

Allied Health Professions' Support Worker Competency, Education, and Career Development Framework (draft for consultation)

Realising potential to deliver confident,
capable care for the future



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Foreword

Support workers play a crucial and growing role delivering safe and effective care across the allied health professions (AHPs). They work across the NHS, social care, the independent sector, housing, education, and the voluntary sectors, playing an integral role supporting people's health and wellbeing.

Ensuring clear and consistent access to high-quality learning and career progression for these staff members will deliver benefits for services and their users, such as high-quality care, continuity of care, improved retention, and reduced waiting lists. Moreover, defining clear pathways into and through support worker roles not only increases job satisfaction and opportunities for support workers, but also builds workforce capacity, creates a more diverse workforce, and helps secure future workforce supply.

However, too often support workers in both health and social care face barriers to their development, deployment, and career progression. These can include variation in roles, inconsistent delegation of tasks, poorly defined development routes, and lack of access to training and education.



There is a need to ensure that support workers have the right knowledge and skills to work at the top of their scope of practice, supported by high-quality education, and can progress their careers and aspirations. This Framework seeks to support this across England.

Suzanne Rastrick OBE
Chief Allied Health Professions Officer for England

AHPs have been at the forefront of developing support worker roles, particularly in the NHS. However, from our work with support workers and services across the country we know there is wide variation in their education and training, and how they are deployed.



We have developed this Framework, working closely with a wide range of partners, and would like to thank everyone who has supported us throughout this process. The Framework, alongside a suite of improvement and implementation resources from HEE, demonstrates our recognition of and commitment to this vital workforce.

Beverley Harden
National Allied Health Professions Lead,
Health Education England
Deputy Chief Allied Health Professions Officer



Part One: Background and context

Background

Health Education England (HEE) has published this AHP Support Worker Competency, Education and Career Development Framework to maximise the contribution of the AHP support workforce to delivering safe and effective care.

This work will ensure that:

- Patients and service users have access to skilled and consistently well-trained support workers who have a defined role within their team, service, and organisation;
- Current and prospective AHP support workers have access to refreshed role descriptions and standardised career/development structures that provide opportunities to follow a richer and more rewarding career pathway;
- Services can address current unwarranted variation in support worker roles, banding and progression;
- Support worker roles can be at the heart of improvements in service delivery and transformation, including new models of care.

This will support joint approaches to the commissioning and delivery of apprenticeships, ensuring support staff are deployed consistently across integrated care systems.

Information on all HEE's work to recognise and develop the AHP support workforce can be found on the [HEE website](#).

The allied health professions are art therapists, dramatherapists, music therapists, chiropodists/podiatrists, dietitians, occupational therapists, operating department practitioners, orthoptists, osteopaths, prosthetists and orthotists, paramedics, physiotherapists, diagnostic radiographers, therapeutic radiographers, and speech and language therapists.



Overview of the Framework

This Framework allows employers, networks, integrated care systems (ICSs) and services effectively plan, develop, and deploy their AHP support workforce.

The Framework provides guidance on training, education and competencies for AHP support workers employed in NHS services and NHS funded services. It supports education providers to plan and deliver accredited education, and ICSs to take a coordinated approach. It will also be of relevance and interest to other public sector employers, including local authorities, as well as the private, independent and voluntary sectors.

The Framework supports three linked workforce strategies that are aimed at:

1. Recruiting local people directly into AHP entry-level roles, where vacancies exist;
2. Developing existing support staff so they can perform at the top of their scope of practice;
3. Creating clear end-to-end progression routes linked to formal education programmes, including access into AHP degrees.

The Framework demonstrates a clear pathway for recruitment and progression, with accompanying common and transferrable skills across [eight domains](#):

Formal knowledge and experience	Supporting patients and service users	Clinical, technical and scientific roles and responsibilities	Communication and information
Safe and inclusive environments	Research and service improvement	Leadership	Personal and professional values and behaviours

How the Framework was developed

The Framework was developed by King's College London, working with HEE and the AHP professional bodies. Support worker job descriptions and person specifications from across the professions were gathered via the NHS Jobs website. In total, 127 were identified and systematically reviewed to identify: detailed qualification and experience requirements across occupations and bands, general skills, behavioural requirements (such as "communications", "personal skills" and "delivering safe care"), and specific roles and responsibilities unique to individual professions. Job descriptions and person specifications were identified as the starting point for developing the Framework because they reflect current deployment and service needs.

Alongside this, existing AHP and other education, competency and qualification Frameworks, codes and standards were also reviewed. These included: relevant apprenticeship standards, Health Technical Levels, individual professional body standards, The Core Competences of Healthcare Assistants in the European Union project outputs, the NCFE CACHE Level 3 Diploma, Care Certificate, Skills for Health Career Framework, and NHS National Job Profiles and careers information.

How to use this Framework

Systems, employers, and staff can use the Framework in the following ways.

Integrated care systems (ICS)

1. Support the standardisation of job descriptions and personal specifications across systems and networks.
2. Assess the relevance of current local training and education programmes, and work with employers and education providers to develop additional provision across the system.
3. Develop skills passports to support transferable training and education.

Employers

1. Work with other employers in the local ICS to support consistency of roles and job descriptions.
2. Review existing organisational job descriptions and personal specifications to ensure they are up to date and consistent, including qualification requirements, and that they enable the full utilisation of support worker skills and capabilities.
3. Review existing grade, skill mix, and deployment to determine the need for new, extended, or enhanced support worker roles.

Registered professional and clinical staff

1. Ensure all team members are clear about role boundaries and scope of practice, and support the safe and appropriate delegation of tasks and responsibilities.
2. Facilitate better team working through competency-based approaches to skill mix.
3. Support personal development plans and appraisals for AHP support staff.
4. Better support the learning and development of support worker colleagues.

