, responsibility and accountability throughout 12. Establish the identity of an enquirer prior to providing any information or data. 13. Ensure that enquiries are routed to the appropriate person if the request is outside your responsibility and accountability. 14. Communicate effectively in the appropriate medium to meet the individuals needs and preferences. 15. Give clear, concise and accurate information or other data where this is within your scope of practice and responsibility. 16. Respond correctly to any questions which are within your area of responsibility and refer any questions that you cannot answer to the appropriate person. 17. Ensure you retain the confidentiality of the individual's information or data in line with legislation and organisational requirements. 	<ol style="list-style-type: none"> 5. Offer assistance to others in the team when they need it and in a friendly and helpful way. 6. Honour undertakings to others consistent with overall work priorities. 7. Clearly present suggestions for improving team working to relevant team members at an appropriate time. 8. Deal with differences in opinion in a way which tries to avoid offence and resolve conflicts in ways that maintain respect. 9. Seek advice from an appropriate person where you experience problems in working effectively with other team members. 10. Identify your own development needs against the demands of the work role. 11. Ensure your personal development objectives are the best balance possible between being achievable, realistic and challenging and being related to effective team working and service delivery. 12. Take responsibility for your own development, learning and performance. 13. Constructively evaluate and use feedback from others to improve future work performance.

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Communication and Information <i>GEN 97, SCDHSC0023, GEN 23, CHS 169</i></p>	<p>18. Where appropriate, ensure the safe and secure transfer of the individual's information or data to the enquirer.</p> <p>19. Record the request for any information or data supplied to maintain an audit trail of persons in receipt of information.</p> <p>20. Maintain full, accurate and legible records in line with current legislation, guidelines, local policies and protocols</p>	
<p>Safe, inclusive environments <i>IPC2-7, 9 & 12.2012¹⁷, PMWRV1, SCDHSC0024, GEN1, GEN 2, GEN23, GEN 96, SCDHSC0022, GEN 63, SCDHSC0234, SS01, CSH36</i></p>	<p>1. Continually assess the need to perform effective hand hygiene to prevent the spread of infection.</p> <p>2. Remove wrist and hand jewellery, including wristwatches prior to performing hand hygiene as these harbour microorganisms and may also inhibit effective hand hygiene.</p> <p>3. Where you wish to wear plain rings, remove them when you are carrying out hand hygiene, to reach all microorganisms.</p> <p>4. Use either liquid soap or approved hand rub products.</p> <p>5. Where you use liquid soap:</p> <ol style="list-style-type: none"> wash your hands to achieve effective hand hygiene, ensuring that you use appropriate techniques in accordance with local and national policies/procedures dry your hands thoroughly using single-use paper/towels or according to local policy/guidelines. <p>6. Where approved hand rub products are available or the only option for hand hygiene:</p> <ol style="list-style-type: none"> ensure that it is appropriate to use them follow the manufacturer's instructions on quantity, application and usage 	<p>1. Apply standard precautions for infection prevention and control and other appropriate health and safety measures.</p> <p>2. Remove personal clothing and fashion items that should not be worn in the workplace and store them in an appropriate safe place.</p> <p>3. Check that all personal protective equipment is clean, in a good state of repair and fits comfortably.</p> <p>4. Wear the correct personal protective equipment for your role and the procedure you are undertaking in line with organisational policy.</p> <p>5. Where required, cover any cuts and grazes securely with an appropriate dressing.</p> <p>6. Maintain a clean, neat and tidy appearance at all times.</p> <p>7. Change your personal protective equipment as soon as practicably possible if it becomes unsuitable for use.</p> <p>8. Remove your personal protective equipment safely in a way that minimises the risk of cross-infection and put it in the appropriate place for re-processing or disposal as necessary.</p> <p>9. Report any shortfalls in personal protective equipment stocks promptly to the appropriate person.</p>

17. Only IPC core competencies are displayed, please also NOS role specific competencies.

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Safe, inclusive environments <i>IPC2-7, 9 & 12.2012, PMWRV1, SCDHSC0024, GEN1, GEN 2, GEN23, GEN 96, SCDHSC0022, GEN 63, SCDHSC0234, SS01, CSH36</i></p>	<p>c) ensure that you use appropriate techniques according to local and national policies/procedures</p> <p>d) allow your hands to air dry fully and naturally before carrying out the activity.</p> <p>7. Avoid contamination of your hands between hand hygiene and carrying out the activity.</p> <p>8. Keep your fingernails short and clean and without nail polish or artificial fingernails and accessories when providing care to others.</p> <p>9. Before each working shift, assess your hands for cuts, cracks and breaks in the skin that could harbour microorganisms.</p> <p>10. Cover any cuts and abrasions with a waterproof dressing, change the dressing when required, and keep the area clean to reduce the risk of infection.</p> <p>11. Maintain good hand skin hydration by using moisturiser as appropriate.</p> <p>12. Report any skin problems to your line manager, Occupational Health or your General Practitioner so that appropriate treatment can be undertaken.</p> <p>13. Should you encounter problems with the facilities and supplies for hand hygiene, that you are unable to remedy, inform the person responsible for them and ask them to act.</p> <p>14. Make sure that you are fit for work.</p> <p>15. Report any personal episodes of illness and infection which could compromise your work to the person in charge of your shift.</p> <p>16. Report any episodes of illness or infection in close social contacts which could compromise your work to the person in charge of your shift.</p> <p>17. Visit your General Practitioner or Occupational Health Service when situations occur that may compromise work.</p>	<p>10. Prevent contamination of personal protective equipment by only wearing it in the designated working area and changing into personal clothing when you finish work.</p> <p>11. Wear additional protective equipment when there is the risk of or presence of aerosol blood, body fluids or radiation in line with organisational policy.</p> <p>12. Wear synthetic non-powdered unsterile gloves and a plastic apron when cleaning and when handling blood, body fluids, specimens and toxic or corrosive substances in line with mandatory risk assessments.</p> <p>13. Wash and dry your hands effectively or use an appropriate alcoholic skin decontamination fluid when arriving on duty and then before and after each activity/patient contact.</p>

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Safe, inclusive environments <i>IPC2-7, 9 & 12.2012, PMWRV1, SCDHSC0024, GEN1, GEN 2, GEN23, GEN 96, SCDHSC0022, GEN 63, SCDHSC0234, SS01, CSH36</i></p>	<ol style="list-style-type: none"> 18. Keep your manager fully informed of the need to be away from work. 19. Maintain a clean and healthy personal status. 20. Promptly resolve problems of personal hygiene before risk of cross infection can occur. 21. Ensure that all necessary health promotion schemes, such as vaccination for work and social activities are taken up as advised by the Occupational Health Department 22. Comply with national regulations related to viral antigen testing before starting and during employment when involved in exposure prone procedures. 23. Work within your level of competence, responsibility and accountability 24. Challenge and confirm right of entry of people to the working environment and take prompt and appropriate action in response to any security problems or issues. 25. Check the risk assessments to identify the hazards and associated risks relevant to your work activities and whenever new protocols, procedures, techniques or equipment are introduced into your work practice. 26. Undertake a risk assessment if one has not been completed or refer to colleagues if this is outside your area of authority. 27. Ensure appropriate personal protective equipment and/or any security protection is worn relevant to the workplace environment and activity. 28. Follow any manufacturer's instructions and the risk assessment guidelines to ensure identified hazards are controlled within your work practices. 	

