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Appendix 2

Transferable Role Template

Career Framework Level 2

Liaison and Diversion Service Volunteer

Final - April 2018

Developed with the Liaison and Diversion
Expert Panel

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Introduction to the Template

Transferable Roles

This template is designed to enable a common understanding and communication of transferable roles. It can be used to help define the learning and development needs for staff already working in these roles and to support the establishment of transferable roles where appropriate.

In the development of this template Skills for Health seeks to provide some consistency of approach to defining the skills and competences needed to fulfil the requirements new, hybrid, or existing transferable roles.

All transferable roles will have common or 'core' competences, plus speciality/pathway specific competences. Over time, these will be supported by appropriate national occupational standard based learning and development packages. The term 'competences' is used throughout the document. All competences are national occupational standards (NOS).

Definition of a Transferable Role

A transferable role (TR) is a named cluster of competences and related activities that is applicable, relevant and replicable across different geographic locations in the UK. A TR may be either a whole job levelled to the Career Framework e.g. advanced orthopaedic practitioner or a subset of various jobs at different levels of the Career Framework, e.g. point of care testing.

The Template

The template has a range of applications and may successfully be used by commissioners, managers, employers, and individual staff members.

In all cases the template is designed to be used as a whole. A role is composed of all components – level descriptors, national occupational standards and indicative learning and development.

Career Framework Levels and National Occupational Standards (NOS)

The Career framework, which has nine levels, is a method of describing the level of autonomy and responsibility and the kind of decision making required by a job. Level descriptors have been established through rigorous discussions and are referenced to and linked with the qualifications frameworks as well as research where available regarding what should be expected of an individual at any given level. The level descriptor is intended to be relevant to any role within the health sector both clinical and non clinical roles.

It is important to bear in mind that the career framework levels are not intended to be coterminous with the NHS Agenda for Change banding, though there may be some similarities.

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

The reference function they are listed by in the template relates to the Health Functional Map which is a method of categorising the NOS and amongst other things facilitates finding them on the data base.

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

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

- Core to the level – the core is intended to be relevant to any role in the health sector, whether it is clinical or not and therefore is broad based in terms of the NOS it contains.
- Specific to the role
- Facets, some roles have different facets, each made up of a group of NOS, relevant to different areas of practice
- Locality Specific – Additional NOS may be added or removed here.

Indicative Learning and Development

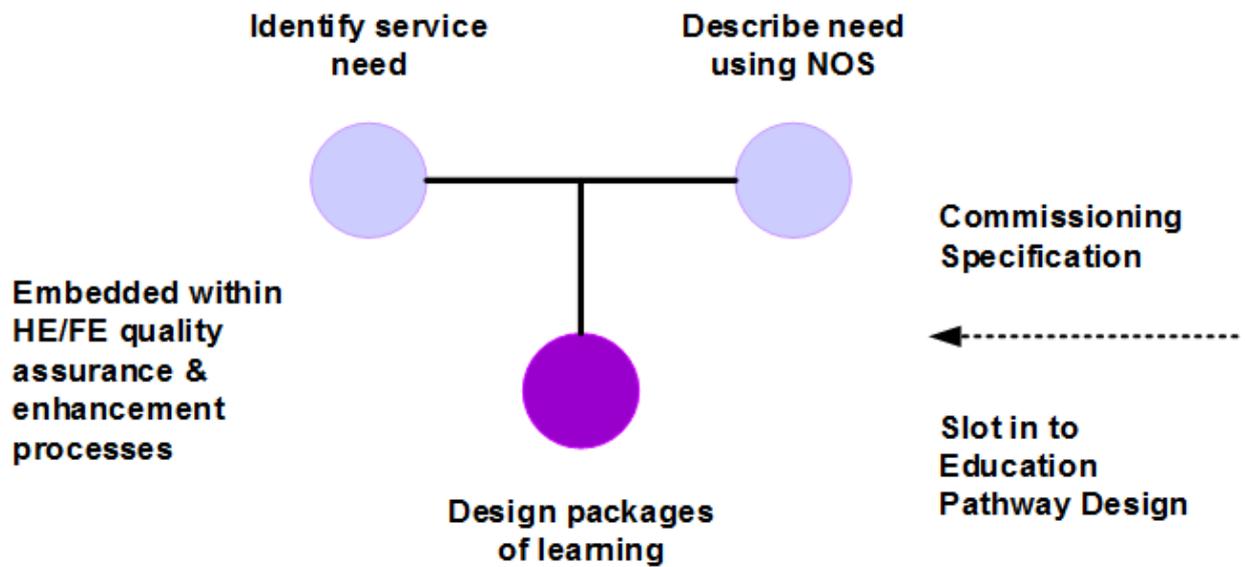
The learning and development section of the template gives an indication of the level and style of learning relevant to the role. It is very much an indication and is not a comprehensive inventory of learning available.

