

Care navigation in SEL

**Interim report
June 2016**

A partnership of NHS providers and Clinical Commissioning Groups serving the boroughs of Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark, with NHS England



***Aspiring to develop
the right people,
with the right skills and behaviours,
at the right place, at the right time,
to deliver
high quality, personalised, integrated care
across south east London***

**SEL STP Workforce Strategy - Vision
2016 – 2021**

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1. Introduction

Much has been written about the health and social care needs of our ageing population and the consequence of unhealthy lifestyles on the population. The challenge of meeting current and anticipated population needs is creating significant and unsustainable demand and increasing financial pressure across the care system. Health and social care services are looking for alternative ways of delivering sustainable high quality care by finding new ways to work better together with patients, carers and their communities.

An added complexity to delivering lasting change is recruitment and retention. To add to this, many providers have developed non-clinical roles with similarities and yet distinct differences that have traditionally made it difficult to transfer between roles and to progress. And although for clinical professionals (doctors, nurses, and allied professionals) there are agreed training programmes, often led by universities and royal colleges, this is often not the case for these be-spoke non-clinical roles many providers have developed.

However, we rely increasingly on non-clinical staff to deliver the administrative aspects of healthcare, in order to address increasing demand and financial constraints. For them, training is often provided on the job ('in-house') with limited formal opportunities for professional development or a career structure that might foster greater commitment and enthusiasm to continue working in health and social care services.

The longest established non-clinical staff groups include receptionists (medical, dental, pharmacist) and traditional 'back-office' staff. They often develop considerable skills and knowledge about the NHS, social care, local populations and healthcare providers. They also possess skills in communication and information technology (IT) but training opportunities can be limited and inconsistent, not only within the same provider network, but also between different provider organisations. Many start work on a part-time basis, with childcare or other caring commitments, but find that, with little opportunity to develop beyond their existing role, there is not enough to sustain their career needs in the longer term, so they eventually move on to work in other sectors. This represents a significant loss of skill and wasted resource used to repeatedly train new staff for the same roles.

More recently, we have seen the advent of the apprenticeship programme and development of new roles to address the needs of our ageing and increasingly frail population and support clinical staff struggling to cope with the increased demand and complexity. These roles include 'patient liaison officers', 'care navigators', 'care coordinators' and assistants to clinical roles such as healthcare and physicians' assistants.

This presents a timely opportunity to develop a career structure that will provide a career progression route from novice through to 'liaison officer' to 'care navigator' and from there entry into health assistant or nurse training, or into formal training for supervisor or management roles. The care navigator project, led by the Our

Healthier South East London workforce programme, has looked with HEE (SL) support to realise this opportunity.

2. Project aim and objectives

2.1 Aim

The overall project aim was to improve opportunities for career development of non-clinical staff within primary care to support staff engagement, retention and progression, improve patient care and health outcomes and enhance the service user experience.

2.2 Objectives

- i. Understand the various models of care navigation that exist in south London.
- ii. Develop a competency framework to include definition of core competencies around both mental and physical health)
- iii. Inform the development of training curricula to match the agreed career pathway framework.

3 Methodology

The project began with a review of available care navigator role related job descriptions from health, social care, ambulance service and voluntary sector sources across south London. The aim was to identify similarities in roles, functions and competencies from which a common career pathway could be developed. Four broad levels and job descriptions were developed and mapped against established banding criteria. It was recognised that much of the training required to achieve competency was already available through apprenticeship modules and allied health and social care education providers. However, it was also recognised that a job description rarely accurately reflects the work actually carried out by individuals within specified roles. Therefore, it was necessary to discuss these non-clinical roles directly with the people doing them and the organisations they work for.

Our Healthier South East London (OHSEL) hosted a successful half-day workshop in February 2016. Approximately sixty people attended the event, representing health and social care. Primary care was represented by attendees from the CEPNs across south east London, alongside GPs, practice managers, project managers, HCAs and care navigators currently in post. There was also input from community providers, the Lambeth, Southwark & Lewisham local pharmaceutical committee and local authorities. The voluntary sector was represented by care coordinators from Age UK

and Southwark Carers. The London Ambulance Service was also represented as did secondary care trusts. Within these groups there were people working in some of the new non-clinical 'navigator' type roles, employers and managers, as well as patient representatives from Patient Advisory Groups.

The aim of the event was to inform the core competencies (and ultimately the job description) for this role by obtaining:

- Clinical input on what administrative competencies they want to see developed to support clinicians.
- Practice manager input on what functions would improve the way practices work.
- Input from staff working in 'navigator' roles about the competencies that their roles require

To achieve this aim the following objectives were identified:

- Determine current non-clinical roles and competencies in supporting patient care.
- Inform training requirements for the development of competencies identified.
- Identify potential requirements for future development of non-clinical staff.

The workshop featured semi-structured table-top discussions which asked delegates to consider:

- Key roles currently undertaken by non-clinical staff to support patient care/experience across South London.
- The competencies within these roles (i.e. all activities except direct business/managerial roles).
- The training given for each identified role and the perceived training gaps.
- How patient care could be improved by developing the non-clinical workforce.
- The important non-clinical roles that need to be developed (current and/or potential future roles).
- The training implications and opportunities (e.g. apprenticeships).

The delegates were allocated in groups which were mixed both in terms of roles and localities to enable cross-fertilisation of ideas and local models. Draft job descriptions were shared following review of existing documented roles with each group during the second session. Delegate feedback, table notes and event evaluation forms were analysed to inform the present report, with additional input into the draft job descriptions.

4 Findings – February 2016 workshop

The discussion was highly informative and valuable and the common themes that arose were:

4.1 Diversity of existing roles

There was an acknowledgement that individual localities were developing similar roles to meet the need for care management, signposting, health advice and administrative management of care plans and co-ordination of input from multiple agencies in those with complex care needs, including mental health.

A range of different job titles for those in new roles in primary care was identified, namely:

- Patient Liaison Officer
- Care Navigator
- Health Champion
- Health Trainer
- Health Coach
- Therapy Assistants
- Care Coordinator

In secondary care, similarities were noted in activities of ward clerks and new roles including complex care coordinators for specific groups, and within social care under local authority control, care managers and similar navigator roles were acknowledged.

This navigator role was also vital within the London Ambulance service, with communication skills and record-keeping being paramount. There was recognition that there was considerable overlap in roles and that existing training for some was often 'ad-hoc' and delivered in an inconsistent way, leaving individuals potentially vulnerable and ill-equipped.