Education providers

1. Support the design and delivery of occupationally specific education programmes, including apprenticeships.
2. Allow common learning across AHP support roles to be identified.
3. To support progression through support worker careers, including into pre-registration.
4. Enhance partnership working at system and individual employer level.

By support workers

1. Identify your current and future development needs.
2. Support continuing professional development and career progression.

The Framework should also be used alongside and supplemented by specific professional body standards, codes and frameworks where they exist.



Part Two:

AHP support worker roles

The country's 170,000 staff employed in the 14 AHPs, across health and social care improve people's health and wellbeing, deliver public health interventions, and reduce the demand for primary, emergency, and urgent care. AHPs work across agencies and boundaries, often in multidisciplinary teams and in new service models.

The AHP support workforce works with registered staff to deliver patient and client care and support, working under a range of supervisory arrangements within agreed guidelines and protocols. They often work as part of multidisciplinary teams developing treatment plans under supervision but can also work with individual practitioners or autonomously within the scope of their role and under guidance and following training.

AHP support worker responsibilities can range from performing routine tasks, such as welcoming and preparing service users for treatment, to direct clinical and support tasks such as applying dressings and treatments or helping service users meet their care plans.

Support workers are employed in the majority of AHP services, working with registered professionals and providing care and treatment, for example by:



Helping dietitians assess, diagnose, and treat service users' dietary and nutritional problems	Assisting occupational therapists in supporting people to carry out everyday tasks	Helping people who need orthotics to support their limbs	Assisting physiotherapists in improving people's mobility
Working with podiatrists to help care for patients with foot or ankle conditions	Using prosthetists' designs to make artificial limbs	Radiography support workers assist diagnostic and therapeutic radiographers support people through diagnose and treatment	Helping speech and language therapists monitor swallowing difficulties and carry out therapy interventions to support communications

Examples of AHP support worker tasks

Podiatry assistant

- Applying dressings and treatments,
- Booking appointments,
- Taking insole templates,
- Advising patients and their carers on foot health and footwear.



Dietetic assistant

- Assisting service users with therapeutic dietary choices,
- Recording and analysing service users' food and fluid intake,
- Support with enteral tube feeding,
- Taking and recording anthropometric measurements,
- Supporting service users in achieving their personal dietary goals,
- Delivering individual and group education in acute and community settings.



Ophthalmic clinic technician

- Visual field testing,
- OCT scans of the retina and optic nerve,
- Vision testing on adults,
- Focimetry (measuring glasses),
- Photography,
- Dilation,
- Intraocular pressures,
- Biometry (pre-op cataract measurements),
- Colour vision testing and history taking.



Occupational therapy assistant

- Helping patients adapt to life after major surgeries such as hip replacement,
- Supporting children with disabilities taking part in school and play activities,
- Helping people living with dementia to develop strategies,
- Helping people living with mental illness get back into everyday activities such as work or volunteering,
- Supporting older people to stay in their homes by assessing and providing minor adaptations and equipment.



Speech and language therapy assistant

- Booking appointments and managing caseloads,
- Preparing communication therapy services,
- Providing therapy for patients after assessment by a registered SLT,
- Providing swallowing care plans,
- Providing dysphagia training to relatives, carers and ward staff,
- Supporting patients to talk after a head or neck injury,
- Modelling play and language activities.

Differences between professions

The distinct nature of each AHP and the populations they support, along with the historic evolution of roles, means that the deployment, grading, and skill mix of AHP support workers vary. Support workers in different AHP occupations are therefore likely to start at different points of the Framework, some at entry level, some at intermediate, and some at assistant practitioner.

In physiotherapy, for example, support worker roles often commence at NHS pay band 2 – equivalent to the entry-level stage of the Framework. In dietetics, support workers are most likely to be employed a band higher (at band 3), which equates to the intermediate stage of the Framework. For therapeutic radiography, in contrast, most support workers are graded at band 4 (assistant practitioner stage), with only a small number at band 3 and none at band 2.

Individuals entering the Framework would be expected to possess all the competencies associated with the previous stage – or be able to acquire them within a reasonable timeframe, perhaps by completing an apprenticeship.

Delegation and supervision

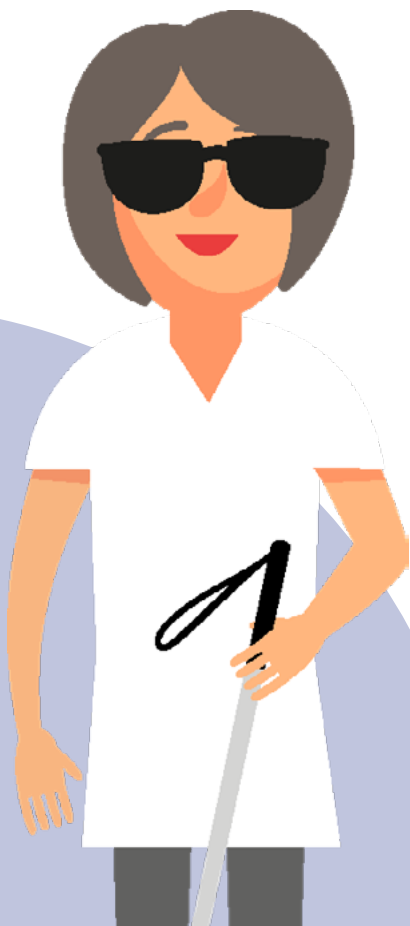
The Health and Care Professions Council (HCPC) and individual professional bodies provide guidance and standards on delegation that should be consulted when planning the development of AHP support worker roles, including the implementation of this Framework.