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Safe, inclusive environments <i>IPC2-7, 9 & 12.2012, PMWRV1, SCDHSC0024, GEN1, GEN 2, GEN23, GEN 96, SCDHSC0022, GEN 63, SCDHSC0234, SS01, CSH36</i></p>	<ul style="list-style-type: none"> 29. Check all resources are fully operational and any materials are within their expiry date and take appropriate action if any resources are not fit for use. 30. Apply the safe lifting and handling techniques required for your work activities. 31. Dispose of any waste or hazardous materials in accordance with specified local procedures and policies. 32. Maintain a tidy and clean work area during and following the work activity. 33. Ensure any resources are stored safely in an appropriate location and environment. 34. Promptly report any incidents or risks to health, safety and security to relevant personnel and complete the required health and safety records clearly and accurately in a timely manner. 35. Maintain full, accurate and legible records of information collected in line with current legislation, guidelines, local policies and protocols. 36. Adhere to legislation, protocols and guidelines relevant to your role and field of practice. 37. Work within organisational systems and requirements as appropriate to your role. 38. Recognise the boundary of your role and responsibility and seek supervision when situations are beyond your competence and authority. 39. Maintain competence within your role and field of practice. 40. Use relevant research-based protocols and guidelines as evidence to inform your practice. 41. Always promote and demonstrate good practice as an individual and as a team member. 	

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Safe, inclusive environments <i>IPC2-7, 9 & 12.2012, PMWRV1, SCDHSC0024, GEN1, GEN 2, GEN23, GEN 96, SCDHSC0022, GEN 63, SCDHSC0234, SS01, CSH36</i></p>	<ul style="list-style-type: none"> 42. Identify and manage potential and actual risks to the quality and safety of practice. 43. Evaluate and reflect on the quality of your work and make continuing improvements. 44. Recognise people's right to make their own decisions and acknowledge their responsibilities. 45. Ensure that your actions in interpreting the meaning of rights and responsibilities are consistent with existing legislative frameworks and organisational policy. 46. Provide information which is up-to-date and takes account of the complexity of the decisions which people may need to make. 47. Give appropriate help to people who are unable to exercise their rights personally. 48. Acknowledge tensions between rights and responsibilities and provide appropriate support towards their resolution. 49. Ensure the necessary records relating to the promotion of rights and responsibilities are accurate, legible, and complete. 50. Provide the necessary information to people who wish to make a complaint about an infringement of their rights. 51. Offer appropriate support to any others involved in the incident once any initial danger has passed. 52. Keep records of incidents that are accurate, legible and complete. 53. Ensure your actions are consistent with people's expressed beliefs and views and acknowledge the benefits of diversity. 54. Promote anti-discriminatory practice in ways which are consistent with legislative frameworks and organisational policy. 	

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Safe, inclusive environments <i>IPC2-7, 9 & 12.2012, PMWRV1, SCDHSC0024, GEN1, GEN 2, GEN23, GEN 96, SCDHSC0022, GEN 63, SCDHSC0234, SS01, CSH36</i></p>	<p>55. Take appropriate action to minimise the impact of discrimination and oppression on people.</p> <p>56. Seek advice and guidance when you have difficulty promoting equality and diversity.</p> <p>57. Record information which is consistent with the promotion of equality and diversity.</p> <p>58. Ensure that information stored in, and retrieved from, recording systems is consistent with the requirements of legislation and organisational policy.</p> <p>59. Maintain records which are accurate and legible and contain only the information necessary for the record's purpose.</p> <p>60. Disclose information only to those who have the right and need to know once proof of identity has been obtained.</p> <p>61. Take appropriate precautions when communicating confidential or sensitive information to those who have the right and need to know it.</p> <p>62. Inform people in a clear and appropriate manner that information will be shared with others when they tell you something that you are required to share with others.</p> <p>63. Handle confidential records securely and store them in the correct place.</p> <p>64. Accurately and promptly confirm that the individual's circulation and breathing has stopped and establish the need for basic life support.</p> <p>65. Ensure your actions always comply with:</p> <ul style="list-style-type: none"> a) established protocols and guidelines b) evidence based, best practice your own scope of practice c) health and safety and standard precautions for infection prevention and control d) legislation. 	

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Safe, inclusive environments <i>IPC2-7, 9 & 12.2012, PMWRV1, SCDHSC0024, GEN1, GEN 2, GEN23, GEN 96, SCDHSC0022, GEN 63, SCDHSC0234, SS01, CSH36</i></p>	<p>66. Seek additional specialist support at the earliest opportunity.</p> <p>67. Check and confirm that the individual is not breathing unaided and that resuscitation is not contraindicated.</p> <p>68. Use relevant, safe techniques for clearing and opening the individual's airway where appropriate.</p> <p>69. Position the individual and yourself appropriately to apply external chest compression and/or ventilation safely and effectively taking account of:</p> <ol style="list-style-type: none"> a) the individual's condition b) the need for a sufficiently firm base to facilitate external chest compression c) the potential need to maintain compressions and ventilation for a prolonged period. <p>70. Use the appropriate ratio when alternating compressions with ventilation and comply with the correct rates and depths of each, ensuring compression is applied on the correct site of the individual's chest.</p> <p>71. Monitor and evaluate the individual's respiratory function and the effectiveness of compressions and ventilation, responding promptly and appropriately to achieve the best possible outcome for the individual.</p> <p>72. Cease the application of any techniques when the individual regains airway and circulation control and place the individual in an appropriate position to enable continued care according to condition.</p> <p>73. Continue ventilation and compressions until:</p> <ol style="list-style-type: none"> a) the individual shows clear signs of unaided circulation and adequate spontaneous breathing is established b) the individual is handed over to the care of others c) you become exhausted d) death is confirmed by an authorised practitioner. 	

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
Safe, inclusive environments <i>IPC2-7, 9 &12.2012, PMWRV1, SCDHSC0024, GEN1, GEN 2, GEN23, GEN 96, SCDHSC0022, GEN 63, SCDHSC0234, SS01, CSH36</i>	<p>74. Accurately and clearly report the actions you have taken and the duration, when handing over to a specialist.</p> <p>75. Reinstate equipment and materials to working status after use.</p>	
Safe, inclusive environments	<ol style="list-style-type: none"> 1. Participates in service evaluation and quality improvement activities relevant to own work. 2. Able to understand and comply with research governance, ethics, protocols and guidelines. 3. Contributes to audit, service evaluation and quality improvement activities, such as service user feedback and benchmarking. 	<ol style="list-style-type: none"> 1. Participates in, contributes to, and may lead, audits, service evaluation and quality improvement projects relevant to own work. 2. Applies research governance, ethics, protocols and guidelines and may undertake more complex research activities including data collection and analysis. 3. Disseminates research findings.
Leadership <i>GEN39, GEN 33, GEN 84</i>	<ol style="list-style-type: none"> 1. Ensure that your working practice conforms to decisions taken by the team. 2. Communicate effectively with other team members and constructively acknowledge the views of colleagues. 3. Provide clear, accurate and sufficient information on work in progress to enable another member of the team to effectively carry out their work. 4. Provide colleagues with help and advice when requested and when this is consistent with your other responsibilities. 5. Make sure that issues in the team are addressed positively and handled in a constructive manner. 6. Agree to maintain confidentiality of information relating to other members of the team. 7. Accurately summarise issues in the team that cannot be resolved and pass this information on to someone who has the authority and capability to reach a solution. 	<ol style="list-style-type: none"> 1. Clarify your understanding of the expected learning outcomes to be achieved and how success is to be measured. 2. Offer constructive and realistic suggestions as to the support you can provide, taking account of any particular strengths and weaknesses in your expertise and experience which could affect the plans being made. 3. Give constructive and timely feedback on ideas and options being explored. 4. Bring attention to any difficulties you foresee in carrying out the plan as required. 5. Confirm your understanding of your contribution to implementing the plan with the therapist. 6. Plan your time to meet your responsibilities for implementing the planned learning activities and make effective use of allocated time. 7. Express a realistic and fair view on the success of the learning activities taking account of the agreed success measures.

