Technology to Care

KNOWLEDGE AND SKILLS SETS

to Embed Electronic Assistive Technology (eAT) in Social Care

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Electronic Assistive Technology (eAT) and Social Care

The landscape of electronic technologies

New electronic technologies are playing an ever greater part in everyday life for us all. Most of us have a mobile phone that we wouldn't be without. Many of us shop online, travel by satnav, talk by video link to friends or family far away, and download apps for practical or leisure use. We may also arrange for lights to come on while we're out, set alarms to detect intruders, or arrange for TV programmes to be recorded while we're busy doing something else.

People who use social care services can and should enjoy the same benefits that the changing world of technology can bring to us all; some already do. Many are also finding that specific technology-based systems or devices have an increasingly important part to play in supporting their safety, well-being and independence. This is true not only for independence in a practical sense but also for enabling greater participation in family, social and economic life. Technology, especially digital technology, can bring substantial benefits in terms of reducing isolation and improving people's motivation and well-being day to day. Such benefits apply to people of all ages. Individuals can now enjoy a much wider range of choices because of electronic technologies, and these in turn can help to nurture more personalised approaches to care and support.

Rapid growth in the use of mobile phones for texting by people with hearing impairments has arisen spontaneously. Their use is now an essential part of the means by which people with such impairments are engaged and involved in family, social and economic life.

Different terms can be used to describe some of these systems and devices, such as assistive technology (AT), or electronic assistive technology (eAT). In this document the term 'eAT' will be used as being the clearest and most accurate for the scope of technology it aims to cover. Further definitions can be found in *Technology to Care: a Workforce Learning Strategy to Embed eAT in Social Care*.[1]

eAT in the form of 'assistive lighting' is increasingly recognised as able to help people with visual impairments. An example is automated lighting that helps to guide people who get out of bed at night time.

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1   *Technology to Care: A Workforce Learning Strategy to Embed Electronic Assistive Technology (eAT) in Social Care (SfC&D 2014)*

Building confidence and competence to support eAT

Some eAT devices may be linked to a specific service with an external centre where data, gathered and transmitted through eAT, is monitored ready to provide a response when an agreed trigger point arises. These remote monitoring and response services (sometimes called telecare) may involve, for example, monitoring a person's movements around their home. Other eAT devices are self-contained and may assist a person to carry out everyday activities or access information online. What's clear is that e-AT has the potential to revolutionise the way people of all ages and with different needs can live their lives and can enable them to enjoy a life that is more full, more rewarding and more independent than they would otherwise have.[2]

'Home environment controllers' assist people to maintain control over their lives by giving remote access to controls for doors, windows, TV, telephone, computer and other appliances. Different interfaces and switches can facilitate extensive use of such devices. Home environment controllers and related devices will increasingly enable people not just to exercise control but also to monitor their homes, eg for energy and water usage.

With this impressive potential, it is crucial that eAT is used effectively and safely, both when e-AT is proposed as part of the way support is delivered and when someone simply chooses to use e-AT from their own decision. In both circumstances the use of eAT may need to be supported by social care workers.

As e-AT becomes part of the way individuals are supported, it is therefore essential that social care workers become confident, knowledgeable and skillful about technology and the contribution it can make. This means not only knowing how a particular piece of equipment works, but also what it helps the individual to achieve and why that's important. As with anything new, it takes time to get used to working with e-AT and it may not be surprising if some individuals using services – and some social care workers – may not initially trust or understand new technology. The knowledge and skills sets in this document aim to guide employers and other stakeholders in developing the knowledge, skill and confidence of their own part of the social care workforce, so that they in turn can support individuals and their carers to enjoy the benefits that eAT can bring.

The scope of the knowledge and skills sets

eAT is not closely defined in the knowledge and skills sets and this is a deliberate approach. Attempting to list a set of services, equipment or devices in a field where change is rapid and where boundaries evolve is unlikely to be helpful and could distract from the common content that the knowledge and skills sets seek to address. The following pointers are offered:

1. eAT devices. The knowledge and skills sets focus on electronic devices including those that enable or depend on access to the internet. The knowledge and skills do not essentially differentiate between 'off the shelf' devices that anyone might buy (like smartphones) and 'social care' devices designed within the sector to address specific assessed needs. The important feature is the purpose for which the device is used: if it is to enhance the independence, well-being and quality of life of an individual and their carers, then the knowledge and skills sets are relevant to the worker providing support.

2   Websites like http://www.mickshouse.info/ illustrate one man's story of the difference e-AT can make and what can be achieved.

2. eAT dependent services. Services that rely on eAT as an integral part of their service delivery continue to grow in number and evolve in their technical infrastructure. The 'three generations' pattern[3] offers a broad guide to the types of service that use eAT:

- 1st generation: including push button alarms, pull cord or pendant alarms, smoke alarms, flood detectors

- 2nd generation: including sensors which monitor the home environment (e.g. door opening), vital signs and physiological measures, use of electrical equipment, fall monitoring, medication management

- 3rd generation: including broadband-based AT, wireless-based or audio-visual technology, virtual or tele-consultation with health and/or support workers.

