

# **Speciality Framework**

Physiotherapy Rehabilitation: Support Workforce

# Owner/co-owner

Scottish Government, NHS Education for Scotland (NES), Allied Health Professions (AHP) Commission working group for speciality frameworks and subgroup for physiotherapy rehabilitation.

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# **Speciality Framework for Physiotherapy Rehabilitation: Support Workforce**

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## Introduction

#### **Focus of framework**

Support workers across health and social care are a crucial part of the multi-disciplinary team, who provide care across Physiotherapy within a rehabilitation setting.

Rehabilitation means different things to different people. Here, rehabilitation refers to a wide range of approaches that include activities, interventions and information resources that support individuals to recover or adjust to achieve their full potential. It includes approaches that focus on early intervention for prevention, prehabilitation and supported self-management (Scottish Government, 2022). Often, these roles are unaligned across Scotland, with no clear education pathways or provisions.

To support this workforce, the Scottish Government have commissioned NES to develop this framework with key stakeholders.

This framework will promote a national approach to support workers working within Physiotherapy rehabilitation teams across Scotland, which will provide structure for the knowledge and skills that are required.

#### Aim and outcomes

The Physiotherapist in Rehabilitation: Support Workforce Framework, aims to articulate the knowledge and skills required to provide high quality services. In this framework we refer to the term health and social care practitioners to include support workers, registered Nurses, Midwives and Allied Health Professionals. The framework is intended to be used by health and social care practitioner's, managers, and educators to understand and develop knowledge and skills across 4 pillars of practice and career levels 3 to 4. For further information please refer to the <u>Career Framework for Health</u> model and the <u>NMAHP Development Framework</u>.

The outcome and impact of using the framework:

- Describing the knowledge and skills required within the service- the framework can
  be used by individuals developing their current and future practice; organisations
  reviewing or developing their services for their local populations; and educators
  ensuring knowledge and services meet the needs of the service.
- Providing Career Pathways the service is an emerging service offering new and
  exciting career opportunities for healthcare practitioners. The framework enables
  individuals and their managers to explore knowledge and skills required to enable
  them to benchmark their knowledge and skills and prepare for career progression
  within services. This service opens opportunities for individuals who aspire to
  horizontal or vertical career progression.
- Recruitment and Succession planning organisations developing their services can
  use the framework to help define the knowledge and skills required for current and
  future services in Scotland. Consideration of service models in other areas that
  may be transferable to their own service. Recruiting the right people who aspire to
  develop their careers within the service can provide a succession plan.

## **Background and strategic alignment**

In October 2021 the Scottish Government commissioned NES to undertake a review of career pathways for support workers working at levels 2 to 4 of the Career Framework for Health. The aim of the commission (Phase 4) relates to Allied Health Professions (AHPs) support workers. The Commission aimed to consolidate and develop the Nursing Midwifery, Allied Health Professionals (NMAHP) Development Framework for AHPs considering generic and profession or service specific (practice area) requirements and produce two agreed examples of AHP frameworks including education and training. For the purposes of this speciality framework, it was decided by the working group to concentrate on levels 3 and 4.

Therefore, to meet this Commission, this framework has been developed and coproduced by NES in collaboration with stakeholders across Scotland. Representation included health board leaders, service managers, clinicians, practitioners, health and social care support workforce, educators, Scottish Government, and NES. This approach has enabled the framework to reflect the design and delivery models of current and emerging services.

As part of the framework development process the framework was consulted on and approved by the national stakeholder group.

## **Structure of framework**

The framework is structured to outline the knowledge, skills and behaviours necessary for practitioners working within the service, spanning career levels 3 to 4 across four pillars of practice. Each level of practice is associated with specific knowledge and skills related to these pillars.

The framework encompasses several key components, including:

- Explanations of the pillars of practice and career levels.
- Guidelines for recording learning.
- Information on delegation, support, and supervision.
- Instructions on how to utilise the framework.

Additionally, it provides role descriptors, details on educational preparation, and outlines the knowledge, skills, and behaviours required for each level of practice.

## **Pillars of practice**

The framework is based on the four pillars of practice for NMAHPs and HCSWs (figure 1). These are:

• Clinical Practice: the knowledge, skills and behaviours needed to provide high quality healthcare that is safe, effective and person-centred.

