Skills for Health

Mapping of the NHS Yorkshire and the Humber *Prevention and Lifestyle Behaviour Change – A Competence Framework*

A report summarising the NOS mapping undertaken in partnership between Skills for Health and NHS Yorkshire and the Humber

Summary

Skills for Health have been commissioned by NHS Yorkshire and the Humber to undertake a mapping of the competences contained in the *Prevention and Lifestyle Behaviour Change A Competence Framework (© February 2010).* The aim of this work is to identify relevant National Occupational Standards (NOS) that apply and indicate where there may be gaps, within available national provision, requiring the development of new NOS or the review of existing NOS to meet the requirements of this framework.

The *Prevention and Lifestyle Behaviour Change: A Competence Framework* is a core component of NHS Yorkshire and the Humber's key Public Health strategy *Making Every Contact Count*. The framework is essentially a commissioner led framework for service and workforce change. It describes the function or activity levels and minimum competences required by the workforce to enable them to develop their skills in addressing the health and wellbeing needs of the local population in areas such as:

- Long term conditions
- Smoking
- Falls prevention
- Alcohol
- Obesity management
- Medicines management
- Physical activity
- Mental health and emotional wellbeing

The framework draws mainly on existing competences developed by Skills for Health and other skills bodies. Locally adapted competences have been developed by adapting existing health sector National Occupational Standards (NOS) where gaps have been identified. These locally adapted competences have been developed to replicate the general style of existing health sector NOS. The framework has not been produced for commercial gain; in fact quite the contrary, as the framework is designed to support all staff and organisations in the delivery of this important public health agenda. This framework will enable a common approach across all elements as everyone will be able to use the same base. Skills for Health hold the copyright for all National Occupational Standards. Skills for Health agrees that the *Prevention and Lifestyle Behaviour Change: A Competence Framework*, produced by NHS Yorkshire and the Humber can use any content from Skills for Health developed National Occupational Standards on the condition that Skills for Health are referenced as the original sources of these National Occupational Standards. This includes any further development of any competence framework based wholly or partially on Skills for Health developed National Occupational Standards.

Skills for Health reviewed in detail the competences contained within the framework and mapped them to our Health Functional Map and then to other potentially relevant NOS. Four of the competences in the framework were presentations of NOS at the time of the frameworks publication in February 2010. In June 2010 Skills for Health published updated NOS; therefore these four competences could be mapped directly. For the locally adapted competences, we also searched the entire database of UK NOS held by UKCES and failed to find any suitable mapping.

There are several possible reasons for the inability to map many of the competences in the framework to NOS. Principally it appears to be the way in which NOS have been developed and expressed by Skills for Health and all other Sector Skills Councils. NOS are developed as solutions for employment. They support employers as a tool to aid the development of competent employees so that the performance of an employee can be observed i.e. that the employee behaves in a particular way or undertakes particular actions – i.e. communicates with, supports the individual to, etc.

The perspective of the employee coming from 'where the individual is at' and embracing the government commitment that public health is everyone's business requires a comprehensive review of any potential NOS. Any such changes will have implications for changes to job descriptions, workforce profiles, workforce development programmes, etc, across organisations, which have cross sectorial working such as organisations that work with Skills for Care, Skills for Justice, and other agencies. Therefore, any review would have to be in conjunction with a myriad of stakeholders, who already have demonstrable ownership in the use of the existing NOS in their current form. As a result a review of potentially appropriate NOS has implications, and would require requests from a number of organisations that currently use the existing NOS, as to the need to review them. This would also require support from these organisations to change the focus or perspective of the relevant NOS.

At the time of this review it is not possible to provide a time frame for the review of the NOS that could potentially apply to *The Yorkshire and Humber – Lifestyle Behaviour Change Competence Framework*.

Contents **Page No**

Summary	……	2
Contents	……	3
1	Introduction ……	4
2	About Skills for Health ……..	4
3	Project Aim ……	4
4	Methodology ……..	5
5	Findings ……..	5
	5.1 The Generic Competences: Level 1 ……	5
	5.2 The Generic Competences: Level 2 ……	6
	5.3 The Generic Competences: Level 3 ……	7
6	Conclusions ……	8
7	Recommendations ……	8
8	Acknowledgements……	8

1 Introduction

This report has been commissioned by NHS Yorkshire and the Humber.

Whilst undertaking the detailed comparison of the content of the competences within the framework we took account of the following underpinning principles:

- It 'comes from where the individual is'
- Many people have multiple or complex lifestyle issues
- Primary and secondary prevention
- The competences are intended to be generic and applicable for the whole workforce
- Not built around the functions delivered by any specific professional
- Lifestyle issues are not condition specific
- Behaviour change as a function of a role and not just a specific defined role
- The framework is a service and workforce change model

We also took account of the discussions that we had during the work with Karen Payne, Clare de Normanville and Vince Ion. What became clear was that the approach adopted to develop the competences within the framework, whilst different in some respects and, could be perceived by some as more progressive; the approach nevertheless followed traditional testing routes, thus ensuring that the competences are robust and fit for the purpose for which they had been developed.