'Activity monitoring systems' can help carers and service providers to monitor remotely the well-being of people with dementia. These often operate using sensors that record movement or the opening of doors, sending this information to a central server via the mobile phone network.

Because these systems are easily fitted and removed, they are increasingly being used to assess needs. They have frequently shown that, with the right support (perhaps including other eATs), many people with (for examples) dementia can remain living at home safely for longer while their carers are relieved to some extent of the stress of continual watchfulness.

Services and job roles that depend on eAT are often at the forefront of new ways of working that cut across traditional boundaries. The following section explains the scope of the social care workforce for this context and considers overlaps with other sectors such as health and housing. Again the scope of the knowledge and skills sets is not tightly delineated, so that no artificial restrictions are imposed where there is useful crossover to the benefit of individuals and carers.

3 Doughty, K., Cameron, K., and Garner, P. (1996) Three Generations of Telecare. *Journal of Telemedicine and Telecare*, 2(2), pp71–80.

The Social Care Workforce

The social care workforce is very diverse. It includes a wide range of job roles – from support workers to personal assistants to service managers – and an even wider range of job titles. At the same time, the best service provision is becoming more and more focused on delivering support that meets the specific needs of each individual, regardless of traditional boundaries with other types of service such as health and housing. As these boundaries become blurred, the different job roles themselves become more flexible and responsive rather than rigid and separate.

The social care workforce is also evolving in ways directly associated with eAT. New roles are emerging, including those of eAT installers and assessors, eAT assistants, call handlers and responders for services that operate remote monitoring and response systems ('telecare'). The emergence of these new roles brings with it the need for distinct areas of knowledge and skills – some of them completely new and some a new application of established areas such as holistic assessment, person centred working and risk management.

The knowledge and skills sets are designed to meet the needs of this diverse and evolving workforce. The following features should be noted:

- the overall focus is the broad social care workforce, working across the full range of settings including residential services, home care, self-directed support/personal assistants, etc

- the social care workforce encompasses those working with people at whatever stage of life, including children and young people as well as adults of all ages

- many of the knowledge and skills statements will apply to the full breadth of the workforce, as eAT becomes an integral resource within all support services

- some of the knowledge and skills statements will have particular relevance to roles directly relating to eAT, including new roles such as assistive technologist and those working with suppliers/manufacturers of eAT to install systems or devices

- the knowledge and skills statements are relevant to those working at all levels of responsibility within a social care service and some apply specifically to managers

- many of the knowledge and skills statements will be directly applicable to job roles related to or overlapping with social care, such as those in health and housing

- some of the knowledge and skills statements may also apply in early years settings

Although the scope of the knowledge and skills sets is therefore broad, there are some specific exclusions:

- Occupational Therapists (OTs) and Speech and Language Therapists (SALTs) play a significant role in assessment and provision of assistive devices of many sorts to meet individual needs, including eATs. As such they have comprehensive professional frameworks already in place, and they are therefore not central to the focus of the knowledge and skills sets although some features may be relevant to them. (Social care workers will often have a role in supporting and encouraging individuals to continue using eAT systems or devices provided through OTs and SALTs and it is at this point that many of the knowledge and skills statements will apply.)

- Commissioners hold a crucial role in the design and provision of social care services now and into the future. They are therefore pivotal in embedding eAT in social care. However the skills and knowledge they need in order to achieve this are distinct from those of the social care workforce as a whole and their requirements are therefore not reflected in these knowledge and skills sets.

Norfolk County Council was a pioneer in creating the new role of Assistive Technology Support Workers (ATSWs). An evaluation of their role found that there were major benefits to individuals and carers.

ATSWs were able to offer AT/eAT choices and enable individuals and carers to try them out. Devices included falls detectors, automated medication dispensers and temperature sensors.

3 The Approach to Knowledge and Skills

The nature of the social care workforce outlined above – diverse, evolving, fluid and increasingly integrated with other sectors – is reflected in the way the knowledge and skills sets are presented. In particular the statements of knowledge and skill are not linked to specific job roles or job titles, but are designed around particular tasks or areas of practice that play a part in the assessment, provision and effective use of eAT devices and related services.

Similarly, the knowledge and skills sets do not focus on the technology itself. They are not primarily concerned with particular eAT devices or with the design of services. Instead they aim to keep a focus on individuals and how eAT may be used to enrich their lives. This may be through gaining wider access to information, services and opportunities (whether for work, education, leisure, or entertainment) or through increasing individuals' own control of the environment, their mobility or their day to day activities. The potential of eAT to enhance the quality of life of carers is also recognised, eg through enabling a carer to rest more fully, in the knowledge that sensors will alert them to an individual's movements during the night.

Consequently, the emphasis of the knowledge and skills sets is on a) recognising where a particular eAT-related service or device is an effective solution to an individual's support requirements and b) providing support and guidance to enable the individual to access and use appropriate eAT safely and effectively.

The skills and knowledge needed to support individuals and carers with eAT will sometimes be distinct from other requirements for social care work but often they will have a clear read across or require the application of core skills and principles. Communication, partnership working, risk management, holistic assessment and person centred approaches remain at the heart of support for eAT as for all social care.

