



The Association
of UK Dietitians

Dietetic Support Worker and Assistant Practitioner Competency Framework

**Mapped to Skills for Health National
Occupational Standards and NHS Simplified
Knowledge and Skills Framework Core and
Specific Dimensions**



Contents

1.0	Introduction	3
2.0	Template Example of the Competency Framework	4
2.1	Agenda for Change: The NHS Knowledge and Skills Framework (Core Dimensions)	4
2.2	Agenda for Change: The NHS Knowledge and Skills Framework (Specific dimensions)	16
3.0	Mapping Exercise.....	21
3.1	Introduction	21
3.2	Simplified KSF Core Dimensions / Skills for Health NOS	21
3.2.1	KSF Core Dimension 1: Communication.....	21
3.2.2	KSF Core Dimension 2: Personal And People Development	23
3.2.3	KSF Core Dimension 3: Health, Safety And Security	23
3.2.4	KSF Core Dimension 4: Service Development.....	24
3.2.5	KSF Core Dimension 5: Quality.....	24
3.2.6	KSF Core Dimension 6: Equality, Diversity And Rights	24
3.3	KSF Specific Dimensions / Skills for Health NOS	25
3.3.1	Hwb1 Promotion Of Health & Prevention Of Adverse Effects.....	25
3.3.2	Hwb6 Assessment And Treatment Planning.....	25
3.3.3	Hwb7 Interventions And Treatment	26
3.3.4	Ik2 Information Collection & Analysis.....	29

1.0 Introduction

1.1 Competency Framework

A competency framework can be used as a working tool to demonstrate the competence of an individual to carry out particular duties through a variety of assessment methods, including for example, production of work products and direct observation by a qualified member of staff.

This resource has been developed to draw together a suite of BDA toolkits and guidance documents which together provide a framework of support for those working as NHS Level 3 or 4 dietetic support workers and those who have responsibility for recruiting / managing this section of the dietetic workforce. Other documents within the toolkit are:

- BDA Assistant Practitioner Curriculum and Capability Framework 2014
- BDA Dietetic Support Worker and Assistant Practitioner Roles, updated 2014
- Dietetic Career Framework, updated 2014

Together the suite of documents can be used to assist in the mapping of job descriptions to knowledge and skills requirements, helping to promote a standardised approach across the NHS. In addition, it can be used by both the support worker and the dietetic manager to support the development of a business case to revise job grading.

This document has been structured to link to both the NHS Simplified Knowledge and Skills Framework, 2010¹ (KSF), alongside the relevant Skills for Health National Occupational Standards, as well as the other documents that make up the BDA's support worker toolkit (as outlined above). Together, these resources provide a route through continuing professional development of the dietetic support workforce, whilst strengthening governance standards, including safe practice.

The BDA wishes to extend its thanks to all those who contributed to this document. In particular our thanks go to Medway Community Healthcare (CIC) who supported the BDA in the development of the Template Capability Framework (Section 2).

A capability framework, mapping skills indicators with practical job based examples in practice has been included within this overarching resource. It is expected that additional indicators and examples may be developed locally using the same principles.

¹ 2010, NHS Employers, Simplified Knowledge and Skills Framework;

2.0 Template Example of the Competency Framework^{2 3}

2.1 Agenda for Change: The NHS Knowledge and Skills Framework (Core Dimensions)

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
AGENDA FOR CHANGE: THE NHS KNOWLEDGE AND SKILLS FRAMEWORK , simplified version 2012 Core Dimension 1: Communication Staff Levels 3 and 4: KSF L2 Communication with a range of people on a range of matters			
Uses a range of communication channels to build relationships	a) Establishing and maintaining contact with different people e.g. Relatives, patients and colleagues. Communicating information, only as instructed. b) Arranging appointments	Use a range of different communication styles and methods when interacting with various individuals and groups including facilitation, establishing a rapport and interpreting non-verbal cues;	a. Establish and maintain relationships with other professionals and patients taking into consideration culture, rights and specific needs. b. Tailor advice for differing cultures and backgrounds as per established protocols.

² Originally developed in partnership with Southampton University Hospitals Organisation

³ Appraisal and KSF made simple, a practical guide: NHS Staff Council, 2010

⁴ Assistant Practitioner Curriculum and Capability Framework, BDA 2014

⁵ Assistant Dietetic Practitioner Post Outline: Medway Community Healthcare (CIC) 2012

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
	<ul style="list-style-type: none"> c) Sharing information and opinions d) Reporting any changes required 	<p>Contribute to activities that enable individuals to make appropriate and safe food choices.</p> <p>Use communication approaches to influence behavior change. Identify and manage barriers to communication in practice.</p> <p>Uses appropriate Information Communication Technology (ICT) to communicate with colleagues and patients</p>	<ul style="list-style-type: none"> c. Liaise with Line Manager, peers and other health care professionals on all appropriate aspects of patient care
Manages people's expectations	<ul style="list-style-type: none"> a) Understands own scope of practice b) Refer within dietetic team as necessary. c) 		<ul style="list-style-type: none"> d. Participate in the delivery of one to one consultations or group sessions as directed by supervisor e. Negotiate dietetic interventions in specified situations as per established protocols
Manages barriers to effective communication	<ul style="list-style-type: none"> a) Modifying the style/form of communication to suit the individual or situation b) Present a positive image of her/himself and the service c) Simplifying the content d) Using communication aids 		<ul style="list-style-type: none"> f. Anticipates barriers to communication g. Uses basic motivational interviewing techniques to facilitate patients to overcome their barriers to change h. Uses appropriate communication aids
Improves communication through communication skills	<ul style="list-style-type: none"> a) Demonstrate listening skills b) Asking and answering questions and giving explanations c) Demonstrate non-verbal skills and body language. 		<ul style="list-style-type: none"> i. Uses different methods of communication e.g text, email, telehealth, telecare and assistive technologies. j. Uses organizational IT systems to access relevant data.

