



Promoting higher quality

**The Quality Assurance Agency
for Higher Education**

**Benchmark statement:
Health care programmes**

Phase 1

Health visiting

Subject benchmark statements: Health care programmes

Subject benchmark statements provide a means of describing the nature and characteristics of programmes of study and training in health care. They also represent general expectations about standards for the award of qualifications at a given level and articulate the attributes and capabilities that those possessing such qualifications should be able to demonstrate.

Subject benchmark statements are used for a variety of purposes. Primarily, they are an important external source of reference when new programmes are being designed and developed. They provide general guidance for articulating the learning outcomes associated with the programme but are not a specification of a detailed curriculum. Benchmark statements provide for variety and flexibility in the design of programmes and encourage innovation within an agreed overall conceptual framework.

Subject benchmark statements also provide support in the pursuit of internal quality assurance. They enable the learning outcomes specified for a particular programme to be reviewed and evaluated against agreed general expectations about standards.

Finally, subject benchmark statements are one of a number of external sources of information that are drawn upon for the purposes of academic review* and for making judgements about threshold standards being met. Reviewers do not use subject benchmark statements as a crude checklist for these purposes however. Rather, they are used in conjunction with the relevant programme specifications, the associated documentation of the relevant professional and statutory regulatory bodies, the institution's own self evaluation documentation, together with primary data in order to enable reviewers to come to a rounded judgement based on a broad range of evidence.

The benchmarking of standards in health care subjects is undertaken by groups of appropriate specialists drawn from higher education institutions, service providers and the professional and statutory regulatory bodies. The statements represent the first attempt to make explicit in published form the general academic characteristics and standards of awards in these subjects in the UK. In due course, the statements will be revised to reflect developments in the subjects and the experiences of institutions, academic review and others that are working with it.

* academic review in this context refers to the Agency's arrangements for external assurance of quality and standards. Further information regarding these may be found in the *Handbook for academic review*, which can be found on the Agency's web site.

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ISBN 1 85824 569 9

AR 029 6/2001

Published by

Quality Assurance Agency for Higher Education

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Southgate Street

Gloucester GL1 1UB

Tel 01452 557000

Fax 01452 557070

Web www.qaa.ac.uk

Printed by

Frontier Print & Design Limited

The Quality Assurance Agency for Higher Education is a company limited by guarantee.

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Foreword

This benchmark statement describes the nature and standards of programmes of study in health visiting, that leads to awards made by higher education institutions in the United Kingdom (UK) in the subject.

It has been developed in collaboration with a number of other health care professions and these are listed below. Although initial work was undertaken in subject specific groups, the analysis of these early drafts identified a number of features which all the subject groups shared. It was, therefore, agreed by each of the specialist benchmarking groups that their respective statements could be cast using a common structure. As work progressed it became increasingly apparent that there was considerable overlap within the details of the subject-specific statements and a common health professions framework was emerging. This emerging framework is, accordingly, displayed in each of the subject statements in order to illustrate on the one hand, the shared context upon which the education and training of health care professionals rests and, on the other, the uniquely profession-specific context within which programmes are organised. It is important to emphasise that benchmark statements are not cast in tablets of stone and will need to be revisited in the light of experience and further developments in health care. Moreover, we are confident that the emerging framework has the potential to embrace other health related professions such as social work, dentistry, medicine and other therapies. It is anticipated that further work in a second phase of the project could lead to an overarching health professions framework.

The initial section of this statement sets out the health professions framework under three main headings:

- A Expectations of the health professional in providing patient/client services;
- B The application of practice in securing, maintaining or improving health and well-being;
- C The knowledge, understanding and skills that underpin the education and training of health care professionals.

The main section of this statement, in addition to describing the nature and extent of programmes leading to awards in health visiting, describes the profession-specific expectations and requirements under the same three categories.

The key feature in this statement, as in the associated statements, is the explicit articulation of the academic and practitioner standards associated with the award in health visiting. This duality reflects the significance of the academic award as the route to registration for professional practice and formal recognition by the professional and statutory regulatory bodies. The threshold standards set out the expectations of health professionals entering their first post immediately on qualification.