Some people may wish to or need to study whole qualifications - others will not. Some will need to participate in smaller 'bite sized' learning opportunities. Each individual should use the role profile to identify with their line manager what their needs are and how they will achieve them.

Learning should follow the Skills for Health learning design principles which encourage partnership working between employers, commissioners and education providers. The learning design principles aim to develop learning that is fit for purpose, practice and award. The key messages are:

- Learning should be based on NOS
- Learning should be accredited and quality assured
- Flexible frameworks and delivery methods should be used
- Bite sized packages of learning that build into larger qualification enable greater flexibility

Skills for Health Learning and Design Principles



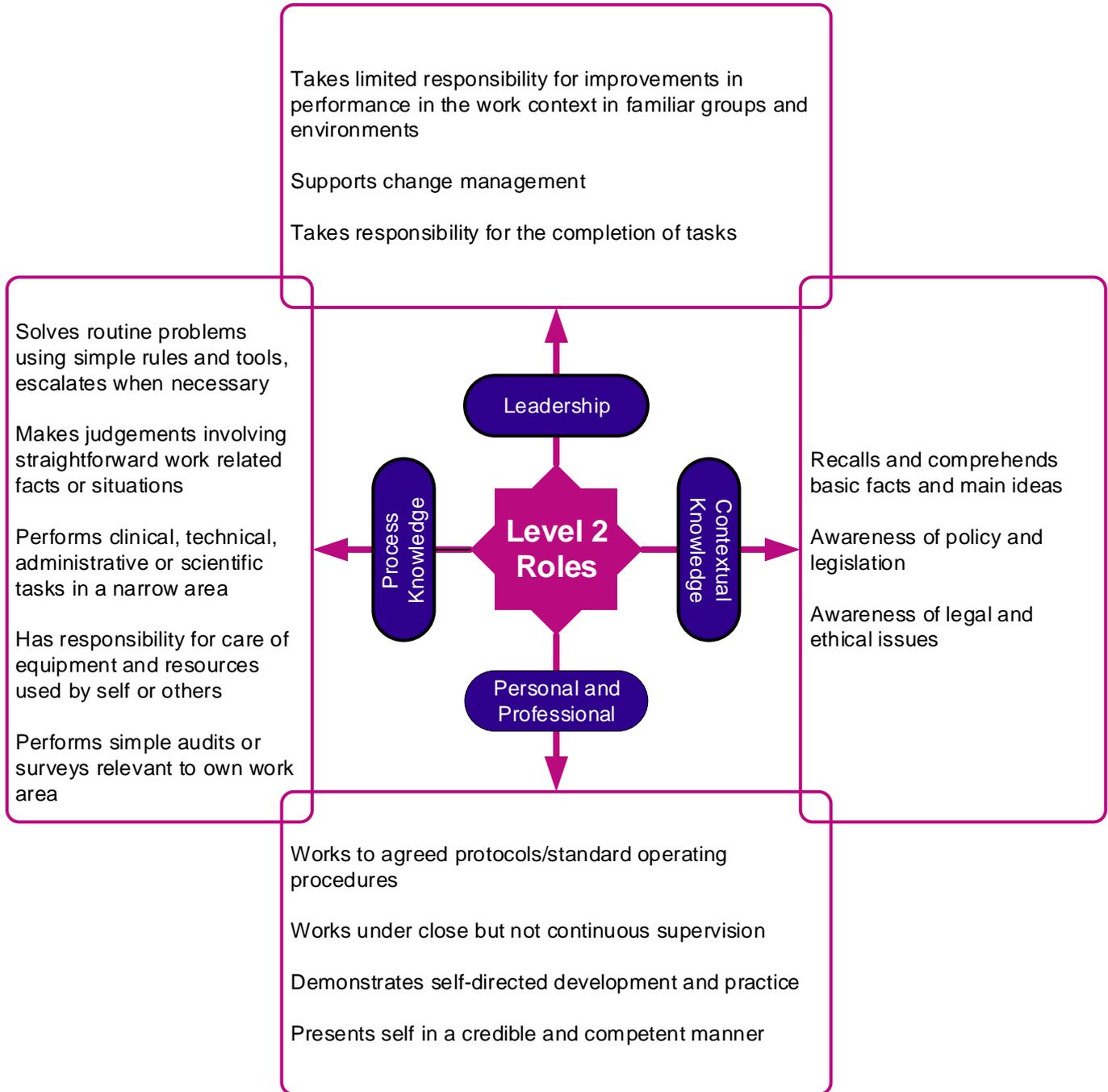
The level of learning required by an individual will be dependent upon what they need to learn. There is a connection between levels of learning and career framework levels however not all learning will be at the same level as the role level. For example someone with expert clinical skills i.e. level 8 may need to engage in learning about management at level 5 or 6 of the qualifications framework. Learning for a practical skill may not be levelled.