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
	d) Uses different methods to communicate eg texts, telephone, note writing		k. Use recognized nutritional analysis programmes.
Keeps accurate and complete records consistent with legislation, policies and procedures	a) Maintain accurate up to date documentation in all records, electronic and paper. b) Demonstrate a complete awareness of confidentiality.	Use written forms of communication with patients, healthcare professionals and other stakeholders as appropriate ensuring compliance to legislation, policies and procedures.	l. Keep accurate records of all outpatient/inpatient consultations in line with organization and departmental standards of record keeping
Communicates in a manner that is consistent with relevant legislation, policies and procedures	a) Would obtain authorisation from caseload holder or line manager prior to disclosing any information. b) Communicate/feedback client needs to the Dietitian and carry out any action required. c) Be aware of the Data Protection Act and follow local codes of practice to ensure appropriate action is taken to safeguard confidential information.	Communicate in a manner that is consistent with relevant legislation, policies and procedures	m. Demonstrate a complete awareness of confidentiality n. Accurately record audit data o. Aware of the Data Protection Act and follow local codes of practice to ensure appropriate action is taken to safeguard confidential information p. Consult with supervisor on patient needs and implement ant action required.
AGENDA FOR CHANGE: THE NHS KNOWLEDGE AND SKILLS FRAMEWORK , simplified version 2012			

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
Core Dimension 2: Personal and People Development Staff Level 3 and 4: KSF L2: Develop own skills and knowledge and provide information to others to help their development			
Seeks feedback from others about work to help identify own development needs	a) Recognise limitations of knowledge/skills and seek help/advice appropriately b) Able to self assess what he/she needs for the role	Seeks and responds to feedback, changing behaviour in light of feedback and reflection, as appropriate	a. Recognises limitations of knowledge/skills and seeks advice as appropriate b. Acknowledges mistakes and treat them as learning opportunities c. Reflect on practice and learning from clinical incidents. Modify behavior where necessary. d. Participates fully in the appraisal process and develops own strategy for undertaking continuing personal development, with help of supervisor. e. Keep accurate and up to date records of CPD within personal development portfolio.
Identifies development needs for own emerging work demands and future career aspiration	a) Plan and contributes fully to the PM&DR process b) Demonstrate an awareness of own performance through reflection and evidence within personal development portfolio. c) Develops and maintains their own Portfolio, Performance Development d) Knowledge of KSF e) Takes part in clinical supervision f) To aim to balance work life and personal well being g) Reflects on learning which has taken place and how practice may be changed accordingly	With direction from supervisor, takes responsibility for own continuing professional development, seeking to develop own practice. Keep skills and knowledge up to date.	

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
	h) Maintains own portfolio of learning	Demonstrates evaluation of his/her performance as an individual and as part of a team Support the development of others	f. Reflect on practice. g. Use documentation held within professional portfolio h. Participates in clinical supervision
Evaluates effectiveness of own learning/development opportunities and relates this to others	a) Identifies and attends at relevant training events to maintain clinical competence as identified at PM & DR b) Maintains own portfolio of learning		
Offers help and guidance to others to support their development or to help them complete their work requirements effectively	a) Participate in taking work experience students. b) Provide ad hoc advice and support to other health care professionals.	Demonstrate a willingness to contribute to teaching and providing feedback to students from all health and social care professions as appropriate.	i. Participate in the induction of new staff j. Under supervision provide ad hoc advice and support to other health care professionals.
Offers feedback promptly	c) Actively contribute to the induction of new staff. d) Actively contribute to student training programme and act as student buddy.		

AGENDA FOR CHANGE: THE NHS KNOWLEDGE AND SKILLS FRAMEWORK , simplified version 2012

Core Dimension 3: Health Safety and Security

Staff Levels 3 and 4: KSF Level 2 Monitor and maintain health, safety and security of self and others

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
Looks for potential risks to self and others in work activities and processes	<ul style="list-style-type: none"> a) Demonstrate an understanding of the following policies/Guidance and acts accordingly b) Infection control. c) Risk management/Incident reporting d) Moving and Handling e) Personal Safety/Lone worker. 	Exercise a professional duty of care to service users;	<ul style="list-style-type: none"> a. Work within Organisation and departmental health, safety and security policies. b. Undertake all mandatory training relating to health and safety as required by the Organisation e.g infection control, moving and handling, personal safety, risk management, basic life support c. Recognise and identify situations where there is risk to self or others and seek advice from line manager before taking appropriate action. d. With support, complete appropriate documentation of critical incidents as required by Organisation policy. e. Take part in risk assessments f. Effective hand hygiene g. Appropriate and secure use of IT
Manages identified risk in the best way possible	<ul style="list-style-type: none"> a) Educate patients, carers and other staff in managing risks and ensure the following: b) Checking the safety of fittings and fixtures and reporting any defects c) Care of equipment and environment. Correct disposal of waste d) Appropriate and secure use of IT e) Security systems and alarms f) Being immunised to protect self and others from specific health risks g) Taking part in risk assessments 	Make necessary risk assessments and take appropriate action in order to protect self, clients, colleagues and the public; seek support as required;	