The section on standards accords with the relevant level descriptor for awards in the qualifications frameworks published by the Quality Assurance Agency for Higher Education.

The section on teaching, learning and assessment draws attention to the central role of practice in the design of learning opportunities for students and the importance of ensuring that professional competence developed through practice is adequately assessed and rewarded. It also notes how essential it is that the integration of theory and practice is a planned process within the overall arrangements made for teaching and learning.

The statement acknowledges the need to put the prospective client/patient at the centre of the student's learning experience and to promote within that experience the importance of team-working and cross-professional collaboration and communication. Implicit in the statement are the opportunities that exist for shared learning across professional boundaries, particularly in the latter stages of training when inter-professional matters can be addressed most productively. It is essential that the opportunities that exist for shared learning in practice are optimised, as well as best use being made of similar opportunities that prevail more obviously in classroom-based activities.

This statement and the associated statements will therefore allow higher education institutions, in partnership with service providers (where appropriate), to make informed curriculum choices about the construction of shared learning experiences. In this context shared learning is seen as one of a number of means of promoting improved collaborative practice and addressing a range of issues which span professional accountability and professional relationships.

Finally, the statement does not set a national curriculum for programmes leading to awards in health visiting. It acknowledges that the requirements of the professional and statutory regulatory bodies need to be incorporated into the design of programmes. It seeks to encourage higher education institutions and service providers to work collaboratively in the design and delivery of their curricula. Its essential feature is the specification of threshold standards, incorporating academic and practitioner elements, against which higher education institutions are expected, as a minimum, to set their standards for the award.

¹ *Dietetics, Health Visiting, Midwifery, Nursing, Occupational Therapy, Orthoptics, Physiotherapy, Podiatry (Chiroprody), Prosthetics and Orthotics, Radiography, and Speech & Language Therapy.*

An emerging health professions framework

The subject specific statements for health visiting have been set within the emerging health professions framework outlined below. As indicated in the foreword, this framework developed as a result of the benchmarking work undertaken collaboratively by 11 different health professional groups. Further evolution of the framework is anticipated through a second phase of the project which will address its goodness of fit with a range of other health and social care professions benchmark statements.

A Expectations of the health professional in providing patient/client services

This section articulates the expectations of a registered professional within health and social care services. It describes what is regarded as a minimum range of expectations of a professional that will provide safe and competent practice for patients/clients in a variety of health and social care contexts.

A1 Professional autonomy and accountability

The award holder should be able to:

- maintain the standards and requirements of professional and statutory regulatory bodies;
- adhere to relevant codes of conduct;
- understand the legal and ethical responsibilities of professional practice;
- maintain the principles and practice of patient/client confidentiality;
- practise in accordance with current legislation applicable to health care professionals;
- exercise a professional duty of care to patients/clients/carers;
- recognise the obligation to maintain fitness for practice and the need for continuing professional development;
- contribute to the development and dissemination of evidence-based practice within professional contexts;
- uphold the principles and practice of clinical governance.

A2 Professional relationships

The award holder should be able to:

- participate effectively in inter-professional and multi-agency approaches to health and social care where appropriate;
- recognise professional scope of practice and make referrals where appropriate;
- work, where appropriate, with other health and social care professionals and support staff and patients/clients/carers to maximise health outcomes;
- maintain relationships with patients/clients/carers that are culturally sensitive and respect their rights and special needs.

A3 Personal and professional skills

The award holder should be able to:

- demonstrate the ability to deliver quality patient/client-centred care;
- practise in an anti-discriminatory, anti-oppressive manner;
- draw upon appropriate knowledge and skills in order to make professional judgements, recognising the limits of his/her practice;
- communicate effectively with patients/clients/carers and other relevant parties when providing care;
- assist other health care professionals, support staff and patients/clients/carers in maximising health outcomes;
- prioritise workload and manage time effectively;
- engage in self-directed learning that promotes professional development;
- practise with an appropriate degree of self-protection;
- contribute to the well-being and safety of all people in the work place.