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Leadership <i>GEN39, GEN 33, GEN 84</i></p>	<ol style="list-style-type: none"> 8. Identify examples of good and poor practice and make suggestions of realistic improvements to team practice to others in the team. 9. Identify your own development needs against the demands of the work role and the demands/requirements of the team. 10. Encourage and support other individuals to identify their own values, interests and priorities in relation to the work they are undertaking. 11. Encourage and support other individuals to think through and identify the impact which their own values, interests and priorities have on their own practice and personal life. 12. Encourage and support other individuals to reflect on their own personal beliefs, preferences and behaviour to identify the effect which they have had on how they think about and work with others. 13. Provide other individuals with constructive feedback on their practice, their effectiveness within their role and their ability to work with others. 14. Encourage other individuals to reflect upon and identify the factors that affect the effectiveness of their practice. 15. Encourage other individuals to reflect upon and identify which of the identified factors they can tackle, and how. 16. Encourage other individuals to reflect upon and identify those factors for which they need support and who this may come from. 17. Encourage other individuals to reflect upon and identify ways in which their practice can be improved. 18. Identify ways of developing other individuals' confidence in performing activities in the workplace. 	<ol style="list-style-type: none"> 8. Take account of the contexts within which the learning activities took place when offering comments on it. 9. Identify and share information on the strengths and weaknesses of the activities in a constructive manner. 10. Offer realistic and constructive suggestions for improvements to the activities and your role in supporting them. 11. Deal with any differences of opinion in a way that maintains effective working relationships with colleagues.

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Leadership <i>GEN39, GEN 33, GEN 84</i></p>	<ol style="list-style-type: none"> 19. Offer others your own views in a fair and constructive manner about the factors which affect their effectiveness and ways in which their practice can be improved. 20. Encourage others to challenge any of your views which they feel are not reasonable or justifiable. 21. Assist others to identify realistic and achievable goals for improving their practice. 22. Assist others to draw up a realistic and achievable plan for achieving their goals. 23. Assist others to seek support from appropriate people who are in a position and are willing to help them to achieve their goals. 24. Assist others to identify how and when they should review their progress towards their goals and your role in this. 25. Offer other individuals' information and advice to enable them to identify and use effective support systems and networks. 26. Assist others to identify barriers to their progress and develop plans to manage these. 	
<p>Personal and professional values <i>INSML002, GEN23</i></p>	<ol style="list-style-type: none"> 1. Acts in a professional manner, demonstrating NHS Constitution values. 2. Monitor trends and developments in your professional sector and area of expertise. 3. Evaluate the impact of trends and developments on your work role. 4. Assess the current and future requirements of your work role in accordance with the vision and objectives of your organisation. 	<ol style="list-style-type: none"> 1. Access and accurately interpret all relevant work instructions and information. 2. Work safely at all times and in accordance with all relevant legislation, guidelines, policies, procedures and protocols. 3. Allocate monitoring activities within your work at regular intervals consistent with legal, professional and organisational requirements.

Domain and relevant NOS standards ▼	Educational level 2/3	Educational level 5 level 3 competencies and the following level 5
<p>Personal and professional values <i>INSML002, GEN23</i></p>	<ol style="list-style-type: none"> 5. Identify gaps between the current and future requirements of your work role and your current knowledge, skills and competence. 6. Assess your own values, motivations and emotions. 7. Identify your own strengths and limitations. 8. Identify your learning and development needs. 9. Agree a development plan which addresses identified gaps in your knowledge, skills, and competence. 10. Agree a development plan which supports your own career and personal goals. 11. Undertake the activities agreed in your development plan using preferred learning methods. 12. Seek new sources of support, when necessary. 13. Access available learning and development resources to support development activities. 14. Evaluate how learning and development activities have contributed to your performance. 15. Request objective, specific and valid feedback on your performance from colleagues, team members and customers. 16. Collate and analyse the feedback and take appropriate actions, where required. 17. Update your development plan in the light of your performance, development activities undertaken and any wider changes. 18. Reflect on your learning and work experiences in your continuing professional development (CPD) records 	<ol style="list-style-type: none"> 4. Adjust the frequency of monitoring where necessary to ensure compliance with quality systems and whenever risks are identified. 5. Monitor your work activities and outcomes against the relevant quality indicators and standards. 6. Access information from appropriate sources as relevant to the monitoring activity. 7. Obtain the correct and complete data relevant to the monitoring activity. 8. Identify any non-compliance or variance in work activities and outcomes against relevant quality indicators. 9. Report instances of non-compliance or variance with quality standards accurately and promptly to relevant people. 10. Use the monitoring results to improve your working practices and outcomes. 11. Access appropriate support to improve your practice and where required act on any recommendations to improve performance and quality outcomes. 12. Review any changes to working practices as required to confirm and sustain improvements. 13. Complete and store all relevant documentation in accordance with organisational requirements.

11. Care Certificate

The Care Certificate¹⁸ is an agreed set of standards that health and care professionals adhere to in their daily working life. Designed with the non-registered workforce in mind, the Care Certificate gives everyone the confidence that health and care professionals have the same introductory skills, knowledge and behaviours to provide compassionate, safe and high-quality care and support in their own workplace setting.

The Care Certificate is based on 15 standards, which individuals need to complete in full before they can be awarded their certificate.

If the employee has completed an accredited education programme, the content of their previous programme of study will determine whether the Care Certificate needs to be completed.

12. Developing your support workforce

12.1 Grow your own

Grow Your Own (GYO) refers to a development pathway which promotes the use of apprenticeships and provides employees with defined workplace career development and progression options. These opportunities provide pathways to enter the regulated sector as well as offering flexibility to grow within the support worker role.

GYO provides employers within a system to benefit from work-based learning and growth activities. For example, a GYO route invests in existing staff. Developing staff that are already within the organisation may prevent attrition and improve retention because the individual will be able to develop and progress within role and remain employed. This model is likely therefore to reduce your turnover rate and provide your department or service with a sustainable recruitment pool.

Such a pathway has benefits for staff, such as, the opportunity to train while remaining within the local system. If your Trust or organisation offers apprenticeships, there is likely to be a system wide development programme which will support individuals through their journey. This support will be available for those wishing to develop within role as well as those individual's that may wish to progress from an entry level apprenticeship towards higher and degree level apprenticeships.

Place based and led care encourages an NHS workforce that reflect the makeup and background of the patients it treats. A GYO pathway will encourage practitioners to remain within the community where they live and work. One way to develop a GYO model and help recruit a diverse workforce is to engage with apprenticeships that can develop your support staff.