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
Works in a way that complies with legislation and organisation policies and procedures on health, safety and risk management	<ul style="list-style-type: none"> a) Driving safely if appropriate b) Effective hand hygiene c) Adheres to all policies and procedure relating to health and safety d) Using organisational security measures e) Taking responsibility for health and safety of self, staff, patients and carers and ensure adherence to relevant policies 	Continually identify and mitigate against potential risks to self, clients, colleagues and the public.	<ul style="list-style-type: none"> h. Aware of and complies with policies and procedures relating to health and safety i. Understands how to use Organisations security measures j. Is aware of own limitations in knowledge and skills. k. In an emergency reports situation promptly and efficiently to supervisor/line manager and follows any given instructions.
Takes action to manage an emergency, calling for help immediately when appropriate	<ul style="list-style-type: none"> a) Reporting situations promptly and efficiently and supporting other members of staff in a emergency b) Reporting of significant events to Senior c) Awareness of how and who to summon in an emergency 	Be aware of and take into account the clinical risk associated with any dietetic intervention;	<ul style="list-style-type: none"> l. Complete Information Governance mandatory training.
Reports actual or potential problems that may put health, safety or security at risk and suggests solutions	<ul style="list-style-type: none"> a) Reports to Senior necessary 	Apply the principles of information governance and maintain safe and effective use of health and social care information;	<ul style="list-style-type: none"> m. Comply with IG principles. n. Demonstrates confidentiality
Supports and challenges others in maintaining		Recognise and respond appropriately to situations where it is necessary to share	<ul style="list-style-type: none"> o. Complete Safeguarding mandatory training

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
health, safety and security at work		information to safeguard service users or the wider public;	p. With direction and support from supervisor/line manager discuss safeguarding issues with appropriate members of staff.
AGENDA FOR CHANGE: THE NHS KNOWLEDGE AND SKILLS FRAMEWORK , simplified version 2012 Core Dimension 4: Service Improvement Staff Level 1 , KSF Level 3: Make changes in own practice and offer suggestions for improving services. Staff Level 2 , KSF Level 4: Contribute to the improvement of services			
Discusses with line manager changes that might need making to own work practice and why	a) Inform Senior of progress or adverse effects from local policies or strategies	Discusses with team the likely impact of changing policies, strategies and procedures on practice	a. Discuss new policies and procedures that impact on own and teams clinical areas. b. Participate in the assessing the impact of these policies on clinical practice
Adapts own work and takes on new tasks as agreed and asks for help if needed	a) Changes practice according to updated policies and strategies as necessary and as instructed by manager	Takes on new work and make changes to own work when agreed, requesting relevant help if needed	c. As directed by supervisor, take on new tasks within specified clinical area. d. Continue to ask for guidance as appropriate. e. Under supervision, carry out audits and patient satisfaction surveys to evaluate the care provided to patients.
Helps evaluate the service when asked to do so	a) Participates with audit. b) Participates with developing services for clients. c) Works closely with public and users of services	Engage in evidence-based practice, review practice systematically, and participates in audit procedures	f. Through reflection and clinical supervision regularly review own practice

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
Passes on any good ideas to improve services to line manager or appropriate person	a) Shares experience and knowledge with others. b) Feedback patient information and own c) Contributes in team meetings/briefings.	Supports colleagues in making suggestions to improve the service	g. Using results of audits and patient satisfaction surveys discuss with line manager/supervisor ways in which the clinical service might be improved h. Identify methods of evaluating changes that have been made. i. Participate in evaluation process. j. Contributes to team meetings/briefings and discuss treatment plans which are felt not to be effective.
Alerts manager if new ways of working, policies or strategies are having a negative impact on the service given to users or the public.	a) Communicates effectively with Senior re treatment plans which are not effective	Constructively identifies where new ways of working, policies or strategies are having a negative impact on the service given to users or the public.	
AGENDA FOR CHANGE: THE NHS KNOWLEDGE AND SKILLS FRAMEWORK , simplified version 2012 Core Dimension 5: Quality Staff Levels 3 and 4: KSF Level 2 Maintain quality in own work and encourage others to do so			
Follows organisation and professional policies and procedures and other quality approaches as required. Encourages others to do the same. Maintains professional registration if has one	a) Follows clinical policies and procedures. b) Assists with regular clinical/documentation audit as required. c) Recognises the meaning of quality procedures on how work is carried out and acts consistently with them d) Support others to do the above	Practice in accordance with current legislation and advise others of this;	a. Comply with Organisation and departmental policies. b. Maintain strict confidentiality in accordance with departmental and Organisation policy . c. Keep accurate written records of all outpatients/ inpatient consultations in accordance with Organisation and departmental standards for record keeping. d. Undertake mandatory training as identified by Organisation.

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
Works within the limits of own competence and area of responsibility and accountability. Gets help and advice where needed	<ul style="list-style-type: none"> a) Identifies issues in own work area or whilst supervising others and takes action to remedy them. b) Recognise own limitations and be aware of when there is a need to refer to a Senior 	Work within the limits of own practice and recognize when to seek advice or refer to another professional;	<ul style="list-style-type: none"> e. Adhere to protocols identified for role f. Work within own scope of practice, seeking advice where necessary. g. Recognise own limitations and refer on as necessary. h. Carries out own duties to a high standard
Works to support the team. Can be counted on when people ask for help or support	<ul style="list-style-type: none"> e) Arrives promptly and alerts others if late f) Liases with Senior Colleagues g) Carries out own duties to a high standard h) Makes suggestions on how quality in own work area can be improved 	Actively contributes to department and multidisciplinary team plans to achieve service goals	<ul style="list-style-type: none"> i. Identifies how quality in own work area can be improved j. Contribute effectively to multidisciplinary team activities e.g. meetings, projects k. Contribute to multi-disciplinary care plan / initiatives l. Under supervision contribute dietetic advice to a multi-disciplinary team to enhance its effectiveness; m. review the on-going effectiveness of the intervention and re-assess priorities as a result of the review
Prioritises own workload and manages own time to ensure priorities are met and quality is not compromised	<ul style="list-style-type: none"> a) Organises workload logically and efficiently according to need and urgency for each day. 	Effectively manages own time prioritizing as required	<ul style="list-style-type: none"> n. Prioritises own caseload on a day to day basis according to need and urgency. o. Able to adapt daily plans when requested by supervisor

