

## **HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

First Published - July 2009

A Knowledge and Skills Framework document defines and describes the knowledge and skills, which an NHS staff member needs in order to provide quality care. This Knowledge and Skills Framework has been put together in order to direct the development of nurses working in the specialist area of homeless health with their professional development.

Not all nurses working in homelessness will need to complete the entire competencies list – although most competencies will be some relevance to majority of clinical practitioners working in homeless health. It is recommended that clinicians pick and choose the competencies that are relevant to them with the assistance of their clinical supervisor or manager.

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Ratified by:

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<b>DOCUMENT CHANGE HISTORY</b>		
<b>Version</b>	<b>Date</b>	<b>Comments</b>
<b>KSF 2</b>	<b>8/5/2009</b>	By D.H. reformatted - changed title so it appears on on each page, numbered skill, reduced size so most competencies fit on one page, pages numbered

## **HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

### **COMPETENCY LIST**

1. **LONE WORKING** - MANAGES THE RISKS OF LONE WORKING, AND MAINTAINS OWN PERSONAL SAFETY AND THE SAFETY OF OTHERS AT ALL TIMES – TAKING ACCOUNT OF LOCAL POLICY
2. **CLIENT ENGAGEMENT** - ENGAGES HOMELESS CLIENTS FROM A VARIETY OF BACKGROUNDS, AND EFFECTIVELY BUILDS THERAPEUTIC RELATIONSHIPS WITH APPROPRIATE BOUNDARIES
3. **RISK ASSESSMENT** - UNDERTAKES THOROUGH CLIENT RISK ASSESSMENTS WHEN REQUIRED, AND UNDERTAKES TIMELY APPROPRIATE ACTION
4. **MENTAL CAPACITY** - IDENTIFIES WHEN AN ASSESSMENT OF MENTAL CAPACITY IS REQUIRED, AND PERFORMS THIS OR REFERS ON AS APPROPRIATE
5. **CHILD PROTECTION** - SCREENS PRO-ACTIVELY FOR CHILD PROTECTION CONCERNS, AND TAKES APPROPRIATE ACTION WHEN CHILD PROTECTION ISSUES ARISE
6. **DOMESTIC VIOLENCE** - SCREENS PRO-ACTIVELY FOR DOMESTIC VIOLENCE CONCERNS, AND TAKES APPROPRIATE ACTION WHEN DOMESTIC VIOLENCE ISSUES ARISE
7. **ACCESS TO HEALTH CARE** - ACTIVELY PROMOTES AND ENABLES CLIENT ACCESS TO MAINSTREAM AND OR SPECIALIST HEALTHCARE SERVICES AS APPROPRIATE
8. **ACCESS TO SUPPORT SERVICES** - HAS COMPREHENSIVE KNOWLEDGE OF LOCAL SPECIALIST COMMUNITY RESOURCES FOR HOMELESS PERSONS (VOLUNTARY OR STATUTORY) AND SIGNPOSTS APPROPRIATELY
9. **WELFARE ISSUES** - IDENTIFIES COMMON HOUSING PROBLEMS, BENEFITS PROBLEMS, AND LEGAL PROBLEMS, AND SIGNPOSTS APPROPRIATELY
10. **COMPREHENSIVE HEALTH ASSESSMENT** - EFFECTIVELY IDENTIFIES UNDERLYING PHYSICAL HEALTH, MENTAL HEALTH, AND ADDICTION PROBLEMS IN HOMELESS CLIENTS, AND TREATS / REFERS ON AS APPROPRIATE
11. **ALCOHOL MISUSE** - SCREENS FOR, AND IDENTIFIES PROBLEM ALCOHOL USE, AND ADVISES / TREATS / SIGNPOSTS APPROPRIATELY
12. **DRUG MISUSE** - SCREENS FOR, AND IDENTIFIES PROBLEM DRUG USE, AND ADVISES / TREATS / SIGNPOSTS APPROPRIATELY
13. **SMOKING** - TAKES A TOBACCO SMOKING HISTORY, GIVES EFFECTIVE SMOKING CESSATION ADVICE, AND SIGNPOSTS APPROPRIATELY

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14. **MOTIVATIONAL INTERVIEWING** - KNOWS THE PRINCIPLES AND PRACTICE OF MOTIVATIONAL INTERVIEWING, AND APPLIES THE SKILLS DURING KEY CONSULTATIONS
15. **MENTAL HEALTH** – SENSITIVELY SCREENS FOR, AND IDENTIFIES MILD, MODERATE AND SEVERE MENTAL HEALTH ISSUES, AND REFERS ON APPROPRIATELY
16. **PERSONALITY DISORDER** - UNDERSTANDS THE POTENTIAL CHALLENGES PRESENTED BY CLIENTS WITH PERSONALITY DISORDER, AND WORKS CONSTRUCTIVELY AND EFFECTIVELY WITH THESE CLIENTS
17. **PUBLIC HEALTH** - TAKES APPROPRIATE ACTION TO PROACTIVELY PROTECT THE HEALTH OF BOTH INDIVIDUAL AND SOCIETY
18. **SEXUAL HEALTH / BLOOD BORN VIRUSES** - SCREENS FOR, AND IDENTIFIES CLIENTS AT RISK OF / SUFFERING FROM SEXUALLY TRANSMITTED DISEASES AND / OR BLOOD BORN VIRUSES, AND ADVISES / TREATS / SIGNPOSTS APPROPRIATELY
19. **REFUGEE HEALTH** - IDENTIFIES ASYLUM SEEKERS AND REFUGEES WHO HAVE PARTICULAR HEALTH NEEDS AS A RESULT OF THEIR ASYLUM SEEKING / REFUGEE STATUS, AND MANAGES THEM APPROPRIATELY
20. **SAFE HOSPITAL DISCHARGE** – PROMOTES SAFE HOSPITAL DISCHARGE
21. **NATIONAL SUPPORT NETWORKS** - UNDERSTANDS WHERE TO ACCESS PROFESSIONAL SUPPORT OUTSIDE OWN ORGANISATION

## **HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

This document has been mapped to National Occupational Standards (NOS). Each National Occupational Standard is mapped to the NHS Knowledge and Skills Framework (October 2004).

NOS describe the skills, knowledge and understanding needed to undertake a particular task or job to a nationally recognised level of competence. They focus on what the person needs to be able to do, as well as what they must know and understand to work effectively.

NOS cover the key activities undertaken within the occupation in question under all the circumstances the job holder is likely to encounter and have transferability across the UK. Using the NOS as 'common currency', users who have demonstrated competence against the standards may be able to claim Recognition of Prior Learning against accredited qualifications and units based on the National Occupational Standards.

This document is mapped to NOS which sit with different sector skills councils. The NOS cited can be found on the Skills for Health website here [https://tools.skillsforhealth.org.uk/competence\\_search/](https://tools.skillsforhealth.org.uk/competence_search/) Where a NOS does not appear on the Skills for Health website, this has been inserted into the document as a hyperlink. Please note, that this mapping, the NOS cited and the hyperlinks are correct at the time mapping (April 2012). For further information on the NHS Knowledge and Skills Framework, please visit [www.nhsemployers.org](http://www.nhsemployers.org)

It has been noted that in some instances where the words 'Mental Health' appear in the title of the NOS, this NOS is applicable outside of the Mental Health arena. There are no specific NOS that mention homelessness, however where possible, there are generic NOS that will apply to this area.

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KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>1. MANAGES THE RISKS OF LONE WORKING, AND MAINTAINS OWN PERSONAL SAFETY AND THE SAFETY OF OTHERS AT ALL TIMES – TAKING ACCOUNT OF LOCAL POLICY</b>						
<p>Understands the risks of lone working with this client group</p> <p>Knows local policies and procedures for reducing the risks of lone working – including out-of-hours procedures</p> <p>Understands how to maximize own personal safety when working in both NHS and non-NHS environments</p> <p>Understands the importance of using non – confrontational approaches in consultation</p> <p>Knows the warning signs of client behavior that are associated with</p>	<p>Reading of Lone Working and Zero Tolerance policies</p> <p>Induction into personal safety procedures and Personal Safety Training</p> <p>Risk assessment training</p> <p>‘Breakaway’ training</p> <p>Reading of Risk Assessments and Service Level Agreements with partner agencies</p> <p>Shadowing of experienced staff – demonstrations and teaching regarding how to maintain personal safety</p> <p>Assessment of knowledge by supervisor</p> <p>Assessment of practice competence by</p>	<p>1. Able to articulate common situations that might present a risk to personal safety</p> <p>2. Able to conduct an appropriate risk assessment before seeing a client (e.g. reviewing notes, getting handover from agency staff etc.)</p> <p>3. Able to articulate the importance of ensuring the team knows one’s whereabouts e.g. through work mobiles, office computer diaries / desk diaries, reporting back at the end of the day – and able to comply appropriately with these procedures</p> <p>4. Able to articulate safety measures that should be taken to ensure safety within a consultation e.g. keeping close to the door, always</p>		<p>1. PROHSS1 Make sure your own actions reduce risks to health and safety</p> <p>2. GEN96 Maintain health, safety and security practices within a health setting</p> <p>3. <a href="#">CFAWRV14 Managing lone working</a></p> <p>3. LSILARD3v2 Support team and virtual working</p> <p>4. GEN96 Maintain health, safety and security practices within a health setting</p> <p>5. ENTO WRV3 Identify, assess</p>	<p>1. Core 3 Health, safety and security</p> <p>2. Core 3 Health, safety and security</p> <p>3. Core 3 Health, safety and security</p> <p>3. G6</p> <p>4. Core 3 Health, safety and security</p> <p>5. Core 3 Health, safety and</p>	