There was agreement that core training for overlapping functions could be developed and delivered in a consistent way across different organisations to make the process viable and affordable. This could be particularly effective if delivered on a modular basis using the apprenticeship programme wherever possible.

4.2 Clinical or non-clinical?

There was a debate as to whether new navigators should be developed from existing clinical staff (mainly nurses/Health Visitors), from Health Care Assistants (with some clinical knowledge), or from fully non-clinical staff.

It was recognised that the evolving roles would be working at different levels of autonomy and complexity, depending on their level of responsibility. This added weight to the concept of a career pathway, enabling junior staff with minimal experience to be trained, gathering skills and competencies incrementally, which, if delivered in a consistent and agreed way across provider groups, would enable transfer of core skills across providers and development of a generic career pathway.

Such a pathway would enable progression through to formal managerial training, or for divergence to Health Care Assistant or Medical Assistant at appropriate levels. This would bring with it the potential to retain an increasingly skilled workforce within the health and social care services. It would also enable those already in the system to fill training gaps and enter the career pathway at appropriate and recognised levels.

4.3 Supervision and regulation

There was concern about the need for formal support for any new roles that would protect both the staff concerned and patients/clients. The more remote the worker was from supervision, the more it was felt that they would be at risk, should they inadvertently step outside their remit and boundaries. Those employed directly by pharmacies and general practice were felt to be the best protected, particularly if they worked within the confines of the organisation's premises.

However, some new roles involved home visiting to vulnerable patients/clients, and whilst there was evidence that some consideration had been given to protecting the worker, this was not always a formal process. Similarly, working with the public in unprotected environments, without recourse to immediate clinical/professional advice (e.g. libraries and schools) could put the patient at risk and might leave the worker vulnerable if, for example, they gave advice which subsequently proved to have an adverse outcome.

These issues were not fully resolved in discussion, but it was recognised that emerging 'at scale' primary care organisations (federations or alliances) and greater collaboration between provider organisations could provide the necessary contractual and supervisory frameworks to address these concerns/risks. Supervision was also raised as a possible issue, were responsibility to fall to clinical staff. These issues should be considered when developing the competencies and responsibilities of more senior non-clinical staff roles.

4.4. Common Competencies

Effective communication formed a part of every competency discussed, and was highlighted as a key function in all roles. Other common competencies arising across the non-clinical workforce are outlined below:

4.4.1 Managing information

The need for a detailed knowledge of local resources and how to access and signpost patients/clients to them was critical. This would include social care, housing and benefits information and mental health services, together with a broad understanding of the NHS structure.

It would also include a demystifying role through avoidance of professional 'jargon'. It also recognises the importance of effective recording of information, use of databases, production and analysis of reports, production of minutes and action plans, and passing the right information to the right agencies in a timely manner.

4.4.2 Protecting patients

The need to recognise the impact of illness for the individual and those around them, including the warning signs that should trigger onward referral, particularly in safeguarding and mental health.

There was some debate about whether this required clinical knowledge, but with a recognition that this would depend on the level of autonomy and place of work with level of supervision being an important determining factor. Confidentiality was also highlighted, as was the need to understand the limits of this and when, and to whom, information should be divulged.

4.4.3 Organisational and networking skills

The basic skills in the use of patient/service user specific protocols, such as those used by the London Ambulance Service, administrative skills in managing information through records and updating databases, filing/retrieval of information, through to organisational and project management skills at higher levels.

The importance of networking between different provider organisations, acting as the service user advocate, was acknowledged. At higher levels, non-clinical roles might include the need for skills in teaching and supervising others and strategic planning for service development within the organisation.

4.4.4 Motivational and supporting skills

Motivational interviewing and coaching skills, to promote behaviour change to improve health (such as smoking cessation and exercise), empathy and compassion to support service users, skills in conflict resolution and understanding psychological and mental health issues that can impact on health and social care.

4.4.5 Developing effective relationships

Developing trust with service users was seen as a combination of support - compassion, confidentiality, knowledge and listening skills, together with availability and continuity for those who needed ongoing help. These linked closely with good communication skills and the ability to network between diverse service user and provider groups. It could also include the ability to facilitate groups and meetings for both service users and providers.

4.4.6 Self-awareness

Self-awareness included the recognition of 'self' in the process of care, and the need for reflection on practice to support learning and development. It included self-

confidence and appropriate assertiveness, recognition of limitations and resilience when faced with challenging situations.

4.4.7 Ethical practice

Appreciation of ethical principles and human rights issues were recognised as important at all levels, avoiding prejudice and discriminative practices and taking into account the needs of those with disabilities and specific language and cultural needs.

Beyond these potentially shared competency areas, it was acknowledged that within each organisation there would be specific additional training needs, relevant to their area of work.

4.5 Potential for future development of non-clinical staff

Developing the non-clinical career pathway would require support from clinicians and for them to be convinced of the value of this. Certain Community Education Provider Networks, where new roles had or were being developed, were enthusiastic about the potential impact of the non-clinical workforce in prevention - reaching and supporting vulnerable people in time to prevent crisis, and thereby helping to reduce clinical workloads. Small but timely interventions were often felt to have a big impact and patient representatives supported this with comments about consistency, continuity and accessibility being important factors, particularly in building confidence and trust. The potential for developing roles that were transferable across health and social care was seen as an opportunity for improving communication and understanding, increasing the focus on proactive rather than reactive care and developing greater consistency and clarity in information shared with service users.

Development of the non-clinical workforce through a modular training programme will undoubtedly have associated costs. Use of the apprenticeship training modules, and local provider resources would minimise these costs, as would collaborative working to ensure that all available training places are filled. More senior roles might be shared between organisations, further reducing costs, and increasing efficiency. Benefits could be seen quite quickly, and a pilot, supported by project funding, might provide the evidence of cost and workload effectiveness for those currently uncertain of benefits, and would allow formal evaluation.

The issues raised at the workshop, as outlined above, have been incorporated into the draft job descriptions (please see appendices). The next steps will be to inform the development of training modules to address desired competencies and seek funding to enable piloting of training modules with providers interested in participating.

5 Findings – May 2016 workshop

5.1 Workshop purpose and format

This workshop was facilitated by our project partner - South London and Maudsley NHS Foundation Trust to discuss the development of an educational framework to deliver the core generic competencies for a non-clinical career pathway for health and welfare service staff.