The HCPC Standards of Conduct, Performance and Ethics Standard 4, for example, states that:

- 4.1 You must only delegate work to someone who has the knowledge, skills and experience needed to carry it out safely and effectively.
- 4.2 You must continue to provide appropriate supervision and support to those you delegate work to.

Individual organisations will also have their own policies and procedures that must be followed to ensure support workers are able to carry out appropriate tasks competently and safely.

The Framework sets out the common education and experience requirements, and the knowledge, skills and behaviours expected at each stage. Until support workers can demonstrate that they are able to perform tasks and responsibilities competently and safely for each stage, they should be closely supervised by an appropriately qualified and registered member of staff.



Improving equality, diversity and inclusion

One of the aims of the Framework is to support greater recruitment from local communities and underrepresented groups into AHP support roles and to support their progression.

Successful approaches to this include:

1. Working with community groups and organisations, such as places of worship or youth groups, local schools and colleges, careers fairs, employment agencies such as Job Centre Plus, and the voluntary sector, to promote AHP careers and employment.
2. Working with agencies that explicitly support groups furthest from the labour market into employment, such as adults with disabilities, young people with special education needs, care leavers or ex-offenders. Working with local authorities and supported employment agencies such as Mencap, The Prince's Trust and The Shaw Trust will assist this.
3. Working in partnership with existing staff and representatives, such as those from black and minority ethnic (BME) backgrounds or who have disabilities, who experience additional barriers to accessing training or development opportunities, so that their needs can be understood and addressed.

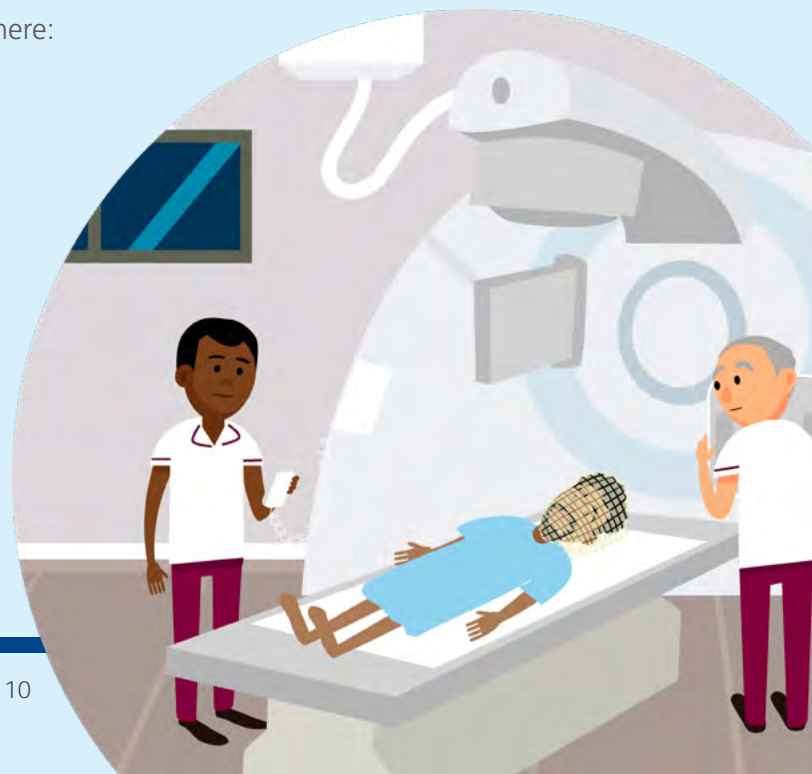
In implementing this Framework, employers should ensure they are acting on findings from the [Workforce Race Equality Standard: 2020 Data Analysis Report for NHS Trusts and Clinical Commissioning Groups](#):

- White applicants were 1.61 times more likely to be appointed from shortlisting compared to BME applicants.
- BME staff were 1.16 times more likely to enter the formal disciplinary process compared to white staff.
- Just 40.7 per cent of BME staff believed that their organisation provided equal opportunities for career progression or promotion compared to 88.3 per cent for white staff.

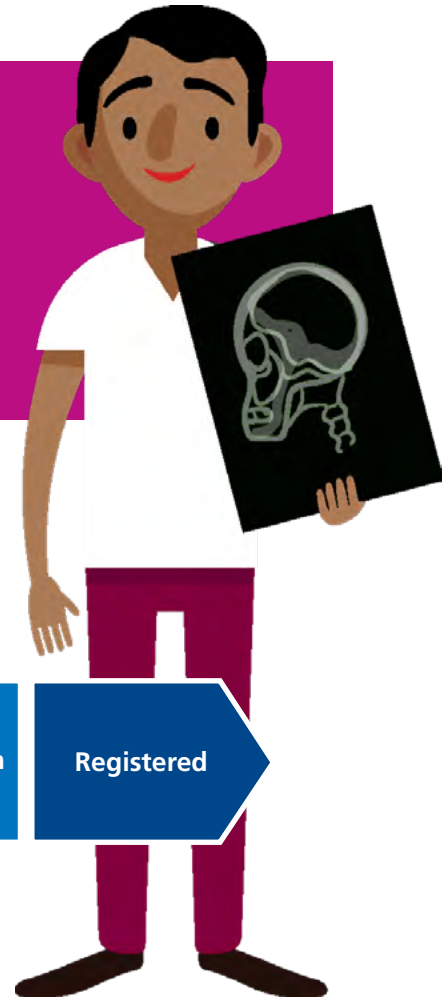
It is important that these specific barriers to recruitment and progression are addressed at both organisational and ICS level, and in partnership with existing multiprofessional workstreams on equality, diversity and inclusion.

Further guidance and resources can also be found here:

- [The Equality and Health Inequalities Hub](#)
- [Talent for care \(HEE\)](#)



Part Three: Framework Stages



The Framework focuses on three main stages of AHP support worker competency, education and career development:



This section describes the three stages, and the distinction between each, in terms of role demand and complexity. Associated training and education requirements are provided in section 4.