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<p>personal safety risk, and understands when to 'back off'</p> <p>Understands how/where to check for 'client alerts' in notes, and how to pass on own concerns to other workers and partner agencies</p> <p>Understands the need to comply with partner agency risk reduction protocols, as well as those of own employer</p> <p>Understands the importance of engaging with clinical supervision in maintaining own emotional safety</p>	<p>supervisor – observed to maximise personal safety in the consultation room, conduct appropriate risk assessments, and terminate the interview or change the subject if personal safety is at risk</p> <p>Clinical supervisee training and/or supervisor training as necessary</p> <p>Commencement of clinical supervision</p>	<p>have method of alarm closest to self</p> <p>5. Able to identify 'risky settings' when it is only appropriate to work in pairs</p> <p>6. Able to recognize warning signs indicating aggression, irrational behavior etc.</p> <p>7. Able to use clinical supervision constructively to discuss concerns, and express difficulties</p>		<p>and review the risk of violence to workers</p> <p>6. HSC232 Protect yourself from the risk of violence at work</p> <p>7. GEN36 Make use of supervision</p>	<p>security</p> <p>6. Core 3 Health, safety and security</p> <p>7. Core 2 Personal and people development</p>	
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KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>2. ENGAGES HOMELESS CLIENTS FROM A VARIETY OF BACKGROUNDS, AND EFFECTIVELY BUILDS THERAPEUTIC RELATIONSHIPS WITH APPROPRIATE BOUNDARIES</b>						
<p>Understands the diverse and complex nature of homeless clients, and the events that may have led them into homelessness</p> <p>Understands the importance of engagement work in accessing certain clients</p> <p>Understands the trust issues that many homeless persons have, and why this is</p> <p>Understands that addiction and mental health problems may compound these trust issues</p>	<p>Equality and Diversity training</p> <p>Client engagement training if available</p> <p>Own reading regarding the histories of homeless persons</p> <p>Exploration of relevant national websites e.g. St. Mungo's Thamesreach, CRISIS, Barnardo's</p> <p>Visit to Day Centres or equivalent in order to have social conversations with potential clients</p> <p>Observations of outreach specialists (e.g. Outreach Teams) in practice / discussions with specialists</p>	<ol style="list-style-type: none"> <li>1. Able to communicate effectively with clients from diverse backgrounds</li> <li>2. Able to identify those clients that need intervention, but who will need extra engagement work to get them into the service</li> <li>3. Able to have conversations regarding non-clinical issues as necessary, in order to relax a client</li> <li>4. Generally able to put clients 'at ease'</li> <li>5. Able to appropriately 'limit set' after a relationship has been built</li> <li>6. Able to identify when own engagement skills are not working</li> </ol>		<ol style="list-style-type: none"> <li>1. / 2. / 3. / 4. / 6. GEN97 Communicate effectively in a healthcare environment</li> <li>2. MH48 Work with people to identify their needs for safety, support and engagement and how these needs can best be addressed</li> <li>4. FMH13<sup>1</sup> Help an individual to feel more psychologically secure</li> <li>5. FMH10<sup>2</sup> Make and maintain personal and professional</li> </ol>	<ol style="list-style-type: none"> <li>1. / 2. / 3. / 4. / 6. Core 1 Communication</li> <li>2. HWB2</li> <li>4. HWB4</li> <li>5. Core 5 Quality</li> </ol>	

<sup>1</sup> Although the title may seem inappropriate, the content for this NOS is applicable in this context

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<p>Understands the importance of consistency, reliability, and investment of time in building relationships</p>	<p>Peer supervision regarding own communication skills  Supervised practice</p>	<p>7. Able to identify concerning clients who are not engaging, who may need to be discussed in supervision</p>		<p>boundaries with patients in a secure setting</p>		
<p>Understands the influence of social background, culture, language, and literacy on effective communication</p>	<p>Assessment of knowledge by supervisor  Assessment of practice competence by supervisor – successful engagement interventions undertaken</p>	<p>8. Able to set objectives with clients, and keep to own side of the bargain in meeting those objectives</p>		<p>7. GEN36 Make use of supervision  8. PE4 Agree a plan to enable individuals to manage their health condition</p>	<p>7. Core 2 Personal and people development  8. G1</p>	
<p>Understands the importance of patient involvement in all aspects of the service</p>	<p>Involvement in patient satisfaction surveys</p>	<p>9. Able to articulate ways to involve patients in the development of services  10. Able to appropriately deal with client complaints</p>		<p>9. SFJCPS 1.1 Engage with service users  10. ICS Unit C3 Resolve customer service problems</p>	<p>9. Core 4 Service Improvement  10. Core 5 Quality</p>	

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<b>3. UNDERTAKES THOROUGH CLIENT RISK ASSESSMENTS AS REQUIRED, AND UNDERTAKES TIMELY APPROPRIATE ACTION</b>						
<p>Understands the need to undertake individual client risk assessments</p> <p>Understands the need for comprehensive history taking (current and past history) in understanding individual client risk</p> <p>Understands which risks require health professionals to undertake mandatory action to minimize risk to the client or others (e.g. social services, emergency mental health services etc)</p> <p>Additionally understands a client's right to autonomy and choice (assuming the client has full mental capacity)</p>	<p>Own reading</p> <p>Risk assessment training</p> <p>Shadowing of a variety of experienced staff undertaking full risk assessments (e.g. mental health, social workers, HVs etc) - demonstrations and teaching on how to sensitively undertake client risk assessments</p> <p>Training regarding 'dual diagnosis'</p> <p>Mental Health First Aid Training</p> <p>Physical health care triage training – e.g. shadowing in A&amp;E</p> <p>Harm minimization training</p> <p>Assessment of knowledge by supervisor</p>	<p>1. Able to risk assess clients in a sensitive, open and professional manner</p> <p>2. Able to competently discuss the following issues with new clients and identify associated potential risks:</p> <ul style="list-style-type: none"> <li>• Suicide attempts / self harm / history of psychosis</li> <li>• History of violence</li> <li>• Unsafe alcohol / drug use including accidental overdose</li> <li>• Self neglect</li> <li>• Neglect of dependent others</li> <li>• Offending history</li> <li>• Social isolation / lack of contact with family</li> <li>• Victim of bullying / domestic violence</li> <li>• Serious physical health conditions</li> </ul> <p>3. Able to refer on appropriately and sensitively</p>		<p>1. CHS46 Assess risks associated with health conditions</p> <p>2. CHS168 Obtain a patient/client history</p> <p>2. MH16 Assess individuals' circumstances and evaluate the risk of abuse, failure to protect and harm to self and others</p> <p>2. AB5 Assess and act upon immediate risk of danger to substance users</p> <p>2. FMH13 Help an individual to feel more psychologically secure</p> <p>2. MH49 Enable</p>	<p>1. HWB2</p> <p>2. HWB2</p> <p>2. HWB2</p> <p>2. HWB3</p> <p>2. HWB4</p> <p>2. HWB4</p>	

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<p>Knows when it is not appropriate to see a client alone</p> <p>Understands the need for risk assessment on an ongoing basis (i.e. at each consultation)</p>	<p>Assessment of practice competence by supervisor – observed to undertake risk assessment competently, and take appropriate action as necessary</p>	<p>if mandatory action is required</p> <p>4. Able to seek advice with difficult decision making as appropriate</p> <p>5. Able to give harm minimization advice if appropriate</p> <p>6. Able to support client to independently make decisions</p> <p>7. Able to recognize the need for repeated risk assessments as necessary</p>		<p>people who are a risk to themselves and others to develop control</p> <p>2. HSC417 Assess individuals' mental health and related needs</p> <p>2. <a href="#">SFJYJBB3 Identify individuals at risk of committing anti-social behaviour or offending</a></p> <p>2. <a href="#">SFJBI203 Contribute to the assessment of victims/survivors of domestic and/or sexual abuse/violence</a></p> <p>2. CS18 Recognise and respond to possible abuse of children and young people</p> <p>3. AF1 Carry out screening and referral assessment</p> <p>3. AA1</p>	<p>2. HWB2</p> <p>2. HWB2</p> <p>2. HWB2</p> <p>2. HWB3</p> <p>3. HWB2</p> <p>3. HWB6</p>	
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				<p>Recognise indications of substance misuse and refer individuals to specialists</p> <p>3. CHS99 Refer individuals to specialist sources of assistance in meeting their health needs</p> <p>4. GEN63 Act within the limits of your competence and authority</p> <p>5. GEN14 Provide advice and information to individuals on how to manage their own condition</p> <p>6. PE1 Enable individuals to make informed health choices and decisions</p> <p>7. HSC430 Support the protection of individuals, key people and others</p>	<p>3. HWB2 HWB6</p> <p>4. Core 5 Quality</p> <p>5. Core 1 Communication</p> <p>6. HWB4</p> <p>7. HWB3</p>	
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<b>4. IDENTIFIES WHEN AN ASSESSMENT OF MENTAL CAPACITY IS REQUIRED, AND PERFORMS THIS OR REFERS ON AS APPROPRIATE</b>						
<p>Knows the 5 principles of the Mental Capacity Act 2005</p> <p>Knows the 4 criteria for functional assessment of mental capacity</p> <p>Understands the importance of clear, comprehensive documentation where mental capacity is an issue</p>	<p>Own reading</p> <p>Attending local (compulsory) training</p> <p>Discussions with supervisor / team</p> <p>Assessment of knowledge by supervisor</p> <p>Assessment of practice competence by supervisor – able to identify clients with potential mental capacity problems</p>	<ol style="list-style-type: none"> <li>1. Able to identify the circumstances in which the mental capacity act may apply, including 'grey' / challenging areas e.g. degrees of intoxication</li> <li>2. Able to sensitively suggest appropriate ways forward e.g. undertaking a Mini Mental Test as a test of cognitive ability, assessing later when more sober, or consulting with other involved professionals</li> <li>3. Able to identify when needs to get advice / consult with others</li> <li>4. Able to clearly document any capacity issues that arise</li> </ol>		<ol style="list-style-type: none"> <li>1. MH14 Identify potential mental health needs and related issues</li> <li>2. GEN97 Communicate effectively in a healthcare environment</li> <li>2. FMH13 Help an individual to feel more psychologically secure</li> <li>3. GEN63 Act within the limits of your competence and authority</li> <li>4. FMH14 Enable an individual to differentiate between positive and negative</li> </ol>	<ol style="list-style-type: none"> <li>1. HWB2</li> <li>2. Core 1 Communication</li> <li>2. HWB4</li> <li>3. Core 5 Quality</li> <li>4. HWB4</li> </ol>	