- Facilitating Learning: the knowledge, skills and behaviours needed to enable effective learning in the workplace.
- Leadership: the knowledge, skills and behaviours needed to lead and to fulfil management responsibilities.
- Evidence, Research and Development (Service Improvement): the knowledge, skills and behaviours needed to use evidence to inform practice and improve services. Note - This pillar is also referred to as Service Improvement for HCSWs.



Figure 1: Pillars of Practice

Further explanation of the pillars of practice is available within the <a href="MAHP Development">MMAHP Development</a>
Framework.

## **Levels of practice**

The framework recognises how complex healthcare practitioner's roles have become and helps to explain the difference in expectations and learning at different levels. These levels are described in the <u>Career Framework for Health</u> which reflects role development and progression. It also reflects the education and career development pathways model set out in the <u>Transforming Roles</u> programme.

These levels of practice are:

- Level 2 Healthcare Support Worker
- Level 3 Senior Healthcare Support Worker
- Level 4 Assistant Practitioner
- Level 5 Practitioner
- Level 6 Senior Practitioner
- Level 7 Advanced Practitioner
- Level 8 Consultant Practitioner

Further explanation of the levels of practice is available within the <u>NMAHP development</u> framework.

## Levels of practice and pay bands

It is important to understand that the levels of practice outlined in the framework differ fundamentally from NHS pay banding. The levels represent career progression and are not tied to the Agenda for Change (AfC) pay bands, which are determined by employers and relate to remuneration.

Health and social care workers typically operate within Levels 2 to 4 of the development framework, while Nursing, Midwifery, and Allied Health Professional (NMAHP) registrants generally fall within Levels 5 to 8.

#### **Related frameworks**

The structure of this framework builds upon the <u>NMAHP Development Framework</u> to demonstrate the knowledge, skills and behaviours required by practitioners working in the service area.

#### **NHS Scotland's Values**

Throughout this framework, the core values shared across Scotland's Health Service will be embedded. The core values include:

care and compassion

- dignity and respect
- openness, honesty, and responsibility
- quality and teamwork

(Scottish Government, 2013)

## **Scottish Social Services Council (SSSC) Values**

The SSSC core values are to:

- listen
- learn
- do the right thing

(SSSC, 2023)

## **Equality and health inequalities statement**

There is a firm commitment to improving population health, reducing health inequalities, and working nationally and locally with partners to make a positive and lasting impact to improving the wellbeing of the people of Scotland. Promoting equality and addressing health inequalities are at the heart of delivering effective and high-quality care.

Throughout the development of this framework, the three parts of the Public Sector Equality Duty have been considered (Ministry of Justice, 2012):

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- 2. advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and
- 3. foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

# **Using the framework**

The framework is designed to enhance current health and social care services by serving as a dynamic document that identifies areas for development among the workforce. It

aims to ensure that the workforce possesses the necessary knowledge and skills to deliver high-quality care tailored to the needs of their service/local populations. As health and social care demands evolve, the framework can help assess current and future requirements.

It is intended for use by NMAHP staff including health and social care support workers, managers/organisations and educators.

#### **Support Workers**

The framework can be used by Health and Social care Support Working, working or aspiring to work within the service. This includes:

- to benchmark current level of practice
- to continue to grow within current level of practice by identifying areas for development
- to guide professional development for support workers
- to customise a development plan linked directly to current and future roles
- to identify evidence to support appraisal review, personal development planning

#### By organisations and service managers

The framework can be used organisations and service managers to help develop current and emerging services. This includes:

- to align to national policy and workforce legislation
- to support service design and development and redesign
- to determine knowledge, skill, and skill mix
- to inform succession planning
- to support skills maximisation need
- to support discussions with staff e.g., career planning and professional development reviews

#### By educators

The framework can be used by educators within service and educational organisations to help prepare support workers to deliver high quality services. This includes:

- to plan and deliver education and training to meet the rapidly changing needs of healthcare practitioners
- to identify opportunities for shared, inter-professional learning
- to plan programmes of education to prepare healthcare practitioners to work at different levels of the framework
- to describe how education programmes articulate with each other

The framework also directly links to the <u>NHS Knowledge and Skills Framework</u> and can be used to support the annual development review cycle.

## **Scope of practice**

Health and social care practitioners have a responsibility to keep knowledge and skills up to date, take part in appropriate and regular learning and professional development activities that aim to maintain and develop their competence and improve their performance.