2 About Skills for Health

Skills for Health are the Sector Skills Council for the whole of the United Kingdom's health sector. Our remit covers those health employers who operate in the public, private and voluntary sectors.

A core activity for Skills for Health is the development of competences known as National Occupational Standards (NOS). NOS focus on what a person needs to be able to do, as well as what they must know and understand to work effectively.

Our NOS are designed to allow people to assess and be assessed against them. In order to do that NOS must be:

- a single task
- able to be undertaken by one individual
- measurable
- observable

Our database of approximately 2,500 NOS include those we have developed to support direct patient care and also include those imported from other Sectors that are relevant to health e.g. administration, management and leadership, IT, record keeping, analysis etc. It is to this database that we have mapped the competence framework.

3 Project Aim

The remit of the project was to:

- Map the five locally developed competences contained within the Prevention and Lifestyle Behaviour Change competence framework to relevant NOS.
- Map the two locally developed competences which are identified as adaptations of the Common Core Principals to Support Self Care (Skills for Health and Skills for Care, 2008) to relevant NOS.
- Map the specific presentations of the two Public Health NOS to ensure that the mapping is still relevant even though when used in *The Prevention and Lifestyle Behaviour Change Competence Framework* they are specific presentations.
- Identify any gaps in the current NOS and to offer a timescale for addressing these gaps.
- Deliver to the Regional Public Health Workforce Advisory Group a concise report, covering the above outputs.

4 Methodology

A desk-based exercise was undertaken to identify the relevant NOS that may be applicable to the framework. This included extremely useful telephone discussions with Karen Payne at NHS Yorkshire and the Humber, Clare de Normanville from Sheffield Hallam University and Vince Ion of True Blue Consultancy. A review of those NOS already identified within the competence framework was undertaken, as well as searching our own NOS database and the wider UKCES NOS database for suitable competences that address the gaps suggested within the framework where locally developed competences had been developed. The detail of the identified NOS was then critically reviewed in comparison with the detail contained within the competences in the framework.

5 Findings

Following the mapping of the competences to potential NOS, the following issues were noted:

5.1 The Generic Competences: Level 1

Prevention and Lifestyle Behaviour change: a competence framework: competence	Skills for Health mapping	Finding and suggested action
Competence 1.1: Ensure individuals are able to make informed choices to manage their self care	Potentially addressed through NOS PE1 Enable individuals to make informed health choices	On further investigation PE1 does not quite map as self care is directed by the person and this NOS identifies the competence needed by someone delivering a function
Competence 1.2: Support and enable individuals to access appropriate information to manage self care needs	Potentially addressed through NOS HSC26 – Support individuals to access and use information	On further investigation the performance criteria do not go into the same level of detail as Competence 1.2. and the NOS identifies the competence needed by someone delivering a function whilst self care is directed by the person.
Competence 1.3: Communicate with individuals about promoting their health and wellbeing	NOS HT2 - Communicate with individuals about promoting their health and wellbeing	HT2 replaced PH02.01. The final version was approved in June 2010 after the competence framework had been developed. We would suggest that the framework be updated with the final version
Competence 1.4: Provide opportunistic brief advice	Appears to be covered by NOS GEN14 – Provide advice and information to individuals on how to manage their own condition.	On further investigation giving brief advice is a very specific approach. GEN 14 is too broad for use in this context. The approach that underpins this NOS was found to be inappropriate for delivering behaviour change i.e. smoking is not a condition and alcohol is not a condition, they are lifestyle choices. GEN14 as a map to 1.4 can only be addressed when the NOS is revised.

5.2 The Generic Competences: Level 2

Prevention and Lifestyle Behaviour change: a competence framework: competence	Skills for Health mapping	Finding and suggested action
Competence 2.1: Ensure your own actions support the care, protection and well-being of individuals	Is an adapted version of NOS HSC24 - Ensure your own actions support the care, protection and well-being of individuals. Final version approved August 2009	Our recommendation is to refer the user HSC24 in its entirety and include in the framework document guidance required to enable it to be used within the specific context.
Competence 2.2 Select and implement appropriate brief lifestyle behaviour change techniques	Select and implement appropriate brief lifestyle behaviour change techniques is a required component of NOS HT3 that was approved in June 2010 – Enable individuals to change their behaviour to improve their own health and wellbeing.	The knowledge and understanding statement 14 in HT3 states "how to use a range of techniques to support individuals in achieving their personal action plan"… On further investigation however, HT3 lacks the specificity detailed in this adapted competence. The inappropriateness of HT3 can only be addressed when the NOS is revised. HT3 as a map to 2.2 can only be addressed when the NOS is revised
Competence 2.3: Enable individuals to change their behaviour to improve their own health and wellbeing	NOS HT3 – Enable individuals to change their behaviour to improve their own health and wellbeing	Final version of HT3 approved June 2010 after the Framework was published. We would again suggest that the framework be updated with the final version
Competence 2.4 Undertake brief interventions	2.4 Locally adapted from NOS AH10 – Employ techniques to help individuals to adopt sensible drinking behaviour and NOS HT3 – Enable individuals to change their behaviour to improve their health and wellbeing.	Competence 2.4 is critical to the framework and whilst the Performance Criteria and Knowledge and Understanding statements are broadly similar to the NOS it is not possible to simply reference these two NOS because behaviour change is not condition or subject specific and must allow for a person centred approach. The mapping of 2.4 to either AH10 or HT3 or both can only be addressed when the NOS are revised.