12.2 Apprenticeships

Apprenticeships bring several tangible benefits to the prosthetic and orthotic profession. This training pathway can create skilled, motivated, and qualified employees across a range of educational levels. When used to stratify the workforce, apprenticeships can help to address skills shortages across the workforce.

NHSE continue to support apprenticeships within the NHS¹⁹ realising a range of benefits to staff and patients, such as:

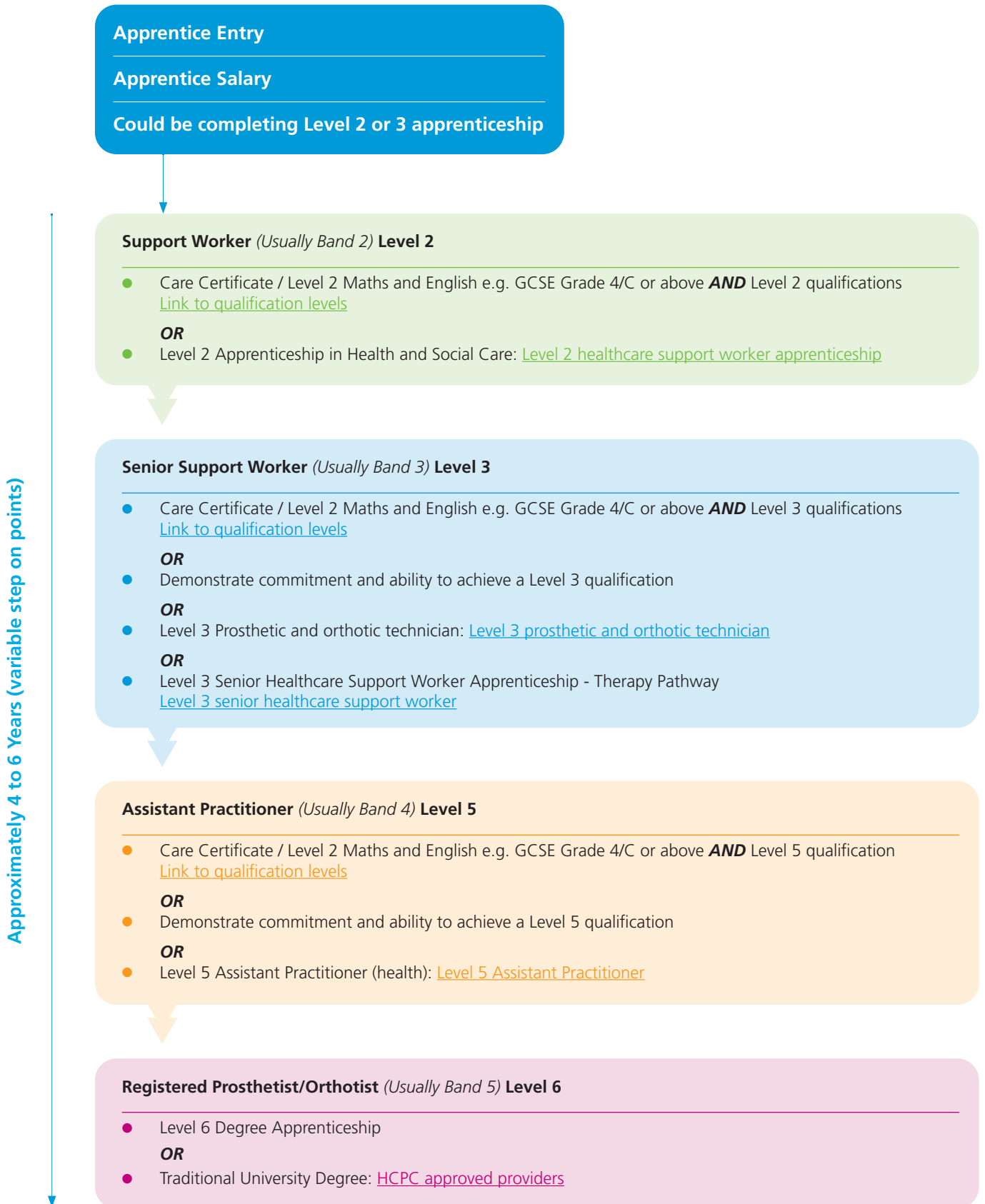
- Improved patient care
- Reduced training and recruitment costs
- Organisation loyalty leading to improved retention rates
- Providing skills that employers need to develop a talented future workforce

The diagram below shows how apprenticeships from level 2 - 6 can build P&O support worker careers both within role and across roles within an NHS setting.

18. <https://www.e-lfh.org.uk/programmes/care-certificate/>

19. <https://www.england.nhs.uk/wp-content/uploads/2018/03/apprenticeship-scheme.pdf>

P&O Apprenticeship routes for support workers



Apprenticeships provide flexible training programmes and increase organisational efficiency and effectiveness, tailored to the needs and requirements of organisations. Learning is completed in the workplace, working alongside experienced staff, gaining job specific skills, minimising disruption, and maximising impact.

Apprenticeships allow organisations to bring new and existing talent through the ranks and train teams with the skills they need to provide high quality care to the patients they serve. Apprenticeship programmes can be a cost-effective way to create a skilled, flexible, and motivated workforce and can help employees keep pace with developments in technology and working practices within healthcare. These programmes can also help improve the diversity of the workforce and can help create employment opportunities for people from local communities. See section 12 and read about Tracey Crooks career story Tracey's story demonstrates what is possible with apprenticeships.

12.3 Further information on apprenticeships

Support worker apprenticeships for prosthetic and orthotic technicians in England are provided by the University of Derby²⁰. For general information on healthcare apprenticeships in England please go to Health Care Apprenticeships Online (HASO)²¹.

12.4 Funding matters

Useful guidance about apprenticeship funding and the apprenticeship levy.

<https://www.gov.uk/government/publications/apprenticeship-levy-how-it-will-work/apprenticeship-levy-how-it-will-work>

This factsheet, from NHS Employers, is another useful source of information:

<https://www.nhsemployers.org/articles/using-apprenticeships-support-workforce-supply>

Also see section 17.1.1 and 17.1.2 for additional resources.

12.5 Widening participation

To embrace the challenges to build a sustainable, skilled, and representative, locality-based workforce, widening participation initiatives can unlock enablers and opportunities for success. With particular focus on widening access for those who are underrepresented within our existing workforce, or from lower socioeconomic and deprived areas and those from minoritised backgrounds, we can better understand the needs of our patients and provide more effective care. Widening participation means that we are actively engaging in inclusive recruitment.

NHSE have pledged a commitment to widening access and participation (WAP)²² suggesting that WAP can help tackle health inequalities and improve opportunities for all and not just a select few. To support this, there must be an increase of pre-employment opportunities generally and ensure they are distributed equally among our communities. For example, Coventry and Warwickshire Partnership NHS Trust (CWPT) have supported 240 young people through a bespoke pre-employment programme focusing on apprenticeship opportunities²³.

Access to good employment opportunities for local communities is crucial for maximising an integrated care system's (ICs) impact on improving population health, healthcare outcomes, reducing inequalities, increasing productivity and value for money, and supporting broader social and economic development.