Health and social care practitioners who delegate care to others must ensure the person's knowledge, skills and competence are appropriate and safe. The resource Making delegation safe and effective: a learning resource for nurses, midwives, allied health professionals and health care support workers | Turas | Learn can be accessed on Turas Learn. The NMC and HCPC also provide guidance relating to delegation.

## **Recording Learning and development**

All practitioners are expected to maintain a professional portfolio that documents their personal and professional development. The method of recording this evidence whether electronically or on paper is a personal choice. However, it is recommended to use the Turas Professional Portfolio, which is accessible to all NMAHP staff in Scotland, including those in the NHS, social care, and voluntary and independent sectors.

Log in/register with Turas and add the professional portfolio application: https://turasdashboard.nes.nhs.scot/

More information on Turas Professional Portfolio:

Nurses - Nursing and Midwifery Professional Portfolio

Allied Health Professional - AHP Professional Portfolio

Health care support workers - <u>Turas professional portfolio | Turas | Learn</u> <u>Recognition of prior learning (RPL) | Turas | Learn</u>

#### **Support and supervision**

Support and supervision are vital to enhance confidence and competence in practice. Engaging in peer supervision, both within a team and externally with others, provides valuable support.

All health and social care practitioners should have regular supervision appropriate to their role as described in the framework KSBs. The aim of supervision is to facilitate guided reflection and learning, to support practice development and enhance work satisfaction. Employers are responsible for providing appropriate access to supervision.

Regular appraisal meetings or personal development reviews will help support the development of individuals.

# Role, education, knowledge, skills and behaviours

The framework has a section for level of practice from level 3 to level 4. The role and responsibility of staff at each level is described along with relevant qualifications and experience. The knowledge and skills are then described for each of the four pillars of practice.

For core KSBs for each pillar of practice, please refer to the <u>NMAHP Development</u> <u>Framework</u>.

The education, knowledge, skills and behaviour required by individual health and social care practitioners will differ depending on the current and emerging service need. However, these are not static and educational requirements of staff will change as services evolve. The framework provides flexibility to tailor learning to meet these individual needs.

Although the core KSBs relate directly to health care, they can also be applied to social care.

## **Level 3 Senior Support Worker**

#### **Role and Responsibility**

- Deliver delegated care, treatment or intervention with compassion, civility and kindness, under the direction and supervision (direct and indirect) of a healthcare practitioner or assistant practitioner
- Contribute to own team and the multidisciplinary / multi-agency team in the delivery of high-quality care
- Work within local policies and guidelines

Title: Senior Healthcare Support Worker

The level outline is informed by the Development and Education Framework for Levels 2 – 4 NMAHP Healthcare Support Workers

#### Qualifications and experience expected for practitioners at this level of career framework

- Can evidence previous knowledge and relevant experience using Recognition of Prior Learning
- Normally at or working towards a SCQF Level 7 qualification in a health or social care related subject
- Numeracy and literacy qualifications are required at this level of practice
- IT / computer literacy are required at this level of practice

#### **Level 3 - Clinical Practice Pillar**

Reference	Core key knowledge, skills, and behaviours
code	
3C1	Will have a broad skill base related to their practice
3C2	Will have a breadth and depth of understanding of role and related activities beyond that of a Level 2 Healthcare Support
	Worker
3C3	Has all the attributes, skills and knowledge required for a Healthcare Support Worker
3C4	Ability to adhere to the HCSW Code of Conduct in relation to consent: Telling patients and members of the public what you
	intend to do and listening carefully to what they say about it (HCSW Code of Conduct 3.2.8)
3C5	Ability to recognise risk in relation to care provision and further develop risk assessment skills

3C6	Ability to understand it is everyone's responsibility (HCSW Code of Conduct 3.2.11) to protect individuals, members of the
	public and report any concerns to a supervisor, manager or make use of the whistleblowing policy to reduce risks in the
	future
3C7	To have an awareness of and comply with core legislation and policies
3C8	Ability to understand and apply knowledge of legislation, and policies specific to area of practice
3C9	Ability to understand and apply the concepts of accountability and responsibility and be confident to accept or decline
	delegated responsibility from a healthcare practitioner or assistant practitioner
3C10	Ability to act on findings within role boundaries to ensure a person's safety
3C11	Ability to develop knowledge of infection prevention and control
3C12	Able to effectively reflect on and in practice
3C13	Recognise the effects and potential symptoms of trauma or vicarious trauma and respond appropriately. Practising at a
	minimum of Trauma Informed practice level
3C14	Ability to escalate concerns if unable to carry out their duty and responsibilities outlined within health and care staffing
	legislation. Practising at Informed level
3C15	Practice in ways which recognise and respond to health inequalities, respect diversity, and protect against discrimination
	and harassment
3C16	Use a range of skills to communicate with people about difficult matters or situations