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
Uses organisation resources effectively and encourages others to do the same	a) Prepare equipment, materials and self appropriately for the work being carried out. b) Uses, maintains, handles and stores equipment and materials efficiently, effectively and safely. c) Alerts relevant person if problems arise regarding faulty equipment etc d) Encourages others to do above	Effectively and safely use resources	p. Undertake safe caseload management of own patients q. Uses, maintains, handles and stores equipment and materials efficiently, effectively and safely r. Understands how to use specific resources within specified role
Monitors the quality of work in own area and alerts others to quality issues, reporting any errors or issues to the appropriate person.		Follow appropriate policy and process to raise concerns about the quality of practice and poor practice/unprofessional behaviour in others;	s. Act in a manner consistent with the values and priorities of the organisation. t. Raise concerns with line manager/supervisor if poor practice is observed. u. Recognise unprofessional behavior in others.
AGENDA FOR CHANGE: THE NHS KNOWLEDGE AND SKILLS FRAMEWORK , simplified version 2012 Core Dimension 6: Equality and diversity Staff Levels 3 & 4: KSF Level 2 Support equality and value diversity			

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
Challenges bias, prejudice and intolerance if appropriate or brings it to the attention of a manager	a) Has an awareness of relevant Policies and procedures i.e. Equal opportunities, harassment and Bullying, Racial Discrimination. b) Reports any concerns to manager	Exercise a professional duty of care to service users;	a. Understand the Organisation's Equal Opportunities and Equality and Diversity Policies b. Attend mandatory training e.g. harassment & bullying, c. Act as a patient advocate and raise concerns with line manager where it is felt that a patient's rights or beliefs are being ignored. d. Aware of the potential for discrimination in the work place and raise any concerns with line manager e. Demonstrate compassion, empathy and understanding, respecting the dignity of service users; f. Use interpreters or dietary resources in other languages as appropriate.
Uses plain language when carrying out duties	a) Explaining to others why their behaviour is discriminatory. b) Evaluates behaviour and interaction with individuals	Practice in a non-discriminatory, non-oppressive manner;	g. Ensure own actions and behaviour does not cause offence to others h. Liaise with catering (if appropriate) to ensure that ethnic population is catered for. i. Provided dietetic advice which incorporates people's beliefs , preferences and choices e.g. Kosher / Jewish
Aware of the impact of own behaviour on others.	a) Beliefs and preferences might include: b) How individuals like to be addressed c) Adheres to legislation, policies and procedures d) Maintains privacy e) Applies changes in treatments according to	Demonstrate sensitivity to social, economic and cultural factors that may affect the interaction with service user	

KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level) ⁴	Working example of application (DAP) ⁵
	individuals needs and cultural preferences etc	Engage service users and carers in planning and reviewing interventions to meet their needs and goals;	j. With support, plan, devise and review nutritional programmes, to achieve agreed goals, taking into consideration the contribution of the family, other health professionals and other agencies;

2.2 Agenda for Change: The NHS Knowledge and Skills Framework (Specific dimensions)

<u>KSF Competency (DSW and DAP appropriate)</u>	<u>Example of Application (DSW and DAP)⁶</u>
HWB1 Promotion of Health and Wellbeing and Prevention of Adverse Effects on Health and Wellbeing Staff Levels 3 & 4: KSF Level 1	
1) Identifies factors which have a positive and negative effect on health and wellbeing and how it can be promoted and adverse effects prevented 2) Enables people to view health and wellbeing as a positive aspect of their lives 3) Enables people to be involved in activities and make their own decisions about them consistent with people's views and beliefs 4) Undertakes planned activities with people with their agreement consistent with legislation, policies and procedures	a) Contribute to health promotion projects e.g. healthy eating stand in staff canteen, BDA awareness campaigns, cardiac rehab type talks b) Liaise with organizers as to how to take the training / awareness session forward and develop a plan. c) Ensure that the content of the health promotion session meets with government targets / guidelines e.g. alcohol consumption, salt intake. d) Design and develop health promotion sessions. e) Use evaluation of previous talks to make changes f) Involve users in feedback.