**Comment [SN1]:** Sam – wanted to add something to t

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				behaviours and understand the consequences		
				4. HSC434 Maintain and manage records and reports		

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<b>5. SCREENS PRO-ACTIVELY FOR CHILD PROTECTION CONCERNS, AND TAKES APPROPRIATE ACTION WHEN CHILD PROTECTION ISSUES ARISE</b>						
<p>Knows important government legislation pertaining to child protection and children in need</p> <p>Understands the types of circumstances that lead to child abuse</p> <p>Understands that child abuse both within families, and outside families (e.g. in institutions)</p> <p>Knows the signs and symptoms of child abuse</p> <p>Understands the importance of immediate referral in pregnancies where there are concerns about the unborn child</p>	<p>Level One / Two Child Protection training as appropriate</p> <p>Shadowing at Child Protection Case Conferences</p> <p>Meeting with the local Named Nurse for Child Protection</p> <p>Shadowing addictions midwives</p> <p>Shadowing of refugee workers working with unaccompanied minors</p> <p>CAF awareness training</p> <p>Discussions with supervisor regarding common child protection issues within the client group</p> <p>Assessment of knowledge by supervisor</p>	<ol style="list-style-type: none"> <li>1. Able to articulate common child protection issues that may present in their role</li> <li>2. Able to identify potential child protection issues during client risk assessment</li> <li>3. Ability to identify children / unborn children who are at risk of abuse</li> <li>4. Able to refer appropriately and sensitively if mandatory action is required</li> <li>5. Able to offer ongoing support to mothers, children and families as appropriate</li> <li>6. Able to provide appropriate support, advice and signposting to vulnerable adults as necessary</li> <li>7. Able to carry out the Common Assessment Framework if this is part of the practitioner role</li> </ol>		<p>1. HSC325 Contribute to protecting children and young people from danger, harm and abuse</p> <p>1. <a href="#">SFJCYW4 Facilitate the integration of unaccompanied/separated children and young people into the community</a></p> <p>2./ 3. CS17 Ensure systems and procedures for safeguarding children and young people are implemented</p> <p>2./ 3. CS18 Recognise and respond to possible abuse of children and young people</p>	<p>1. HWB3</p> <p>1. HWB3</p> <p>2./ 3. HWB3</p> <p>2./ 3. HWB3</p>	

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<p>Understands how the law applies to under 16s – i.e. Frazer competence</p> <p>Understands the pan-London Safeguarding Children Guidelines - including the guidelines pertaining to inappropriate sexual relationships in those aged 16 – 19 year olds</p> <p>Understands how the law applies to 'unaccompanied minors' (Asylum Act, Section 17, 20)</p>	<p>Assessment of practice competence by supervisor – able to identify child protection issues and take appropriate action</p>			<p>4. CHS99 Refer individuals to specialist sources of assistance in meeting their health needs</p> <p>5. / 6. HSC431 Support individuals where abuse has been disclosed</p> <p>5. FMH13 Help an individual to feel more psychologically secure</p> <p>6. <a href="#">SCDLSS325 Support children and young people who have experienced trauma</a></p> <p>7. CHS119 Select assessment and investigative techniques/procedures to meet individuals' needs</p>	<p>4. HWB2 HWB6</p> <p>5./ 6. HWB3</p> <p>5. HWB4</p> <p>HWB3</p> <p>7. HWB7</p>	
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<b>6. SCREENS PRO-ACTIVELY FOR DOMESTIC VIOLENCE CONCERNS, AND TAKES APPROPRIATE ACTION WHEN DOMESTIC VIOLENCE ISSUES ARISE</b>						
<p>Knows important government legislation pertaining to domestic violence</p> <p>Understands the meaning of the term Domestic Violence, and the diversity of domestic violence victims</p> <p>Understands the theory of the 'Cycle of Violence'</p> <p>Knows potential indicators of domestic violence</p> <p>Understands barriers to the disclosure of domestic violence</p> <p>Knows cultural myths regarding domestic violence</p> <p>Understands</p>	<p>Domestic Violence training</p> <p>Shadowing domestic violence workers</p> <p>Visit to/ shadowing workers at local women's refuge(s)</p> <p>Discussions with supervisor regarding common domestic violence issues within the client group</p> <p>Assessment of knowledge by supervisor</p> <p>Assessment of practice competence by supervisor – able to identify domestic issues and take appropriate action</p> <p>Feedback on performance from supervisor / clients</p>	<ol style="list-style-type: none"> <li>1. Able to identify potential domestic violence issues during client risk assessment</li> <li>2. Able to recognize signs and symptoms of domestic violence during consultation (including elder abuse, male and vulnerable adult victims)</li> <li>3. Able to listen, and empathize with domestic violence clients, and respect requests for confidentiality and privacy</li> <li>4. Able to empower clients to disclose domestic violence and/or take action when they are ready to do this</li> <li>5. Able to comprehensively document reported incidents of domestic violence</li> <li>6. Able to provide information and resources to victims</li> </ol>		<ol style="list-style-type: none"> <li>1. <a href="#">SFJBI203 Contribute to the assessment of victims/survivors of domestic and/or sexual abuse/violence</a></li> <li>2. HSC395 Contribute to assessing and act upon risk of danger, harm and abuse</li> <li>3. <a href="#">SFJBI101 Communicate and engage with victims/survivors of domestic and/or sexual abuse/violence</a></li> <li>3. FMH13 Help an individual to feel more psychologically secure</li> <li>4. HSC426</li> </ol>	<ol style="list-style-type: none"> <li>1. HWB2</li> <li>2. HWB3</li> <li>3. Core 1 Communication</li> <li>3. HWB4</li> <li>4. HWB4</li> </ol>	

## HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK

<p>professional responsibility around domestic violence (particularly with regard to child protection)</p> <p>Understands the importance of documenting domestic violence incidents (including documentation of injuries)</p> <p>Knows local and national support resources available to assist victims of domestic violence</p> <p>Knowledge of Multi Agency Risk Assessment Conferences (MARACs)</p>	<p>Shadowing of perpetrators group</p> <p>Training regarding working with perpetrators</p> <p>Shadowing on local MARAC meeting</p>	<p>7. Able to refer victims to appropriate agencies (e.g. women's refuges, social services, counseling etc.)</p> <p>8. Able to offer support and advice to the perpetrator as necessary e.g. referral to perpetrators groups</p> <p>9. Able to raise awareness of domestic violence through routine enquiry</p> <p>10. Able to identify and refer appropriate cases to the relevant MARAC</p>		<p>Empower families, carers and others to support individuals</p> <p>5. HSC434 Maintain and manage records and reports</p> <p>6. <a href="#">SFJGK101 Provide access to information for victims/survivors of domestic and/or sexual abuse/violence</a></p> <p>7. <a href="#">SFJBG204 Work in partnership with agencies to tackle domestic and/or sexual abuse/violence</a></p> <p>7. <a href="#">SFJGK202 Arrange safe accommodation for victims/survivors of domestic and/or sexual abuse/violence</a></p> <p>8. <a href="#">SFJEF201 Explore</a></p>	<p>5. IK1</p> <p>6. HWB3</p> <p>7. Core 4 Service Improvement</p> <p>7. HWB4</p> <p>8. Core 1 Communication</p>	
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

				<p><a href="#">perpetrator's behaviour and attitudes relating to their domestic and/or sexual abuse/violence</a></p> <p>9. HSC3103 Contribute to raising awareness of health issues</p> <p>10. CHS99 Refer individuals to specialist sources of assistance in meeting their health needs</p>	<p>9. HWB1</p> <p>10. HWB2 HWB6</p>	
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## HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>7. ACTIVELY PROMOTES AND ENABLES CLIENT ACCESS TO MAINSTREAM AND OR SPECIALIST HEALTHCARE SERVICES AS APPROPRIATE</b>						
<p>Understands possible previous bad experiences the client group may have had when accessing health care</p> <p>Knows local 'friendly' GP practices, dentists, opticians and chiropodists happy to register / work with homeless clients</p> <p>Understands the need for advocacy in order for certain clients to access primary health care services</p> <p>Understands NHS entitlements for homeless persons, asylum seekers, A8/A2 Clients, and those with no recourse to public funding</p> <p>Understands the GP registration process</p> <p>Understands the role of</p>	<p>Own reading and research regarding NHS entitlements</p> <p>Equality and Diversity training</p> <p>Assertiveness training</p> <p>Induction pack on local services</p> <p>Local area survey – walking and experiencing the local area of work e.g. Community Health Centres, Walk-In Centres, A&amp;Es etc</p> <p>Shadowing of PALS</p> <p>Shadowing of experienced staff members e.g. doing advocacy work, referrals, using Language Line etc.</p> <p>Use of <a href="http://www.nhs.uk">www.nhs.uk</a> to find local services</p> <p>Knows how to access up-to-date information regarding entitlements e.g. through Homeless Link website <a href="http://www.homeless.org.uk">www.homeless.org.uk</a></p>	<ol style="list-style-type: none"> <li>1. Able to articulate the problems our clients might have accessing primary care</li> <li>2. Able to support clients to access health care services, including escorting clients / providing extended advocacy as necessary</li> <li>3. Able to influence and empower clients to engage with health services</li> <li>4. Able to develop effective links with local health care service providers.</li> <li>5. Ability to challenge service providers when health care access is wrongly denied</li> <li>6. Able to demonstrate good local knowledge of healthcare services and resources</li> <li>7. Able to refer clients on to suitable services as necessary</li> <li>8. Able / motivated to contemporaneously search for information regarding local</li> </ol>		<p>1. / 2. CHS177 Advise on access to and use of services</p> <p>2. FMH13 Help an individual to feel more psychologically secure</p> <p>2. MH46 Support people in relation to personal and social interactions and environmental factors</p> <p>2. HSC367 Help individuals identify and access independent representation and advocacy</p> <p>2. HSC410 Advocate with, and on behalf of, individuals, families, carers,</p>	<p>1. / 2. Core 1 Communication</p> <p>2. HWB4</p> <p>2. HWB4</p> <p>2. HWB4</p> <p>2. Core 1 Communication</p>	