Skills and knowledge needed to embed eAT in social care	
Generic social care skills and knowledge	*eAT specific skills and knowledge*
These are skills and knowledge statements already recognised as applicable to the social care workforce, eg in National Occupational Standards (NOS) for Health and Social Care	These are the skills and knowledge statements needed for the workforce that arise specifically because of the widening use of eAT. They are outlined for the first time in the knowledge and skills sets that follow. Where a generic social care statement has particular relevance for eAT, it is included here.

Documents that helped in the development of the knowledge and skills sets are listed in Appendix 1.

Using the Knowledge and Skills Sets to Embed eAT

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These knowledge and skills sets for eAT are designed to be a practical resource for employers and other learning providers to use. They are an important mechanism for implementing *Technology to Care: a Workforce Learning Strategy to Embed eAT in Social Care*[1] and they were developed to accompany the strategy and its implementation plan.

As such, employers are free to use the sets just as they find most useful. It is known[2] that most learning activity about eAT in social care is delivered 'in-house', which means that employers are the key players in developing learning programmes, whether through induction, shadowing, mentoring or more formal events. Suppliers of eAT are also central to learning opportunities in this area and they, along with other learning providers, can regard these as practical and authoritative resources on which to build training and development activities.

The strategy *Here for Good* makes the following recommendations, several of which focus on the use of the knowledge and skills sets for eAT:

Recommendation 1

Employers ensure that skills and knowledge for eAT are integrated in their systems and processes that guide service delivery

Recommendation 2

Employers ensure that learning needs in relation to supporting the use of eAT are identified and addressed for individual workers and for the workforce as a whole

Recommendation 3

Employers promote to their workforce the positive contribution eAT can make to the independence, well-being, lifestyle and opportunities of individuals, by developing and/or making available inspiring case studies to raise the confidence of employees in eAT

Recommendation 4

The eAT knowledge and skills sets become the foundation for learning and development activities relating to eAT

1   *Technology to Care: a Workforce Learning Strategy to Embed eAT in Social Care*. Skills for Care and Development 2014
2   *Supporting Employers with the Workforce Implications of Assistive Technology: Survey Findings.* Skills for Care and Development 2012

Recommendation 5

When purchasing products and services from manufacturers, trainers and eAT providers, employers ensure that learning activities are mapped to the knowledge and skills sets and meet learners' needs for all practical and ethical aspects[3] of supporting individuals to use eAT.

Recommendation 6

Suppliers/manufacturers of eAT products and services consider workforce learning needs in relation to their technology provision and the eAT knowledge and skills sets

Recommendation 7

The SfC&D partner agency in each nation ensures that eAT is considered for inclusion when national induction frameworks are next reviewed

Recommendation 8

The SfC&D partner agency in each nation clarifies how eAT maps onto their career pathways, continuing professional development and progression routes

Recommendation 9

eAT National Occupational Standards (NOS) are developed to ensure eAT is recognised as an area of competence and embedded in practice

Recommendation 10

Gaps in accredited qualifications and learning in relation to eAT are addressed at all levels

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3   'Ethical aspects' relate to consideration of possible conflicts with human rights, social care values and holistic needs.

5 The Knowledge and Skills Sets for eAT

Overview

eAT KS 1	**CONFIDENCE IN TECHNOLOGY**
eAT KS 1.1	Digital literacy
eAT KS 1.2	Promoting the benefits of eAT
eAT KS 1.3	Working as part of a team
eAT KS 2	**RIGHTS, VALUES AND eAT**
eAT KS 2.1	Human Rights and eAT
eAT KS 2.2	Privacy and confidentiality
eAT KS 2.3	Informed consent
eAT KS 3	**SOURCING eAT**
eAT KS 3.1	Sourcing high quality eAT solutions
eAT KS 3.2	Procurement of eAT solutions
eAT KS 4	**ASSESSMENT AND REVIEW IN RELATION TO eAT**
eAT KS 4.1	Assessment
eAT KS 4.2	Support for self-assessment
eAT KS 4.3	Implementation
eAT KS 4.4	Review
eAT KS 5	**SAFE INSTALLATION, MAINTENANCE AND DISPOSAL OF eAT**
eAT KS 5.1	Installation
eAT KS 5.2	Maintenance
eAT KS 5.3	Removal, storage, recycling or disposal of eAT
eAT KS 6	**REMOTE OR VIRTUAL MONITORING AND RESPONSE SYSTEMS**
eAT KS 6.1	The purpose and potential of services that use remote or virtual operation
eAT KS 6.2	Interpreting data
eAT KS 6.3	Making and handling calls

Layout and application

The knowledge and skills sets are presented under six key areas as in the overview. Each includes an introduction setting out the context for the key area and why it is important.

Statements of knowledge and skill are presented separately within each key area, along with a broad indication of which parts of the workforce they apply to. It should be noted that these indications are for guidance purposes only and should not be regarded as restrictions to use in terms of job role, occupational level or service type.

The focus throughout the knowledge and skills sets is on tasks rather than roles. This is the feature that enables them to be used flexibly. It gives the added potential for the knowledge and skills sets to become a mechanism for integrated approaches to care and support, as they can be applied not only to the social care workforce but also to contingent workers within health, housing and other related sectors.