Representatives of education providers from universities, health service education provider agencies, CEPNs, and SLaM attended. Each had access to a template identifying eight core competency areas and four levels of care navigator role, with increasing in complexity skills in each of the eight competency areas. After a brief overview of the project to date, mixed groups were asked to consider how, from their backgrounds, they would address the training needs for the eight identified competency areas at each navigator level. They were asked to identify where suitable training was already available and how any gaps might be filled; what new commissioning opportunities there might be; and what challenges would need to be addressed. They were asked to consider costs and sustainability with a suggestion that use of apprenticeship training programmes might support an effective and affordable model in the long term.

5.2 Outcomes

There was broad agreement with the eight competency areas. The only additional recommendation was the inclusion of a learning requirement of social determinants of health under the 'protecting patients' competency. Participants identified the potential to use existing training modules from their own organisations to deliver many of the skills required within each competency area. There was recognition that levels 1 and 2 of the care navigator role could be served well through existing apprenticeship training modules and the Care Certificate. Levels 3 and 4 would have some provision through apprenticeship training but that there may be a need to consider formal or university (QCF/NVQ; City and Guilds; BSc.) modules or equivalent. There were specific areas where existing training programmes might not cover all skills required, particularly at level 4. These included identifying boundaries, coaching, mentoring, self-confidence, ethical practice, assessment and supervision.

Participants discussed the form of training, recognising that this was a real opportunity to develop training for a new career pathway, free from past rules and regulations. The 'learners' would be adults and had already expressed a desire to be engaged in such approach to education and training. They were also largely a part-time workforce, particularly at levels 1 and 2, and would require training opportunities that were both flexible and convenient, in terms of location and timing. Their employers would need to be satisfied that training did not detract from their need to retain a viable workforce, as well as be affordable with clear value to their organisations.

With these factors in mind, groups considered ways of learning, ranging from:

- E-learning - a good way of reinforcing IT skills as well as learning in other areas. There was recognition that some training modules already exist - such as Information Governance - which could be used.
- In-house training, where there would need to be supervision, assessment and 'sign-up' for competencies demonstrated.
- Course based learning, including half-day / full-day or longer / locally or regionally delivered, and how these might be coordinated.
- The format of training, to include taught modules, simulation, secondment and role-swaps, documented reflection on work activities, learning from feedback - from service users, supervisors and peers.
- Peer support and exchange of experience through virtual or real contacts - group meetings on a locality basis through to on-line networks on a broader scale.

The need to assess skills gained to ensure that training was effective and ensure that competencies were maintained over time was vital. The group discussed how formal assessment should range from self-assessment, review at appraisals; feedback from service users and simulation assessment.

With these variables, the group concluded that:

- The best way forward would be to design a portfolio based learning programme, almost certainly an e-portfolio format. We could learn from existing e-portfolios for clinical staff, focusing on the eight competency areas that would enable career progression, demonstrate transferable skills as well as personal aspirations. Other competencies specific to the job might also be recorded alongside the core competencies. It would be possible then to identify and deliver tailored training to each individual to meet competencies in different ways. These could be seen by learners and existing or future employers; as well as provide a forum for appraisal discussion to ensure that existing skills are maintained and any gaps are filled.
- Education providers, whether locally or regionally based, would need to make available to all CEPNs the range of training they would offer, and which competencies and level of care navigator role their training would be aimed at.
- CEPNs would be responsible for ensuring that all sectors, including the voluntary sector, were aware of, and engaged in, the process of developing their non-clinical staff.
- Sustainability of the programme would depend upon initial investment to develop and pilot the e-portfolio and training programmes, using apprenticeship training and joint training across different provider organisations to ensure economies of scale for locally delivered training. This would promote the integration of care agenda, which would draw interest and support from commissioners.
- Changing hearts and minds of clinical staff to accept non-clinicians undertaking administrative work previously done by them may require negotiation and demonstration of the positive impact for patients and clinicians alike.

6 Proposed next steps

- Agree terminology to identify 'care navigator' as the main title for all roles encompassed within the competency framework
- Develop the e-portfolio from the career template
- Collate information from education providers regarding existing training that would meet competency requirements at specified care navigator levels
- Identify and address gaps in training availability
- Pilot the programme in 2 CEPN areas
- Evaluate outcomes and revise programme where required
- Roll-out programme to all CEPN areas and all provider groups

7 Acknowledgments

The SEL STP Workforce Strategy Programme would like to thank HEE SL and all those who have shared their knowledge and experience and contributed to the research findings.

The Project Team	
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Care navigation related initiatives across south London

Organisation / Borough:	Bexley
Contact:	Wendy Milligan wendymilligan@nhs.net www.bexleycepn.org.uk
Title of project:	TBC
Summary:	In Bexley we are piloting a volunteer health champion role in 7 practices run by Bexley Voluntary Services Council

Organisation / Borough:	Croydon
Contact:	Alison Lawton alison.lawton6@nhs.net
Title of project:	Personal Independence Coordinators (PICs)
Summary:	<p>In Croydon we are developing a Model of Care for people over 65. As part of this, we are developing a number of new posts for people called Personal Independence Coordinators, commonly known as PICs!</p> <p>We are also starting a pilot programme on the Altogether Better Programme, and some of the roles within practices may fall within the Care Navigator type remit.</p>

Organisation / Borough:	Lambeth
Contact:	<p>Jack Lewin jack.lewin@nhs.net</p> <p>Therese Fletcher theresefletcher@nhs.net</p>
Title of project:	Primary Care Navigators (Diabetes)
Summary:	<p>Lambeth CCG are expanding on a small scale pilot to train Primary Care Navigators to support patients with long term conditions, supported by a highly localised navigation tool in the form of an information prescription directory. The programme has been established by the National Association for Primary Care (NAPC) in partnership with HEE SL</p> <p>The PCN (Diabetes) programme started in 2015 and eleven GP Practices and ten Pharmacies (three of which withdrew) participated in the project with a total of 41 navigators. Most PCNs who take on a care navigation role are from a non-clinical background and do this work in addition to their everyday duties.</p>

Organisation / Borough:	Bromley
Contact:	<p>Natasha Hoare natashahoare@nhs.net</p> <p>Jackie Tavabie jackietavabie@googlemail.com</p>
Title of project:	Patient Liaison Officers
Summary:	<p>The Bromley Patient Liaison Officers training programme was set up and competencies were developed by the Bromley CEPN.</p> <p>Dr Tavabie has been leading on this project since 2012.</p>

Organisation / Borough:	Greenwich
Contact:	Irene Grayson irene.grayson1@nhs.net , Bridget Imeson bridget.imeson@royalgreenwich.gov.uk , Ro York ro@oyork.com
Title of project:	Primary Care Navigators
Summary:	Greenwich CEPN has developed care navigators through its Integrated work. There is a plan for 30 Health Champions f/t employed (some employed through an apprenticeship route aligned with Primary Care to work on prevention and to support GP practices. These 30 health Champions will be supported by 300 volunteer Health Trainers, managed by (probably) the Volunteer Centre.