**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

<p>PALS in accessing GP services</p> <p>Understands the importance of providing written information in other languages</p> <p>Understands the importance of establishing literacy levels</p> <p>Understands how to access interpreting services e.g. Language Line</p> <p>Understands there is a potential for gaps in services to exist</p> <p>Understands when there is a need to facilitate a client to complain about services</p> <p>Knows complaints procedure for own service, and knows process for dealing with complaints</p>	<p>Training around complaints procedure of own organisation</p> <p>Assessment of knowledge by supervisor</p> <p>Assessment of practice competence by supervisor – able to advocate, refer, use Language Line appropriately etc.</p>	<p>services using Internet etc, if suitable service is not immediately known</p> <p>9. Able to utilize Language Line, and provide written information for clients in appropriate formats as necessary</p> <p>10. Able to sensitively ask questions regarding literacy</p> <p>11. Able to identify and report gaps in services</p> <p>12. Able to contribute to data collection in order to demonstrate the need for new services</p> <p>13. Able to facilitate a client to complain as necessary</p> <p>14. Able to deal with complaints appropriately and sensitively</p>		<p>groups and communities</p> <p>3. MH41 Empower people with mental health needs to represent their views and organise their own support, assistance or action</p> <p>4. M&amp;L A3 Develop your personal networks</p> <p>4. GEN39 Contribute to effective multi-disciplinary team working</p> <p>5. MH43 Challenge injustice and inequalities in access to mainstream provision for individuals with mental health needs</p> <p>6. CHS174 Advise and inform others on services</p> <p>6. CHS177</p>	<p>3. HWB4</p> <p>4. Core 5 Quality</p> <p>5. Core 6 Equality and diversity</p> <p>6. Core 1 Communication</p> <p>7. HWB2</p>	
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

				<p>Advise on access to and use of services</p> <p>7. CHS99 Refer individuals to specialist sources of assistance in meeting their health needs</p> <p>8. BAD323 Research information</p> <p>9. GEN14 Provide advice and information to individuals on how to manage their own condition</p> <p>9. HSC371 Support individuals to communicate using interpreting and translation services</p> <p>10. GEN97 Communicate effectively in a healthcare environment</p> <p>11. / 12. GS CPS 2.2 Review</p>	<p>8. IK2</p> <p>9. Core 1 Communication</p> <p>10. Core 1 Communication</p> <p>11./ 12. IK2</p> <p>13. / 14. Core 5 Quality</p>	
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

				<p>and evaluate current service provision</p> <p>11. PHP47 Advocate for the improvement of health and wellbeing</p> <p>13. / 14. ICS Unit C3 Resolve customer service problems</p> <p>ICS Unit C5 Monitor and solve customer service problems</p>	<p>11. Core 4 Service improvement</p> <p>13. / 14. Core 4 Service Improvement</p>	
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>8. HAS COMPREHENSIVE KNOWLEDGE OF LOCAL SPECIALIST COMMUNITY RESOURCES FOR HOMELESS PERSONS (VOLUNTARY OR STATUTORY) AND SIGNPOSTS APPROPRIATELY</b>						
<p>Knows local services available for the homeless e.g. Day Centres, Hostels, Night Shelters, Soup Runs etc</p> <p>Knows how to access information regarding services in other areas</p> <p>Knows local community and faith groups providing support to vulnerable individuals</p> <p>Knows how to refer to the local Outreach Team (see below)</p>	<p>Reading of induction pack</p> <p>Reading of hostels, day centres directory</p> <p>Exploration of relevant websites e.g. Homeless London, St. Mungo's, Thamesreach, Broadway, NHS websites</p> <p>Visits to all key local services</p> <p>Shadowing of Outreach Team workers / Training on use of local homeless databases (e.g. CHAIN)</p>	<ol style="list-style-type: none"> <li>1. Able to confidently and accurately give information to a client on homeless services that they can use - in a format appropriate for them (e.g. taking note of language, literacy problems, with maps etc)</li> <li>2. Able / motivated to contemporaneously search for information regarding local services using Internet etc if indicated</li> <li>3. Able to identify clients to refer to community groups</li> <li>4. Able to refer NFA clients to the Outreach Team in a way that will maximize the possibility of the client being located</li> </ol>		<ol style="list-style-type: none"> <li>1. CHS174 Advise and inform others on services</li> <li>1. CHS177 Advise on access to and use of services</li> <li>2. BAD323 Research information</li> <li>3. HSC331 Support individuals to develop and maintain social networks and relationships</li> <li>4. CHS99 Refer individuals to specialist sources of assistance in meeting their health needs</li> </ol>	<ol style="list-style-type: none"> <li>1. Core 1 Communication</li> <li>2. IK2</li> <li>3. HWB4</li> <li>4. HWB2 HWB6</li> </ol>	



**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>9. IDENTIFIES COMMON HOUSING PROBLEMS, BENEFITS PROBLEMS, AND LEGAL PROBLEMS, AND SIGNPOSTS APPROPRIATELY</b>						
<p>Basic understanding of housing and benefits entitlements for homeless persons, asylum seekers, A8/A2 clients, and those with no recourse to public funding</p> <p>Basic understanding of the benefits system</p> <p>Familiarity with <b>Section 188</b> – the duty of a Council to ensure that suitable accommodation is made available to a homeless person until the Council completes their enquiries (and decides whether a substantive duty is owed under Part 7 of the Act).</p> <p>Knows how to refer to</p>	<p>Shadowing of Outreach Team workers</p> <p>Shadowing of Benefits worker</p> <p>Visit to Citizens Advice Bureau</p> <p>Specialist training regarding the rights of asylum seekers, A8/A2 clients etc.</p> <p>Shadowing of experienced staff members</p> <p>Assessment of knowledge by supervisor</p> <p>Assessment of practice competence by supervisor – able to give appropriate basic advice, and signpost as necessary</p>	<ol style="list-style-type: none"> <li>1. Able to briefly explain legal aspects of homelessness to a client, and refer NFA clients to an HPU / Outreach Team / other service as appropriate</li> <li>2. Able to identify clients at risk of losing their accommodation, and refer them to appropriate sources of support and advice</li> <li>3. Able to identify clients who would benefit from formal Benefits advice and refer appropriately</li> <li>4. Able to signpost clients to legal advice if necessary</li> </ol>		<p>1. HSC367 Help individuals identify and access independent representation and advocacy</p> <p>1./ 2./ 3. HSC349 Enable individuals to access housing and accommodation</p> <p>1./ 2./ 3. MH33 Support individuals to identify and access housing and accommodation services</p> <p>1./ 2./ 3. HSC422 Promote housing opportunities for individuals</p> <p>3. CHS99 Refer individuals to</p>	<p>1. HWB4</p> <p>1./ 2./ 3 HWB4</p> <p>3. HWB2 HWB6</p>	

**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

<p>the local Outreach Team / where the local HPU is, and understands how these two services work</p> <p>Knows local and national providers of specialist advice to marginalized client groups</p>			<p>specialist sources of assistance in meeting their health needs</p> <p>3. HSC345 Support individuals to manage their financial affairs</p> <p>4. <a href="#">SFJIB30 First line asylum legal advice</a></p> <p>4. CHS174 Advise and inform others on services</p> <p>4. <a href="#">SFJCYPW10 Promote the safety and security of children and young people in the immigration and asylum system</a></p>	<p>3. HWB3</p> <p>4. Core 1 Communication</p> <p>4. Core 1 Communication</p> <p>4. Core 3 Health, safety and security</p>	
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## HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>10. EFFECTIVELY IDENTIFIES UNDERLYING PHYSICAL HEALTH, MENTAL HEALTH, AND ADDICTION PROBLEMS IN HOMELESS CLIENTS, AND TREATS, REFERS ON AS APPROPRIATE</b>						
<p>Knows the common physical and mental health conditions that present in the client group</p> <p>Understands the incidence of tri-morbidity in the client group</p> <p>Understands the importance of taking a family history</p> <p>Understands the importance of taking a social and environmental history</p> <p>Understands that the client group are not pro-active in seeking health care</p> <p>Understands the importance and need to use opportunistic questioning in order to discover potential</p>	<p>Shadowing of team members</p> <p>Reading of assessment documentation provided in-house, and assessment documentation used in other environments</p> <p>Engagement in regular clinical supervision</p> <p>Specialist training in history taking and advanced physical assessment skills as appropriate (e.g. Autonomous Practice in Minor Illness course)</p> <p>Specialist training in treatment skills if appropriate e.g. phlebotomy, four layer bandaging</p> <p>Involvement in case review meetings</p> <p>Supervised practice</p> <p>Presenting of assessed</p>	<ol style="list-style-type: none"> <li>1. Able to articulate common physical and mental health morbidities that may present in the client group</li> <li>2. Able to undertake a comprehensive health assessment for a client</li> <li>3. Able to identify any important morbidities in clients, that were not necessarily the presenting complaint</li> <li>4. Able to refer individuals clearly and confidently to other professionals as necessary based on the clinical assessment</li> <li>5. Able to maintain accurate individual records</li> <li>6. Able to maintain appropriate levels of confidentiality with sensitive and complex information as appropriate / requested</li> <li>7. Able to apply advanced clinical skills in order to assess,</li> </ol>		<p>1. MH18<sup>3</sup> Identify the physical health needs of individuals with mental health needs</p> <p>2. HSC417 Assess individuals' mental health and related needs</p> <p>2. CHS60 Assess individuals with long term conditions</p> <p>2. MH17 Assess the need for intervention and present assessments of individuals' needs and related risks</p> <p>2. CHS39 Assess an</p>	<p>1. HWB2</p> <p>2. HWB2</p> <p>2. HWB2</p> <p>2. HWB6</p> <p>2. HWB6</p>	

