Transferable Role Template

Career Framework Level 3

Electronic Assistive Technology Technician
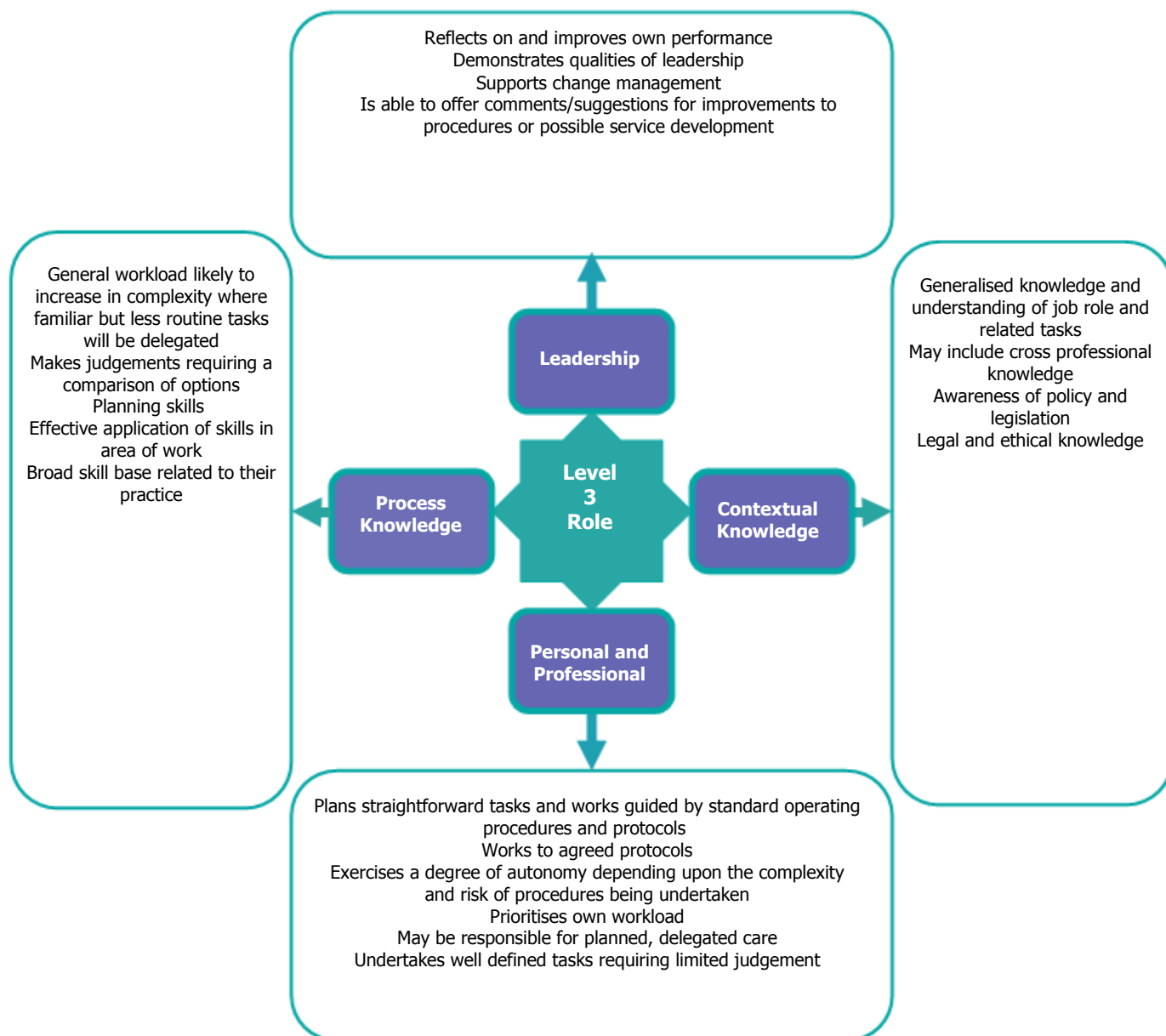
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Developers

Birmingham ACT
Skills for Health

Level Descriptors
Key characteristics of a Level 3 Role

Reflects on and improves own performance
Demonstrates qualities of leadership
Supports change management
Is able to offer comments/suggestions for improvements to procedures or possible service development

General workload likely to increase in complexity where familiar but less routine tasks will be delegated
Makes judgements requiring a comparison of options
Planning skills
Effective application of skills in area of work
Broad skill base related to their practice

Leadership

Level 3 Role

Process Knowledge

Contextual Knowledge

Personal and Professional

Generalised knowledge and understanding of job role and related tasks
May include cross professional knowledge
Awareness of policy and legislation
Legal and ethical knowledge

Plans straightforward tasks and works guided by standard operating procedures and protocols
Works to agreed protocols
Exercises a degree of autonomy depending upon the complexity and risk of procedures being undertaken
Prioritises own workload
May be responsible for planned, delegated care
Undertakes well defined tasks requiring limited judgement

Definition of the Level 3 Role

People at level 3 require knowledge of facts, principles, processes and general concepts in a field of work. They may carry out a wider range of duties than the person working at level 2 and will have more responsibility with guidance and supervision available when needed. They will contribute to service development and are responsible for self-development.