Organisation / Borough:	Wandsworth
Contact:	Jeremy Fenwick jeremy.fenwick@nhs.net
Title of project:	Health and social care coordinators
Summary:	Wandsworth CEPN are mobilising an “Enhanced Care Pathway” contract for 500 (initially frail elderly) patients in Wandsworth. These will have a Health and Social Care Coordinator in each practice to look after their portion of the 500 patients (average 12 per practice).

Organisation / Borough:	Croydon
Contact:	Geoff Berg g.berg@nhs.net
Title of project:	Personal independence coordinators
Summary:	There are personal independence coordinators (PICs) as part of Croydon CCG’s Outcomes Based Commissioning for over 65s. AgeUK is leading on this.

Organisation / Borough:	Sutton
Contact:	Geoff Berg g.berg@nhs.net
Title of project:	Care coordinators
Summary:	There are care coordinators built into Sutton’s long term care work stream, but they haven’t been rolled out yet.

APPENDICES

Appendix 1: Job description Band 2/3

Job Description

Job Title: Receptionist; Administrator

Grade: Band 2/3

Reports to: Organisation Manager / Service delivery lead / Emergency medical dispatcher

Job Purpose:

The post holder, as a member and representative of the organisation, will often be the first point of contact for service users. He/she will demonstrate excellent communication skills through a range of media (telephone; face-to-face; IT), with focus on customer care, ensuring that every contact counts and promoting the good name of the organisation. He/she will be able to deal with complex information, both organising and prioritising this to ensure best possible care, having regard for confidentiality; urgency and attention to detail.

The post holder will facilitate the smooth administration of the organisation's activities. They will ensure accurate record keeping and data entry and will have such knowledge of the organisation as to enable users to access appropriate services, facilitating and booking this where needed. They will liaise, as directed, with other related organisations, providing a reliable and effective communication link to improve service outcome for customers / patients. They will work closely with other members within the organisation, having responsibility for administering appointment schedules and diaries.

Communications and Working Relationships:

(These will depend on specific jobs)

Key Responsibilities

1. To have a thorough knowledge of organisation procedures and to work in accordance of written protocols
2. To provide excellent, efficient and courteous customer service at all times, whether in person; on the telephone or in writing (letter or electronic communication)

3. Record information, as directed, keeping accurate records in a timely manner
4. Take and deliver messages, ensuring appropriate handover, both promptly and accurately
5. Maintain diaries and appointment schedules for relevant members of the organisation, as directed
6. To help in the organisation of meetings; preparation of documents, including photocopying/preparation of reports and other material as relevant to the organisation
7. To facilitate the effective managing of information in the organisation; taking responsibility for managing incoming and outgoing post (+/- electronic communications) ensuring that this is directed to the appropriate members of the organisation
8. To take part in the collection of information and its analysis for audit and service improvements in the organisation, and to monitor standards within own work
9. To recognise and respond quickly to emergencies
10. To make appointments / bookings for customers / patients and liaise with other organisations where needed.
11. As first point of contact, to listen to and understand customer / patient requests with empathy, taking time to organise and prioritise these, recognising the importance of equality; diversity and the avoidance of discrimination.
12. To maintain confidentiality in accordance with organisation procedures and policies, protecting personal and sensitive data.
13. To participate in team meetings and service reviews / improvements
14. To report any incidents that might compromise health and safety for self, other staff or customers/patients
15. To undertake activities that ensure the safety and security of the organisation (e.g. locking premises) as directed by the organisation manager
16. To take part in annual appraisal; developing a personal development plan, from which training needs will be identified and training undertaken
17. Other administrative and reception duties as specific to the organisation.
18. To know limitations and boundaries and where to seek help
19. To work in accordance with Equal Opportunities; Data Protection; Health and Safety and organisational dress code

Person Specification

Verified at interview (I), by application (A) or by a test (T)

Essential:

1. Qualifications

- Minimum GCSE English and Maths or equivalent (I), (A)
- NVQ level 2 or equivalent work experience in administrative or customer service (I), (A)

2. Experience

- Previous experience in reception or administrative role with customer contact and use of electronic records and databases (I), (A).
- Adult/child safeguarding level 2 (A)
- Basic life support training (A)

Or

- Completion of entry level apprenticeship training (A)

3. Attitudes and personal attributes

- positive attitude towards staff and customers / patients (I), (A), (T).
- ability to take initiative and prioritise workload (I),(A),(T).
- ability to work under pressure and meet deadlines (I),(A),(T).
- good interpersonal skills (I), (A)
- respect for confidentiality (I), (A)
- ability to deal with conflict and distress (I)
- ability to work in a challenging and changing environment, responding quickly and flexibly to new developments (I),(A).
- a willingness to learn and develop within the organisation (I), (A)

4. Communication skills

- good level of literacy, e.g. able to construct accurate letters and give written information as memos; meeting notes and action plans; emails and reports (I),(A),(T)
- able to input into computer databases and use these systems effectively and efficiently (I),(A),(T).

- able to communicate clearly in person and on the telephone with a range of audiences (I),(A),(T)
5. Team-working
 - able to work constructively within a team to meet objectives (I),(A)
 6. Information management & technology
 - able to use electronic records and databases, relevant software packages and associated electronic devices and equipment (such as telecare devices) as specific to the organisation (I),(A),(T).

Desirable

1. Qualifications
 - Customer Service qualification (I),(A).
 - ECDL Part 1 & 2 (plus unit E) or equivalent (I),(A).
2. Experience
 - Satisfactory completion of Band 2 Receptionist/Administrator NHS training programme, with recommendation to progress from employer through appraisal process (I),(A).
3. Skills and Attributes
 - To have, or be willing to work towards, a relevant clerical / administrative qualification (e.g. NVQ Admin level 3, RSA3 or equivalent) (I),(A).
4. Knowledge:
 - An understanding of physical / mental health care provision, together with an awareness and appreciation of current NHS policy and priorities in relation to mental health services (I),(A).

Appendix 2: Job description Band 3 / 4

Job Description

Job Title: Patient Liaison Officer / Case Manager / Ward Clark / Health Champion / Emergency Medical Dispatcher

Grade: Band 3/4

Reports to: Organisation Manager / Service delivery lead

Job purpose:

The post holder, as a member and representative of the organisation, will have direct contact with service users and will be instrumental in ensuring that plans for individual service users, and information that the organisation wishes to share with its clients / patients, are enabled and enacted. The post holder will have excellent communication skills, to ensure that every contact counts, through a range of media (telephone; face-to-face; IT) and will demonstrate excellent customer care through commitment to follow-through of established plans to improve health/customer outcomes.