Entry level (support worker)

The entry-level stage describes the minimum education and competency requirement for all AHP support workers.

At the entry-level stage, AHP support workers will use general skills and work under the close supervision of registered staff, for example performing housekeeping tasks, stock control or basic clinical support delegated tasks.

Entry level is typically NHS pay scale band 2 or equivalent. This equates to the entry-level stage of the Framework and is linked to equivalent formal education. For other professions, the first point at which staff are recruited will be higher than this stage.

Intermediate (senior support worker)

At this stage, support workers will use more advanced skills under the supervision of registered staff and may also work alone. Tasks and responsibilities include the direct delivery of clinical, technical or scientific activities (following training), such as the taking of bloods and monitoring people's progress in terms of body weight or nutrition, or delivering exercise sessions to improve health and wellbeing. At this stage, support workers will contribute to service improvement and be able to make fact-based judgements.

Intermediate level is typically NHS pay scale band 3 or equivalent. This is likely to be the stage many AHP support workers are first recruited to. It is also the first point from which existing support staff, with sufficient qualifications, can apply for pre-registration degrees. They will be expected to be able to acquire an occupationally specific Level 3 qualification, such as the Senior Healthcare Support Worker apprenticeship.

Assistant practitioner

The specialist nature of Assistant practitioner roles and levels of responsibility mean that direct entry at this level is unlikely.

Assistant practitioner roles are typically NHS pay scale band 4 or equivalent. Support workers at this level will possess enhanced skills in their area of work, which may be a specialist area. They will provide direct care and support, including to service users with more complex needs. They will be able to delegate appropriate tasks to other support staff. They will be able to independently plan and deliver individual or team tasks.

Summary of Framework stages

Table 2 gives an indication of the different levels of complexity at the entry level, intermediate and assistant practitioner stages (this incorporates [Skills for Health Career Framework levels](#)).

Entry level	Support workers at this stage require a basic factual knowledge and understanding of their field of work. They may carry out straightforward clinical, technical, scientific or administrative tasks according to established protocols, procedures or systems of work with close guidance and supervision. They might, for example, perform routine administration or housekeeping tasks and if providing support to a service user would do so under close supervision. They will begin to identify areas for self-development and will participate in service improvement programmes.
Intermediate	Support workers at this stage require knowledge and understanding of facts, principles, processes and general concepts in their field of work. They may carry out a wider range of delegated duties than the person working at entry level, and will have more responsibility, with supervision and guidance available when needed. They contribute to service development and are responsible for their own development. Support workers at this level might carry their own caseloads that have already been seen by a registered professional, prioritise their own workload, and work with service users under a range of supervisory arrangements while undertaking routine processes.
Assistant practitioner	At this stage there is a requirement for factual and theoretical knowledge of principles, procedures, processes, and concepts in broad contexts within a field of work. Work is guided by standard operating procedures, protocols or systems of work, but people must make judgements, plan activities, contribute to service development and demonstrate self-development. They might be responsible for supervision of some staff.

Part Four:

Education levels for AHP support workers

This section describes the key formal education programmes associated with each stage of the Framework.

Since 2015, all formal education qualifications in England and Wales have been placed within an overarching Framework called The Regulated Qualifications Framework (RQF). The RQF distinguishes between different levels of understanding and expertise, with each level being progressively more challenging than the last. The RQF continues up to Level 8 (which includes doctorates). Bachelor degrees are placed at Level 6.

Credits are the means of formally recognising learning achievement. Broadly speaking, one learning credit is equivalent to 10 hours of study and teaching. Together with the RQF levels, credits allow comparisons with other equivalent qualifications:

- Awards are between 1 and 12 credits,
- Certificates are between 13 and 36 credits,
- Diplomas are 37 credits or above.

Full information about the range of qualifications associated with each level of the RQF can be found on the [government website](#), and information about how qualifications convert to tariff points for university can be found on the [UCAS website](#).

Functional skills

Functional skills are an underpinning requirement of formal qualifications, as well as safe and effective care. It is essential that staff attain the appropriate level of functional skills in English and mathematics. There are three functional skill levels of attainment, which are different to RQF levels:

- Entry 1, Entry 2 and Entry 3
- Level 1 (equivalent to GCSE grades 1-3)
- Level 2 (equivalent to GCSE grade 4)

Most formal education programmes and qualifications relevant to health and social care, such as apprenticeships, include the requirement to achieve a Level 2 functional skill competence. While



many NHS employers will often specify or imply a minimum level of functional skills (normally Level 2) when recruiting new staff, these are not mandated. This Framework suggests that people entering AHP support roles should possess or can obtain, within a reasonable period, functional skills at Level 2 in English and mathematics. Further information on HEE resources to support functional skills attainment is available from the [Healthcare Apprenticeships Standards Online website](#).

Digital skills

AHP support workers need to be digitally confident and competent, including understanding the potential of digital to improve care. Qualifications such as Technical Levels include a digital element that not only addresses general application (for example in the use of spreadsheets) but also the application of digital skills in specific occupations. There are also specific RQF qualifications that teach digital skills.

HEE has also designed a [Digital Literacy Capability Framework](#), which includes a self-assessment tool and a [Digital competency framework for Allied Health Professionals](#) for all allied health professions from band 3 to band 9.

Skills passports

One of the challenges and frustrations that AHP support workers face is that their learning is not always transferrable. One way to address this is to create skills passports, which allow support workers to record their learning, including trust-specific training packages to support local requirements of their roles. If developed at systems or network level, passports can be applied across organisations and boundaries (for example between NHS and social care service providers in an ICS locality), supporting transferability and reducing transaction costs, such as repeating learning (because employers recognise each other's learning). This will also assist co-delivery of apprenticeships and support consistency through a common approach to job design. Skills passports also help clarify the boundaries of roles and allow space for recording informal learning.