⁶ Assistant Dietetic Practitioner Post Outline: Medway Community Healthcare (CIC) 2012

KSF Competency (DSW and DAP appropriate)		Example of Application (DSW and DAP)⁶	
5) Records and reports back fully on the activities undertaken and alerts		g) Identify key resources for use in a health promotion exercise.	
HWB7 Interventions and Treatments Staff Level 3 – KSF Level 1 Staff Level 4 – KSF Level 2			
KSF Competency (DSW appropriate)	Working examples of application (DSW Level)	KSF Competency (AP level)⁷	Working example of application (DAP)⁸
1) Checks with relevant sources of information to confirm the tasks to be undertaken in relation to interventions and/or treatments 2) Respects individuals' dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent for the activities to be undertaken 3) Undertakes specified tasks correctly, and in line with legislation, policies and procedures and/or established protocols	a) With supervision translate nutritional information into simple and easily understood practical advice for individuals and carers, on a one to one basis and in groups. b) Negotiate dietetic interventions in specified situations as per established protocols. c) With support make clinical decisions on the nutritional aspects of a patient's care and advise the multidisciplinary team accordingly. d) As recommended by line manager / supervisor make recommendations regarding nutritional support for the nutritional management of	1) Discusses the individual's treatment plan and their related condition/illness with the care team and understands his/her own role in delivering interventions and/or treatments within the plan 2) Respects individuals' dignity, wishes and beliefs; involves them in shared decision making; and obtains their consent for the interventions and/or treatments to be undertaken 3) Identifies any specific precautions or contraindications to the proposed interventions / treatments and takes the appropriate action 4) Prepares for, undertakes and records interventions/treatments correctly, and in line with legislation, policies and procedures and/or established	a) Use basic nutritional counselling skills and motivational interviewing techniques to facilitate patients to overcome their barriers to change. b) With supervision translate nutritional information into simple and easily understood practical advice for individuals and carers, on a one to one basis and in groups. c) Negotiate dietetic interventions in specified situations as per established protocols. d) With support make clinical decisions on the nutritional aspects of a patient's care and advise the multidisciplinary team accordingly. e) As per established protocols make recommendations regarding changes

⁷ Assistant Practitioner Curriculum and Capability Framework, BDA 2014

⁸ Assistant Dietetic Practitioner Post Outline: Medway Community Healthcare (CIC) 2012

KSF Competency (DSW and DAP appropriate)		Example of Application (DSW and DAP)⁶	
4) Monitors individuals whilst carrying out the tasks and identifies and reports any changes in the individual's health and wellbeing	patients.	protocols	to nutritional support for the nutritional management of patients.
5) Records activities and outcomes consistent with legislation, policies and procedures.	e) Ensure safe practice by documenting and reporting clinical incidents as outlined in Organisation Policy..	5) Supports and monitors people throughout promptly alerting the relevant person when there are unexpected changes in individuals' health and wellbeing or risks 6) Provides information to the team on how individuals' needs are changing and feedback on the appropriateness of the individual's treatment plan when there are issues 7) Responds to, records and reports any adverse events or incidents	f) Ensure safe practice by documenting and reporting clinical incidents as outlined in Organisation Policy.
IK2 Information Collection and Analysis Staff Level 3 and 4: KSF Level 2			
Indicator (DSW and DAP appropriate)		Example of Application (DSW and DAP)⁹	
1) Identifies and agrees: <ul style="list-style-type: none"> the question/issue to be addressed by the data/information the nature and quantity of data/information to be collected the quality criteria which the data/information should meet 		a) Collect appropriate data for study / audit question. b) Undertake analysis of data through appropriate statistical package c) Identify limitations of data collection and confounding variables d) Evaluate validity of findings	
2) Effectively uses appropriate methods and sources for obtaining and recording the data/information		e) Draw conclusions and based on these suggest improvements to patient care. f) Present findings to an appropriate audience.	

⁹ Assistant Dietetic Practitioner Post Outline: Medway Community Healthcare (CIC) 2012

<u>KSF Competency (DSW and DAP appropriate)</u>		<u>Example of Application (DSW and DAP)⁶</u>	
3) Confirms that the data/information meets the agreed quality criteria and takes appropriate action if it does not 4) Collates and analyses the data/information using methods appropriate to: <ul style="list-style-type: none">the initial questions which the data/information is intended to answerthe nature of the data/information 5) Reports the data and information at the agreed time using presentation, layout, tone, language, content and images appropriate to: <ul style="list-style-type: none">its purposethe people for whom it is intendedagreed formats and protocols 6) Complies with relevant legislation, policies and procedures throughout			
G1 Learning and Development Staff Level 3: KSF Level 1 Staff Level 4: KSF Level 2			
<u>Competency (DSW appropriate)</u>	<u>Example of Application (DSW Level)</u>	<u>Additional Competency (AP level)¹⁰</u>	<u>Example of Application (DAP)¹¹</u>
1) Identifies with the relevant people the activities to be undertaken to support learning and	a) Agree with the relevant lead the aims and objectives of the education session e.g. patient group, health care professionals.	1) Agrees with the team the purpose, aims and content of the learning and development and own role in the process	a) Agree with the relevant lead the aims and objectives of the education session e.g. patient group,health care professionals.

¹⁰ Assistant Practitioner Curriculum and Capability Framework, BDA 2014

¹¹ Assistant Dietetic Practitioner Post Outline: Medway Community Healthcare (CIC) 2012

KSF Competency (DSW and DAP appropriate)		Example of Application (DSW and DAP)⁶	
<p>development</p> <p>2) Undertakes the task effectively and to time consistent with legislation, policies and procedures</p> <p>3) Reports any difficulties or problems at an appropriate time to a team member.</p>	<p>b) Formulate talk / tutorial (including researching the current evidence in subject area)</p> <p>c) Consider learning styles and different methods of education e .g. audience participation, workshops, focus groups</p> <p>d) Formulate and undertake formal evaluation of the session</p> <p>e) Reflect on delivery of presentation</p> <p>f) Collate evaluation and identify changes to future sessions.</p>	<p>2) Prepares thoroughly for own role addressing any issues in advance</p> <p>3) Supports learning recognising individuals' particular needs, interests and styles using the agreed methods and approaches in a manner that stimulates individuals' interest, promotes development and encourages their involvement by developing an environment that supports learning consistent with legislation, policies and procedures</p> <p>4) Gains feedback from learners and relevant others on the effectiveness of learning and development and their ideas for how it can be improved</p> <p>5) Reflects on and evaluates the effectiveness of learning and development using feedback from learners and others</p> <p>6) Discusses own evaluation with the team and agrees how learning and development might be improved in the future</p>	<p>b) Formulate talk / tutorial (including researching the current evidence in subject area)</p> <p>c) Consider learning styles and different methods of education e .g. audience participation, workshops, focus groups</p> <p>d) Formulate and undertake formal evaluation of the session</p> <p>e) Reflect on delivery of presentations</p> <p>f) Collate evaluation and identify changes to future sessions.</p>