He/she will have sound knowledge of local services and providers; maintain an up to date database of this information, and understand how to access these services. He/she will have knowledge of health promotion issues and current locality initiatives and be able to offer this information to clients/patients. He /she will be able to deal with complex information, using knowledge of local services and pathways to signpost clients to appropriate agencies. Acting as the client's advocate, they will be able to make brief assessments of client needs, and be able to recognise emergencies and urgent need, both for physical and mental health problems.

The post holder will be responsible for ensuring care plans are implemented, keeping accurate and relevant records and communicate progress or any problems with managerial or clinical staff, as appropriate. They will be competent in the use of computer databases; audit, and in the production of reports and updating of care plans. They will be able to organise and run meetings (one-to-one or groups), from administrative aspects to delivery and to evaluate outcomes, feeding back to senior members within the organization.

**Communications and Working Relationships:
(These will depend on specific jobs)**

Key Responsibilities

1. To develop a thorough knowledge of the employing organisation and to work in accordance with written protocols.
2. To implement agreements and policies concerning data sharing and client/patient consent.
3. To provide excellent customer care, demonstrating empathy; patience and an holistic approach to client/patient care, with commitment to follow-through of care plans and building effective working relationships.
4. To be able to triage calls, directing clients / patients appropriately to relevant personnel / services.
5. To have excellent communication skills, with the ability to communicate in writing (letters and electronically) and verbally with a wide range of providers and users of services, including patients; carers; voluntary; social; primary and secondary care providers.
6. To have a sound and up to date knowledge of local health and social care policy, together with service availability and how to access those services.
7. To maintain an accurate database of services available to clients/patients.
8. To understand, and be able to disseminate, health promotion information, using this to identify clients who might benefit from these services and to signpost accordingly.
9. To keep accurate records of all client/patient contacts, using the organisation databases and templates as directed, updating as necessary.
10. To be able to carry out audit of organisation and own activities; coordinate satisfaction surveys; produce reports and give presentations within the organisation and locality.
11. To be able to organise and facilitate meetings for the organisation and for clients/patients (on a one-to-one or group basis) - such as carers groups - and to be able to take minutes of such meetings.
12. To understand the common needs and safeguarding issues of vulnerable patient groups, including the elderly; housebound and those with long-term conditions, including physical and mental disabilities.
13. To understand the legal; ethical and regulatory principles of the NHS, and know personal boundaries and when to seek help.
14. To be aware of own impact in the process of care; the need for reflection on practice and resilience when faced with challenging situations.
15. To understand the importance of confidentiality.
16. To respond appropriately in emergency situations.
17. To report any incidents that might compromise health and safety for self, other staff or customers/patients.

18. To take part in annual appraisal, developing a personal development plan, from which training needs will be identified and training undertaken.
19. To assist in the training of other colleagues where appropriate.
20. To work in accordance with Equal Opportunities Policy; Data Protection; Health and Safety, an organisational dress code.
21. Other liaison / health promotion activities as agreed with the organization.

Person Specification

Verified at interview (I); by application (A), or by a test (T)

Essential

1. Qualifications

- Minimum GCSE English and Maths or equivalent (I),(A)
- Secretarial qualification or demonstrable experience at NVQ Admin level 3, RSA3 or
- equivalent (I),(A)

2. Experience

- Previous experience in reception or administrative role with customer contact and evidence of
- ability to use initiative and work independently (I),(A),(T)
- confident in communication through a wide range of channels and competence in use of
- relevant IT databases (I),(A),(T)
- current Adult and Child Safeguarding training level 3 (A)
- Basic life support training (A)

or:

- Satisfactory completion of Band 2/3 Receptionist/Administrator NHS training programme, with recommendation to progress from employer through appraisal process (A)

3. Attributes and personal abilities

- positive attitude towards staff and customers / patients (I),(A),(T).
- ability to take initiative and prioritise workload (I),(A),(T).
- demonstrate effective organisational skills (I),(A)
- ability to work under pressure and meet deadlines (I),(A),(T).
- good interpersonal skills (I),(A).
- commitment to effective communication and attention to detail (I),(A),(T)
- respect for confidentiality (I),(A)

- able to deal with conflict and distress (I)
- ability to work in a challenging and changing environment, responding quickly and flexibly to
- new developments (I),(A).
- ability to problem solve (I),(A),(T)
- a willingness to learn and develop within the organisation (I),(A).

4. Communication Skills

- confident in communication methods and able to communicate effectively with a range of customer and provider groups (I),(A),(T)
- confident in the use of computer databases and able to record information accurately and in a timely manner (I),(A),(T)
- able to convey clear messages to seniors in the organisation; customers/patients/carers, and other provider agencies, including the production of reports and giving presentations (I),(A),(T)

5. Team-working

- Able to relate to, and work with, all professional and non-clinical staff within the organisation (I),(A).
- Able to motivate other team members to support care plan and health promotion initiatives (I),(A).
- Able to demonstrate an understanding of own impact on the process of care, and resilience when faced with challenging situations (I), (A).

6. Information management & technology

- able to use electronic records and databases, relevant software packages and associated electronic devices and equipment (such as telecare devices) as specific to the organisation (I),(A),(T).

Desirable

1. Qualifications

- Education to A level in at least 2 subjects or equivalent (A)
- Evidence of consistent pattern of learning from education and experience (I),(A)
- Ability to move between sites in a timely manner (A)

2. Experience

- Satisfactory completion of training at Band 2/3 (Receptionist/Administrator) in NHS non-clinical staff training programme (I),(A)

3. Skills and Attributes

- Able to work independently and make sound judgements ((I),(A),(T)
- Strong organisational skills in planning and co-ordination of care for clients (I),(A)
- A willingness to work towards advanced clerical / administrative qualifications (I),(A)

4. Knowledge

- An understanding of physical / mental health care provision, together with an awareness and appreciation of current NHS policy in relation to mental health services (I),(A).