Recruitment and progression pathways

This Framework sets out the qualifications expected upon recruitment, and the subsequent education and training AHP support workers should be able to access once employed, at each stage:

	Qualifications upon recruitment	In-work formal education
Entry level	<ul style="list-style-type: none"> • RQF Level 2 qualification • Level 2 functional skills 	<ul style="list-style-type: none"> • Care Certificate • Level 2 apprenticeships such as The Healthcare Support Worker apprenticeship standard (Level 2 Diploma) • Employer-based training (such as study days) • Statutory and mandatory training
Intermediate level	<ul style="list-style-type: none"> • RQF Level 3 qualifications or demonstrated ability to achieve an RQF Level 3 qualification • Level 2 functional skills 	<ul style="list-style-type: none"> • Care Certificate • Level 3 apprenticeships such as The Senior Healthcare Support Worker (Level 3 Diploma) • Employer-based training (such as study days) • Statutory and mandatory training
Assistant practitioner	<ul style="list-style-type: none"> • Minimum RQF Level 3 qualifications • Level 2 functional skills 	<ul style="list-style-type: none"> • Care Certificate • Level 4/5 apprenticeships such as Assistant Practitioner in Healthcare Apprenticeship (Level 5 qualification such as foundation degree) • Employer-based training (such as study days) • Statutory and mandatory training

The table uses apprenticeships as an example of in-work formal education. It should be noted that current employees are likely to possess a range of equivalent qualifications (such as NVQs, foundation degrees and diplomas) and experience. There is therefore no need for such staff to re-train.

Part Five:

The Framework: domains, competencies, and indicators

The AHP Support Worker Education and Competency Framework is grouped under eight domains:

Formal knowledge and experience	Supporting patients and service users	Clinical, technical and scientific roles and responsibilities	Communication and information
Safe and inclusive environments	Research and service improvement	Leadership	Personal and professional values and behaviours

Each domain sets out requirements of support workers at the entry-level, intermediate and assistant practitioner stages in terms of the level of responsibility and, where appropriate, includes examples of duties. There is a progression in complexity and demand from one stage to the next.

For example, this means that an individual at the intermediate stage should already have acquired or be able to acquire, in reasonable time, all the knowledge, skills, and attitudes (through experience, education and practice) set out for the entry-level stage, as well as those required at the intermediate stage.

Knowledge, skills and behaviours combined are described as competencies. To be competent as an AHP support worker requires all three. For example, the ability to communicate effectively taking account of an individual's circumstances, but also in a compassionate and caring manner. Competencies, aligned to service need, should be the basis of job design, a prerequisite upon recruitment, and determine access to education programmes. They should also allow support workers to consider how they might develop within their teams and progress their careers.

Given the breadth of practice across the 14 AHPs, the AHP Support Worker Education and Competency Framework provides broad indications of requirements and includes some examples to help guide support workers and their managers in planning their training needs, roles, and responsibilities. The Framework should be used alongside and supplemented by specific professional body standards, codes and frameworks where they exist.



Overview of the Framework domains

Domain	Description
1. Formal knowledge and experience	Formal qualifications and experience expected of a new candidate (including functional skills) on recruitment.
2. Supporting patients and service users	Supporting patients and service users and their families, and providing care throughout their care and care pathways
3. Clinical, technical and scientific roles and responsibilities	The underpinning knowledge and practice, support and interventions required of support staff to safely assist service users in meeting their optimum potential.
4. Communication and information	The ability to communicate clearly, respectfully, and effectively using a range of methods – written, verbal and non-verbal. Maintaining confidentiality and protection of data and overcoming physical, sensory, cognitive and language barriers to understanding.
5. Safe and inclusive environments	The principles of equality, diversity and inclusion, safeguarding, protection, personal wellbeing and safety, along with the importance of duty of care and candour.
6. Research and service improvement	Participation in research, audit, evaluation and service improvement projects.
7. Leadership	The importance of being a role model, identifying areas for self-improvement and supervising others, and leading on patient safety, improvements and support for others.
8. Personal and professional values and behaviours	Understanding and demonstration of the values in the NHS Constitution and NHS People Promise , as well as self-development and personal wellbeing.

Framework domains

Domain 1: formal knowledge and experience The minimum essential formal qualifications and experience required for AHP support workers entering each stage. Some roles may in addition have specific role requirements such as a driving license.			
	Entry level	Intermediate	Assistant practitioner
1.1 Education requirements	RQF Level 2 qualification (for example GCSE grade 4/C or above). Level 2 functional skills. Once employed, the <u>Care Certificate</u> and potentially the Healthcare Support Worker apprenticeship standard, as well as statutory and mandatory in-house training.	RQF Level 3 qualifications or demonstrated ability to achieve a relevant RQF level 3 qualification on employment (e.g., possesses good Level 2 qualification grades). Level 2 functional skills. Once employed, the <u>Care Certificate</u> and potentially the Senior Healthcare Support Worker apprenticeship, as well as statutory and mandatory in-house training.	RQF Level 3 health or care related qualification. Level 2 functional skills. <u>Care Certificate</u> . Once employed, the Healthcare Assistant Practitioner apprenticeship, as well as statutory and mandatory in-house training.
1.2 Experience	It is not essential to show experience in health or social care settings at this stage, but candidates should be able to demonstrate experience of working with the public, for example customer care skills in retail or through volunteering.	It is desirable that candidates can demonstrate experience in health and/or social care settings, such as employment, work experience or volunteering.	Able to demonstrate substantial experience in health and care settings, including in the relevant field of work.