A4 Profession and employer context

The award holder should be able to:

- show an understanding of his/her role within health and social care services;
- demonstrate an understanding of government policies for the provision of health and social care;
- take responsibility for his/her own professional development;
- recognise the value of research and other scholarly activity in relation to the development of the profession and of patient/client care.

B The application of practice in securing, maintaining or improving health and well-being

All health care professionals draw from the knowledge and understanding associated with their particular profession. This knowledge and understanding is acquired from theory and practice. It forms the basis for making professional decisions and judgements about the deployment in practice of a range of appropriate skills and behaviours, with the aim of meeting the health and social care needs both of individual clients/patients and of groups, communities and populations. These decisions and judgements are made in the context of considerable variation in the presentation, the setting and in the characteristics of the client/patient health and social care needs. They often take place against a backdrop of uncertainty and change in the structures and mechanisms of health and social care delivery.

Sound professional practice is essentially a process of problem solving. It is characterised by four major phases:

- the identification and analytical assessment of health and social care needs;
- the formulation of plans and strategies for meeting health and social care needs;
- the performance of appropriate, prioritised health promoting/health educating/caring/diagnostic/therapeutic activities;
- the critical evaluation of the impact of, or response to, these activities.

B1 Identification and assessment of health and social care needs

The award holder should be able to:

- gather relevant information from a wide range of sources including electronic data;
- adopt systematic approaches to analysing and evaluating the information collected;
- communicate effectively with the client/patient, (and his/her relatives/carers), group/community/population, about their health and social care needs;
- use a range of assessment techniques appropriate to the situation and make provisional identification of relevant determinants of health and physical, psychological, social and cultural needs/problems;
- recognise the place and contribution of his/her assessment within the total health care profile/package, through effective communication with other members of the health and social care team.

B2 Formulation of plans and strategies for meeting health and social care needs

The award holder should be able to:

- work with the client/patient, (and his/her relatives/carers), group/community/population, to consider the range of activities that are appropriate/feasible/acceptable, including the possibility of referral to other members of the health and social care team and agencies;
- plan care within the context of holistic health management and the contributions of others;
- use reasoning and problem solving skills to make judgements/decisions in prioritising actions;
- formulate specific management plans for meeting needs/problems, setting these within a timescale and taking account of finite resources;
- record professional judgements and decisions taken;
- synthesise theory and practice.

B3 Practice

The award holder should be able to:

- conduct appropriate activities skilfully and in accordance with best/evidence-based practice;
- contribute to the promotion of social inclusion;
- monitor and review the ongoing effectiveness of the planned activity;
- involve client/patient/members of group/community/population appropriately in ongoing effectiveness of plan;
- maintain records appropriately;
- educate others to enable them to influence the health behaviour of individuals and groups;
- motivate individuals or groups in order to improve awareness, learning and behaviour that contribute to healthy living;
- recognise opportunities to influence health and social policy and practices.

B4 Evaluation

The award holder should be able to:

- measure and evaluate critically the outcomes of professional activities;
- reflect on and review practice;
- participate in audit and other quality assurance procedures;
- contribute to risk management activities.

C Knowledge, understanding and skills that underpin the education and training of health care professionals

The education and training of health care professionals draws from a range of well-established scientific disciplines that provide the underpinning knowledge and understanding for sound practice. Each health care profession will draw from these disciplines differently and to varying extents to meet the requirements of their specialty. It is this contextualisation of knowledge, understanding and skills that is characteristic of the learning in specific health care programmes. Consequently, in this introductory section, the attributes and capabilities expected of the student are expressed at a generalised level.

C1 Knowledge and understanding

The award holder should be able to demonstrate:

- understanding of the key concepts of the disciplines that underpin the education and training of all health care professionals, and detailed knowledge of some of these. The latter would include a broad understanding of:
 - the structure and function of the human body, together with a knowledge of dysfunction and pathology;
 - health and social care philosophy and policy, and its translation into ethical and evidenced based practice;
 - the relevance of the social and psychological sciences to health and healthcare;
 - the role of health care practitioners in the promotion of health and health education;
 - the legislation and professional and statutory codes of conduct that affect health and social care practice.