<sup>3</sup> Although the title may seem inappropriate, the content for this NOS is applicable in this context

**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

<p>underlying serious morbidity</p> <p>Understands the importance of matching the level of questioning to the clients language and literacy skills</p> <p>Understands the importance of opportunistic health promotion</p> <p>Understands the importance of clinical audit in maintaining standards of care</p> <p>Understands scope of own practice skills, and boundaries of own knowledge</p> <p>Understands the importance of keeping up to date with current literature and research</p> <p>Understands the importance of sharing knowledge, skills and expertise with peers</p>	<p>clients to senior staff</p> <p>Assessment of knowledge by supervisor</p> <p>Assessment of practice competence by supervisor – observed to be able to use comprehensive assessment to identify underlying morbidities</p>	<p>diagnose, and treat minor illnesses and injuries in homeless individuals (taking account of underlying morbidities) if this is within the job role</p> <p>8. Able to request appropriate clinical investigations in order to achieve timely diagnosis and treatment, if within the job role</p> <p>9. Able to demonstrate competence in relevant treatment skills e.g. vaccination, phlebotomy, four layer bandaging etc, if within the job role</p> <p>10. Able to identify which clients need a specific plan of care, and to develop a plan in partnership with the client, producing clear patient identified goals</p> <p>11. Able to work with others to develop and review standards of care</p>		<p>individual's health status</p> <p>2. FMH13 Help an individual to feel more psychologically secure</p> <p>2. CHS40 Establish a diagnosis of an individual's health condition</p> <p>3. MH14 Identify potential mental health needs and related issues</p> <p>5. HSC434 Maintain and manage records and reports</p> <p>6. CHS169 Comply with legal requirements for an individual's confidentiality</p> <p>7. CHS118 Form a professional judgement of an individual's health condition</p> <p>7. / 10. CHS44 Plan activities,</p>	<p>2. HWB4</p> <p>2. HWB6</p> <p>3. HWB2</p> <p>5. IK1</p> <p>6. Core 3 Health, safety and security</p> <p>7. HWB6</p> <p>7. / 10. HWB6</p>	
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

				<p>interventions and treatments to achieve specified health goals</p> <p>8. CHS119 Select assessment and investigative techniques/procedures to meet individuals' needs</p> <p>9. GEN63 Act within the limits of your competence and authority</p> <p>9. CHS132 Obtain venous blood samples</p> <p>10. CHS41 Determine a treatment plan for an individual</p> <p>11. PSL8 Develop joint operational policies and care pathways</p>	<p>8. HWB6</p> <p>9. Core 5 Quality</p> <p>9. HWB6</p> <p>10. HWB6</p> <p>11. Core 4 Service Improvement</p>	
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>11. SCREENS FOR, AND IDENTIFIES PROBLEM ALCOHOL USE, AND ADVISES / TREATS / SIGNPOSTS APPROPRIATELY</b>						
<p>Understands alcohol dependence syndrome, and different patterns of alcohol use / misuse</p> <p>Understands the causes and presentation of alcohol withdrawal syndrome and its risks</p> <p>Understands the health and social consequences of alcoholism</p> <p>Understands the reasons for vitamin replacement treatment and current guidance regarding this</p> <p>Knows the range of treatment options available to client (e.g. detox with Librium), as well as</p>	<p>Own reading</p> <p>Exploration of relevant national websites e.g. Alcohol Concern, National Statistics Online</p> <p>Study days (if available)</p> <p>Visit to Alcohol Recovery Project or similar</p> <p>Shadowing of secondary care neuropsychiatric team dealing with chronic alcohol dependent clients if possible</p> <p>Shadowing of secondary care liver team dealing with liver cirrhosis if possible</p> <p>Observations of specialists in practice / Discussions with specialists</p> <p>Supervised practice</p>	<p>1. Able to identify clients with problematic alcohol use using local tools if appropriate e.g. Paddington Alcohol Test, FAST</p> <p>2. Able to discuss concerns with clients and give brief intervention advice</p> <p>3. Able to refer to alcohol support appropriately</p> <p>4. Able to make use of a basic assessment tool that identifies alcohol withdrawal syndrome</p> <p>5. Able to identify danger signs e.g. fits, blackouts, DT's and refer for emergency help as necessary</p> <p>6. Able to explain to clients why they need vitamin replacement, and refer for Thiamine etc / give Thiamine as required</p> <p>7. Able to discuss sleep</p>		<p>1. AE1 Test for substance use</p> <p>1. AA1 Recognise indications of substance misuse and refer individuals to specialists</p> <p>2. FMH13 Help an individual to feel more psychologically secure</p> <p>2. AH10 Employ techniques to help individuals to adopt sensible drinking behaviour</p> <p>2. / 7. GEN14 Provide advice and information to individuals on how to manage their own condition</p> <p>3. CHS99 Refer</p>	<p>1. HWB6</p> <p>1. HWB2</p> <p>2. HWB4</p> <p>2. HWB4</p> <p>2. / 7. Core 1 Communication</p> <p>3. HWB2</p>	

**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

<p>the processes involved in accessing treatments e.g. detox and rehab</p> <p>Basic understanding of 'sleep hygiene' &amp; the relationship of sleep problems to substance misuse</p> <p>Understands the legal workings of PGDs</p> <p>Knows how to set boundaries with clients under the influence</p>	<p>PGD reading / training as required</p> <p>Assessment of knowledge by supervisor</p> <p>Assessment of practice competence by supervisor – successful interventions undertaken</p> <p>Feedback from clients</p>	<p>hygiene issues with a client, and make basic recommendations for improvement</p>		<p>individuals to specialist sources of assistance in meeting their health needs</p> <p>4. AF3 Carry out comprehensive substance misuse assessment</p> <p>5. AB5 Assess and act upon immediate risk of danger to substance users</p> <p>6. AB2 Support individuals who are substance users</p>	<p>HWB6</p> <p>4. HWB2</p> <p>5. HWB3</p> <p>6. HWB4</p>	
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KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>12. SCREENS FOR, AND IDENTIFIES PROBLEM DRUG USE, AND ADVISES / TREATS / SIGNPOSTS APPROPRIATELY</b>						
<p>Understands features of dependence on heroin, crack cocaine, ecstasy, benzodiazepines, marijuana, and other common drugs of abuse</p> <p>Understand delivery modes of the above drugs, and the associated risks</p> <p>Knows withdrawal symptoms associated with common drugs of abuse, and the associated dangers of these withdrawal syndromes</p> <p>Knows the clinical features of, and risks of overdose with the above drugs</p> <p>Understands what immediate action to take in event of OD</p> <p>Knows the range of treatment options available to client (e.g. Methadone and Subutex), and the processes involved in accessing treatments e.g. detox and rehab</p> <p>Knows drug interactions between prescribed and non-prescribed drugs</p>	<p>Own reading</p> <p>Exploration of relevant national websites e.g. Talk to Frank, Exchange Supplies, National Statistics Online, Home Office</p> <p>Study days – options are available through a variety of agencies</p> <p>Visit to Community Drug and Alcohol Team or similar – shadowing during substitute prescribing session</p> <p>Observations of specialists in practice / Discussions with specialists</p> <p>Supervised practice</p> <p>PGD reading / training as required</p> <p>Assessment of</p>	<ol style="list-style-type: none"> <li>1. Able to assess the seriousness of a presenting addiction, and identify associated individual client risk factors e.g. groin / neck injecting, abscesses, recent ODs, criminal behaviour, sex work etc.</li> <li>2. Able to articulate the risks of specific drugs to clients</li> <li>3. Able to identify features of withdrawal, and refer client appropriately</li> <li>4. Able to teach the recovery position to clients</li> <li>5. Able to give harm minimisation advice to clients</li> <li>6. Able to refer on for and / or give needle exchange safely</li> <li>7. Able to refer for addictions treatment</li> <li>8. Able to administer</li> </ol>		<ol style="list-style-type: none"> <li>1. AF3 Carry out comprehensive substance misuse assessment</li> <li>2. FMH13 Help an individual to feel more psychologically secure</li> <li>2. AD1 Raise awareness about substances, their use and effects</li> <li>2. / 5. / 10. GEN14 Provide advice and information to individuals on how to manage their own condition</li> <li>3. AB5 Assess and act upon immediate risk of danger to substance users</li> <li>4. CHS35</li> </ol>	<ol style="list-style-type: none"> <li>1. HWB2</li> <li>2. HWB4</li> <li>2. HWB1</li> <li>2. / 5. / 10. Core 1 Communication</li> <li>3. HWB3</li> <li>4. HWB7</li> </ol>	