Domain 2: supporting patients and service users Supporting patients and service users and their families throughout their care and care pathways, and understanding the wider health and social care system.			
Competence	Entry level	Intermediate	Assistant practitioner
2.1 Positive relationships	Develops, manages, and maintains positive, appropriate relationships with patients and service users, families and carers, demonstrating respect, kindness, compassion and empathy at all times.		
2.2 Person-centred care	Provides person-centred care and support.	Understands and demonstrates what it means to provide person-centred care , of providing education and resources to support informed decision making, and of respecting individual's decisions.	Consistently deploys care, treatment and support strategies to promote and provide person-centred care, including providing information, advice and guidance to service users, carers, families, health professionals and others.
2.3 Privacy and dignity	Able to identify ways to promote dignity and is aware of individuals' environments and factors that might cause discomfort.		
2.4 Health and social care system	Aware of the main organisations in the health and social care system and services provided.	Understands a range of organisations in the health and social care system and services provided and can signpost people effectively in liaison with MDT colleagues.	Understands a range of organisations in the health and social care system and services provided, referring patients/service users to services appropriately.
2.5 Legal, and ethical responsibilities	Aware of the main legislation, legal and ethical responsibilities that shape provision of social care services for service users.	Understands and can explain the main legislation, legal and ethical responsibilities that shape provision of health and social care for service users.	Understands and can explain the main legislation, legal and ethical responsibilities that shape health and social care and the role of agencies such as the Care Quality Commission.
2.6 Practice frameworks	Understands the importance of adhering to codes of practice, clinical procedures, and professional standards.		

Domain 2: supporting patients and service users Supporting patients and service users and their families throughout their care and care pathways, and understanding the wider health and social care system.			
Competence	Entry level	Intermediate	Assistant practitioner
2.7 Team and partnership working	Able to work collaboratively with a variety of health staff, social care staff, professional staff and others. Understands and demonstrates the principles of team and partnership working.		
2.8 Role awareness	Recognises the importance of support workers in delivery, including the diverse roles undertaken by AHP support workers. Is able to define own role, for example by describing their duties and the roles of others.		
2.9 Service awareness	Understands the services and programmes of care provided by their employer	Has a thorough understanding of the function and role of their service.	Has a thorough understanding of the function and role of their service and can actively advocate for this to other teams and services.



Domain 3: clinical, technical and scientific roles and responsibilities Knowledge and practice, support and interventions required to safely assist service-users meet their optimum potential.			
Competence	Entry level	Intermediate stage	Assistant practitioner stage
3.1 Underpinning knowledge	Basic understanding of routine clinical, technical and/or scientific roles and responsibilities.	Core knowledge of clinical, technical and/or scientific roles and responsibilities. including clinical risk assessment.	Developed knowledge of clinical, technical and/or scientific theory and practice, within their immediate field of practice. Understands the importance of evidence-based practice.
3.2 Role boundaries	Understanding of role boundaries and the importance of supervision and carrying out appropriately delegated tasks. Able to understand and follow procedures, protocols and plans.		
3.3 Autonomy	Works under close supervision.	May work alone within scope of role, for example in the community, and have their own caseload of service users with non-complex needs previously seen by a registered member of staff.	Able to work independently with patients/service users on a day-to-day basis within the scope of the role and operational policies, protocols and procedures.
3.4 Time management	Organises own day to day tasks to ensure timely completion.	Manages own workload and time, for example maintaining own diary.	Manages own workload and time, including prioritising tasks and resources, taking account of changing circumstances.
3.5 Consent	Understands and gains valid consent prior to action or providing care, and records this appropriately.		

Domain 3: clinical, technical and scientific roles and responsibilities Knowledge and practice, support and interventions required to safely assist service-users meet their optimum potential.			
Competence	Entry level	Intermediate stage	Assistant practitioner stage
3.6 Tasks and responsibilities	Performs straightforward, routine and specific delegated care tasks, for which they have achieved competencies, and working within procedures, policies and plans.	Performs straightforward, routine and specific delegated care tasks, for which they have received training, working within procedures, policies and plans. Able to adapt practice to situations.	Within scope of role and working to operating procedure, protocols and procedures plans, implements and monitors own treatment and care plan interventions, including adapting to circumstances.
3.7 Prioritising care	Demonstrates the ability to respond flexibly to the needs of the working environment	Can prioritise activities to meet the holistic needs of patients/ service users, including adjusting normal routines where levels of complexity exist.	Understands the impact of complex care needs and other factors when prioritising care activities within their own or the team's defined workload.
3.8 Planning and evaluating care	Assists in effective care planning and evaluation by sharing relevant information in a timely manner with members of the MDT.	Provides feedback on service-user progress and condition, recognises the impact of support and interventions, and suggests ideas for improvement when developing, reviewing and evaluating care plans based on objective evidence and experience.	Actively participates in the planning, development and evaluation of personalised care plans by offering objective clinical or evidence-based information to inform planned activities.

Domain 3: clinical, technical and scientific roles and responsibilities Knowledge and practice, support and interventions required to safely assist service-users meet their optimum potential.			
Competence	Entry level	Intermediate stage	Assistant practitioner stage
3.9 Reporting, referring and escalating concerns	Able to recognise signs of discomfort, anxiety or concerns and promptly report them to a registered member of staff.	Uses knowledge and understanding of common physical, mental and behavioural health conditions to recognise deterioration in service users. Responds by promptly escalating concerns to a registered practitioner.	Gathers and interprets relevant information and forms a judgement on the improvement or deterioration in the physical, mental or behavioural condition of patients/service users and responds by referring or escalating concerns to a registered practitioner.
3.10 Signposting	Directs queries in respect of signposting to appropriate MDT colleagues.	Maintains a working knowledge of local support available for service users and signposts people effectively in liaison with MDT colleagues.	Arranges access to services to support personalised care plans, referring service users to agencies and services appropriately.
3.11 Aids and equipment	Maintains patient/ service user equipment, including stock control, delivery and setting up.	Ensures safe and effective use of equipment by patients/ service users, including fitting, demonstration, and teaching of safe and appropriate use.	Ensures safe and effective use of equipment, including fitting, demonstration and teaching of safe and appropriate use. Adapts equipment where appropriate and monitors individual's progress. Carries out basic risk assessment and able to document in care records.
3.12 Emergency care	Recognises an emergency, summons assistance and acts as a member of the MDT within parameters of own competence and defined role. In settings where a registered practitioner is not present, initiates immediate first aid whilst awaiting the arrival of appropriately qualified practitioners.		