Reference code	Speciality key knowledge, skills, and behaviours
3C17	Understanding of anatomy body systems, cognition and normal function, relevant to the job role.
3C18	Describe what normal movement is, to identify patterns of abnormal movement and identify needs for rehabilitation.
3C19	Describe the main bones, joints and muscle groups in the body and how they relate to normal movement.
3C20	Describe common causes which limit muscle function and joint range of movement.
3C21	Describe what normal function is, to identify adaptive patterns and needs for rehabilitation.
3C22	Understand the potential causes of reduced mobility e.g. falls, fracture, weakness, poor balance.

3C23	Accept and carry out delegated tasks from registered AHP for rehabilitation in relation to treatments that have locally agreed competencies for.
3C24	Record and interpret background information to fully inform pre-referral, pre-triage systems.
3C25	Implement Waiting Well Initiatives and prehabilitation to commence early intervention to avoid deterioration.
3C26	Assist with information gathering (face to face/phone calls) to gain a detailed subjective history from the individual and/or
	other sources as required (e.g. family, carers, multi-disciplinary team).
3C27	Order, fit and demonstrate equipment provision for individuals.
3C28	Carry out gait analysis on individuals and treat accordingly within your scope of practice.
3C29	Carry out the individual's treatment plan with an awareness of falls prevention and strategies (where appropriate).
3C30	Assist with stair, transfer and balance assessments.
3C31	Support wellbeing management tools i.e. Anxiety management – breathing techniques.
3C32	Review goal setting and interventions to progress rehabilitation activity programmes.
3C33	Assist with intervention/therapeutic and patient reported and experience outcome measures.
3C34	Implement onward referrals to other services e.g. leisure, third sector, support and self-help groups.
3C35	Being aware of how to apply for OT reablement/packages of care etc for patients for safe discharge.

#### **Level 3 - Facilitating Learning Pillar**

Reference	Core key knowledge, skills, and behaviours
code	
3F1	Ability to develop and maintain own knowledge and skills to provide person centred, safe and effective care with support from a healthcare practitioner or assistant practitioner
3F2	Has an awareness of methods to ensure learning has taken place e.g., 4–stage approach to teaching a clinical skill, or use of Chunk & Check / Teach Back
3F3	Ability to engage in [clinical] supervision, using reflective practice and feedback to develop the quality of care and outcomes
3F4	Engages with appraisal and creates a plan for ongoing development

Reference code	Speciality key knowledge, skills, and behaviours
3F5	Work in accordance with the AHP Practice Education Development Framework e.g. giving and receiving feedback. The AHP
	Practice Education Development Framework   NHS Educa
3F6	Provide support, supervision and preceptorship to HCSW, Newly Qualified Practitioners (NQPS) and students.
3F7	Understand the value of learning from others in the multi-disciplinary team to gain up to date clinical and speciality
	knowledge and skills and an understanding of AHP roles within the rehabilitation setting.
3F8	Assist with group work and classes to provide information and education to individuals and their carers. Be able to reflect
	and evaluate how the activity went.
3F9	Ability to reflect on and demonstrate own communication, within the team environment and to engage with individuals and
	utilise supervision to inform practice.

## Level 3 - Leadership Pillar

Reference	Core key knowledge, skills, and behaviours
code	
3L1	Ability to recognise and understand role boundaries and limitations whilst working
3L2	Participate in multidisciplinary team development
3L3	Ability to develop a solution focused approach to problems and take appropriate action
3L4	Ability to develop an awareness of the impact of leadership activities in relation to compassion, civility, kindness and human
	factors

Reference	Speciality key knowledge, skills, and behaviours
code	
3L5	Assist with discharging from support worker caseload.
3L6	Managing the stock room, supplies and the provisions for rehabilitation purposes.