Appendix 3: Job description Band 4/5

Job Description

Job Title: Care Navigator / Case Manager / Senior Ward Clark / Senior Health Champion / Personal Assistant / Medical Assistant

Grade: Band 4/5

Reports to: Organisation Manager / Service delivery lead

Job purpose:

The post holder, as a member and representative of the organisation, will take primary responsibility for assessment; development and co-ordination of plans for individual, and groups of, service users; monitoring those services and their impact on client care, giving feedback on outcomes and client satisfaction to the organisation. They will work with colleagues from across a number of services in developing a multi-disciplinary approach to patient care, ensuring an holistic approach is taken. Fundamental to this approach will be ensuring that services work together to provide a seamless service which adds both financial and patient value, reduces unnecessary duplication and builds relationships between services. The post holder will have excellent literacy and IT skills, being confident in the use of risk stratification tools to identify at risk client groups; conducting audits and producing reports at a strategic level that will guide developments within the organisation.

The post holder will have excellent communication skills in a multi-professional environment, being an advocate for clients, and able to negotiate with both clients and providers, to achieve best outcomes. They will have a good understanding of risk in physical and mental illness to prioritise need, making and receiving referrals as required. They will provide both emotional support for vulnerable clients, and motivational skills to support change management and create a supportive working environment for both the organisation and service users. They will understand their impact their own actions on those they seek to help and colleagues, and have resilience to cope in challenging situations.

They will have a sound knowledge of health and social care policy, together with local services and health promotion initiatives, that will enable the safe transfer of clients between different provider services, and the integration of services from different providers where indicated.

Communications and Working Relationships:

(These will depend on specific jobs)

Key Responsibilities

1. To have a thorough knowledge of the organisation and its strategic aspirations, to work in accordance with written protocols and to contribute to the development of new policies.
2. To provide excellent customer care, acting as the client advocate; taking and receiving referrals; prioritising need and ensuring a smooth delivery of appropriate services
3. To understand the principle of assessment for vulnerable patients, particularly those with mental health needs and long term conditions, and to maintain awareness of safeguarding issues
4. To use risk stratification, or other, tools, as necessary, to identify at risk groups and individuals to target for health promotion or welfare interventions.
5. To take both clinical and social histories from clients in sufficient detail to enable effective and timely intervention, and to use this information to develop care/action plans, in negotiation with them and provider agencies
6. To have a sound and up-to-date knowledge of health and social care policy, at national and local level, and of available local services, in order to be able to advise within the organisation and signpost clients to access services or manage their own care (e.g. personal budgets)
7. To be able to work confidently in a multi-professional environment, being fluent in medical; social care and lay terminology, and able to produce reports and presentations that are meaningful to all.
8. To provide emotional support for vulnerable clients in crisis (patients or carers) and timely onward referral.
9. To be able to organise and chair multi-professional meetings and case reviews, producing summaries for senior management and clinicians.
10. To have a sound knowledge of current health promotion initiatives, delivering both health promotion advice and monitoring progress, through motivational interviewing both opportunistically and through targeted intervention.
11. To understand the legal; ethical and regulatory principles of the NHS, and know personal boundaries and when to seek help.
12. To respond appropriately in emergency situations.
13. To be self-aware and demonstrate resilience in the face of challenging situations.
14. To report any incidents that might compromise health and safety for self; other staff or clients / patients
15. To monitor performance of the organisation within the scope of own work and ensure those standards are met.
16. To be able to undertake developmental training of other staff as required.

17. To take part in annual appraisal, developing a personal development plan, from which training needs will be identified and training undertaken.
18. Other activities, as agreed with the organisation.

Person Specification

Verified at interview (I); by application (A), or by a test (T)

Essential

1. Qualifications

- Minimum A level education with English and Maths at C grade or above at GCSE (I),(A).
- Has the ability to move between sites in a timely manner (I),(A).
- Secretarial and/or I.T. qualification at NVQ Admin level 3, RSA3 or equivalent experience (I),(A)
- Adult and Child Safeguarding - level 3 training (A)
- Basic life support training (A)

2. Experience

- More than 3 years of experience working in health, social care or information and advice, in direct contact with people, families and carers in a paid or voluntary capacity (I),(A)
- Experience of working in a multi-professional environment in the health; social or voluntary care sectors (I),(A).
- Experience delivering services to vulnerable clients with long term conditions and/or mental health conditions (I),(A)
- Experience in collating data; audit and producing and presenting reports (I),(A) or:
- Satisfactory completion of Band 4 NHS non-clinical staff training programme (as above) with recommendation to progress from employer through appraisal process (A)

3. Attributes and personal abilities

- Positive attitude towards staff and clients / patients (I),(A),(T)
- Ability to work under pressure and meet deadlines (I),(A),(T)
- Excellent interpersonal skills and diplomatic when dealing with sensitive matters (I),(A)
- Commitment to effective communication and attention to detail (I),(A),(T).
- Respect for confidentiality (I),(A)
- Able to deal with conflict and distress (I)

- Able to work in a challenging and a changing environment, responding quickly and flexibly to new developments (I),(A)
 - Able to work independently, making judgements and working pro-actively, within the organisation premises or client residence (I),(A),(T)
 - Strong organisational skills, with ability to plan; prioritise; monitor progress; produce reports; identify gaps in services and opportunities for development (I),(A),(T)
 - A willingness to learn and develop within the organisation (I),(A)
4. Communication Skills
- Confident in communication methods and able to communicate effectively with a range of customer and provider groups, verbally and in writing (I),(A),(T).
 - Proficient in the use of negotiation and motivational skills to promote health and ensure services are used efficiently and effectively (I),(A),(T)
 - Diplomatic when dealing with sensitive information or managing potential conflict (I),(A),(T)
5. Team-working
- Able to relate to and work with all professional and non-clinical staff within the organisation (I), (A).
 - Able to motivate other team members to support organisational developments and health promotion initiatives (I),(A).
 - Confident in organising and chairing multi-professional meetings and case conferences (I),(A)
 - Highly organised and reliable and willing to take responsibility for own actions (I),(A)
6. Information management & technology
- able to use electronic records and databases, relevant software packages and associated electronic devices and equipment (such as telecare devices) as specific to the organisation (I),(A),(T).