**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

<p>Knows particular health risks associated with each mode of drug use e.g. DVT, ulcers, abscesses, BBVs - IVDU, pulmonary problems – crack use</p> <p>Understands who is a priority for immunisation with e.g. Hep B, Revaxis</p> <p>Understands the need for increased safer sex advice for drug users</p> <p>Basic understanding of 'sleep hygiene' &amp; the relationship of sleep problems to substance misuse</p> <p>Understands the legal workings of PGDs</p>	<p>knowledge by supervisor</p> <p>Assessment of practice competence by supervisor – successful interventions undertaken</p> <p>Feedback from clients</p>	<p>emergency PGD drugs safely</p> <p>9. Able to undertake a body check, and identify signs of damage to veins</p> <p>10. Able to recommend, explain the need for, and administer appropriate vaccinations</p> <p>11. Able to give safer sex advice, and advise on condom use</p> <p>12. Able to discuss sleep hygiene issues with a client and make basic recommendations for improvement</p>		<p>Provide first aid to an individual needing emergency assistance</p> <p>6. AH3 Supply and exchange injecting equipment for individuals</p> <p>7. CHS99 Refer individuals to specialist sources of assistance in meeting their health needs</p> <p>7. AF2 Carry out assessment to identify and prioritise needs</p> <p>8. / 10. CHS3 Administer medication to individuals</p> <p>9. CHS39 Assess an individual's health status</p> <p>11. / 12. GEN14 Provide advice and information to individuals on how to manage their own</p>	<p>HWB6</p> <p>6. HWB4</p> <p>7. HWB2 HWB6</p> <p>7. HWB2</p> <p>8. / 10. HWB5</p> <p>9. HWB6</p> <p>11. / 12. Core 1 Communication</p>	
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>13. TAKES A TOBACCO SMOKING HISTORY, GIVES EFFECTIVE SMOKING CESSATION ADVICE, AND SIGNPOSTS APPROPRIATELY</b>						
<p>Understands that homeless persons should be offered an equitable service in respect of smoking cessation advice, and referral to smoking cessation services</p> <p>Understands the health issues related to smoking</p> <p>Knows various approaches to smoking cessation</p> <p>Understands the effects of passive smoking</p>	<p>Own reading</p> <p>Level One/Two smoking cessation training</p> <p>Exploration of relevant national websites</p> <p>Visit to local smoking cessation service / discussion with specialists</p> <p>Supervised practice</p> <p>Assessment of knowledge by supervisor</p> <p>Assessment of practice competence by supervisor</p> <p>Feedback from clients</p>	<ol style="list-style-type: none"> <li>1. Able to take a smoking history</li> <li>2. Able to give brief intervention advice regarding smoking</li> <li>3. Able to advise clients regarding avoiding passive smoking as appropriate</li> <li>4. Able to refer to appropriate Level 2/3 services if required</li> </ol>		<ol style="list-style-type: none"> <li>1. CHS168 Obtain a patient/client history</li> <li>2. FMH13 Help an individual to feel more psychologically secure</li> <li>2. / 3. CHS79 Support individuals who express a wish to stop smoking</li> <li>4. CHS99 Refer individuals to specialist sources of assistance in meeting their health needs</li> </ol>	<ol style="list-style-type: none"> <li>1. HWB2</li> <li>2. HWB4</li> <li>2. / 3. HWB1</li> <li>4. HWB2 HWB6</li> </ol>	

**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>14. KNOWS THE PRINCIPLES AND PRACTICE OF MOTIVATIONAL INTERVIEWING, AND APPLIES THE SKILLS DURING KEY CONSULTATIONS</b>						
<p>Understands the basic principles of the 'Stages of Change' model</p> <p>Understands the basic principles of a Motivational Interviewing approach</p> <p>Knows the differences between a motivational approach and a confrontational approach</p>	<p>Own reading regarding model</p> <p>Exploration of relevant national websites</p> <p>Discuss with alcohol and/or drugs treatment specialist in relation to specific clients</p> <p>Observation of practitioners making use of motivational skills</p> <p>Assessment of knowledge by supervisor</p> <p>Assessment of practice competence by supervisor – able to present an empathetic, non-challenging / labelling approach</p>	<ol style="list-style-type: none"> <li>1. Able to make a basic assessment of a clients motivation to change</li> <li>2. Able to adopt a client centred / collaborative approach to discussion of addiction issues with clients</li> <li>3. Able to use empathic counselling skills and avoid challenging / labelling</li> </ol>		<p>1. / 2. MH101 Manage the process of change throughout counselling</p> <p>2. FMH13 Help an individual to feel more psychologically secure</p> <p>3. MH100 Establish and maintain the therapeutic relationship</p>	<p>1. / 2 .HWB7</p> <p>2. HWB4</p> <p>3. Core 1 Communication</p>	

## HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>15. SENSITIVELY SCREENS FOR, AND IDENTIFIES MILD, MODERATE AND SEVERE MENTAL HEALTH ISSUES, AND REFERS ON APPROPRIATELY</b>						
<p>Knows the limits and boundaries of their own knowledge and skills</p> <p>Knows the signs and symptoms of depression in primary care, and how to undertake a brief assessment</p> <p>Understands the level of motivation and stability required in order for a client to benefit from counseling etc</p> <p>Understands the difference between Severe and Enduring Mental Illness, and other conditions e.g. mild-moderate depression and anxiety</p> <p>Understands the importance of thorough risk assessment when dealing with self-harm and suicide risk</p> <p>Basic understanding of psychotropic medication</p>	<p>Own reading – WHO Diagnostic and Management Guidelines for Mental Disorders in Primary Care</p> <p>Exploration of relevant national websites e.g. MIND</p> <p>Review of tools used to do a Mental State Exam, and identification of how key questions can be integrated into one's own assessment</p> <p>Mental Health First Aid training</p> <p>Other study days if available</p> <p>Shadowing CPN</p> <p>Observations of CPN in practice / Discussion with CPN around key issues</p> <p>Training on the Care Programme Approach</p> <p>Supervised practice – including practice using tools as appropriate</p> <p>Assessment of knowledge</p>	<ol style="list-style-type: none"> <li>1. Able to identify boundaries of own competence / skill, and refer on as necessary</li> <li>2. Able to conduct a risk assessment to identify e.g. self-neglect, self-harm and suicide risk</li> <li>3. Able to identify the signs and symptoms of depression in primary care, and undertake a brief assessment using an appropriate tool e.g. PHQ9 and/or own history taking skills</li> <li>4. Able to identify appropriate clients to refer for counseling</li> <li>5. Able to articulate the difference between psychotic illnesses and other mental health conditions, and able to identify psychotic symptoms during assessment using tools and/or history taking skills as appropriate</li> <li>6. Able to identify side effects, failure to respond or concordance issues with psychotropic medication, and able to give advice and refer on</li> </ol>		<ol style="list-style-type: none"> <li>1. GEN63 Act within the limits of your competence and authority</li> <li>2. MH16 Assess individuals' circumstances and evaluate the risk of abuse, failure to protect and harm to self and others</li> <li>2. MH14 Identify potential mental health needs and related issues</li> <li>3. FMH13 Help an individual to feel more psychologically secure</li> <li>3. CHS39 Assess an individual's health status</li> <li>4. CHS99 Refer</li> </ol>	<ol style="list-style-type: none"> <li>1. Core 1 Communication</li> <li>2. HWB2</li> <li>2. HWB2</li> <li>3. HWB4</li> <li>3. HWB6</li> <li>4. HWB2</li> </ol>	

**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

<p>Understands the diagnosis of Post Traumatic Stress Disorder, and approaches to management, and is able to identify probable sufferers</p> <p>Knows local referral pathways, resources, and key people to contact when supporting clients with mental health difficulty</p> <p>Understands the principles of the 'strengths' and 'recovery' models</p> <p>Understands the use Care Programme Approach in mental health care</p> <p>Understands the existence of 'somatic symptoms'</p> <p>Understands cultural issues in mental health</p>	<p>by supervisor</p> <p>Assessment of practice competence by supervisor – successful interventions undertaken</p> <p>Presenting cases to team or local agency</p> <p>Feedback from clients</p> <p>Assistance to develop honest self appraisal of own skills and competence</p>	<p>as appropriate</p> <p>7. Able to identify the key features of PTSD during a client history</p> <p>8. Able to make contact with appropriate services, and use referral pathways</p> <p>9. Able to liaise appropriately with local CMHTs, and identify the Care Coordinator of a client</p> <p>10. Able to identify physical symptoms that might have a mental health causation</p> <p>11. Able to articulate ideas and behaviours which might have a cultural basis, and not be a symptoms of a mental health condition</p>		<p>individuals to specialist sources of assistance in meeting their health needs</p> <p>5. / 6. 7. FMH1 Assess, diagnose and formulate a patient's mental health disorder</p> <p>8. CHS99 Refer individuals to specialist sources of assistance in meeting their health needs</p> <p>9. GEN44 Liaise between primary, secondary and community teams</p> <p>10. CHS39 Assess an individual's health status</p> <p>11. MH14 Identify potential mental health needs and related issues</p>	<p>HWB6</p> <p>5. / 6. 7. HWB6</p> <p>8. HWB2 HWB6</p> <p>9. Core 1 Communication</p> <p>10. HWB6</p> <p>11. HWB2</p>	
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>16. UNDERSTANDS THE POTENTIAL CHALLENGES PRESENTED BY CLIENTS WITH PERSONALITY DISORDER, AND WORKS CONSTRUCTIVELY AND EFFECTIVELY WITH THESE CLIENTS</b>						
<p>Understands the diagnosis of personality disorder</p> <p>Understands the trust issues that personality disordered persons have, and that this may be rooted in past emotional trauma</p> <p>Understands the importance of consistency, reliability, and investment of time in building relationships</p> <p>Understand the notion of 'boundaries'</p> <p>Understand some of the common behaviours that people with PD display, and which may prove challenging</p>	<p>Own reading</p> <p>Exploration of relevant national websites</p> <p>Study days (if available)</p> <p>Supervised practice</p> <p>Presenting cases to team or local agency</p> <p>Assessment of knowledge by supervisor</p> <p>Assessment of practice competence by supervisor – successful interventions undertaken</p> <p>Feedback from clients</p> <p>Assistance to develop honest self appraisal of own skills and competence</p>	<ol style="list-style-type: none"> <li>1. Able to identify clients whose problems are a result of their PD</li> <li>2. Able to articulate the pros and cons of such a label</li> <li>3. Able to explain a PD diagnosis to a client</li> <li>4. Able to appropriately 'limit set' – and withdraw from a situation when inappropriate behaviours are being displayed</li> <li>5. Able to demonstrate insight regarding own responses to the behaviour of people with PD</li> <li>6. Able to identify situations which may need discussing in supervision</li> <li>7. Able to articulate the limit of one's own skills in helping people with PD</li> </ol>		<p>1. CHS40 Establish a diagnosis of an individual's health condition</p> <p>2. GEN14 Provide advice and information to individuals on how to manage their own condition</p> <p>3. CHS48 Communicate significant news to individuals</p> <p>3. FMH13 Help an individual to feel more psychologically secure</p> <p>4. / 5. MH100 Establish and maintain the therapeutic relationship</p>	<p>1. HWB6</p> <p>2. Core 1 Communication</p> <p>3. Core 1 Communication</p> <p>3. HWB4</p> <p>4. Core 1 Communication</p>	