## **Level 3 - Service Improvement Pillar**

Reference code	Core key knowledge, skills, and behaviours
3S1	Apply knowledge and skills in using information technology systems to access resources e.g., clinical guidelines and policies, relevant publications
3S2	Effectively reflect on and discuss own practice
3 <b>S</b> 3	Identify risk in relation to care provision and service improvement
3S4	Has an awareness of quality improvement methodologies

Reference	Speciality key knowledge, skills, and behaviours
code	
3S5	Support with key learning from adverse events e.g. team-based review.
3S6	Contribute to the design, development, implementation and evaluation of service and quality improvement initiatives and
	range of quality assurance activities, including involvement in data collection.

#### **Level 4 Assistant Practitioner**

#### **Role and Responsibility**

- Has developed clinical skills which are more specialised than senior HCSWs and specific to an area of practice
- Actively involved in supporting others to learn, for example HCSWs, senior HCSWs and students
- Expected to have strong leadership and service improvement skills, for example working on improvement projects such as information for people receiving care, liaising with other departments and services
- Deliver less routine delegated activities, care, treatment, interventions or support for people receiving care with compassion, civility and kindness, in support of and supervised (direct or indirect) by healthcare practitioners as part of a multi-professional / multi-agency team. This will be dependent on an individual's needs and area of practice relevant to each profession and context of care delivery

Title: Assistant Practitioner

The level outline is informed by the Development and Education Framework for Levels 2 – 4 NMAHP Healthcare Support Workers

#### Qualifications and experience expected for practitioners at this level of career framework

- Can evidence previous relevant experience using Recognition of Prior Learning
- Normally at or working towards a SCQF Level 8 qualification in a health or social care related subject
- At this level specific training, guidance or qualifications may be required by relevant professional bodies or legislation
- Numeracy and literacy qualifications are required at this level of practice
- IT / computer literacy are required at this level of practice

#### **Level 4 - Clinical Practice Pillar**

Reference	Core key knowledge, skills, and behaviours
code	
4C1	Has an in-depth knowledge and understanding of the scope of practice, job role and related activities
4C2	Has a comprehensive skill base related to practice. Any interventions carried out will be achieved through additional, focused training and education
4C3	Ability to develop knowledge on how and why care provision and that of others in the multidisciplinary/multi-agency team, impacts on the person's journey
4C4	Ability to adhere to the HCSW Code of Conduct in relation to consent: Telling patients and members of the public what you intend to do and listening carefully to what they say about it (HCSW Code of Conduct 3.2.8)
4C5	Demonstrate risk assessment skills in relation to the person receiving care
4C6	Ability to understand it is everyone's responsibility (HCSW Code of Conduct 3.2.11) to protect individuals, members of the public and report any concerns to a supervisor, manager or make use of the whistleblowing policy to reduce risks in the future
4C7	Ability to apply knowledge and demonstrate appropriate understanding of core legislation and policies
4C8	Ability to understand and apply knowledge of legislation, and policies specific to area of practice
4C9	Ability to understand and apply the concepts of accountability and responsibility and be confident to accept or decline delegated responsibility from a healthcare practitioner or assistant practitioner
4C10	Demonstrate underpinning knowledge that enables integration of theory relating to practice in relevant settings
4C11	Demonstrate application of best practice within practice setting
4C12	Recognise the effects and potential symptoms of trauma or vicarious trauma and respond appropriately. Practising at a minimum of Trauma Informed practice level
4C13	Ability to escalate concerns if unable to carry out their duty and responsibilities outlined within health and care staffing legislation. Practising at Informed level
4C14	Practice in ways which recognise and respond to health inequalities, respect diversity, and protect against discrimination and harassment
4C15	Use a range of skills to communicate with people about difficult matters or situations