20. <https://www.derby.ac.uk/apprenticeships/-level-3-prosthetic-and-orthotic-technician-apprenticeship/#contact-us>

21. <https://www.skillsforhealth.org.uk/integrated-solutions/apprenticeship-support/>

22. <https://www.hee.nhs.uk/our-work/talent-care-widening-participation/widening-access-participation-wap>

23. <https://www.nhsemployers.org/case-studies/apprenticeships-pathway-boosting-young-peoples-recruitment>

NHS Employers have produced several resources showcasing how local communities and organisations have worked with NHS partners to support inclusive recruitment. Two examples are given below, but please visit the resources for comprehensive information.

Example 1: This resource provides detailed case studies and resources to support skilled workers from the refugee communities gain access to NHS jobs²⁴.

Example 2: This toolkit contains advice, tools, and resources to support health and social care organisations to recruit people who have experienced homelessness into the workforce, to support them to stay in their roles and become an asset to the organisation²⁵.

A more recent innovation, introduced by the health Foundation in 2019, details how, becoming an 'anchor' organisation can have a positive impact on widening participation. An anchor organisation refers to a large, often, not for profit or public sector organisation, that is rooted in its community and whose long-term sustainability is tied to the wellbeing of the population that it serves²⁶. NHS systems and organisation are being encouraged to adopt 'anchor approaches' to help with inclusivity and tackling health inequalities. It is thought that by adapting anchor practices decision makers can maximise the contribution the NHS makes to the wider determinants of health – the social, economic, and environmental conditions that shape good health. For more information The Health Foundation has some key information on the topic²⁷.

13. Guidance on delegation and supervision

The Health and Care Professions Council (HCPC) and BAPO provide guidance and standards on delegation that should be consulted when planning the development of P&O support worker roles. The HCPC Standards of Conduct, Performance and Ethics states that:

- 4.1 You must only delegate work to someone who has the knowledge, skills and experience needed to carry it out safely and effectively.
- 4.2 You must continue to provide appropriate supervision and support to those you delegate work to.

In addition, the AHP support worker, competency, education and career and development framework sets out the common education and experience requirements and the knowledge, skills and behaviours expected at each stage.

Until support workers can demonstrate that they are able to perform tasks and responsibilities competently and safely for each stage, they should be closely supervised by an appropriately qualified and registered member of staff.

To facilitate safe and effective delegation and supervision for AHP support workers NHSE has also produced a supervision and delegation handbook^{24,25}. BAPO has also provided guidance on supervision of support staff, and this can be found on the website²⁶.

24. Supervision and delegation handbook

25. <https://www.hee.nhs.uk/our-work/allied-health-professions/enable-workforce/developing-role-ahp-support-workers/ahp-support-workforce-resources>

26. <https://www.bapo.com/Guidance-paper-on-the-supervision-of-Assistant-Practitioners.docx>

14. Case study blogs

14.1 P&O orthotic support worker training and education for patient facing roles in the NHS

Tracey Crooks works as an assistant practitioner support worker within the orthotic service for North Lincolnshire and Goole (NLAG) NHS Foundation Trust. The case study demonstrates the depth and breadth of work that P&O support workers can aspire to. Tracey has completed her training via the apprenticeship route and has completed both a level 3 and level 5 apprenticeship and completed her foundation degree. Read more about Tracey's journey.

Tracy Crooks, Assistant Practitioner Orthotics²⁷

Can you tell us about your role and the difference it makes to patient care?

As an orthotic assistant practitioner, I carry my own case load of patients. Being an assistant practitioner has given me a bigger scope of practice and the knowledge to fulfil that role and allowing me more autonomy in doing it.

What attracted you to being a support worker?

At the age of 16 when I left school, I did not want to work in a factory like all of my family, so I entered the care sector and have been in the care sector in one way or another ever since; which amounts to nearly 34 years now.

How has training and development in your role helped you so far?

The training has allowed me to progress as far as I could, however the apprenticeship and foundation degree helped me take the next step to the level that was just out of reach.

I now know more about how care is implemented, how it can have an impact on the patient not just physically but emotionally and socially. It gave me the knowledge and confidence to look at care not just for the individual but also how the care we offer can benefit the larger community. I have been able to expand my competencies. I have more responsibility and I now take an active role in how we as a department deliver care to our patients.

As a support worker you can have an enormous impact on someone and their view of the NHS.

What are you most proud of in your role?

1. Completing the foundation degree and higher apprenticeship at the age of 49
2. Implementing the knowledge I have gained to research and put together patient information booklets that are available to the wider community on the hub
3. Improving waiting times for patients
4. The confidence I have gained while doing this role
5. Starting another apprenticeship in team leader/supervisor.

What would you say to others to encourage more people to become AHP support workers?

While a role of an AHP support worker may not be the most glamorous and sometimes it can be very difficult, it is a very rewarding job.

Many people think support workers are "just carers" or "just assistants", they are not! As a support worker you can have an enormous impact on someone and their view of the NHS.

There are so many different types of job roles out there waiting to be explored that can lead to change, not for just a single patient but support workers can change the way care is given to the community as a whole.

Anything else you would like to say?

One of my favourite quotes is by Dr Jane Goodall

“What you do makes a difference, and you have to decide what kind of difference you want to make.”

For care to improve it takes someone to take the first step. That first step could be by anyone and it could lead anywhere.

14.2 Support workers in leadership

The next blog details a project that Tracey was involved in following the COVID-19 pandemic. Tracey was a key member of the team when it came to developing a waiting time recovery plan. This showcases the level of involvement that our P&O support workers contribute and showcases how influential support workers are in leadership. Read more about the initiative spearheaded by Tracey:

Orthotics, The Cinderella service of the NHS

Here in orthotics, we are a service that not many people really know about or understand. We provide things like prescription braces, splints, callipers, footwear, spinal and abdominal supports, helmets and occasionally insoles to name but a few, as well as supply vouchers for the provision of prescription wigs for our postiche patients. We supply items which help people recover from or avoid injury as well as to patients who live with long term or lifelong conditions. When we supply an orthosis, we are not just looking at the physical impact it will have on the patient health but also the psychological benefits it will have as well.

The correct supply and fitting of any orthoses can help improve quality of life by reducing pain, promoting and/or maintaining mobility and independence and so in turn preventing more invasive and expensive interventions like surgery, amputation or the need for social care intervention. Previous studies have estimated that for every £1 spent on improving orthotics services, the NHS could potentially save as much as £4.

Here at NLAG at the start of January, we started off much the same as all other departments after COVID-19. We had patient waiting times of 18 weeks due to the backlog of referrals and the list was getting longer. And at the time we were only able to offer three clinics a week. Patients were getting frustrated and taking it out on the admin team when they couldn't get an appointment. Things were looking very bleak and needed to change. After just six months it has now changed and we have completely turned the service around.


We put together a proposal to increase availability and capacity and gave this to our team lead who was extremely supportive and encouraging and submitted the proposal report for approval, this came back very quickly. By increasing the availability and capacity from three to five face-to-face clinics a week, with the addition of one full telephone clinic, we have reduced that 18 week waiting time for new patients' referrals down to five weeks for adults and follow ups currently also sitting at five weeks. Paediatric new patients and follow ups are both now at two weeks. By introducing more clinics and telephone follow up appointments as well as implementing the new patient initiated follow up lists (PIFU) we have been able to streamline the face-to-face appointments to the new patients and those that have an issue and need to be seen urgently.