Example of Role at Level 3

Senior Healthcare Assistant:

Senior healthcare assistants or technicians support the work of practitioners at all levels and may work as part of a team. They demonstrate an ability to carry out tasks, solving straightforward problems and making some judgements, with guidance and supervision available. They have skills in specific focussed aspects of service delivery.

These characteristics have been developed by Skills for Health working with employers and other stakeholders.

Basic Information:

Named Role	**Electronic Assistive Technology Technician**
Area of work	Community NHS Or Local Authority Or Independent
Role Family	AHPs, Healthcare Science
Experience required	
Career Framework Level	3

Summary of Role

The EAT technicians set up, maintain and provide reactive call out to repair EC and AAC equipment.

Scope of the Role

The EAT technician will:

- Prepare EC equipment to meet individual needs
- Prepare AAC equipment as required
- Test equipment for functionality and electrical safety
- Install the equipment in the persons home and demonstrate its safe use
- Mount AAC and EC equipment to a persons wheelchairs and conduct either a stability test or a stability risk assessment where a test cannot be carried out.
- Deal with fault calls on a priority needs based system and interpret issues to find solutions
- Liaise with the responsible clinician and the client to keep them informed of any delays to delivery
- Decontaminate equipment and ensure it is safe to use prior to testing/returning to stock/repair
- Carry out annual maintenance including clinical based review questions in clients own environment(s)
- Have knowledge of all equipment prescribed including keeping up to date with new and emerging technology.

Level 3 Core Competences / National Occupational Standards:

Underpinning Principle	Reference Function		Competence
1. COMMUNICATION	1.2	Communicate effectively	GEN97 Communicate effectively in a healthcare environment http://tools.skillsforhealth.org.uk/competence/show/html/id/3001
2. PERSONAL & PEOPLE DEVELOPMENT	2.1.1	Develop your own practice	SCDHSC0023 Develop your own knowledge and practice http://tools.skillsforhealth.org.uk/competence/show/html/id/3517
	2.1.2	Reflect on your own practice	GEN23 Monitor your own work practices http://tools.skillsforhealth.org.uk/competence/show/html/id/2051
3. HEALTH SAFETY & SECURITY	3.5.1	Ensure your own actions reduce risks to health and safety	IPC2.2012 Perform hand hygiene to prevent the spread of infection http://tools.skillsforhealth.org.uk/competence/show/html/id/3309
			PROHSS1 Make sure your own actions reduce risks to health and safety http://tools.skillsforhealth.org.uk/competence/show/html/id/3327
			PMWRV1 Make sure your actions contribute to a positive and safe working culture http://tools.skillsforhealth.org.uk/competence/show/html/id/4027
	3.5.2	Protect individuals from abuse	SCDHSC0024 Support the safeguarding of individuals http://tools.skillsforhealth.org.uk/competence/show/html/id/3518
5. QUALITY	5.1.1	Act within the limits of your competence and authority	GEN63 Act within the limits of your competence and authority http://tools.skillsforhealth.org.uk/competence/show/html/id/85
	5.1.2	Manage and organise your own time and activities	HT4 Manage and organise your own time and activities http://tools.skillsforhealth.org.uk/competence/show/html/id/2501
6. EQUALITY & DIVERSITY	6.1	Ensure your own actions support equality of opportunity and diversity	SCDHSC0234 Uphold the rights of individuals http://tools.skillsforhealth.org.uk/competence/show/html/id/3506
B. HEALTH INTERVENTION	B2.1	Obtain information from individuals about their health status and needs	CHS169 Comply with legal requirements for maintaining confidentiality in healthcare http://tools.skillsforhealth.org.uk/competence/show/html/id/2820
D. INFORMATION MANAGEMENT / INFORMATION AND COMMUNICATION TECHNOLOGY	D2.4	Maintain information / record systems	CFA_BAD332 Store and retrieve information using a filing system http://tools.skillsforhealth.org.uk/competence/show/html/id/4104

H. MANAGEMENT & ADMINISTRATION	H1.3.1	Contribute to the effectiveness of teams	SCDHSC0241 Contribute to the effectiveness of teams http://tools.skillsforhealth.org.uk/competence/show/html/id/3509
	H2.6	Receive and pass on messages and information	ESKITU020 Use digital communications http://tools.skillsforhealth.org.uk/competence/show/html/id/4150