Reference	Speciality key knowledge, skills, and behaviours		
code			
4C16	Understanding of anatomy body systems, cognition and normal function, relevant to the job role.		
4C17	Describe what normal movement is, to identify patterns of abnormal movement and identify needs for rehabilitation.		
4C18	Describe the main bones, joints and muscle groups in the body and how they relate to normal movement.		
4C19	Describe common causes and pathologies which limit muscle function and joint range of movement.		
4C20	Describe what normal function is, to identify adaptive patterns and needs for rehabilitation.		
4C21	Understand the potential causes of reduced mobility e.g. falls, fracture, weakness, poor balance.		
4C22	Accept and carry out delegated tasks from registered AHP for rehabilitation in relation to assessments and treatments that		
	have locally agreed competencies for.		
4C23	Assess and implement Waiting Well Initiatives and prehabilitation to commence early intervention to avoid deterioration.		
4C24	Execute information gathering (face to face/phone calls) to gain a detailed subjective history from the individual and/or other		
	sources as required (e.g. family, carers, multi-disciplinary team) where appropriate.		
4C25	Carry out gait analysis on individuals and assess and treat accordingly within your scope of practice.		
4C26	Assess, order, fit and demonstrate equipment provision for individuals.		
4C27	Assessing and applying problem solving skills e.g. adapting task to suit the individual's current function and allowing the		
	individual to choose different adaptive ways of performing tasks.		
4C28	Demonstrate falls prevention strategies and education throughout the individual's treatment plan.		
4C29	Assess and implement stair assessments, transfer assessments, balance, both regular and progressive.		
4C30	Identify appropriate intervention/therapeutic and patient outcome measures and assess and implement as required.		
4C31	Have an awareness of Realistic Medicine and Values Based Health and Care when delivering physio rehabilitation, and to be		
	able to have Shared Decision Making / "What Matters to You" conversations with patients and families and support them to		
	have these with other HCPs and identify their personal outcomes.		
4C32	If role requires when working with pathway patients, assess, implement, monitor and discharge according to the pathway		
	guidance.		
4C33	Discuss goal setting and interventions to progress rehabilitation activity programmes.		
4C34	Discuss and assess potential complications / limitations to rehabilitation e.g. cognition, psychological barriers, environment.		
4C35	Lead and facilitate wellbeing management tools e.g. Anxiety management - breathing techniques.		
4C36	Able to describe and apply for OT reablement/packages of care etc for individuals for safe discharge.		

4C37	Assess, implement, monitor, and discharge from mobility support programmes, utilising decision-making skills to discharge
	from support worker caseload.
4C38	Assess and implement onward referrals to other services e.g. leisure, third sector, support and self-help groups.

## **Level 4 - Facilitating Learning Pillar**

Reference	Core key knowledge, skills, and behaviours	
code		
4F1	Ability to use reflection to enhance self-awareness, gain new insights and develop resilience when faced with adverse situations	
4F2	Demonstrate application of a variety of methods to ensure learning has taken place, e.g., 4 stage approach to teaching a clinical skill, or use of Chunk & Check / Teach Back	
4F3	Ability to recognise the personal impact of any difficult situations and have strategies to enable personal learning and development, recognising the limits of competence and personal strengths	
4F4	Engages with appraisal and creates a plan for ongoing development	
4F5	Ability to engage in [clinical] supervision, using reflective practice and feedback to develop the quality of care and outcomes	
4F6	Ability to effectively undertake the role of clinical supervisor for all functions of clinical supervision, within own scope of practice	

Reference	Speciality key knowledge, skills, and behaviours	
code		
4F7	Demonstrate enhanced communication skills by presenting and providing case feedback to multi-disciplinary team meetings.	
4F8	Ability to reflect on and demonstrate own communication, within the team environment and to engage with individuals and utilise supervision to inform practice.	
4F9	Understand the value of learning from others in the multi-disciplinary team to gain up to date clinical and speciality knowledge and skills and an understanding of AHP roles within the rehabilitation setting.	

4F10	Work in accordance with the AHP Practice Education Development Framework e.g. giving and receiving feedback. The AHP	
	Practice Education Development Framework NHS Educa	
4F11	Provide support, supervision and preceptorship to HCSW, Newly Qualified Practitioners (NQPS) and students.	
4F12	Lead and facilitate group work and classes to provide information and education to individuals and their carers. Be able to	
	reflect and evaluate how the activity went.	
4F13	Following appropriate training and/or development apply and provide individual, or group, health promotion and wellbeing	
	advice for individuals.	
4F14	Completion of, and ability to apply appropriate training for the rehabilitation setting. e.g. role specific -OTAGO, falls	
	prevention.	

#### Level 4 - Leadership Pillar

Reference	Core key knowledge, skills, and behaviours	
code		
4L1	Ability to work effectively in a multi-disciplinary / multiagency team and participate in team development initiatives	
4L2	Demonstrate problem-solving skills and take action regarding people's care and / or treatment through an awareness of policy and legislation	
4L3	Demonstrate effective organisational and time management skills practice in an anti-discriminatory and inclusive manner with individuals and colleagues	
4L4	Demonstrate and apply an understanding of the impact of leadership theories and activities in relation to compassion, civility, kindness and human factors	

Reference	Speciality key knowledge, skills, and behaviours	
code		
4L5	Analyse and compile priority listing of caseload due to outcome of therapy progression.	
4L6	Managing the stock room, supplies and the provisions for rehabilitation purposes.	