C2 Skills

Information gathering

The award holder should be able to demonstrate:

- an ability to gather and evaluate evidence and information from a wide range of sources;
- an ability to use methods of enquiry to collect and interpret data in order to provide information that would inform or benefit practice.

Problem solving

The award holder should be able to demonstrate:

- logical and systematic thinking;
- an ability to draw reasoned conclusions and sustainable judgements.

Communication

The award holder should be able to demonstrate:

- effective skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, their relatives and carers; and, when necessary, to groups of colleagues or clients.

Numeracy

The award holder should be able to demonstrate:

- ability in understanding, manipulating, interpreting and presenting numerical data.

Information technology

The award holder should be able to demonstrate:

- an ability to engage with technology, particularly the effective and efficient use of information and communication technology.

Benchmark statement for health visiting

Introduction

Health visiting is a specialist discipline within community nursing practice. It has a significant focus on public health, and shares areas of practice and health care goals with colleagues in primary care and other professions. Through work with individuals, families, groups and communities, health visitors seek to promote health and well-being and prevent illness. Whilst there is an emphasis within health visiting practice on child and family health, work with populations and communities to address issues of health and social inequalities and social exclusion represents an increasing focus on public health within contemporary practice. The health visiting service is unsolicited, thus not offered in relation to specific care needs. Hence it is a dynamic and health-focused service able to respond flexibly to a range of service and community needs.

Health visiting is underpinned by four principles that guide and direct professional practice. These include:

- the search for health needs;
- the stimulation of an awareness of health needs;
- the influence on policies affecting health;
- the facilitation of health-enhancing activities. (CETHV 1977)

This benchmark statement acknowledges contemporary developments within the context of health visiting and its regulation across the United Kingdom (UK), which will shape its content and focus over time. These developments include an increasing emphasis on primary care and public health within the health service, social, demographic and epidemiological changes, new models of service provision, and changes in professional practice.

Health visiting programmes are approved by the statutory regulatory body and higher education institutions at degree level. This benchmarking statement therefore incorporates the requirements of the statutory regulatory body. Registration as a first level nurse or as a midwife is a requirement for entry to a health visiting programme. Study may be undertaken on a full- or part-time equivalent basis. Health visiting programmes share a common core curriculum with the other disciplines in community nursing specialist practice, and have an equal balance of theory and practice. Whilst ensuring that students acquire the unique knowledge and skills to underpin practice in health visiting, education programmes also prepare students for multi-professional and multi-agency working. Opportunities to study health visiting are offered in at least 45 institutions throughout the UK.

This benchmark statement is the product of a collaboration that actively involved practitioners, educators, service managers, professional and statutory bodies and government agencies drawn from across the UK. It incorporates required professional standards and covers health visiting as an applied academic subject at honours degree level. It must be noted that the standards set by the statutory regulatory body are at no less than first degree level, but the vast majority of programmes in England, Wales and Northern Ireland are at honours degree level. Programmes in Scotland are normally at ordinary degree level.

Nature and extent of programmes in health visiting

The search for health needs

The search for health needs is regarded as the primary function of the profession and one that is fundamental to the process of health visiting. It incorporates searching out, identifying and assessing need. Whilst these stages occur in an integrated way, it is necessary to conduct a search or an investigation of health needs before the process of identification and assessment can be satisfactorily completed.

Searching proactively for health needs takes place at an individual, family and community level. The search is focused on the identification of factors influencing health at all levels. It is initiated by health visitors, is non-stigmatising, and guided by a code of ethics and client participation in the process.

Health visitors search for unmet needs in society and identify needs not currently addressed by other professional groups. Identification of the broader environmental influences on health, including those closely associated with poverty, poor housing and unemployment is an important part of the role of the health visitor.