Many of our patients have long term conditions, they can be on our list for many years. So, rather than patients just sitting on waiting lists and automatically receiving a follow up review at six or 12 months, we are placing these patients on the PIFU list, they can then initiate their own follow up when they need us.


So far, all these changes are working very well and have made a huge, positive impact on the service, not just for patients who are very happy and always give us compliments on the service, but also the improvement in staff morale has increased tremendously and we very rarely get any complaints now. Our aim is to get that wait down further to four weeks, if we can.


15. Training and education resources


BAPO have created a suite of training and education resources for support workers. These can be accessed via BAPO's website: www.bapo.com


Introduction to lower limb orthoses
For support workers - December 2023
Developed on behalf of the British Association of Prosthetists and Orthotists


Introduction to upper limb orthoses
For support workers - December 2023
Developed on behalf of the British Association of Prosthetists and Orthotists


Introduction to lower limb prosthetics
For support workers - December 2023
Developed on behalf of the British Association of Prosthetists and Orthotists


Introduction to upper limb prosthetics
For support workers - December 2023
Developed on behalf of the British Association of Prosthetists and Orthotists


Introduction to Gait
For support workers - December 2023
Developed on behalf of the British Association of Prosthetists and Orthotists

16. Glossary of Terms

Apprenticeship	an apprenticeship is employment with training to industry standards in a recognised occupation. It will involve a substantial programme of on and off-the-job training.
Apprenticeship Levy	Employers with a pay bill over £3 million each year, pay the apprenticeship levy. Levy paying employers can spend their apprenticeship levy funding on apprenticeship training.
Apprenticeship standard	new-style apprenticeship based on an occupational standard that defines the duties carried out by someone in the occupation and knowledge, skills and behaviours required to achieve that competence in those duties. The apprentice's occupational competence is tested by an independent, endpoint assessment.
Continuing professional development	This is the way in which a worker continues to learn and develop throughout their career, keeping their skills and knowledge up to date and ensuring they can work safely and effectively.
Diversity	Celebrating differences and valuing everyone. Diversity encompasses visible and non-visible individual differences and is about respecting those differences.
Duty of care	Your duty of care means that you must aim to provide high quality care to the best of your ability and say if there are any reasons why you may be unable to do so.
Equality	Being equal in status, rights, and opportunities.
Grow your own	refers to workforce strategies that seek to attract and recruit more local people into health and social care employment. This is achieved, for example, by engaging with local schools and colleges, working with job centres, local work and health programmes, and also adults who may be considering a career change or others who might be economically disadvantaged. Once in employment, a GYO strategy will look to support individuals and develop their careers whether they remain in a particular post or progress upwards.
Knowledge, skills and behaviours	what is needed to competently undertake the duties required for an occupational standard.
Occupational standard	document that details what someone competent in the occupation does - duties and the knowledge, skills, and behaviours they require to do it; the basis for apprenticeship standards and T-levels.
Orthosis, orthotic device, or product	externally applied device used to compensate for impairments of the structure and function of the neuro-muscular and skeletal systems. ¹
Person centred values	These include individuality, independence, privacy, partnership, choice, dignity, respect, and rights.

1. ISO (2020) ISO 8549-1: Prosthetics and orthotics — Vocabulary — Part 1: General terms for external limb prostheses and external orthoses.

Prosthesis, prosthetic device, or product

externally applied device used to replace wholly, or in part, an absent or deficient limb segment.¹

Reflect

This is the process of thinking about every aspect of your work, including identifying how and where it could be improved.

Scope of practice

The boundaries of a post's roles and responsibilities, including the tasks the role holder may and may not perform.

1. ISO (2020) ISO 8549-1: Prosthetics and orthotics — Vocabulary — Part 1: General terms for external limb prostheses and external orthoses.



17. Appendices

17.1 Resources

17.1.1 Delegation and Supervision

https://healtheducationengland.sharepoint.com/:b:/s/AHPWC/EW-MfXeK-QZDnkK8Q8bWMNwBFUrMLmlbWK21wM_-4GliNA?e=rL3Nnc

https://healtheducationengland.sharepoint.com/:b:/s/AHPWC/EX0z7frhiVHpsULBj0nhYoBoLc4xKdRdJJ_2K4qYkDCjg?e=JTMayv

<https://www.csp.org.uk/publications/principles-underpinning-delegation-physiotherapy-support-workers>

<https://www.bapo.com/wp-content/uploads/2019/06/BAPO-Standards-Best-Practice-2018-update.pdf>

<https://www.bapo.com/wp-content/uploads/2020/08/BAPO-Guidance-paper-on-the-supervision-of-Assistant-Practitioners.docx>

<https://www.skillsforcare.org.uk/Support-for-leaders-and-managers/Managing-people/Supervision.aspx>

17.1.2 Developing your support workforce

<https://apps.who.int/iris/bitstream/handle/10665/259209/9789241512480-part2-eng.pdf?sequence=2&isAllowed=y>

<https://healtheducationengland.sharepoint.com/:b:/s/AHPWC/EfIONv077K5LvYw0RJgKAkBZB8ew6KCojYZobGRh7w6Xw?e=Zr8RhV>

<https://healtheducationengland.sharepoint.com/:b:/s/AHPWC/ET097qwYmaJLryhEJLpEjuYBdyzn4g04PNm8iE30CXWxEg?e=iDc6RM>

<https://healtheducationengland.sharepoint.com/:x:/g/Comms/Digital/Eb6n6D-kvvhFp-muUPE-ej0BHa22ZWHgejAAvHnqZCPa-Q?e=4aOIRa>

https://healtheducationengland.sharepoint.com/:b:/s/AHPWC/EUmDbcC75SxNgWM7rkthL_wBG6TzMdsMr5nku593EybmKQ?e=kKvORo

<https://healtheducationengland.sharepoint.com/:b:/g/Comms/Digital/EUnS0vdLv4BLh5er5EvJArIBMQxnWNiS1TWPs8cec4giWQ?e=pWjOaf>

<https://www.hee.nhs.uk/our-work/allied-health-professions/enable-workforce/developing-role-ahp-support-workers/ahp-support-workforce-resources>

<https://www.bapo.com/Guidance-paper-on-the-supervision-of-Assistant-Practitioners.docx>

https://www.hee.nhs.uk/sites/default/files/documents/AHP_Framework%20Final_0.pdf

<https://www.hee.nhs.uk/our-work/allied-health-professions/enable-workforce/developing-role-ahp-support-workers>

<https://www.hee.nhs.uk/our-work/talent-care-widening-participation/support-worker-help-resources/support-worker-learning-development-roadmap>

17.1.3 Care Certificate

<https://www.hee.nhs.uk/our-work/care-certificate>

<https://healtheducationengland.sharepoint.com/Comms/Digital/Shared%20Documents/Forms/AllItems.aspx?id=%2FComms%2FDigital%2FShared%20Documents%2Fhee%2Enh%2Euk%20documents%2FWebsite%20files%2FCare%20certificate%20toolkit&p=true&ga=1>

<https://www.skillsforhealth.org.uk/info-hub/category/the-care-certificate/>

18. Job Descriptions

Example Job Description for P&O Support worker role

DIRECTORATE OF OPERATIONS JOB DESCRIPTION

POST	Therapy Assistant Practitioner Orthotics C&TS
PAY BAND	AFC band 4 (Band 3 trainee)
RESPONSIBLE TO	Senior Orthotist
ACCOUNTABLE TO	Operational Lead

BASE

ABOUT US

The Northern Lincolnshire and Goole NHS Foundation Trust is a dynamic and successful organisation with a strong focus on delivering quality care to our population of around 440,000 people. We provide a comprehensive range of secondary care services from 3 main centres, Grimsby, Goole and Scunthorpe as well as community services.