Role Specific Competences / National Occupational Standards:

Underpinning Principle	Reference Function		Competence
G. MEDICAL DEVICES PRODUCTS & EQUIPMENT	G3.2	Install new medical devices and equipment	CHS200 Install equipment and associated systems within healthcare http://tools.skillsforhealth.org.uk/competence/show/html/id/2824
	G3.5	Test and evaluate equipment, medical devices and products (against a standard)	CHS207 Test medical devices, products, equipment and associated systems within healthcare http://tools.skillsforhealth.org.uk/competence/show/html/id/2832
	G4.1	Maintain equipment, medical devices and products	GEN78 Conduct routine maintenance on clinical equipment http://tools.skillsforhealth.org.uk/competence/show/html/id/2635
			CHS210 Maintain healthcare equipment, medical devices and associated systems http://tools.skillsforhealth.org.uk/competence/show/html/id/2835
	G4.2	Repair medical devices and equipment	CHS208 Repair medical devices, equipment and associated systems within healthcare http://tools.skillsforhealth.org.uk/competence/show/html/id/2833

Facets of Role (National Occupational Standards):

Underpinning Principle	Reference Function	Competence
	None Assigned	

Locality Specific Competences / National Occupational Standards:

Underpinning Principle	Reference Function	Competence
	None Assigned	

Indicative Learning and Development

Transferable roles may be underpinned by a range of learning and development activities to ensure both competence and role confidence. The learning and development included within the template is by nature indicative. In some cases it is endorsed by professional bodies and/or special interest groups and accredited by an awarding body.

Transferable role	Electronic Assistive Technology Technician
Formal endorsed learning	Formal learning normally has an assessment component and should lead to a recognised qualification or be part of learning which is endorsed by a recognised authority. PAT testing
Informal learning	Informal learning opportunities may include work shadowing, self directed study, and non assessed taught sessions. This is not an exhaustive list. All learning should be negotiated and include clear learning outcomes which impact upon practice. Informal Learning required during the first 12 months - Work shadowing - Desk based research regarding available resources - Use of supervision - Training sessions from AT companies - Attendance at relevant conferences and meetings in relation to AT.
Summary of learning and development including aims and objectives	
Duration	Initial period of training for approximately 6 -12 months. On-going training and supervision to be provided
National Occupational Standards used	As detailed within role outline. The performance criteria and knowledge statements in each NOS will form the basis for the development of specific learning outcomes for each person and may be used to develop generic learning outcomes for each module/unit of learning.
Credits (including framework used)	Wherever possible learning should be credit rated to enable transferability and progression

Accreditation	Wherever possible learning should be accredited by education providers, professional bodies or similar
APEL and progression	Wherever possible learning should be transferable through APEL and should enable progression to other formal learning
Programme structure	Most programmes of learning are built around a flexible, blended learning experience. Modules of learning enable choice and therefore a tailored learning experience.
Continuous Professional Development	It is recognised that continuing professional development is an essential component to maintaining competent, safe practice at all levels of the career framework. Learning should be active, with the impact on service delivery clearly defined and agreed between the learner and their line manager. A range of methods for capturing the impact of learning may be used e.g. learning contracts, reflective accounts, productivity measures, appraisals systems and processes. Ongoing supervision and review
Resources required, e.g. placement learning, preceptors, accredited assessors etc	Learners may need to access learning in a variety of ways including online, taught sessions, self directed study. Wherever possible protected time included in their work schedule should be considered. Where work based assessments take place; assessors will be required Ongoing supervision and review
Quality Assurance	Learning should be quality assured to ensure fitness for purpose and efficacy.

Policies included in learning programme documentation	Policies are related to the learning and not to service delivery. Where formal learning is offered some of the following policies may apply.
	For example:
	Equal opportunities,
	Accessibility
	Teaching and learning
	Assessment, internal verification and moderation
	Appeals procedure
	APEL processes
	Staff development
	Academic standards
	Equality and diversity
	E-safeguarding and Safeguarding
	Health and safety
	Grievance and disciplinary procedures
Funding	Funding for learning should be negotiated locally and should be sustainable to fulfil service needs.
Leading to registration or membership with:	Some learning may result in the learner being registered or being able to join a professional body or similar organisation.

References & Further Information:

European Commission, (2008) The European qualifications framework for lifelong learning (EQF) Office for Official Publications of the European Communities, Luxembourg

NHS Education for Scotland (NES). (2009, revised 2010). A Guide to Healthcare Support Worker Education and Role Development http://www.nes.scot.nhs.uk/media/350213/hcsw_report_final.pdf

The Register of Clinical Technologists, (2014, reviewed 2016) Code of professional conduct http://therct.org.uk/wp-content/uploads/2014/09/RCT-Code-of-Professional-Conduct.pdf

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