A partnership approach, through which clients are empowered to address issues influencing their health, is an important element of the health visiting process and is central to the promotion of health and the prevention of ill health. Not all health needs are immediately transparent and particular skills are required to identify unmet health needs. On an individual basis the principle of searching for health needs is demonstrated through skilled observation of and communication with clients. Hidden needs are revealed through this mechanism, where discussion is centred around helping clients to examine situations and possible interventions, ensuring that they are provided with the opportunity to discuss issues that they may not have raised independently.

The expert nature of searching for health needs in communities is apparent in the methods used by health visitors, which include qualitative and quantitative approaches to the collection, interpretation and analysis of data. Health visitors are involved in developing profiles of the health and social needs of the local population. This involves bringing together relevant epidemiological data, information from the health visitor's case load, general practice data, local information, and needs expressed by individuals and communities. This information is used to inform local health improvement programmes and to influence resource allocation to areas with the greatest health and social needs.

The stimulation of awareness of health needs

Stimulating an awareness of health needs is the next stage in the process of health visiting. This principle underpins professional practice at an individual, family, community and political level and relates to stimulating awareness through the provision of knowledge and influencing beliefs and behaviours, which positively affect health.

This principle is particularly relevant to the work that health visitors undertake with vulnerable groups in society who may have limited access to information regarding health and health care services. Health visitors frequently work with socially excluded groups to stimulate an awareness of health needs and to establish outreach services to promote social inclusion.

The health visitor's role in stimulating an awareness of health needs is based on the principles of empowerment. This includes the provision of information and the building of self-esteem and confidence, to motivate and enable individuals to see health as a positive resource.

Health visitors work closely with other professionals and statutory and voluntary agencies to raise an awareness of and address the needs of individuals and communities and to provide services where they are most needed. They also apply the principle of stimulating an awareness of health needs through positively influencing the media and by working with action groups. Environmental issues may also be the focus of their work.

Influences on policies affecting health

The principle of influencing policies that affect health is pivotal to the health visitor's role in promoting health and underpins work at a local and national level.

This principle is applied in health visiting practice through activities that seek to influence policies at an individual, community and national level. These activities are the evaluation of the effectiveness of current practices and the provision of feedback to inform future organisational policy and strategic planning and the

use of new data to stimulate policy development. A contribution to the activities of professional organisations and other national bodies that represent the needs of clients and the profession may also be made. In each of these cases the health visitor may be engaged in direct action and/or in empowering individuals and groups to seek positive change.

The facilitation of health-enhancing activities

Health visitors act as catalysts for change and promote an understanding of factors that influence health. Within a framework of empowerment, advocacy and leadership, the health visitor works in partnership with individuals, families and communities to facilitate health-enhancing activities. The aim of health visiting work is to enable others to control or change their own lifestyle or environment. Health visitors also work closely with other agencies and bodies to promote the development of services supporting health enhancing activities.

A Expectations of the health visitor as a professional

At honours degree level, the study of health visiting involves the integrated study of subject-specific knowledge; the acquisition of skills and values; the critical application of research knowledge from health and social sciences (and closely related disciplines) to inform understanding and to underpin action, reflection and evaluation in health visiting practice. Honours degree programmes should be designed to foster an integration of contextual, analytic, explanatory and practical knowledge and understanding. The specific areas of subject knowledge, understanding and skills integral to practice are defined in this statement.

A1 Professional autonomy and accountability of the health visitor

The award holder should be able to:

- appreciate the significance of professional self-regulation, act within a framework of professional accountability, and respect the need to maintain the integrity of the profession and not bring it into disrepute;
- understand the legal responsibilities and ethical considerations of professional practice;
- demonstrate an awareness of professional roles, responsibilities and boundaries and the context and settings in which health care is delivered;
- understand the significance of the concepts of continuing professional development and lifelong learning, accept responsibility for personal/professional development of self, and take account of the expectation to maintain registered professional status through appropriate means;
- engage in clinical supervision and other approaches to the review and development of professional practice.