A crucial part of the workforce in this context consists of those employed by eAT suppliers and manufacturers who install systems and devices and introduce them to individuals and carers. Key areas 2 and 5 have particular relevance to this part of the workforce, while the full suite will strengthen understanding of the overall context within which eAT is used to promote positive lifestyles for individuals and carers across the UK.

Context

For eAT to become truly embedded in social care, it is necessary for all social care workers to have confidence in technology and its potential to enhance – even transform – the lives of those they support. All social care workers will need some ability to use technology themselves at least for simple tasks, in order for them to be able to share and exchange their experience confidently, when needed, with individuals and carers.

Note: In SK1, 'IT' is used to refer to IT devices in general, while 'eAT' is used to indicate IT and other devices when used specifically to promote independence and wellbeing in a social care context. Some of the devices themselves may be the same.

Key Area	Knowledge Needs	Skills Needs
	Guide: The knowledge statements in KS 1 apply UNIVERSALLY to all those who carry out direct care and support tasks <u>or</u> management tasks in any social care service, whether or not currently using eAT	*Guide: The skills statements in KS 1 apply UNIVERSALLY to all those who carry out direct care and support tasks <u>or</u> management tasks in any social care service, whether or not currently using eAT*
eAT KS 1.1 Digital literacy	**What you need to know:** ● how to use everyday IT devices such as mobile phones/smart phones/ smart TVs / games consoles/ computers ● the way that IT and other eAT devices are powered and the importance of powering/ recharging them ● hazards associated with IT and eAT devices because they are electrically powered ● the importance of security measures when using the internet	**What you need to be able to do:** ● safely charge IT and other eAT devices ● safely switch on and switch off IT and other eAT devices ● use basic functions on IT devices ● access the internet to find information and services ● use measures that promote internet safety
eAT KS 1.2 Promoting the benefits of eAT	**What you need to know:** ● sources of information that illuminate how eAT can enhance quality of life, independence and well-being ● the range of ways in which eAT can enhance the quality of life, independence and well-being of individuals and carers ● the potential for eAT to be designed or adapted to meet an individual's specific needs ● ways that 'off the shelf' and personalised eAT devices can be accessed by individuals and the importance of accessible switches and other controls ● the value of being able to access services and information about jobs, education, leisure, travel , shopping, etc , as well as care and support services	**What you need to be able to do:** ● convey confidence to individuals and carers about the use of eAT devices and related services ● support individuals and carers to access information about eAT ● support individuals and carers to make informed choices regarding eAT ● encourage and support individuals and carers to try out eAT devices that may be of help or of use to them ● guide individuals and carers in the effective use of eAT devices ● convey confidence to individuals and carers about your own ability, with appropriate guidance and training, to configure or calibrate eAT devices ● make appropriate referrals based on your knowledge of eAT

Key Area	Knowledge Needs	Skills Needs
eAT KS 1.3 Working as part of a team	**What you need to know:** • the limits of your own responsibilities in relation to eAT • others within or beyond your organisation who have a particular role or expertise in relation to eAT • the importance of working with others for the benefit of individuals and carers in relation to eAT • how and when to refer a situation that is beyond the scope of your role for eAT	**What you need to be able to do:** • recognise when specialist advice and/or the involvement of others is required • make appropriate referrals when required • work with those who have complementary roles or expertise in relation to eAT, when required, to achieve positive outcomes for individuals and carers

Context

eAT has the capacity to transform the lives of individuals and carers in positive and life-enhancing ways and so promote and protect their human rights. At the same time, eAT has the potential for unintended negative impacts. These may include infringing an individual's right to privacy (eg through environmental sensors that may monitor an individual's sleeping habits); dignity (eg when monitoring intimate personal matters such as use of the toilet); confidentiality (eg when transmitting personal information); autonomy (eg where automatic controls that may over-ride an individual's choices). Use of remote monitoring may in itself lead to increased isolation and the diminishing of human interaction. It is imperative that social care workers apply the core values that underpin all their work when supporting individuals to incorporate eAT into their lives, recognising the conflicts and dilemmas that may arise and how to resolve them.

Key Area	Knowledge Needs	Skills Needs
	Guide: The knowledge statements in KS 2 apply UNIVERSALLY to all those who carry out direct care and support tasks or management tasks in any social care service, whether or not currently using eAT	*Guide: The skills statements in KS 2 apply UNIVERSALLY to all those who carry out direct care and support tasks or management tasks in any social care service, whether or not currently using eAT*
eAT KS 2.1 Human Rights	**What you need to know:** • that human rights are enshrined in legislation as well as codes of practice for social care • how eAT can promote and protect an individual's human rights • the possible consequences if eAT were NOT used in particular situations (eg reduced freedom where eAT could support mobility; extreme risk aversion where eAT could support safety ; increased stress for carers where eAT could relieve the need for constant vigilance) • how eAT may conflict with an individual's human rights • possible conflicts of interest where eAT may be proposed as a substitute for direct support/personal contact with a care worker, for reasons of economy rather than the wellbeing of the individual • the importance of engaging with individuals to explore the impact eAT will have on their lives as a whole	**What you need to be able to do:** • access information on relevant human rights legislation and guidance when required • work with individuals and carers to consider any tensions or conflicts between a proposed eAT solution and their human rights • facilitate resolution where there is conflict regarding eAT, eg between the choice of the individual and the safety of others