3.0 Mapping Exercise

3.1 Introduction

Section 3 of this framework maps relevant standards taken Skills for Health library of National Occupational Standards (NOS) to the NHS Simplified KSF Core Dimensions, which are as follows:

The KSF Core dimensions:

- | | |
|-----------------------------------|----------------------------------|
| 1 Communication | 4 Service development |
| 2 Personal and people development | 5 Quality |
| 3 Health, safety and security | 6 Equality, diversity and rights |

In addition, Skills for Health NOS pertinent to those working in a clinical setting have also been referenced. The NOS selected may be used for a variety of Dietetic Support Worker and Dietetic Assistant Practitioner roles. These standards were developed through consultation, with the dietetic and broader AHP workforce, alongside other key stakeholders, a process driven by Skills for Health in 2009/10.

3.2 Simplified KSF Core Dimensions / Skills for Health NOS

3.2.1 KSF Core Dimension 1: Communication

Ref:	NOS
HSC233:	Relate to and interact with individuals <i>This workforce competence covers relating to and interacting with individuals. This involves identifying the relationship needs of individuals, developing effective relationships with them and monitoring and altering the relationships to meet changing needs.</i>
CfA203:	Maintain customer relations
CfA206:	Deal with visitors
GEN21:	Interact with individuals using telecommunications
HSC369:	Support individuals with specific communication needs
HSC31:	Promote effective communication for and about individuals <i>This workforce competence covers promoting effective communication with, for and about individuals. This involves identifying ways of communicating effectively on difficult, complex and sensitive issues, supporting others to communicate and updating and maintaining records and reports.</i>
CHS174:	Advise and inform others on services
CHS100:	Develop relationships with individuals with long term conditions
HSC3100:	Participate in inter-disciplinary team working to support individuals

GEN18:	<p>Give presentations to groups</p> <p><i>This workforce competence is about giving presentations to groups. The groups could be colleagues or support groups or others in the community requiring information about a topic that is within your area of work.</i></p> <p><i>The activities that might be relevant to this workforce competence include: identifying individual needs and learning styles; choosing appropriate presentation techniques; structuring presentations; and adapting presentations to take account of technology-based learning.</i></p>
GEN22:	<p>Communicate effectively with individuals.</p> <p><i>This competence replaced HI36, LTCN2 and EUSC_15 during rationalisation of the database.</i></p> <p><i>This workforce competence is about communicating effectively with individuals. People completing this workforce competence will be working directly with individuals and will be expected to communicate effectively with key people and others who are important to the tasks being undertaken.</i></p> <p><i>Those taking this workforce competence will also be expected to use their initiative and follow organisational procedures in times of crisis.</i></p>
HSC21:	<p>Communicate with, and complete records for individuals</p> <p><i>This workforce competence covers communicating with individuals in all types of health and social care settings. This involves working with individuals and others to identify the best forms of communication, listening and responding to individuals' questions and concerns, communicating with individuals using their preferred method of communication, and accessing and updating records and reports, for and about individuals.</i></p>
GEN17:	<p>Contribute to the discharge of an individual into the care of another service</p> <p><i>This workforce competence is about supporting the discharge of individuals from a health care service once the decision to discharge has been taken by an appropriate practitioner.</i></p> <p><i>This workforce competence is suitable for anyone who is expected to assist in the discharge of an individual from the health care services. Discharge may be into the care of other health or social services or into the individual's own care, which includes care provided by family members and/or significant others.</i></p> <p><i>The workforce competence includes clinical discharge procedures and covers the checking of discharge notes, the transmission of information and, in the case of individuals being discharged into their own care, the provision of advice and information on their after-care.</i></p>

3.2.2 KSF Core Dimension 2: Personal And People Development

Ref:	NOS
M&L A2:	Manage your own resources and professional development
HSC23:	Develop your knowledge and practice
HSC33:	<p>Reflect on and develop your practice.</p> <p><i>This competence replaced PH03.01, DIAB_CA2 and DANOS AC1 during rationalisation of the database.</i></p> <p><i>This workforce competence covers reflecting on, evaluate and taking action to enhance your own knowledge and practice.</i></p>

3.2.3 KSF Core Dimension 3: Health, Safety And Security

Ref:	NOS
CHS6:	Move and position individuals
GEN96	<p>Maintain health, safety and security practices within a health setting. This competence has replaced GEN3.</p> <p><i>This workforce competence relates to the continuous and consistent attention of each individual maintaining their health, safety and security practices within a health setting to protect themselves and others during all work activities and will be assessed in conjunction with other standards. It also covers personal security and access to working environments.</i></p> <p><i>This competence does not cover the personal security of patient information data.</i></p>
HSC22:	<p>Support the health and safety of yourself and individuals.</p> <p><i>This competence replaced Diab_HE2 and DANOS DB3 during rationalisation of the database</i></p> <p><i>This workforce competence is about keeping yourself, individuals and others that you are responsible for, safe and secure within the working environment. This involves carrying out health and safety checks before you begin work activities, ensuring your own actions support health and safety in the place you work, and taking action to deal with emergencies.</i></p>
HSC32:	<p>Promote, monitor and maintain health, safety and security in the working environment.</p> <p><i>This competence replaced HCS E3, Diab_HE3 and DANOS BD4 during rationalisation of the database.</i></p> <p><i>This workforce competence covers keeping yourself, individuals and others for whom you are responsible, safe and secure within your working environment and minimising risks arising from emergencies. Users of this</i></p>

