

## **Practice example: NI knowledge and skills framework**

Recommendation 8 - workforce development

### **Background**

As knowledge and services expand, health and social care systems and practices change in response to society's needs and therefore the roles and responsibilities of health and social care staff evolve. Therefore, periodic review and updating of staff skills and knowledge is required to ensure their currency reflects these changes. The project identified that there wasn't a consistent approach to the training and development of staff working across this interface. The development of the knowledge and skills framework was informed by the Think Family model approach to provision and delivery of care as outlined in the SCIE guidance.

### **Intended outcomes**

A framework was developed to inform health and social care trusts and voluntary organisations in the planning, commissioning and delivery of a training programme that would meet the learning and development needs of staff working across the mental health and children's services interface. The framework also aims to:

- provide guidance and assist in the standardisation of the approach to service delivery
- inform education providers
- provide support to and develop staff competency when working with parents who have mental ill health
- improve quality care and support in the management of risk
- be used by individual practitioners and/or managers to assist in identifying individual learning and development needs.

### **Practical actions**

A working sub-group was established with representation from all relevant services - including training departments - at a pre- and post-registration level across relevant professions; including social work, nursing, medicine and allied health professions. For the purposes of this project, it was designed to meet the needs of the statutory sector, but in the design we were cognisant of the training needs of voluntary sector staff. We designed the framework so that it can also be used to address the needs of both professional and non-professional staff and, where possible, fit with existing training programmes. This document sets out the skills and competencies needed by health and social care professionals working with parents with mental health problems and their families.

### **What actually happened**

The sub-group developed the content, and the framework was written by the project manager. It was distributed for wide consultation, feedback provided informed the amendments made, and the framework was subsequently sent for consultation and then finalised. The framework was designed with regard to the different level of learning needs required by staff, related to their level of responsibility and contact with families. It was signed off by the board members of the Health and Social Care Board (commissioners) and will be implemented across the five trusts with an implementation plan, which identifies who needs to complete the training, at what level and at what stage of their career. The project managers also linked with education representatives for social services, mental health, nursing and medicine (both at under- and post-graduate level), to raise awareness about the project, and discuss ways of including Think Family in higher and professional education.

### **Advice for others**

- Allow plenty of time to develop the framework. To try and review a training strategy to meet the needs of staff in medicine, nursing, social work, allied health professionals and non-professional staff in one framework is a complex and challenging task.
- Awareness of the family model approach should be introduced to staff at the earlier opportunity in their training, including pre-qualifying training such as undergraduate and postgraduate health and social care courses.
- In designing the framework you need to consider resource implications to ensure that the training can be delivered. However, this should not detract from the standards of practice necessary as identified in the framework. Barriers to delivering training should not deter from good practice, and other means of delivering training could be explored (e.g. in-house, at team meetings etc).