Key Area	Knowledge Needs	Skills Needs
eAT KS 2.2 Dignity, Autonomy, privacy and confidentiality	**What you need to know:** • ways in which eAT can promote dignity, autonomy, privacy and confidentiality • the potential of eAT to breach an individual's right to dignity, autonomy, privacy and confidentiality • ways in which eAT may gather personal data about individuals and carers • the safeguards, in general terms, that can be put in place to protect personal data • the level of importance that attaches to maintaining confidentiality for what may be highly personal information	**What you need to be able to do:** • support individuals and carers to understand both the risks and the benefits to their dignity, autonomy, privacy and confidentiality that may be associated with the proposed use of eAT • keep individuals and carers informed about the type of information to be gathered, how it is stored and used • advise individuals and carers on how they can access their own personal information and learn how it is being used, or has been used • guide individuals and carers in how to use eAT devices in ways that ensure minimum amounts of personal information are gathered and stored, commensurate with their needs and choices
eAT KS 2.3 Informed consent	**What you need to know:** • the importance of obtaining informed consent, not only for the use of eAT itself but also for the manner in which personal information will be gathered, stored and shared • the importance of having agreed processes for establishing consent when an individual is not able to express informed consent for themselves • at what points to seek or renew consent (eg change in circumstances) and how to do this • how a worker's communication and interpersonal skills can impact on an individual's decision-making	**What you need to be able to do:** • communicate effectively with individuals and carers • explore with individuals and carers any concerns and issues they have around the introduction of eAT • explore with individuals and carers the balance between independence and interdependence, where eAT may include monitoring by others • explore the options for eAT to identify the least intrusive solution to preserve dignity while meeting needs • support the individual to express their informed choice about eAT and how it is to be used • use agreed processes to establish consent when an individual is not able to express informed consent for themselves

Context

Social care workers must have sufficient knowledge of the wide range of eAT to recognise when eAT may offer the best solution to address an individual's needs. This may include sourcing eAT to assist people who have visual, hearing or cognitive impairments; difficulty with mobility or navigation; difficulty with communication or in controlling their home environment; or who need support through prompting or health and motivational coaching (for medication compliance, therapy, exercise, orientation, etc); or for activity monitoring, falls and seizure monitoring. It may also include sourcing eAT to enable access to every day technologies (computers, smartphones, tablets, etc) and the internet.

Key Area	Knowledge Needs	Skills Needs
	Guide: The knowledge statements in KS3 apply to those who carry out the associated tasks SPECIFICALLY relating to eAT; and to those who carry out MANAGEMENT tasks in any social care service, whether or not currently using eAT	*Guide: The skills statements in KS3 apply to those who carry out the associated tasks SPECIFICALLY relating to eAT*
eAT KS 3.1 Sourcing high quality eAT solutions	**What you need to know:** • where good information about eAT and related services can be obtained, including costs and the conditions of eligibility for particular services • where eAT and related services can be accessed and/or tried • accreditation schemes and codes of practice that relate to access to and use of eAT • the importance of eAT devices carrying appropriate certifications with regard to their electrical safety and operation in line with approved protocols • the benefits of services operating in accordance with appropriate codes of practice and providing good quality user guides and on-going support • the importance of checking that eAT and related services facilitate control by the individual or carer	**What you need to be able to do:** • keep up to date with reliable information about eAT including codes of practice and accreditation schemes • support individuals and carers to access information about eAT and eAT-based services • source eATs and/or eAT-based services that comply with appropriate codes of practice and certifications

Key Area	Knowledge Needs	Skills Needs
eAT KS 3.2 Procurement of eAT solutions	**What you need to know:** ● the way that eAT and eAT services are procured and commissioned within social care ● how self-purchase by individuals and carers can complement procured/ commissioned eAT ● how to develop specifications for eATs ● how to evaluate the relative merits of different eATs ● how to assess value for money in relation to eATs	**What you need to be able to do:** ● assess the potential merits of eAT, taking account of the interests of individuals and the context of service provision ● develop detailed specifications for eATs ● assess the merits of different eATs that may meet requirements ● procure appropriate eATs for individuals and carers ● assist individuals and carers in procuring eATs ● confirm value for money in relation to eAT solutions

eAT KS 4   ASSESSMENT AND REVIEW IN RELATION TO eAT

Context

In order to ensure that eAT is used only as appropriate, it is important to understand the relationship between the individual, their environment and the potential for care and support involving eAT. Social care workers must have sound knowledge of the process by which strengths and needs are assessed and reviewed holistically. Such assessment, where not undertaken by the individual themselves, may be undertaken by social care workers and/ or by others (eg occupational therapist). Assessment and review should be undertaken in close partnership with the individual; it involves gathering and recording relevant information, assessing key points, agreeing desirable outcomes and exploring appropriate solutions. It also involves evaluating the outcomes and solutions over time and ensuring that assessment and review is a dynamic and person centred process rather than a bureaucratic exercise.