**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

<p>Understands the kinds of psychosocial intervention likely to be useful to people with a diagnosis of personality disorder</p> <p>Knows the national and local resources available to support people with a personality disorder, and how to make use of them</p>		<p>8. Able to refer for specialist help as appropriate</p>		<p>4. FMH10<sup>4</sup> Make and maintain personal and professional boundaries with patients in a secure setting</p> <p>6. GEN36 Make use of supervision</p> <p>7. GEN63 Act within the limits of your competence and authority</p> <p>8. CHS99 Refer individuals to specialist sources of assistance in meeting their health needs</p>	<p>4. Core 5 Quality</p> <p>6. Core 2 Personal and people development</p> <p>7. Core 5 Quality</p> <p>8. HWB2 HWB6</p>	
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<sup>4</sup> Although the title may seem inappropriate, the content for this NOS is applicable in this context



## HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>17. TAKES APPROPRIATE ACTION TO PROACTIVELY PROTECT THE HEALTH OF BOTH INDIVIDUAL AND SOCIETY</b>						
<p>Knows why homelessness is a public health issue</p> <p>Understands which infectious conditions are common in homeless persons e.g. TB, HIV, Hepatitis A, Hepatitis B, Hepatitis C, STIs e.g. syphilis, scabies, head lice</p> <p>Knows the risk factors associated with developing TB, HIV, Hepatitis A, Hepatitis B, Hepatitis C, STIs e.g. syphilis, scabies, head lice etc</p> <p>Understands the transmission routes of the above</p> <p>Knows which of these infectious diseases are notifiable</p> <p>Has a good working knowledge of immunization programmes in UK</p>	<p>Own reading regarding current Government priorities around public health</p> <p>Visit to local public health unit</p> <p>Visit to TB service</p> <p>Training in TB risk assessment</p> <p>Training in Mantoux testing and reading if required</p> <p>Visit to local HIV, Liver, GU clinic</p> <p>Shadowing of practice nurse to become up to date regarding National Service Frameworks for chronic disease, and national screening programmes</p> <p>Immunization / PGD training –working</p>	<ol style="list-style-type: none"> <li>1. Able to identify normal levels of incidence and prevalence of a disease in the population</li> <li>2. Able to identify 'outbreaks', and who these need to be reported to</li> <li>3. Able to identify notifiable diseases</li> <li>4. Able to identify the need for TB screening and refer / screen as appropriate</li> <li>5. Able to identify the need for BBV screening and refer / screen as appropriate</li> <li>6. Able to identify the need for STI screening and refer / screen as appropriate</li> <li>7. Able to accurately identify various parasitic skin disorders e.g. scabies , head lice</li> <li>8. Able to use PGDs safely</li> </ol>		<p>1. HP3 Monitor and analyse routine surveillance data to assess risks to health, wellbeing and safety</p> <p>1. / 2. PHS06 Assess risks to the population's health and wellbeing and apply this to practice</p> <p>3. HP1 Identify hazards and assess risks to health, wellbeing and safety from information provided by individuals</p> <p>4. / 5. / 6. / 10. CHS227 Conduct health screening programmes</p> <p>4. / 5. / 6. / 10. PHS04 Plan,</p>	<p>1. IK2</p> <p>1. / 2. Core 5 Quality</p> <p>3. HWB3</p> <p>4. / 5. / 6. HWB1</p> <p>4. / 5. / 6. / 10. HWB3</p>	

**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

<p>Understands the specific recommended immunizations relevant to the client group</p> <p>Understands 'herd immunity'</p> <p>Understands the reasoning behind opportunistic immunisation</p> <p>Understands the legal workings of PGDs</p> <p>Knows the signs and symptoms of anaphylactic shock</p> <p>Knows the other general areas of public health that are the focus of national targets (and equally of relevance to the homeless population) e.g. cancer, coronary heart disease, obesity, smoking, cervical Screening, teenage pregnancy</p>	<p>alongside others until assessed competent</p> <p>Basic Life Support / Anaphylaxis training (Up to date certificates must be held before working independently)</p> <p>Assessment of knowledge by supervisor</p> <p>Assessment of practice competence by supervisor – identifies when conditions need to be notified, and identifies trends</p>	<p>to proactively immunize in both health, and non health settings</p> <p>9. Able to identify important NSFs and NICE guidance that apply equally to this client group as to the general population</p> <p>10. Able to perform yearly health checks as necessary, or enable the client to access necessary screening as appropriate</p>		<p>implement, monitor and evaluate disease prevention and screening programmes to improve the population's health and wellbeing</p> <p>7. CHS40 Establish a diagnosis of an individual's health condition</p> <p>8. HP9 Develop plans to provide immunisation as an intervention to protect the population's health and wellbeing</p> <p>9. PHP24 Work in partnership with communities to implement policies, strategies, services, programmes and interventions to improve health and wellbeing</p>	<p>7. HWB6</p> <p>8. HWB1</p> <p>9. HWB1</p>	
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>18. SCREENS FOR, AND IDENTIFIES CLIENTS AT RISK OF / SUFFERING FROM SEXUALLY TRANSMITTED DISEASES AND / OR BLOOD BORN VIRUSES, AND ADVISES / TREATS / SIGNPOSTS APPROPRIATELY</b>						
<p>Knows the prevalence of Hep A, Hep B, Hep C, HIV and STI's in the client group</p> <p>Knows the routes of transmission of BBVs and STIs, and who is most at risk</p> <p>Knows any local trends within the population</p> <p>Knows the local screening services available for STI and BBV</p> <p>Knows how to facilitate a client with a BBV or STI into treatment</p> <p>Knows the probable clinical and public health consequences of non-compliance with treatment for BBVs and STIs</p> <p>Understands the particular needs of 'Working Women'</p> <p>Understands reasons for the low uptake of cervical screening in this client</p> <p>Knows about the National Chlamydia Screening</p>	<p>Own reading</p> <p>Study days regarding sexually transmitted diseases, and BBVs</p> <p>Study days regarding Family Planning</p> <p>Visit to local GU clinic</p> <p>Shadowing GU nurses</p> <p>Shadowing BBV nurses if locality employs these</p> <p>Visit to cervical screening session ? with Practice Nurse</p> <p>Visit to Hepatitis Clinic in secondary care</p> <p>Phlebotomy training as appropriate</p> <p>Cervical cytology training / sexual health screening training as appropriate</p>	<ol style="list-style-type: none"> <li>1. Able to establish and maintain effective communication with clients regarding BBVs and STIs, and manage any challenging and sensitive issues effectively</li> <li>2. Able to identify clients most at risk of acquiring BBVs and STIs</li> <li>3. Able to articulate the routes of transmission of BBVs and STIs, and give appropriate harm minimisation advice to clients</li> <li>4. Able to discuss the pros and cons of testing / not-testing with clients, and thus ensure informed consent</li> <li>5. Able to identify clients who are likely to be spreading infections, and challenge this in an appropriate manner</li> <li>6. Able to recommend, explain the need for, and administer appropriate vaccinations in order to protect clients</li> <li>7. Able to give safer sex</li> </ol>		<p>1. GEN97 Communicate effectively in a healthcare environment</p> <p>1. FMH13 Help an individual to feel more psychologically secure</p> <p>2. CHS42 Identify individuals with or at risk of developing long term conditions or related ill health</p> <p>3. CHS46 Assess risks associated with health conditions</p> <p>3. IPC13 Provide guidance, resources and support to enable staff to minimise the risk of</p>	<p>1. Core 1 Communication</p> <p>1. HWB4</p> <p>2. HWB1</p> <p>3. HWB2</p> <p>3. Core 3 Health, safety and security</p>	

**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

<p>Programme</p> <p>Knows about the HPV vaccine</p> <p>Knows how to advise clients regarding effective condom usage</p> <p>Understands which vaccinations are recommended for clients with risky sexual behavior</p> <p>Understands the need for effective family planning advice</p> <p>Understands why many clients do not access family planning services</p> <p>Understands possible reasons for disturbed menstrual cycles in homeless women</p>		<p>advise, and advise on condom use</p> <p>8. Able to identify clients at risk of unplanned pregnancy, and give appropriate advice</p> <p>9. Able to give appropriate health advice to clients trying to become pregnant, particularly those clients whose unborn children could potentially end up on the 'at risk' register</p> <p>10. Able to signpost / refer clients effectively and appropriately</p> <p>11. Able to take bloods from clients with difficult veins if this is a part of the job role</p>	<p>spreading infection</p> <p>4. CHS167 Obtain valid consent or authorisation</p> <p>5. HP7 Provide information and advice to at-risk contacts, to protect health, wellbeing and safety</p> <p>5. CHS227 Conduct health screening programmes</p> <p>5. PHS04 Plan, implement, monitor and evaluate disease prevention and screening programmes to improve the population's health and wellbeing</p> <p>4. / 6. / 7. / 8. / 9. GEN14 Provide advice and information to individuals on how to manage their own condition</p>	<p>4. HWB2</p> <p>5. HWB3</p> <p>5. HWB1</p> <p>5. HWB3</p> <p>4. / 6. / 7. / 8. / 9. Core 1 Communication</p>	
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