Domain 4: communication and information management Communicate clearly and accurately using a range of written, verbal and non-verbal methods, maintaining confidentiality and protection of data, and overcoming physical, sensory, cognitive and language barriers to understanding.			
Competence	Entry stage	Intermediate stage	Assistant practitioner stage
4.1 Confidentiality and data protection	Understands role requirement and the importance of accessing, maintaining and storing documentation relating to care, in accordance with local guidance and in accordance with legal requirements for maintaining confidentiality and data protection.		
4.2 Record keeping	Keeps complete, clear, accurate and timely records, utilising digital platforms as required.		
4.3 Methods of communication	Communicates through a variety of methods, including the use of interpersonal, written and verbal and non-verbal skills. Exchanges information with service user and families using tact or persuasion.		
4.4 Effective communication	Provides and receives routine and straightforward information in a timely and effective manner to and from service users, carers, members of staff and others.	Communicates to service users, carers, staff, teams and others in a way that is understandable and accessible, addressing any barriers to understanding. This requires the selection of the most appropriate method of communication.	Demonstrates the ability to provide and receive complex and sensitive information, including relating to service users. Judges the appropriate method of communication, ensuring information is provided in an accessible way.

Domain 5: safe and inclusive environments Working within organisational policies and procedures to ensure equality, diversity and inclusion, safeguarding, protection and personal wellbeing, and safety, along with the importance of infection control, duty of care and candour.			
Competence	Entry stage	Intermediate stage	Assistant practitioner stage
5.1 Health and safety	Contributes to the maintenance of healthy and safe working environments through appropriate practice, use of resources, techniques and behaviours and understanding of relevant legislation.		
5.2 Policies and procedures	Understands the importance of adhering to organisational policies, protocols, procedures, and standards.	Understands the importance of adhering to organisational policies, protocols, procedures, and standards.	Contributes to the development, application and evaluation of organisational procedures and protocols.
5.3 Risk management	Identifies and manages risks, including assessment of moving and handling, using local policies and procedures.		
5.4 Incidents and complaints	Reports any incidents, accidents or complaints in a timely manner, taking appropriate action where necessary.		
5.5 Safeguarding	Understands and follows the principles of safeguarding and protection. Follows local procedures and escalates concerns in a timely manner, complying with legal requirements.	Is vigilant for cues indicating safeguarding issues. Escalates safeguarding concerns and reports to the MDT in a robust, timely manner; complying with legal requirements.	Takes responsibility for risk identification and assessing activity within scope of role and adhering to local and national safeguarding procedures and policies.
5.6 Infection prevention and control	Uses a range of techniques for infection prevention and control.	Understands the principles and practices of infection control, adhering to these consistently within own sphere of practice.	Supports others to understand the principles and practices that underpin infection control principles.
5.7 Duty of care and candour	Acts with integrity and honesty, ensuring individuals do not experience harm by reporting situations, behaviours or errors that might lead to adverse outcomes for service users.		

Domain 5: safe and inclusive environments Working within organisational policies and procedures to ensure equality, diversity and inclusion, safeguarding, protection and personal wellbeing, and safety, along with the importance of infection control, duty of care and candour.			
Competence	Entry stage	Intermediate stage	Assistant practitioner stage
5.7 Respects diversity	Understands, promotes, and advocates for equality and diversity and demonstrates inclusion through interaction with individuals.		
5.8 Awareness of implicit bias	Aware of one's own values, culture and position and the impact of one's work and actions on others.		
5.9 Recognises and reacts to discrimination	Promotes equality and challenges discriminatory behaviour, particularly relating to age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation. Provides support without prejudice.		
5.10 Widens access to care	Understands and applies the principles and processes to support access to care and making reasonable adjustments.		