Key Area	Knowledge Needs	Skills Needs
	Guide: The knowledge statements in KS 4 apply to those who carry out the associated tasks SPECIFICALLY relating to eAT; and to those who carry out MANAGEMENT tasks in any social care service, whether or not currently using eAT	*Guide: The skills statements in KS 4 apply to those who carry out the associated tasks SPECIFICALLY relating to eAT*
eAT KS 4.1 Assessment	**What you need to know:** ● the importance of keeping up to date with eAT and eAT service developments ● the way in which developments around eAT and eAT services are impacting on processes of assessment and the ways in which people are able to access eAT independently ● the importance of the process of assessment and review, including consideration of the potential role of eAT devices or eAT services in meeting an individual's needs and achieving positive outcomes ● the relationship between the individual and their physical, social and family environment and the way that these impact on the need for support ● the potential role of eAT in meeting an individual's needs and achieving positive outcomes in the context of their physical, social and family environment ● the importance of assessing risks associated with eAT ● funding options that could assist when sourcing eAT ● issues around eAT procurement ● issues around the compatibility of eAT devices ● how eAT fits within an overall plan of support	**What you need to be able to do:** ● communicate effectively with individuals and carers in relation to eAT ● undertake systematic assessments to identify an individual's strengths and needs in the context of their physical, social and family environment ● reason and problem solve to identify any potential role for eAT ● assess the merits of different eAT options and support individuals and carers to understand these ● assess the suitability of the home environment for eAT ● undertake risk assessment in the context of eAT ● advise the individual regarding procedures, costs and charges pertaining to eAT ● accurately document assessment information including that relating to eAT

Key Area	Knowledge Needs	Skills Needs
eAT KS 4.2 Self assessment	**What you need to know:** • the process whereby individuals and carers can self-assess and/or review their strengths, needs and options in relation to eAT • ways in which individuals can be supported in the process of self-assessment in relation to eAT • options for direct payments or individual budgets that can provide individuals with the opportunity to self-assess and procure their own eAT services or devices	**What you need to be able to do:** • keep up to date with eAT and eAT service developments • communicate effectively with individuals and carers in relation to eAT • support individuals through the self-assessment process in relation to eAT • signpost individuals and offer guidance on sources of information on self-purchase of eAT • advise individuals regarding costs and charges pertaining to eAT, including where these are directly sourced by themselves
eAT KS 4.3 Implementation *Note: For practical tasks relating to eAT within a plan of support, see also eAT KS 5* **l**	**What you need to know:** • how social care values apply when supporting individuals and carers to use eAT systems and devices within a plan of support	**What you need to be able to do:** • communicate effectively with individuals and carers in relation to eAT • apply the values of social care when supporting individuals and carers to use eAT systems and devices within a plan of support
eAT KS 4.4 Review	**What you need to know:** *As at eAT KS 4.1*	**What you need to be able to do:** • communicate effectively with individuals and carers in relation to eAT • undertake systematic reviews to identify an individual's needs in the context of their physical, social and family environment, how these have changed and how well they have been addressed by existing support options • measure and record the positive outcomes of eAT usage for the individual and carers • ensure that any unwelcome outcomes resulting from eAT use are recorded (eg reduction in human interaction) • take account of all outcomes from eAT in planning holistically for future support

eAT KS 5 — SAFE INSTALLATION, MAINTENANCE AND DISPOSAL OF eAT

Context

In many instances, installation and related tasks for eAT devices may be contracted out to the manufacturer or supplier. SK5 is relevant to workers in this context. Social care workers will normally need to be involved in the process to some degree also, so SK5 is relevant to them too. The key priority for all is the importance of dialogue with the individual and carers regarding both practical matters (such as power sources, positioning, links to networks, calibration, maintenance, what happens when there is a device or network failure); and emotional aspects (such as consequent changes to lifestyle, anxiety about unfamiliar devices, or the need to learn new procedures).

Social care workers will have a central role in supporting the individual to use eAT devices with confidence, to maintain them over time and to dispose of them safely.

Key Area	Knowledge Needs	Skills Needs
	Guide: The knowledge statements in KS 5 apply to those who carry out the associated tasks SPECIFICALLY relating to eAT; and to those who carry out MANAGEMENT tasks in a service which depends on or supports the use of eAT, including eAT suppliers and related agencies.	*Guide: The skills statements in KS 5 apply to those who carry out the associated tasks SPECIFICALLY relating to eAT*
eAT KS 5.1 Installation	**What you need to know:** • the impact on an individual of having a new eAT device installed • the way in which eAT may be supplied as free-standing or installed devices, and the consequent different requirements for any fitting or installation process • the need for some eAT devices to be linked to the mains and to telephone or broadband networks • safety policies and practices that relate to eAT when working in people's homes, including with regard to handling devices where there is an infection risk • appropriate installation and safety/risk assessment checklists for eAT	**What you need to be able to do:** • communicate effectively with individuals and carers in relation to eAT • work with the individual and carers to allay any fears and anxieties about the installation • evaluate, in collaboration with the individual, the appropriate location for eAT devices • complete relevant safety and operational checks (including ensuring interoperability) for eAT and any linked services • act on any safety risks associated with the installation of eAT • obtain relevant specialist support, where appropriate, for tasks to address safety issues • make permitted adjustments to eAT in response to the choices and needs of the individual • plug in, calibrate and test the device or support the individual to do so • support the individual to understand instructions on the safe use of the device or service and confirm their understanding • check servicing requirements for the eAT device and agree how accurate records will be maintained