We pride ourselves on being a friendly and caring place to work where we aim to combine our patient first approach with innovative and creativity against a backdrop of holistic team working, as encapsulated in our vision and values – Together we care, we respect, we deliver.

ABOUT THE POST

This post centres on the intervention of orthotics but may include aspects of care relating to other therapy and nursing. The post may also include general administrative and housekeeping tasks. There will be frequent use of computers to place information and data into relevant systems, including patient records.

The post holder will independently treat allocated clients referred to the service when they have completed the relevant competencies to do so. The caseload of clients treated will have been triaged or assessed by registered practitioners prior to allocation. They will work jointly with the orthotist to provide interventions with clients who have more complex needs.

The postholder will undertake a holistic orthotic assessment with clients, including defining individual goals, assessing a variety of orthotic needs. They will plan, initiate, modify and complete a range of orthotic interventions, evaluating outcomes achieved and discharging clients when appropriate.

They will also complete specific allocated tasks such as the review of patients and fitting of orthoses.

Treatment will include providing a variety of orthotic devices such as protective helmets, back braces etc. and footwear. It will include providing advice, motivating, and training individuals, their carers and relatives. A holistic approach will include support to make lifestyle changes to reduce the risk of complications and ill-health. Client facing activity will be on an individual one to one basis or assisting the orthotist.

The post holder will have direct responsibility to develop, modify and evaluate resources and ways of working in line with outcome results, client satisfaction and current research.

MAIN TASKS REQUIRED OF THE POST HOLDER

Work within a competency based framework to manage an allocated caseload of clients. Gain baseline information from a variety of sources to enable comprehensive client assessment. Work independently or jointly with qualified orthotists (dependent on competencies gained and level of complexity), to fully assess client needs including physical, functional, social and cognitive aspects. Plan, review and modify treatment directly in line with client goals and outcomes achieved per intervention.

Take responsibility for managing own caseload within required timescales, proactively accessing regular supervision and support to do so. Ensure every contact counts and gain supervision for tasks which are beyond competencies completed. Monitor and progress treatment format in line with clinical needs and client goals, ensuring the use of validated outcome measures with each individual. Plan, facilitate and complete discharge including provision of information to relevant professionals.

Document interventions within Trust standards on System One. Work closely with other members of the MDT in order to provide holistic person centered care.

Audit response to treatment, develop and modify resources and ways of working in line with current research.

Actively engage in training, supervision, reflection and annual reviews. Be proactive in accessing support when needed, managing risks as they occur and being responsible for ensuring appropriate level of activity against individual Job Plan. Work flexibly as a team player, supporting the department with other tasks within own skills base as required including admin, data collection and housekeeping.

DUTIES AND RESPONSIBILITIES OF THE POST HOLDER

Clinical Duties

1. Follow a competency based framework to develop appropriate clinical skills supported by theoretical knowledge. Develop appropriate clinical reasoning skills to guide assessment, treatment and discharge of allocated clients.
2. Provide clinical interventions independently or jointly, dependant on the completion of own competencies, the level of complexity seen or the level of risk involved. Joint working will include working with a registered clinician for all tasks where competencies are not in place.
3. Gain valid informed consent and work within a legal framework with clients who lack capacity to consent to assessment and treatment.
4. Gain relevant assessment detail for all clients from a variety of sources. Information may include the client's medical and social history, a physical assessment, functional and cognitive ability, the initiation of a validated outcome measures and their goals for treatment.
5. Ensure individual short term and long term goals for intervention are clearly negotiated, realistic and achievable. Actively engage clients in the planning of their individual treatment programme to meet their personal goals.
6. Organise and plan orthotic treatment and support for allocated clients within appropriate settings; in outpatient, schools or acute settings. Provide continuity of care- working in liaison with other healthcare professionals, developing care around the client, ensuring convenience and efficiency and effectiveness of service. Monitor and modify treatment within own competency in response to their progress.
7. Provide timely discharge. Ensure relevant discharge information is shared using departmental standards and timescales, with both the client and appropriate professionals.
8. Provide competency based treatment which could or may include:
 - 8.1 Assessment and provision of Fabric Abdominal Supports
 - 8.2 Assessment and provision of Fabric Spinal Supports
 - 8.3 Assessment and provision of Elastic Band Trusses'

- 8.4 Assessment and provision of Elastic Hosiery
 - 8.5 Assessment and provision of Firm & Soft Stock Collars
 - 8.6 Assessment and provision of Paediatric Footwear
 - 8.7 Assessment and provision of Basic Paediatric Insoles
 - 8.8 Assessment and provision of Protective Helmets
 - 8.9 Assessment and provision of Footwear Adaptions and LLD Assessment
 - 8.10 Assessment and provision of AFO Reviews
 - 8.11 Assessment and provision of Basic Serial Casting
 - 8.12 Telephone and face to face review of patients following the Orthotists intervention
 - 8.13 Providing information and advice to individuals, their relatives or carers and other healthcare professionals.
9. Communicate complex information and ensure patients are engaged and fully involved in their care. Involve carers and relatives dependant on client consent and relevancy. Use a range of verbal and non-verbal communication tools, including where there may be barriers to communication. Gain support and advice from the MDT to aid communication where there are complex needs and where joint working is required. Provide and develop relevant written resources to enhance client understanding.
 10. Actively use validated outcome measures to evaluate and monitor progress of individual treatments and the service. Use feedback from outcomes, current evidence and levels of client satisfaction to continually improve the care given, ensuring a high standard of clinical outcomes.
 11. Provide prompt, accurate and factual client records, using standardised format such as SOAP and ensuring Trust and professional standards are maintained.
 12. Use clinical reasoning and current evidence to guide interventions. Form a professional judgement of individual needs, acting within protocols and competency to manage or escalate conditions or problems assessed. Gain the assistance of a registered clinician to deal with complexity.
 13. Ensure every contact counts, considering relevant preventative or supportive information to meet longer term concerns.
 14. Prioritise and manage allocated caseload effectively and efficiently, with the indirect supervision of registered practitioner. Appoint and organise interventions in a timely manner, each contact being relevant to patient goals.
 15. As an integrated member of the MDT, communicate effectively and appropriately including within MDT meetings. Support relevant interventions of others, maximising outcomes and ensuring a smooth patient journey.
 16. Develop innovative approaches to service provision, reviewing current evidence to guide practice. Follow and contribute to the pathways and protocols for the service.
 17. Gain the support and advice of senior staff for all situations which you do not have the skills to address
 18. Provide or participate in the training of other staff, relatives or carers. Delegate and supervise others dependant on service needs, competency and role.
 19. Work flexible hours, which could include evenings and weekends, to ensure client and carer participation. Contribute to the wider team, supporting others –especially during periods of staff pressures.
 20. Manage clients within expected number of contacts, communicating anomalies with senior staff. Ensure minimum contacts detailed in job plan are managed.
 21. To undertake any other duties that may be required in negotiation with as specified by the service management to support service delivery/ development and which are applicable to the grade of the post

Administrative Duties

1. Perform general admin tasks such as answering the telephone, taking messages, photocopying, ordering of supplies and accessing medical records.