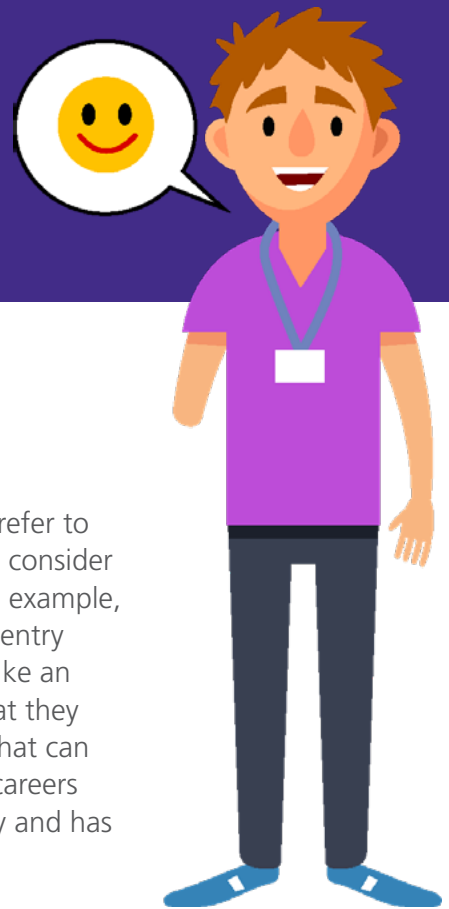


Domain 6: research and service improvement Participation and undertaking of research, audit, evaluation and service-improvement projects.			
Competence	Entry stage	Intermediate stage	Assistant practitioner stage
6.1 Service improvement	Participates in service evaluation and quality improvement activities relevant to own work.	Participates in audit, service evaluation and improvement activities, such as service user feedback and benchmarking.	Participates in, contributes to, and may lead, audits, service evaluation and improvement projects relevant to own work.
6.3 Research activity	Able to understand and comply with research governance, ethics, protocols and guidelines.	Understands and complies with research governance, ethics, protocols and research, and may carry out routine research activities under guidance of more experienced staff.	Applies research governance, ethics, protocols and guidelines and may undertake more complex research activities including data collection and analysis.

Domain 7: leadership Understanding the importance of being a role model, time management, identifying areas for self-improvement, and supervising others.			
Competence	Entry stage	Intermediate stage	Assistant practitioner stage
7.1 Professionalism	Acts in a professional manner, demonstrating NHS Constitution values.		
7.2 Role modelling	Acts as a role model (for example by being welcoming).	Understands the importance of role models, for example to assist the development of others.	Demonstrates role modelling, including advocating for other support staff.
7.3 Leadership	Takes appropriate action when the performance and practice of others should be positively recognised or requires improvement.	Takes appropriate action when the performance and practice of others should be positively recognised or requires improvement.	Takes appropriate action when the performance and practice of others should be positively recognised or requires improvement. Takes and demonstrates management and leadership for own work within scope of practice. Advocates for service users, their families and carers.
7.4 Supervising others	May help induct and instruct new support staff.	Inducts new team members. Participates in training and mentoring of less experienced support staff and students (including apprentices) in respect of tasks and responsibilities within scope of practice.	May manage staff and mentor less experienced staff and students, including apprentices.
7.5 Developing others	Participates in team learning.	Contributes to colleague's learning, for example by giving and receiving feedback and contributing to learning resources for others, such as students.	Contributes to the learning of the organisation, colleagues and team, for example by giving and receiving constructive feedback and contributing to learning resources for others. Supports students on placement.

Domain 8: personal and professional values and behaviours The values required to work in health and social care, and personal learning and self-development.			
Competence	Entry stage	Intermediate stage	Assistant practitioner stage
8.1 Ways of working	Demonstrates, through interactions with others, the core values of the NHS and Our NHS People Promise .		
8.2 Health and wellbeing	Understands and acts on own safety and health and wellbeing needs.	Understands and acts on own safety and health and wellbeing needs.	Understands and acts on own safety and health and wellbeing needs and support the health and wellbeing of wider team members.
8.3 Role of learning and development	Understands why learning is important and how it improves performance, practice and quality of care.		
8.4 Self-development and learning	Participates in learning (including mandatory training) to ensure up-to-date knowledge, skills and behaviours to safely perform role.	Actively participates in learning opportunities to maintain knowledge and inform practice.	Actively participates in learning opportunities and demonstrates self-improvement, for example by actively seeking feedback.
8.5 Appraisals	Prepares for and participates in appraisals and agrees a Personal Development Plan.		
8.6 Personal development plans	Records learning and personal development and is supported to identify areas for improvement.	Records own learning and personal development. Identifies and articulates areas for self-improvement, including through self-reflection and evaluation of practice.	Records own learning and personal development. Identifies areas for self-improvement and actively participates in learning opportunities to maintain and extend knowledge and performance.

Glossary



Career stages

Career stages, sometimes also called career or employment lifecycles, refer to key points and transitions in people's careers. They are a useful way to consider career development and the factors that might enable or inhibit it. For example, the first two stages of the Framework are called pre-employment and entry level. Before deciding to apply for a job, particularly a vocational one like an AHP, individuals need to be aware the role exists, what it involves, what they need to apply and what the process is. There are a number of things that can shape those decisions, including family, friends and media, as well as careers information, advice and guidance. Once a person has decided to apply and has been successful, they progress to the entry stage.

Competence

The necessary knowledge, skills and attitudes to perform tasks and responsibilities safely and proficiently.

End-to-end workforce strategies

An end-to-end workforce strategy refers to interventions that address all career stages in a joined-up and holistic way. This avoids silo approaches that focus on a single activity (such as introducing an apprenticeship) without considering wider factors (such as functional skills and learning environments). Such strategies are based on clear data about the current workforce, including skills gaps, and also take a long-term perspective, seeking to secure the workforce of the future.

Functional skills

Functional skills relate to numeracy and literacy attainment (mathematics and English). Functional skills attainment is a core element of all healthcare apprenticeship standards. Digital skills are also increasingly being seen as an essential skill. Related to functional skills are English for Speakers of Other Languages (ESOL) programmes that help, for example, staff employed through international recruitment to become more proficient in the English language.

Grow Your Own (GYO)

GYO refers to workforce strategies that seek to attract and recruit more local people into health and social care employment. This is achieved, for example, by engaging with local schools and colleges, working with job centres, local work and health programmes, and also adults who may be considering a career change or others who might be economically disadvantaged. Once in employment, a GYO strategy will look to support individuals and develop their careers whether they remain in a particular post or progress upwards.

Knowledge and skills

Knowledge is the outcome of acquiring and assimilating information and data by learning a body of facts, principles, theories and practice. This can be achieved through study and practice. A skill is the ability to apply knowledge to complete a task, activity or solve a problem. Skills can be cognitive or practical (manual dexterity, for example).

Scope of practice

The boundaries of a post's roles and responsibilities, including the tasks the role holder may and may not perform.

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