Key Area	Knowledge Needs	Skills Needs
eAT KS 5.2 Maintenance	**What you need to know:** • the importance of proper maintenance and cleaning of eAT in line with the guidance of manufacturers or suppliers • how and when to report any faults, breakages or malfunctions of eAT	**What you need to be able to do:** • provide individuals with appropriate information on the maintenance of eAT and relevant contact details • follow and document maintenance procedures for eAT devices e.g. re-fitting batteries • respond to and act on any maintenance issues in relation to the device • promptly report any failures of eAT using the relevant procedure • provide general support to the individual in their use of eAT • observe and monitor the relationship between the individual and the eAT, eg how well it is integrated into their life, whether it is having the expected outcome, whether it remains relevant and appropriate for the individual • report any concerns about the well-being of the individual or changing requirements about eAT
eAT KS 5.3 Removal, storage, recycling or disposal	**What you need to know:** • the importance of following agreed procedures for the removal, storage, recycling or disposal of eAT	**What you need to be able to do:** • provide the individual with information on the removal and disposal of the eAT after use and support them to understand the process and requirements • carry out, or support the individual to carry out, the removal, cleaning, storage, recycling and/or disposal of eATs in accordance with agreed procedures

eAT KS 6   REMOTE OR VIRTUAL MONITORING AND RESPONSE SYSTEMS

Context

Services that use remote or 'virtual' monitoring and response systems are those which harness the potential of eAT to support individuals at a distance. Terminology for these services continues to evolve. They are sometimes referred to as 'telecare'. 'Telehealthcare' is also sometimes used to identify services that capture elements of health as well as care and support. 'mCare services' adopt mobile phones as the central monitoring mechanism. These remote or virtual services can be defined as those that utilise *'personal and environmental sensors (in the home) that enable people to remain safe and independent in their own home for longer. 24 hour monitoring ensures that, should an event occur, the information is acted upon immediately and the most appropriate response put in train.'[1]*

Key Area	Knowledge Needs	Skills Needs
	Guide: The knowledge statements in KS 6 apply to those who carry out the associated tasks SPECIFICALLY relating to eAT; and to those who carry out MANAGEMENT tasks in a service which depends on or supports the use of eAT	*Guide: The skills statements in KS 6 apply to those who carry out the associated tasks SPECIFICALLY relating to eAT*
eAT KS 6.1 The purpose and potential of services that use remote or virtual operation	**What you need to know:** ● the role and purpose of services that use remote or virtual operation ● the potential merits of these services for individuals with a range of care and support needs ● how these services may cross traditional service boundaries (eg social care, health, housing) ● how these services operate in collaboration with other services (eg health, fire, police)	**What you need to be able to do:** ● keep up to date with developments in remote or virtual service delivery ● review the potential of new services or ways of operation that could be of benefit to individuals ● work in partnership with other professionals and services to ensure remote or virtual service provision is effective.

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1   Dept of Health, quoted on http://www.telecare.org.uk/

Key Area	Knowledge Needs	Skills Needs
eAT KS 6.2 Interpreting data	**What you need to know:** • the importance of data and information accessed and monitored within remote or virtual services • the very high level of importance that attaches to maintaining confidentiality about highly personal information • agreed parameters within data and information that indicate where specific responses must be triggered • the need for urgency in handling information that may be life critical or time critical in other ways • how and when to initiate contact with individuals and carers in relation to data and information • the necessity to work in partnership with other social care staff with specialist knowledge wherever appropriate • how and when to access help and guidance from colleagues, specialists, or other external services	**What you need to be able to do:** • interpret data, based on agreed parameters, regarding the safety and wellbeing of the individual • initiate contact with individuals and carers in relation to any data or information received that falls outside agreed parameters • access and implement help and guidance from others in interpreting data and information where appropriate
eAT KS 6.3 Making and handling calls	**What you need to know:** • the range of ways in which 'calls' may be made (eg text, voice or video) • the impact of your own communication and interpersonal skills on the response and reaction of the individual • the range of factors that may impact on an individual's fluency and tone during a call • the relevance of information received and its implications for the individual's well-being	**What you need to be able to do:** • employ excellent interpersonal skills when making and receiving calls • take special care when communicating with users who may be distressed and/or have difficulties in communication • identify and elicit salient points of information during the call and check your understanding with the caller • follow agreed protocols for action during and after a call • keep the caller informed of actions being taken • confirm that the caller is satisfied with the outcome of the call • initiate reviews (in service provision, protocols, responses etc) as necessary

Appendix 1:
Documents that Supported Development of the Knowledge and Skills Sets

Academy of Medical Royal Colleges. (2012) *EHealth Competency Framework – Defining the Role of the Expert Clinician*. Produced in partnership with the Scottish Government.
Available at: http://aomrc.org.uk/about-us/news/item/ehealth-competency-framework-defining-the-role-of-the-expert-clinician.html

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Assist UK. (2005). *A Competence Framework for Trusted Assessors*.
Available at: http://www.cot.co.uk/sites/default/files/publications/public/Competence-framework.pdf

Care Council for Wales. *Code of Practice for Social Care Workers*. Cardiff.
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Care Council for Wales. (2009) *Knowledge Set and Progress Log for Dementia Care*. Cardiff.