	<i>competence will need to ensure that practice reflects up to date information and policies.</i>
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3.2.4 KSF Core Dimension 4: Service Development

Ref:	NOS
M&L A3:	Develop your personal networks
GEN13:	<p>Synthesise new knowledge into the development of your own practice</p> <p><i>This competence replaced HI25 and HCS J7 during rationalisation of the database.</i></p> <p><i>The workforce competence covers your role in incorporating and embedding new knowledge into practice. The new knowledge may come from reflecting on and evaluating your own practice or from finding out about and utilising the developments made by others. This workforce competence is intended to support good practice in action research and the development of evidence-based practice.</i></p> <p><i>The workforce competence applies to all workers in the health and social care sector who are accountable for their own actions and responsible for their own development. This includes registered and unregistered staff.</i></p>

3.2.5 KSF Core Dimension 5: Quality

Ref:	NOS
HSC241:	Contribute to the effectiveness of teams
GEN63:	Act within the limits of your competence and authority
CfA202:	Work within your business environment
CM B7:	Manage the use of physical resources
GEN12:	<p>Reflect on and evaluate your own values, priorities, interests and effectiveness</p> <p><i>This workforce competence covers reflecting on and evaluating your own values, interests, priorities and effectiveness in practice to enable you to understand your own actions and reflect on the effectiveness of your interaction with others.</i></p> <p><i>The workforce competence applies to all workers in the health and social care sector who are accountable for their own actions and responsible for their own development. This includes registered and unregistered staff.</i></p>

3.2.6 KSF Core Dimension 6: Equality, Diversity And Rights

Ref:	NOS
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HSC330:	Support individuals to access and use services and facilities
HSC24:	<p>Ensure your own actions, support the care, protection and well-being of individuals. <i>This competence replaced Diab_DA2 during rationalisation of the database.</i></p> <p><i>This workforce competence covers supporting the care, protection and well-being of individuals. This involves relating to and supporting individuals in the way they choose, treating people with respect and dignity, and assisting in the protection of individuals from danger, harm and abuse.</i></p>
HSC3116:	<p>Contribute to promoting a culture that values and respects the diversity of individuals</p> <p><i>This workforce competence covers contributing to ensuring that the environment and culture in which you work values and respects the diversity of individuals. This involves contributing to identifying methods and processes that ensure each individual is valued and respected, contributing to implementing methods and processes that encourage individuals to value and respect each other, and Identifying and using the life experiences of individuals as a resource to promote a culture that values and respects everyone.</i></p>
HSC234:	<p>Ensure your own actions, support the equality, diversity, rights and responsibilities of individuals</p> <p>This workforce competence covers the underpinning values and principles that must be demonstrated in every aspect of your daily work with individuals, key people and others. It is applicable to all workers in all health and social care settings.</p> <p>This competence involves respecting the rights and interests of individuals, treat everyone equally and in ways that respects diversities and differences and acting in ways that promote the individuals' confidence in you and your organisation.</p>

3.3 KSF Specific Dimensions / Skills for Health NOS

3.3.1 Hwb1 Promotion Of Health & Prevention Of Adverse Effects

Ref:	NOS
CM G4:	Communicate with individuals groups and communities about promoting their health and wellbeing in a defined caseload

3.3.2 Hwb6 Assessment And Treatment Planning

Ref:	NOS
CM D6:	Empower families, carers and others to support individuals with long term conditions
HSC3103:	Contribute to raising awareness of health issues
HSC398:	Contribute to assessing the needs of individuals for therapeutic programmes to enable them to manage their behaviour
Diab GA1:	Assess and advise individuals with suspected diabetes
Diab HA8:	Enable individuals with diabetes to monitor their blood glucose levels
AHP26:	Provide support to individuals to develop their skills in managing dysphagia
AHP27:	Assist others to monitor individuals' attempts at managing dysphagia
CHS59:	Respond to referrals of individuals with health conditions
CHS93:	<p>Agree a dietary plan for patients with a specified medical condition.</p> <p><i>This competence replaced RenRL2 during rationalisation of the database This competence is about supporting a patient with a specified medical condition to make and sustain dietary and lifestyle changes using a dietary plan. The dietary plan should be agreed with the patient, and with their carer (s) if the patient chooses to involve them.</i></p>
CHS92	<p>Review and Monitor a Patient's Nutritional Wellbeing</p> <p><i>This competence is about identifying the dietary needs of the patient and negotiating with them a nutritional plan that the patient is likely to sustain. Tension can occur when staff are not cognisant of religious, cultural, social and age customs and requirements and the implications these can have on the patient's lifestyle and habits.</i></p>

3.3.3 Hwb7 Interventions And Treatment

Ref:	NOS
CfA201:	Carry out your responsibilities at work
CM D4:	Implement specific parts of individualised programmes of care
CHD HO2:	Assist in delivering the care plan for individuals needing care
MH29:	Support individuals during activities to improve their physical health and wellbeing
GEN58:	Receive requests for assistance, treatment or care