5.3 The Generic Competences: Level 3

Prevention and Lifestyle Behaviour change: a competence framework: competence	Skills for Health mapping	Finding and suggested action
Competence 3.1: Enable people to address issues related to health and wellbeing	NOS PHP41 – Enable people to address issues related to health and wellbeing	3.1 differs slightly from PHP 41 with some changes made to Performance Criteria 6, 11 and 14. We recommend this NOS is used in its entirety with appropriate guidance included within the framework document to aid its translation to the specific work context
Competence 3.2: Enable individuals to put their choices for optimising their lifestyle behaviours into action.	NOS MH40 – Enable individuals and families to put informed choices for optimising their mental health and social well-being into action or NOS HT3 – Enable individuals to improve their own health and wellbeing	On further investigation neither MH40 or HT3 map to 3.2 because behaviour change is not condition or subject specific and must allow for a person centred approach. The mapping of 3.2 to either MH40 or HT3 or both can only be addressed when the NOS are revised.
Competence 3.3: Enable individuals to maintain lifestyle behaviour changes	Competence 3.3 is based on NOS CM.E1 – Help individuals with long term conditions to change their behaviour to reduce the risk of complications and improve their quality of life. NOS HT3 - Enable individuals to improve their own health and wellbeing	The knowledge and understanding within CM.E1 is in excess of what is required for 3.3 Particular reference to Performance Criteria 6 could be made “help individuals to: a) evaluate the changes they have made to their behaviour and the effects on their health and wellbeing; b) identify their broader learning and development; c) decide how they will take their learning forward; etc”. However Competence 3.3 is much more than what is described in Performance Criteria 6. It is about multi complex issues and the need to maintain change. A mapping of 3.3 to NOS can only be achieved when CM.E1 or HT3 are revised

6 Conclusions

The framework is a comprehensive guide applicable to the target audience. The mapping that Skills for Health has undertaken has confirmed the validity of the original NOS mapping that was undertaken to develop this framework.

Having critically reviewed the competences within the framework and the identified related NOS it is clear that the approach that the framework uses is different to the current way that NOS are developed. The reason why it has not been possible to map many of the locally adapted competences to NOS is because behaviour change is not condition or subject specific whereas many NOS are and as currently written these NOS do not allow for the person centred approach that underpins *The Yorkshire and Humber – Prevention and Lifestyle Behaviour Change Competence Framework*. In order to fully map the competences contained in the framework existing NOS will need to be revised or new NOS developed The work undertaken to produce this report provides a really good platform to support the review of existing NOS as the opportunity arises, or the development of new NOS should that ultimately prove necessary.

7 Recommendations

- In terms of the Skills for Health Functional Map it has been identified that no explicit gaps exist.

- We would recommend that when Version 2 of *The Yorkshire and Humber – Prevention and Lifestyle Behaviour Change Competence Framework* is produced, those NOS that do map are included in their entirety with the Skills for Health branding and that the locally adapted competences whilst laid out in the same style are put into plain text so it is easy for users of the Framework to see where NOS are applicable and the locally adapted competences are applicable.

- Skills for Health would welcome the opportunity following this review of the locally adapted competences to consider them together with the legacy that *The Yorkshire and Humber – Prevention and Lifestyle Behaviour Change Competence Framework* provides to embed behaviour change in everyday practice whether that is practice delivered by health, social care or other workforces who have to opportunity to do so as the existing NOS are reviewed.

- Any review of NOS has major implications that would require requests from a number of organisations that currently use the existing NOS, as to the need to review them. This would also require support from these organisations to change the focus or perspective of the relevant NOS. It is therefore not possible to currently give a time frame for the review of the NOS that could potentially support *The Yorkshire and Humber – Prevention and Lifestyle Behaviour Change Competence Framework.*

8 Acknowledgements

This report was written by Andrew Harvey, Skills for Health Regional Director, Yorkshire and the Humber using mapping undertaken by Nikki Hale, Programme Manager Skills for Health

Skills for Health would not have been able to undertake the mapping exercise and development of this report without the assistance of the following people who were key members of the original team who developed *The Yorkshire and Humber – Prevention and Lifestyle Behaviour Change Competence Framework:*

Karen Payne	Public Health Workforce Lead, NHS Yorkshire and the Humber
Clare de Normanville	Faculty lead for Public Health, Faculty of Health and Wellbeing, Sheffield Hallam University
Vince Ion	True Blue Consultancy