Care Council for Wales. (2010) *Practice Guidelines – Supporting the Social Care Workforce to Deliver Person Centred Care for People with Dementia*. Cardiff.

Down, K. and Stead, A. (2007) *Assistive Technology Workforce Development*. Foundation for Assistive Technology. London.

Health Design and Technology Institute. (2009) *Assistive Technology Workforce Development: Using Assistive Technology to Support a Falls Care Pathway*.

Jepson, J. and Evans, M. J. (2006) *An Evaluation of a New Assistive Technology Workforce in Norfolk Social Services*. University of East Angia, Norwich.

Joint Improvement Team (JIT). (2010) *Telehealthcare in Scotland: A Strategy for Education and Training 2010–2012.* Published by Joint Improvement Team (JIT) and Scottish Centre for Telehealth (SCT).

Northern Ireland Social Care Council. (2002). *Codes of Practice for Social Care Workers and Employers of Social Care Workers*.
Available at: http://www.niscc.info/codes_of_practice-10.aspx

Scottish Government. (2011) *Promoting Excellence: A Framework for All Health and Social Services Staff Working with People with Dementia, their Families and Carers*.
Available at: http://www.scotland.gov.uk/Resource/Doc/350174/0117211.pdf

Scottish Government. (2012) *A National Telehealth and Telecare Delivery Plan for Scotland to 2015*. Edinburgh.
Available at: http://www.scotland.gov.uk/Publications/2012/12/7791

Scottish Social Services Council. (2009). *Codes of Practice for Social Service Workers and Employers*. Edinburgh.
Available at: http://www.sssc.uk.com/doc_details/1020-sssc-codes-of-practice-for-social-service-workers-and-employers

Skills for Care (2012) *Assisted living technology and services: A learning and development framework*. Skills for Care, Leeds

Skills for Care. (2010). *Codes of Practice for Social Care Worker and Employers*.
Available at: http://www.skillsforcare.org.uk/developing_skills/GSCCcodesofpractice/GSCC_codes_of_practice.aspx

Skills for Care. (2011). *Capable, Confident, Skilled: A Workforce Development Strategy for People Working, Supporting and Caring in Adult Social Care*. SfC, Leeds.

Skills for Care. (2012) *Workforce Development for those Working in Assisted Living Services: Autumn Briefing*. Leeds.

Skills for Care and Development. (2012) *Assisting Employers with the Workforce Implications of Assistive Technology: Desk Based Research*. London.

Skills for Care and Development, SFC&D (2012) *Supporting Employers with Workforce Implications of Assistive Technology: Survey Findings*. London.

Skills for Health. (2011) *Competencies and National Occupational Standards*.
Available at: http://www.skillsforhealth.org.uk/about-us/competences%10national-occupational-standards/

Tarpey, L., and Hollingworth, S. (2010) *The Impact of New Technology upon the Social Care, Children and Young People's Workforces*. Report for Skills for Care and Development, Hasca Ltd.

Tether, B., Mina, A., Consoli, D., Gagliardi, D. (2005) *A Literature Review on Skills and Innovation. How Does Successful Innovation Impact on the Demand for Skills and How Do Skills Drive Innovation?* ESRC Centre for Research on Innovation and Competition, University of Manchester. Published by The Department of Trade and Industry.
Available at: http://webarchive.nationalarchives.gov.uk/+/http://www.berr.gov.uk/files/file11008.pdf

Wigfield, A., Moore, S., Buse, C., and Fry, G. (2012) *Workforce Development for Assisted Living Technology: Understanding Roles, Delivery and Workforce Needs.* Centre for International Research on Care, Labour and Equalities; University of Leeds.

Appendix 2: Contributors

These knowledge and skills sets and the accompanying strategy *Technology to Care: a Workforce Learning Strategy to Embed eAT in Social Care* have been informed by desk based research and a wide range of stakeholder input, including an e-survey and consultation and engagement events across the UK. Feedback on the Knowledge and Skills Sets was received from 140 participants who attended a series of 10 workshops across the UK during summer 2013.

A network of eAT Champions established to support this work contributed to many workshops and provided feedback at several points during development. The Champions included representation from local authority commissioners, telecare services managers, care and support service providers, occupational therapists, health, housing, and third sector workers. Individuals who use services also contributed to the development of the documents.

A Task Group was also drawn together to steer this work, to ensure consistency of approach and consensus across the UK. Members included representation from a range of employers and Sector Skills bodies from Scotland, Northern Ireland, England and Wales. These were:

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In response to feedback received, the group further adapted the draft Strategy and Knowledge and Skills Sets originally developed by Dr Malcolm Fisk, Dr Gina Sands, Nikki Holliday, Darren Awang, Dr Gillian Ward, Emma Rose-Hayes and Simon Fielden of Coventry University.

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Notes