				<p>9. MCN23 Provide advice and information during pregnancy</p> <p>9. MCN22 Provide pre-conception advice and information</p> <p>10. CHS177 Advise on access to and use of services</p> <p>10. CHS99 Refer individuals to specialist sources of assistance in meeting their health needs</p> <p>11. CHS132 Obtain venous blood samples</p>	<p>9. HWB4</p> <p>9. HWB4</p> <p>10. Core 1 Communication</p> <p>10. HWB2 HWB6</p> <p>11. HWB6</p>	
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## HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>19. IDENTIFIES ASYLUM SEEKERS AND REFUGEES WHO HAVE PARTICULAR HEALTH NEEDS AS A RESULT OF THEIR ASYLUM SEEKING / REFUGEE STATUS, AND MANAGES THEM APPROPRIATELY</b>						
<p>Understands why asylum seekers / refugees may become homeless</p> <p>Understands that many asylum seekers / refugees will not understand the NHS system</p> <p>Has working knowledge of the asylum system e.g. <b>NASS</b> section 4 - The rights of failed asylum seekers to access to health care in certain circumstances</p> <p>Knows when and how to refer to a welfare / immigration advisor</p> <p>Knows where to access translation services, and</p>	<p>Equality and Diversity training</p> <p>Basic training around the asylum system, and asylum seekers / refugee rights to NHS care <a href="http://www.harpweb.org/content.php?section=practical">www.harpweb.org/content.php?section=practical</a></p> <p>Supervised practice with clinicians working exclusively with asylum seekers and refugees</p> <p>Supervised practice delivering comprehensive health assessment developed for new asylum seekers</p> <p>Supervised practice using Language Line or equivalent</p> <p>Visit to nearest Refugee Council centre</p> <p>Visit to a refugee day</p>	<ol style="list-style-type: none"> <li>1. Able to engage effectively with clients from an asylum seeking / refugee background</li> <li>2. Able to ask difficult questions sensitively, and encourage clients to 'open up' in a safe environment</li> <li>3. Able to enable asylum seeking / refugee clients to understand and access NHS health care e.g. GP services, antenatal care</li> <li>4. Able to refer clients to appropriate services, and support clients in accessing them</li> <li>5. Able to work effectively with Language Line, face-to-face interpreters and health advocates</li> <li>6. Able to assess the 'catch-up' immunization needs of adults and children, and administer / refer as</li> </ol>		<p>1. / 2. GEN97 Communicate effectively in a healthcare environment</p> <p>1. <a href="#">SFJCYPW10 Promote the safety and security of children and young people in the immigration and asylum system</a></p> <p>2. FMH13 Help an individual to feel more psychologically secure</p> <p>3. / 4. CHS177 Advise on access to and use of services</p> <p>3. / 4. HSC330 Support</p>	<p>1./ 2. Core 1 Communication</p> <p>1. Core 3 Health, safety and security</p> <p>2. HWB4</p> <p>3. / 4. Core 1 Communication</p> <p>3. / 4. HWB4</p>	

**Comment [SN2]:** Sam, you make a change to this

**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

<p>understands the importance of using official providers of language support</p> <p>Has working knowledge of local refugee groups</p> <p>Understands the issues faced by unaccompanied minors</p> <p>Understands that the effectiveness of delivery of standard immunization programmes varies in different countries, and that asylum seekers / refugees may need catch up immunizations</p> <p>Understands the diagnosis of Post Traumatic Stress Disorder, identifies probable sufferers, and knows approaches to management</p> <p>Understands the loss and separation issues that asylum seekers / refugees</p>	<p>centre in order to have social conversations with potential clients</p> <p>Reading of local directories outlining services for asylum seekers / refugees</p> <p>Reading of 'Green Book' outlining HPA guidance on immunizing people with an incomplete UK schedule <a href="http://www.hpa.org.uk">www.hpa.org.uk</a></p> <p>Reading of resources provided by the Medical Foundation for Victims of Torture <a href="http://www.torturecare.org.uk/">www.torturecare.org.uk/</a></p> <p>Reading of resources regarding Female Genital Mutilation <a href="http://www.forwarduk.org.uk/key-issues/fgm">www.forwarduk.org.uk/key-issues/fgm</a></p> <p>Shadowing of professionals working on Looked After Children team if possible</p> <p>Assessment of knowledge by supervisor</p>	<p>appropriate for immunizations</p> <p>7. Able to identify the key features of Post Traumatic Stress Disorder, or other mental health problems when taking a client history, and refer on to appropriate support services in timely manner</p> <p>8. Able to refer to and /or liaise with social services / and Looked After Children's services as necessary</p> <p>9. Able to identify potentially overlooked child development problems if working with children</p>		<p>individuals to access and use services and facilities</p> <p>5. HSC371 Support individuals to communicate using interpreting and translation services</p> <p>6. / 7. CHS168 Obtain a patient/client history</p> <p>6. PHP17 Work in partnership with others to prevent the onset of adverse effects on health and wellbeing in populations</p> <p>7. / 8. CHS99 Refer individuals to specialist sources of assistance in meeting their health needs</p> <p>9. CS21 Monitor the health and well-being of children and young people</p>	<p>5. Core 1 Communication</p> <p>6. / 7 .HWB2</p> <p>6. HWB1</p> <p>7. / 8. HWB2 HWB6</p> <p>9. HWB2</p>	
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

<p>face</p> <p>Understands that clients may present with both physical injuries sustained through torture and / or war e.g. hearing loss, limb loss, and also commonly with 'somatic' pain</p> <p>Understands underlying physical health problems that asylum seekers may present with that will be a risk to individual and public health e.g. TB, HIV etc</p> <p>Knows that clients may have undergone Female Genital Mutilation, and understands UK law in respect of this</p> <p>Understands there may be unidentified child development problems in asylum seeking / refugee families</p> <p>Understands there may be potential difficulties around</p>						
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

family re-unions Knows the issues related to age disputed children						
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## HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>20. PROMOTES SAFE HOSPITAL DISCHARGE</b>						
<p>Understands the importance of safe hospital discharge</p> <p>Understands the importance of planning for safe discharge from time of hospital admission</p> <p>Understands the clinical risks to an individual of delayed discharge</p> <p>Understands the reasons for the high rate of self-discharge in the client group</p> <p>Knows the local intermediate / respite care facilities available to the client group</p> <p>Knows local physical and mental health community nursing teams providing</p>	<p>Reading of the 'Hospital Admission and Discharge: People who are homeless or who are living in temporary or insecure accommodation' protocol</p> <p>Visit to local A&amp;E(s)</p> <p>Shadowing of hospital discharge team</p> <p>In particular shadowing of any Homeless Link Workers that exist in the A&amp;E or discharge team</p> <p>Shadowing of hospital social services staff</p> <p>Assessment of knowledge by supervisor</p> <p>Assessment of practice competence by supervisor – able to identify unsafe discharges and advocate appropriately</p>	<ol style="list-style-type: none"> <li>1. Able to identify unsafe hospital discharges</li> <li>2. Able to advocate for clients to prevent unsafe hospital discharge</li> <li>3. Able to advocate for a clients needs to be met whilst an inpatient (i.e. substance misuse needs, mental health needs etc), in order to prevent self-discharge</li> <li>4. Able to articulate clearly to secondary care staff the nature of accommodation a client resides in (i.e. the level of support provided where they live)</li> <li>5. Able to ensure appropriate follow-up arrangements are made on discharge</li> <li>6. Able to develop a safe plan of care for medication on discharge – in particular able to give counseling around</li> </ol>		<ol style="list-style-type: none"> <li>1. CHS122 Prepare a discharge plan with individuals</li> <li>2. / 3. HSC410 Advocate with, and on behalf of, individuals, families, carers, groups and communities</li> <li>4. GEN97 Communicate effectively in a healthcare environment</li> <li>5. GEN17 Contribute to the discharge of an individual into the care of another service</li> <li>6. CHS55 Facilitate the individuals management of</li> </ol>	<ol style="list-style-type: none"> <li>1. HWB6</li> <li>2. / 3. Core 1 Communication</li> <li>4. Core 1 Communication</li> <li>5. HWB7</li> <li>6. HWB4</li> </ol>	

**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

<p>community support to the client group</p> <p>Understands the nature and types of accommodation a client may reside in e.g. hostels, supported housing, B&amp;Bs etc.</p> <p>Knows how to contact local hospital discharge teams</p> <p>Familiar with the 'Hospital Admission and Discharge: People who are homeless or who are living in temporary or insecure accommodation' protocol</p>		<p>concordance, and come up with a management strategy if concordance is unlikely</p> <p>7. Able to involve friends, carers, and keyworkers in hospital discharge decisions as appropriate</p>		<p>their condition and treatment plan</p> <p>7. GEN43 Monitor and review the rehabilitation process with the individual, their family, carers and other professionals</p> <p>7. CHS122 Prepare a discharge plan with individuals</p>	<p>7. HWB5</p> <p>7. HWB6</p>	
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**HOMELESSNESS - KNOWLEDGE AND SKILLS FRAMEWORK**

KNOWLEDGE AND UNDERSTANDING	TRAINING REQUIRED	ASSESSMENT OF COMPETENCE AND SKILLS	ACHIEVED DATE AND SIGNATURE	MAPPED TO NOS	MAPPED TO NHS KSF	COMMENTS
<b>21. UNDERSTANDS WHERE TO ACCESS PROFESSIONAL SUPPORT OUTSIDE OWN ORGANISATION</b>						
<p>Knows that homelessness is a small speciality with limited numbers of experts</p> <p>Understands the importance of networking in order to increase knowledge</p> <p>Understands the professional clinical risks associated with being an isolated practitioner</p>	<p>Exploration of relevant national websites e.g. HNG – UK, QNI – Homeless Health Initiative, London Network (Homeless Group), Homeless Link</p> <p>Attendance at one network meeting and / or training event during the induction period</p>	<ol style="list-style-type: none"> <li>1. Able to articulate the need for involvement in networking organisations</li> <li>2. Able to articulate the professional risks of lone working</li> <li>3. Able to engage with workers of varying disciplines in other areas in order to increase own knowledge base</li> </ol>		<ol style="list-style-type: none"> <li>1. M&amp;L A3 Develop your personal networks</li> <li>2. <a href="#">CFAWRV14 Managing lone working</a></li> <li>3. GEN13 Synthesise new knowledge into the development of your own practice</li> <li>3. M&amp;L A2 Manage your own resources and professional development</li> </ol>	<ol style="list-style-type: none"> <li>1. Core 5 Quality</li> <li>2. Core 3 Health, safety and security</li> <li>3. Core 2 Personal and people development</li> <li>3. Core 2 Personal and people development</li> </ol>	