At all times learning should be tailored to the needs of the service and the individual. A flexible approach to learning is required in terms of curriculum design and the use of informal learning opportunities. More detail is included in the indicative learning and development section of this template.

The Template

Level Descriptors

Definition of the Level 2 Role



People at level 2 require basic factual knowledge of a field of work. They may carry out clinical, technical, scientific or administrative duties according to established protocols or procedures, or systems of work.

Indicative if reference title: 'Support Worker'

Definition of Support Worker

Support workers work to agreed protocols and procedures. They are able to solve routine problems and make straightforward judgements. They have general skills across a range of aspects of service delivery and work under close supervision.

These characteristics have been developed by Skills for Health and Justice working with employers and other stakeholders.

The National Occupational Standards

This section of the template has an example of a level 2 role. This example is intended to give core information for the role. The indicative learning and development packages are included.

Basic Information

Named Role	Liaison and Diversion Service Volunteer
Area of Work	Liaison and Diversion – Public Sector, Independent Sector
Sample Job Description Available	No
Experience Required	Must be at least 18 years old and have knowledge of the local community and have an understanding of, and recent lived experience of the criminal justice system and identified vulnerabilities Language skills relevant to the community DBS clearance and other vetting as appropriate The post will last for a maximum of 2 years and then supported to move to alternative work
Career Framework Level	Level 2

Scope of the Role

The purpose and scope of this role is to encourage service users to engage with the Liaison and Diversion Service, other agencies and referral pathways and provide emotional and other support including advocacy.

The role will involve supporting people to navigate through the Criminal Justice System, to access support for mental health needs as well as other vulnerabilities including substance misuse, (alcohol and drugs), homelessness, intellectual disabilities and challenging behaviour.

An understanding of professional boundaries is essential. The role provides emotional and, where appropriate, practical support to individuals, with support from the Liaison and Diversion Practitioner, planning a programme of support, working with their families and friends, supporting them to access other agencies and will be based in the Liaison and Diversion team.

The role will assist the Liaison and Diversion Service to support its main aims of:

- Improved access to healthcare and support services for vulnerable individuals through effective liaison with appropriate services and a reduction in health inequalities.
- Diversion of individuals, where appropriate, out of the youth and criminal justice systems into health or other supportive services.
- Delivery of efficiencies within the youth and criminal justice systems.
- The reduction of re-offending.