Desirable

1. Qualifications
- Education to degree level or equivalent (A)
 - Evidence of leadership training in previous work (I),(A).
2. Experience

- Satisfactory completion of training at Band 3/4 (Patient Liaison Officer / Case Manager / Ward Clerk / Health Champion) in NHS non-clinical staff training programme (I),(A)
- Evidence of project management (inputting and analysing data; evaluating projects and producing reports (I),(A)
- Experience working with vulnerable clients with complex physical; mental and social care needs (I),(A)

3. Skills and attributes

- A positive approach to change and change management (I),(A)
- Able to see opportunities for improvement (I),(A)
- Able to recognise and manage risk (I),(A).
- Able to lead on specific projects (I),(A).
- Able to use negotiation and motivational skills with clients and staff (I),(A)

4. Knowledge

- An understanding of physical / mental health care provision, together with an awareness and appreciation of current NHS policy in relation to mental health services (I),(A)

Appendix 4: Job description Band 5/6

Job Description

**Job Title: Care navigator supervisor / Care connector / Organisation manager /
Service delivery lead**

Grade: Band 5/6

Reports to: Organisation lead / Senior management / Board

Job purpose:

The post holder will be responsible for the development and delivery of systems of working that improve the client's experience and outcomes within the health and welfare sectors. They will oversee the performance of the non-clinical workforce within the organisation; being responsible for the recruitment and induction of non-clinical staff (including the voluntary sector); for monitoring standards, and developing staff through a robust appraisal process and regular supervision. They will contribute to service planning, (through research; identification of new ideas; development of business plans, and presentation) at a senior level and be responsible for managing projects and associated budgets, and evaluating outcomes. The post holder will be able to manage the coordination of complex care needs, engaging appropriately with health and social care teams, and the voluntary sector, to reduce avoidable crises. They will have excellent communication and negotiation skills, being able to contribute to service development across different organisations and within a multi professional environment

Communications and Working Relationships:

(These will depend on specific jobs)

Key responsibilities

1. To have a sound and up-to-date knowledge of health and social care policy (including public health priorities) at all levels and an appreciation of how this affects the organisation, and both know of, and be able to negotiate with, local service providers, regarding local service provision.
2. To contribute to the development of strategic aspirations for the organisation, and protocol development for non-clinical staff members within the organisation.

3. To identify opportunities for service improvement, particularly within the non-clinical framework, and to develop business plans to implement improvements.
4. To manage projects and associated budgets, producing interim and final reports; making best use of resources and meeting deadlines.
5. To be a central care co-ordinator for care planning, being able to assess and manage complex care needs within vulnerable client groups, negotiating with clients; carers and multiple provider agencies, and ensuring smooth handover between agencies.
6. To promote enthusiasm and commitment of staff within the organisation to providing best care for clients.
7. To provide supervision and mentorship for non-clinical staff, including voluntary staff, engaged in client signposting / liaison and care navigation roles.
8. To deliver an effective appraisal process for non-clinical staff, ensuring that recommendations for training and development are acted upon.#
9. To be able to organise and chair strategic meetings; producing and presenting reports; audits and evaluation of projects as required.
10. To be able to work confidently in a multi-professional environment and fluent in medical; social care and lay terminology.
11. To understand legal; ethical and regulatory principles of the NHS, and demonstrate understanding of confidentiality; equality and diversity.
12. To know personal boundaries and when to seek help.
13. To understand the impact of 'self' in all interactions, with colleagues and patients/clients, and demonstrate resilience when faced with challenging situations.
14. To respond appropriately in emergency situations.
15. To address issues raised in respect of health and safety for self; other staff or clients.
16. To take part in annual appraisal, developing a personal development plan, from which training needs will be identified and training undertaken.
17. Other activities as agreed with the organisation.

Person Specification

Verified at interview (I); by application (A), or by a test (T)

Essential

1. Qualifications
 - Relevant degree or equivalent of training and experience (I),(A)
 - Evidence of consistent pattern of learning from education; training and experience (I),(A)
 - Evidence of leadership training and/or leadership activities in previous work (I),(A)

- Evidence of excellent administrative and I.T. skills with ability set up systems and processes and monitor performance (I),(A),(T).
- Has the ability to move between sites in a timely manner (I),(A)
- Adult and child safeguarding - level 3 training (A)
- Basic life support training (A)

2. Experience

- At least 5 years of experience in health or social care, in direct contact with clients, in a paid or voluntary capacity (I),(A).
- Co-ordination of services from a range of different organisations in a multi-professional environment (I),(A)
- Ability to work effectively and build relationships with a wide variety of people. (I),(A)
- Experience of working with vulnerable clients with complex needs, including mental health and long-term conditions (I),(A).
- Project management; managing budgets; evaluating outcomes; analysing data and producing and presenting reports (I),(A),(T)
- Demonstrated successful outcomes and meeting deadlines (I),(A)
or
- Satisfactory completion of Band 5 NHS non-clinical staff training programme with recommendation to progress from employer through appraisal process (I),(A).

3. Attributes and personal abilities

- Able to motivate and support staff and clients (I),(A).
- Excellent interpersonal skills and diplomatic when dealing with sensitive matters (I),(A),(T)
- Able to deal with conflict, complaints and distress (I),(A).
- Ability to recognise and manage risk (I),(A),(T)
- An understanding of confidentiality and its importance (I)
- Highly organised; adaptable and flexible; able to plan; monitor progress (I),(A),(T)
- Able to prioritise (I), (A),(T)
- A positive approach to change and change management (I).(A).
- Self-motivated and able to work independently and under pressure (I),(A).
- Able to make judgements; use initiative, and take responsibility for own actions and seek advice when appropriate (I),(A)
- Able to share information and good practice appropriately (I),(A)
- Able to promote equality and diversity principles (I),(A).
- Willingness to learn and develop within the organisation (I),(A)
- Able to see opportunities for improvement (I),(A),(T).

4. Communication skills

- Confident in communication methods and able to communicate effectively with a range of clients and provider groups verbally and in writing (I),(A),(T).
- Able to undertake staff appraisals in a supportive and constructive way and facilitate change where appropriate in staff members (I),(A),(T)
- Able to mentor staff and monitor progress, being proficient in giving feedback, both at appraisal and in supervision (I),(A),(T)
- Proficient in use of negotiation and motivational skills with both clients and staff (I),(A),(T)
- Diplomatic when dealing with sensitive information or managing potential conflict (I),(A),(T)
- Understands the importance and limits of confidentiality (I),(A)

5. Team-working

- Able to relate to and work with all professional and non-clinical staff within and outside the organisation (I),(A)
- Able to lead in specified projects (I),(A)
- Able to motivate others (I),(A)
- Able to use initiative and develop new ideas to improve client services (I),(A),(T)
- Confident in organising and chairing meetings (I),(A)

6. Information management & technology

- able to use electronic records, databases, spreadsheets relevant software packages and associated electronic devices and equipment (such as telecare devices) as specific to the organisation and job requirements (I),(A),(T)

Desirable

1. Qualifications

- Healthcare management qualification (AMSPAR etc.) or working towards such qualification (I),(A)
- Training in employment law and regulations (I),(A)

2. Experience

- Satisfactory completion of training at Band 4/5 (Care navigator ./ Case Manager /etc) in NHS non-clinical staff training programme (I),(A).
- Experience of leading projects at managerial level, and strategic decision-making within previous employment (I),(A)

3. Skills and Attributes

- A good understanding of leadership styles as applied to self and the organisation (I),(A)

- A commitment to continuing career development within the health and social care service (I), (A)
4. Knowledge
- A comprehensive understanding of physical / mental health care provision and current NHS policy, together with a strategic view of potential future developments and implications for the organisation and clientele (I),(A).