CHS126:	Conduct handover between healthcare personnel
CHS56:	Provide clinical information to individuals
GEN59:	Direct requests for assistance, care or treatment using protocols and guidelines
CHS3:	Administer medication to individuals
CHS66:	Support individuals to manage their medication
CHS16:	Undertake care for individuals with nasogastric tubes
LLUK L11:	Enable learning through demonstrations and instruction
CM E3:	Enable individuals to use assistive devices and assistive technology
CHS145:	<p>Provide support to individuals to manage their body weight.</p> <p><i>This competence has replaced AHP8.</i></p> <p><i>This workforce competence covers providing specialist support services to help individuals to manage their body weight at optimum nutritional levels. This may be individuals who are overweight and those who need to gain weight.</i></p> <p><i>In the context of this competence the term individual refers only to adults and older children.</i></p>
CHS146:	<p>Monitor individuals' progress in relation to managing their body weight and nutrition.</p> <p><i>This competence has replaced AHP9</i></p> <p><i>This workforce competence is about providing specialist monitoring services to help people evaluate their progress and re-establish goals and targets to manage their body weight and improve nutritional health and well-being. In the context of this competence the term individual refers only to adults and older children.</i></p>
CHS147:	<p>Administer oral nutritional products to individual</p> <p><i>This workforce competence covers your role in preparing and administering nutritional products to individuals and monitoring of the effects. This role is complex and will not be the role of all care staff, only those designated to undertake this activity according to their expertise and employers decisions. This workforce competence is intended to be used in a variety of care settings including hospitals, nursing and residential homes, hospices, and community settings including the individuals own home and GP surgeries.</i></p>
CHS149:	<p>Monitor and review individuals' progress in relation to maintaining optimum nutritional status.</p> <p><i>This competence has replaced AHP14.</i></p>

	<p><i>This workforce competence covers monitoring and reviewing an individual's progress in relation to maintaining optimum nutritional status.</i></p>
DYS1:	<p>Undertake protocol-guided swallow screening/ assessments</p> <p><i>This competence is about the initial screening and/or assessment of individuals who present with difficulties swallowing liquids (including saliva) and solids. It covers recognition and identification of swallowing difficulties and implementation of protocol-guided actions. The practitioner will refer individuals with swallowing difficulties for a comprehensive dysphagia assessment using processes, and within timescales, specified in local protocols. It is essential that the potential risks presented by the problems associated with dysphagia are recognised and action taken with the appropriate degree of urgency.</i></p> <p><i>This competence is for practitioners who are not specialists in dysphagia, but who have appropriate training and responsibility for identifying individuals with swallowing difficulties. This includes practitioners who work across primary and secondary health care, social services and education.</i></p>
CHS17:	<p>Carry out extended feeding techniques to ensure individuals' nutritional and fluid intake</p> <p><i>This workforce competence covers feeding individuals using techniques other than oral feeding. These methods include Percutaneous Endoscopic Gastrostomy (PEG) feeds, nasogastric (NG) tube feeds and subcutaneous fluid infusions.</i></p> <p><i>This workforce competence does not cover intravenous techniques for giving fluids.</i></p>
CHS19:	<p>Undertake physiological measurements.</p> <p><i>This competence replaced HCS I4, Diab_FA1, Diab_FA5, HCS361 and DANOS AH6 during rationalisation of the database.</i></p> <p><i>This workforce competence covers taking and recording physiological measurements as part of the individuals care plan. Measurements include: blood pressure - both by manual and electronic; pulse rates and confirming pulses at a variety of sites e.g. pedal pulses; pulse oximetry; temperature, respiratory rates, peak flow rates; height; weight; body mass index (BMI); girth.</i></p> <p><i>These activities could be done in a variety of care settings, including hospitals wards and other departments including out patients, nursing homes, the individuals own home, GP surgeries etc.</i></p> <p><i>The recording of such measurements must take into account the individuals overall condition, and the delegation of these measurements to you may change as the individual's condition changes, and sometimes this skill will fall outside of your role and responsibility. Any adverse conditions may result in other members of the care team undertaking these measurements.</i></p>

CHS148:	<p>Provide information and advice to individuals on eating to maintain optimum nutritional status.</p> <p><i>This competence has replaced AHP13.</i></p> <p><i>This workforce competence covers providing support to individuals to maintain optimum nutritional status by offering advice and information.</i></p>
GEN14:	<p>Provide advice & information to individuals on how to manage their own condition</p> <p><i>This workforce competence covers establishing individuals' requirements for information and providing advice and information to enable them to manage their condition, adopting a suitable lifestyle to optimise their health and wellbeing. The term 'individual' in this workforce competence is taken to mean anyone with whom you come into contact whether they are service users, their family or significant others, colleagues, or other professionals. You need to relate to each person as someone with their own particular needs for information and advice and develop a full understanding of their requirements and how these can best be met. This workforce competence depends on your being able to communicate information effectively, and being responsive to any queries.</i></p>

3.3.4 Ik2 Information Collection & Analysis

Ref:	NOS
CHS168:	<p>Obtain a patient/client history. This competence replaced EUSC01.</p> <p>This workforce competence covers gathering information to obtain a relevant history from the individual and where appropriate a third party to establish the health status and needs of the individual to support and inform their assessment, intervention, care or treatment plan.</p>
EUSC02:	<p>Obtain supporting information to inform the assessment of an individual</p> <p>This workforce competence covers gathering information to support and inform the assessment of the health status and needs of an individual requiring medical assistance.</p>