Volunteers are usually from the local community, with recent lived experience of the criminal justice system and vulnerabilities such as mental health, substance misuse, learning disabilities and are provided with training to enable them to:

- i) Encourage service users to engage with the Liaison and Diversion Service, other agencies and referral pathways.
- ii) Provide emotional support and a willingness to share as appropriate experience with service users
- iii) Increase the awareness and understanding of the range of local networks, community services and service user services available eg. recovery gym
- iv) Have an ability to adapt and engage in a variety of environments to support service users
- v) Be able to provide support and advice to colleagues in the wider Liaison and Diversion Service/Team based on lived experience
- vi) Assist in the recruitment of other volunteers
- vii) Raise concerns to feed into clinical supervision and care planning
- viii) Work with Liaison and Diversion Practitioners/Peer Support Lead/Support Workers to review care plans

Volunteers will initially be supported and supervised by the Peer Support Worker and Liaison and Diversion Manager and will be provided with appropriate training for the role.

All level 2 roles will have the following common/core competences.

All competences are national occupational standards (NOS)

Specific competences to the role have then been identified. Any additional competences specific to the locality should then be identified locally using the competence tools and the health functional map added to the template using the same format.

Common/Core Competences for all Level 2 Roles:

Underpinning Principles	Reference Function		Competence
1. Communication	1.2	Communicate effectively	GEN97 Communicate effectively in a health care environment
2. Personal and People Development	2.1.1	Develop your own knowledge and practice	SCDHS0023 Develop your knowledge and Practice
	2.1.2	Reflect on your own practice	GEN23 Monitor your own work practices
3. Health, Safety and Security	3.5.1	Ensure you own actions reduce risks to health and safety	IPC2.2012 Perform hand hygiene to prevent the spread of infection
			PROHSS1 Make sure your own actions reduce risks to health and safety
			PMVRV1 Make sure your actions contribute to a positive and safe working culture
4. Service Improvement	4.7	Contribute to improving services	SCDINSPG1 Contribute to the improvement of services
5. Quality	5.1.1	Act within the limits of your competence and authority	GEN63 Act within the limits of your competence and authority
6. Equality & Diversity	6.1	Ensure your own actions support equality of opportunity and diversity	SCDHSC0234 Uphold the rights of individuals
B. Health Intervention	2.1	Obtain information from individuals about their health status and needs	CHS169 Comply with legal requirements for maintaining confidentiality in healthcare
D. Information Management / Information and Communication Technology	D2.4	Maintain information/record systems	CFA_BAD 332 Store and retrieve information using a filing system
H. Management and Administration	H1.3.1	Contribute to the effectiveness of teams	SCDHSC0241 Contribute to the effectiveness of teams
	H2.6	Receive and pass on messages and information	ESKITU020 Use digital communications

Role Specific Competences

Underpinning Principle	Reference Function		Competence
1. Communication	1.3	Support individuals to communicate	GEN85 Support individuals with communication and interaction difficulties
	1.4	Develop effective relationships with individuals	SCDHSC0233 Develop effective relationships with individuals
			SFJAB1 Communicate effectively with people
	1.5	Provide information, advice and guidance	CHS177 Advise on access to and use of services
			SCDHSC0026 Support individuals to access information on services and facilities
A. Assessment		Assess an individual's needs arising from their health status	MH14.2013 Identify potential mental health needs and related issues
B. Health Intervention	B3.4.2	Refer individuals to services for treatment and care	AA1.2014 Recognise problematic use of alcohol or other substances and refer individuals to services
	B16.2	Support individuals who are distressed	SCDHSC Support individuals who are distressed
C. Health Promotion and Protection	C2.4	Enable people to address issues relating to their health and wellbeing	SCDHSC0330 Support individuals to access and use services and facilities
			SCDHSC0026 Support individuals to access information on services and facilities
			HT3 Enable individuals to change their behaviour to improve their own health and wellbeing
			PHP41 Enable people to address issues related to health and wellbeing



Underpinning Principle	Reference Function		Competence
	2.6	Act on behalf of an individual, family or community (advocacy)	SCDHSC0410 Advocate with and on behalf of individuals

Locality Specific Competences

In this space you can define additional competences which are essential for your local needs.