Table 1: Competencies and Core Functions at Each Care Navigator Level

(Entry level Apprenticeship Training or equivalent expected before Level 1)

COMPETENCY	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
Effective communication	<ul style="list-style-type: none"> -Telephone skills -Listening skills -Recording and responding to information and requests -Proactive patient contacts -Understanding cultural needs 	<ul style="list-style-type: none"> -Understand and able to use common health and social care terminology -Able to communicate in multiple formats in order to engage a variety of patients / clients / agencies / professionals 	<ul style="list-style-type: none"> -Skills in enquiry and interpretation of information to identify areas of concern or risk -Able to give and receive feedback -Able to negotiate with colleagues; patients and external providers 	<ul style="list-style-type: none"> -Skilled in negotiation and planning at strategic level -Able to lead teams in patient / client care
Managing information	<ul style="list-style-type: none"> -Managing complex information and requests -I T skills :- Appointments / diaries/ prescriptions / medication / registrations Information governance -Managing documents and data -Accountability -Follow-through -Effective handover -Attention to detail 	<ul style="list-style-type: none"> -Collating data -Writing reports -Managing databases -Understanding basic principles of audit -Able to take minutes in meetings -Able to develop monitoring systems -Understanding of the Data Protection Act -Able to implement action points from care plans 	<ul style="list-style-type: none"> -Able to use risk analysis software -Able to develop, implement and monitor care plans with patients /clients -Able to receive and prioritise referrals 	<ul style="list-style-type: none"> -Able to monitor standards; and carry out quality improvement projects -Able to plan services and manage budgets -Able to evaluate outcomes of organisation activities in providing care for vulnerable groups

(Entry level Apprenticeship Training or equivalent expected before Level 1)

COMPETENCY	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
Protecting patients	<ul style="list-style-type: none"> -Health and safety at work -Basic life support -Safeguarding children and adults - level 2 -Recognising and alerting appropriate others to emergencies - physical, social and mental health -Confidentiality 	<ul style="list-style-type: none"> -Managing vulnerable / distressed people / mental health patients/ carers, through communicating with in and outside own organisation -Able to respond appropriately in crises -Safeguarding children and adults - level 3 -End of life care - level 2 -Mental health training - level 2 -Understanding of potential problems and barriers to care associated with disability, learning disorder and dementia 	<ul style="list-style-type: none"> -Understanding principles of assessment for vulnerable patients -Understanding the impact on health of long term conditions including mental health -Able to manage a caseload of stable patients/clients with long term conditions 	<ul style="list-style-type: none"> -Able to manage complex care needs -Knowledge of local and national public health issues -Able to receive and manage complaints, referring to clinicians or senior management where necessary
Organising and networking skills	<ul style="list-style-type: none"> -Understanding the organisation, protocols and procedures -Organisation security -Understanding the organisation within the broader concepts of health and welfare services -Awareness of local services and how to access them 	<ul style="list-style-type: none"> -Able to access local resources and signpost appropriately from a range of options -Updating local services register -Understanding local health and social care policy -Able to give presentations within own organisation 	<ul style="list-style-type: none"> -Able to write reports; make case for change and generate proposals -Able to produce and present reports and audit in strategic meetings -Understanding of multidisciplinary team working and able to network across traditional provider boundaries (including voluntary sector) -Able to chair multi professional meetings and reviews 	<ul style="list-style-type: none"> -Able to recruit and be responsible for induction of junior non-clinical staff -Able to contribute to strategic planning at managerial level -Skills in project management

(Entry level Apprenticeship Training or equivalent expected before Level 1)

COMPETENCY	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
Motivation and supporting skills	<ul style="list-style-type: none"> -Able to demonstrate empathy and compassion -Able to deal with distressed patients /clients and manage conflict -Recognition of mental health impact on welfare 	<ul style="list-style-type: none"> -Able to co-ordinate meetings / arrange case reviews and understand their functions -Able to run defined group sessions (e.g. carers groups) -Understanding of health promotion: purpose, methods and impact -Motivational interviewing skills 	<ul style="list-style-type: none"> -Skills in education and training for patients and level 1 and 2 care navigators -Skills in advocacy and enabling for patient / clients -Understanding of social care and personal budgets -Motivational interviewing skills 	<ul style="list-style-type: none"> -Able to mentor junior staff, offering advice on role responsibilities and career development within the organisation. -Able to debrief with junior staff -Able to coordinate and run appraisal system for non-clinical staff
Developing effective relationships	<ul style="list-style-type: none"> -Commitment to person-centred working -Reliability -Honesty and integrity -Team working 	<ul style="list-style-type: none"> -Ability to engage patients in discussion to encourage healthy choices -Able to manage regular contacts and reviews, supporting patients and carers -Team working - decision-making and responsibility 	<ul style="list-style-type: none"> -Able to facilitate supportive working environment for all staff including volunteers -Able to supervise junior staff -Able to provide emotional support for distressed patients / carers -Able to support vulnerable patients post hospital discharge 	<ul style="list-style-type: none"> -Able to supervise junior staff -Able to manage workforce capacity / line management / dispute resolution
Self-awareness	<ul style="list-style-type: none"> -Prioritising -Time management -Stress management / resilience -Making judgements -Defining boundaries -Personal support 	<ul style="list-style-type: none"> -Able to monitor impact of own work -Knowing own limitations and how to debrief - Resilience 	<ul style="list-style-type: none"> -Self-confident in relating to colleagues and patient /clients -Self-directed in seeking learning opportunities for development -Able to reflect on own work and learning 	<ul style="list-style-type: none"> -Able to reflect on own practice and that of others -Able to use tact and diplomacy in dealing with sensitive issues
Ethical practice	<ul style="list-style-type: none"> -Understanding stigma and discrimination in social and health care -Understanding own prejudices 	<ul style="list-style-type: none"> -Understanding of legal, ethical and regulatory principles of the health and social care system 	<ul style="list-style-type: none"> -Able to act as a role model for junior staff -Understanding of cultural needs of specific populations 	<ul style="list-style-type: none"> -Able to evaluate proposals for new developments within ethical principles