## **Level 4 - Service Improvement Pillar**

Reference	Core key knowledge, skills, and behaviours	
code		
4S1	Demonstrate and apply knowledge of relevant guidelines	
4S2	Ability to understand and apply evidence-based practice and identify and assesses risk in relation to care provision and quality care outcomes	
4S3	Identify risk in relation to care provision and service improvement	
4S4	Demonstrate effective application of quality improvement methodologies and tools	
4\$5	Ability to recognise the importance of responding to individuals' feedback and comments appropriately including resolving complaints in a timely manner and effectively at local level, escalating as appropriate	

Reference	Speciality key knowledge, skills, and behaviours	
code		
4S6	Participate and contribute to key learning from adverse events e.g. team-based review.	
4S7	Contribute to the design, development, implementation and evaluation of service and quality improvement initiatives and	
	range of quality assurance activities, including involvement in data collection in the rehabilitation setting.	

# **Appendices**

# **Appendix 1: Scottish Credit & Qualifications Framework (SCQF)**

SCQF is the national qualifications framework. Senior Healthcare support workers are normally working at SCQF level 7 and Assistant Practitioners at SCQF level 8. There are some example qualifications in the table below. The minimum SCQF level for entry into the NMAHP professions is Level 9 (Ordinary Degree). Advanced Practice has been mapped to SCQF Level 11 study (Master's level). It is neither necessary nor desirable to map all post-registration education to academic levels, but where it is appropriate, the following can be used as a guide.

More information can be found at - <u>Interactive Framework | Scottish Credit and Qualifications Framework (scqf.org.uk)</u>

Career Framework level	Minimum associated SCQF level
2 Healthcare Support Worker	SCQF Level 6 – examples include:  + SVQ Healthcare Support (Clinical) + SVQ Social Services + Healthcare Modern Apprenticeships: Health Care Support (clinical) + Modern Apprenticeships: Social Services and Healthcare
3 Senior Healthcare Support Worker	SCQF Level 7 – examples include:  + SVQ Healthcare Support (Clinical) + SVQ Social Services & Healthcare + HNC Healthcare Practice + HNC Occupational Therapy Support + PDA Promoting Positive Behaviour + PDA Promoting Excellence in Dementia Skilled Practice + PDA Developing Professional Practice in Health and Social Care

	+ PDA Health and Social Care: Administration of Medicine + OU – K102 -Introducing Health and Social Care + OU – Certificate of Higher Education in Healthcare Practice + OU – K104, Introduction to Healthcare Practice Modern Apprenticeships: Health Care Support (Clinical) Modern Apprenticeships: Social Services and Healthcare
4 Assistant Practitioner	SCQF Level 8 – examples include  + PDA Acute and Community Care + PDA Health and Social Care: Personalisation in Practice + PDA Health and Social Care: Promoting Enhanced Professional Practice + PDA Healthcare Professionals: Facilitating Learning, Training and Assessment in the Workplace + PDA Occupational Therapy Support + PDA Podiatry Support + OU – Diploma of Higher Education in Health and Social Care + Higher Education Diploma: Wellbeing and Enablement
5 Practitioner	Level 9 – Ordinary Degree level
6 Senior Practitioner	Level 10 – Honours Degree level
7 Advanced Practitioner	Level 11 – Master's Degree level
8 Consultant Practitioner	Level 11/12 – Master's/Doctorate level

## **Appendix 2: Reference List**

- Ministry of Justice (2012) Public sector equality duty. Available at: <u>Public sector</u>
   <u>equality duty GOV.UK (www.gov.uk)</u>
- Scottish Government (2013) Everyone matters: 2020 health workforce vision.
   Available from: Everyone matters: 2020 health workforce vision gov.scot (www.gov.scot)
- Scottish Government (2022) Rehabilitation and Recovery: A once for Scotland
   Person-Centered Approach to Rehabilitation in a Post COVID era. Available from:

   Supporting documents Rehabilitation and recovery: a person-centred approach gov.scot
- SSSC (2023) *Strategic Plan 2023-2026*. Available from: <u>SSSC Strategic Plan 2023-2026</u>. <u>pdf</u>

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