Go to the [Health Functional Map](#) to begin your search for the competences related to the additional tasks or functions you have identified.

All competences are cross referenced to the NHS knowledge and skills framework (KSF).

Underpinning Principles	Reference Function		Competence

Indicative Learning and Development

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

Transferable Role	Volunteer-Liaison and Diversion Service
Formal endorsed learning	<p>Formal induction and bespoke Liaison and Diversion Training - Core 1 and 2 lasting 100 hours</p> <p>Literacy skills</p> <p>Other training which may be formal or informal:</p> <ul style="list-style-type: none"> • Record keeping • Conflict resolution • Advocacy First Aid at Work • Basic life support • Lone working • Information governance
Informal learning	<p>As in formal learning above-some training may be accredited and some informal</p> <p>Support for progression into other roles eg Peer Support Worker including identification of skills gaps eg Literacy and IT skills</p>
Summary of learning and development including aims and objectives	Formal induction-covering understanding of the Liaison and Diversion functions and roles of all service staff including Practitioners and Support Workers.
Duration	The role is for a duration of 2 years and the role will be supported to look to progress into the Peer Support or Support Worker role or other related work
National Occupational Standards used	As detailed within role outline. The performance criteria and knowledge statements in each NOS will form the basis for the development of specific learning outcomes for each person and may be used to develop generic learning outcomes for each module/unit of learning.
Credits (including framework used)	Wherever possible learning should be credit rated to enable transferability and progression
Accreditation	Wherever possible learning should be accredited by education providers, professional bodies or similar
APEL and progression	Wherever possible learning should be transferable through APEL and should enable progression to other formal learning
Programme structure	Formal and informal learning to meet the needs of the service
Resources required, e.g. placement learning, preceptors, accredited assessors etc	Placements with the Liaison and Diversion Service Shadowing
Quality Assurance	

Policies included in learning programme documentation	For example: <ul style="list-style-type: none"> • Equal opportunities, • Accessibility • Teaching and learning • Assessment, internal verification and moderation • Appeals procedure • APEL processes • Staff development • Academic standards • Equality and diversity • E-safeguarding and Safeguarding • Health and safety • Grievance and disciplinary procedures • Safeguarding • Information Governance
Funding	
Leading to registration or membership with:	

Continuing Professional Development

It is recognised that continuing professional development is an essential component to maintaining competent, safe practice at all levels of the career framework.

The following is considered the minimum required to maintain competence within this role. Learning should be active, with the impact on service delivery clearly defined and agreed between the learner and their line manager. A range of methods for capturing the impact of learning may be used e.g. learning contracts, reflective accounts, productivity measures, appraisals systems and processes.

Wherever possible learning should be accredited and/or credit rated and should focus on the needs of the individual in the role.

Statutory and Mandatory learning of particular relevance to the role	None identified Safeguarding Data Protection Information Governance	
Formal endorsed learning	Title	None identified
	Awarding body	
	Credit	
	QCF code	
	Level	

Informal learning	Negotiated at appraisal/performance review
Method of capturing impact	Annual appraisal
Funding required	Dependent upon agreed CPD plan and negotiated locally
Frequency required (once a year, once every two years, twice or more a year)	Annual learning needs will be identified and planned as part of the appraisal process. Specific goals will be agreed and the best method for achieving them negotiated.

References:

2010 Skills for Health, Career Framework Level Descriptors

2014 Skills for Health Employability Skills Matrix

2013/14 NHS England Liaison and Diversion Operating Model

2017 NHS England Liaison and Diversion Standard Service Specification



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