2. Use computer programmes as required. This includes the use of System One for clinical records, the use of Word and Excel for projects or tasks including the collection of data and collation of quality information.
3. Manage and maintain own resources dependant on role.

Training and Education

1. Work within defined competencies and protocols as established including the Calderdale Framework.
2. Proactively engage in competency based learning, developing and maintaining own competency to provide interventions relevant to client and service needs.
3. Maintain Best Practice; adhere to NICE Guidelines, Trust standards and current legislation.
4. Actively participate in Continuous Professional Development (CPD), including in-service training programmes by attending, delivering and assisting in the delivery of presentations and courses. Use other relevant forms of CPD including integration of evidence based trends and developments within team practice.
5. Evaluate own work and current practices through analysis of current evidence, supervision, reflection, appraisal, audit and active use and evaluation of outcome measures.
6. Participate in teaching students to graduate level on clinical skills and knowledge within core clinical areas, including gaining APPLE accreditation or equivalent.
7. Participate in the development of joint competences across professions in order to minimise transfers of care and promote cross professional working

Governance

1. Actively engage in the clinical governance of services providing; including the quality, safety and effectiveness of the service delivered, managing risk within the work situation on a daily basis in all settings.
2. Accept clinical responsibility for an allocated caseload, working independently without direct supervision to manage those clients, within own competency.
3. Be aware of own ability, knowledge base and limitations, ensuring advice is gained from a relevant registered clinician to manage issues outside of own ability.
4. When working as a lone practitioner ensure clinical supervision is maintained and Trust Lone Worker Policy is followed.
5. Meet regularly with supervising clinicians to gain clinical supervision, including support to problem solve
6. Manage and monitor the work environment and resources prior, during and after clinical activity including the preparation and cleaning of resources,
7. Maintain client confidentiality at all times.
8. Plan and take responsibility for own mandatory training, supervision and annual review (PADR). Ensure all are completed within required timescales. Be proactive in researching and requesting training required, acknowledging own training needs.
9. Ensure personal fitness for work, presenting a positive image of self and Trust. Exercise good personal time management and reliable attendance. Always ensure professional conduct and appearance.
10. Have an awareness of and adhere to all Trust and departmental policies and other statutory requirements such as Infection Control, Health and Safety, Equal Opportunities, COSHH, Fire Safety, Complaints and Accident Reporting.

11. Take appropriate action, including reporting via Datix, in the event of incidents and near misses to staff, patients or any other person. Actively request and engage in incident investigation, driving forwards service improvements to reduce risks in the future.
12. Be responsible for maintaining accurate, comprehensive client treatment records in line with Trust and Professional Standards of Practice
13. The staff member will ensure that (s)he follows the Trust's infection prevention and control policies and procedures to protect clients, staff and visitors from healthcare-associated infections. He or she will ensure that (s)he performs the correct hand hygiene procedures, when carrying out clinical duties. He or she will use aseptic technique and personal protective equipment in accordance with Trust policies as required.

This job description is not a definitive list of all responsibilities but identifies key tasks and duties of the post holder. It gives a general outline of the post and is not intended to be inflexible or a final list of duties. It will be subject to periodic review in the light of the development of the Division and the Trust as a whole. Any changes will be made in discussion with the post holder.

VISION AND VALUES

Together we care, we respect, we deliver is our vision.

Created with the input of staff from all occupations our vision and its values set out a clear statement regarding why we are all here. Central to our vision is the sense of team, inclusivity and that everything we do contributes to the delivery of exemplary, safe patient care. We recognise that without every person in our team we could not provide the excellent services that we do. Crucially we recognise that looking towards the future we want to harness uniqueness through enhanced quality and innovation whilst making sure what we do is the right thing, each time and every time.

The Trust Board and each member of staff unanimously endorse our vision and values and pledge to deliver our hospital and community services through our values. In accepting employment with the Trust you enter an express commitment to abide by the Trust vision and values, the NHS values and constitution. You are required to familiarise yourself with the Trusts vision and values behavioural standards observing and placing our patients at the very forefront of everything you do. You should also be mindful that employment with the NHS also requires you to behave in manner that does not bring the Trust or your profession into disrepute whilst outside of work.

Complementing the vision and values is the Trust's zero tolerance framework relating to behaviours and non-compliance with your clinical and non-clinical responsibilities. Failure to observe the vision and values behavioural statements, or the zero tolerance framework, may result in disciplinary action, including gross misconduct and termination of employment action being taken against you.

ADDITIONAL INFORMATION PERTINENT TO ALL STAFF

Health and safety - Healthcare associated infection

Healthcare workers have an overriding duty of care to patients and are expected to comply fully with best practice standards. You have a responsibility to comply with Trust policies for personal and patient safety and for prevention of healthcare-associated infection (HCAI); this includes a requirement for rigorous and consistent compliance with Trust policies for hand hygiene including the 'bare below the elbows' approach, use of personal protective equipment and safe disposal of sharps. Knowledge, skills and behaviour in the workplace should reflect this; at annual appraisal you will be asked about the application of practical measures known to be effective in reducing HCAI. The Trust has the responsibility of ensuring that adequate resources are available for you to discharge your responsibilities.

Safeguarding

The Trust has in place both a Safeguarding Children Policy and a Safeguarding Adults Policy in line with national legislation.

The Safeguarding Policies place a duty upon every employee who has contact with children, families and adults in their everyday work to safeguard and promote their welfare. In the event that you have concerns about possible harm to any child or adult you should seek advice and support from the Trust Safeguarding team or in their absence contact your line manager or your Assistant Divisional Director. Out of hours contact should be made with the on-call manager through switchboard.

The Trust has nominated Safeguarding Leads who act as contact points for support and advice if concerns are raised about a child or adults welfare. These individuals can be reached through switchboard during office hours by asking for the Named Professionals for Safeguarding Children or Adults respectively.

The policies and procedures described below are located on the intranet and internet site and you should ensure you are aware of, understand and comply with these. In addition, the Trust will publicise and raise awareness of its arrangements and provide appropriate resources and training.

Confidentiality

All information, both written and computer based, relating to patients' diagnosis and treatment, and the personal details of staff and patients, is strictly confidential. The Northern Lincolnshire and Goole NHS Foundation Trust and its employees have a binding legal obligation not to disclose such information to any unauthorised person(s). This duty of confidence is given legal effect by reference to the Data Protection Act 1998 and the 'right to privacy' under the Human Rights Act 1998. It applies to any information which is processed by the Trust (i.e. stored, retained, maintained as a record, amended or utilised for the Trust's purposes as an NHS Hospital), from which a living person is capable of being identified. Individuals must observe a 'need to know' principle. No member of staff may seek out any information that they do not need to undertake their duties. This applies to clinical or other personal information of any third party.

Equality impact assessment

The Foundation Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. We therefore aim to ensure that in both employment and the delivery of services no individual is discriminated against by reason of their gender, gender reassignment, race, disability, age, sexual orientation, religion or religious/philosophical belief, marital status or civil partnership.