A2 Professional relationships of the health visitor

The award holder should be able to:

- participate effectively in multi-professional approaches to health care, act independently and collaboratively within a multi-disciplinary and multi-agency context, generate and maintain effective interactions with relevant external agencies including other healthcare professionals, and utilise appropriate referral procedures;
- work in partnership with others to support and implement policy initiatives to improve the health of the local population;
- demonstrate an understanding of the mechanisms by which professional practice contributes to health care policy and the development of primary health care and improvement of public health;
- involve users of services in ways that utilise their knowledge and experience, and develop their capacity and power to influence factors affecting their lives.

A3 Personal and professional skills of the health visitor

The award holder should be able to:

- make appropriate professional judgements with confidence;
- work collaboratively with other health care professionals in professional practice;
- engage in self-directed learning, contribute to effective learning experiences for students and promote an environment conducive to learning;
- exercise responsibility for personal safety;
- undertake personal and professional reviews of team members, identifying potential and facilitating personal development plans;
- advise on educational opportunities to support the professional development of team members;
- contribute constructively to the management of change and the resolution of conflict;
- facilitate learning in relation to identified health need for patients, clients and their carers;
- provide leadership, where appropriate, on public health issues;
- provide counselling and psychological support for individuals and their carers.

A4 Profession and employer context of the health visitor

The award holder should be able to:

- demonstrate an understanding of the historical roots of health care in the UK and of current developments in health and social care;
- contribute to promoting and maintaining a safe health care environment;
- show understanding of how primary health care, public health, health education and health promotion are organised;
- contribute to research and other scholarly activity in the development of professional practice;
- demonstrate an understanding of legislation and legislative processes that govern specific aspects of practice;
- contribute to quality assurance through agreed audit procedures and clinical governance.

B The application of practice in health visiting

B1 Identification and assessment of health needs

The award holder should be able to:

- work proactively in the search for health needs at an individual, family and community level;
- identify the social, political, economic and technological factors that impact upon health and use this information to analyse local and national determinants of health for groups and communities;
- utilise a range of assessment techniques appropriate to assessing the health needs of communities, groups, families and individuals in differing environments, such as in people's homes, health centres, GP surgeries, schools and places of work and leisure;
- take account of the diversity of life experiences and key events in the human life cycle that influence health and assess the individual's ability to influence these;
- assess and evaluate specialist health care interventions to meet health and health-related needs of individuals, families, groups and communities;
- identify risk factors which may lead to the potential for physical or psychological abuse;
- undertake diagnostic, health screening and health surveillance activities relevant to individual, family and community health maintenance;
- collect, collate and analyse data to inform health policies and the provision of health care.

B2 Formulation of plans and strategies for meeting health needs

The award holder should be able to:

- stimulate an awareness of health and care needs, enabling individuals, families, groups and communities to recognise their health needs and take appropriate action;
- differentiate and utilise approaches to meeting the health needs of individuals, families, groups and communities, appropriate to their specific circumstances, location and environment;
- support and empower individuals, families, groups and communities to participate in decisions regarding their health and health care and to access available information and services to achieve health gain;
- advise on the range of local, regional and national services available to assist with health maintenance and health care and the means to access these, using advocacy skills where appropriate;
- contribute to the development of a community health profile;
- act with others to develop strategies to promote social inclusion;
- utilise opportunities to influence health and social policy and practice at local, regional and national levels;
- initiate practice developments to enhance the quality of the health visiting contribution to public health and the quality of care;
- work in partnership with others to influence and support health, and contribute to the development of strategic plans and other policy initiatives to promote the health of the local population.

B3 Focused activity

The award holder should be able to:

- act independently and collaboratively within a multi-disciplinary and multi-agency context, providing professional leadership on public health issues;
- plan, provide and evaluate specialist health care interventions to meet health and health related needs of individuals, families, groups and communities;
- work in partnership with individuals, families, groups and communities to maintain and improve health;
- facilitate learning in relation to identified health needs for individuals, families, groups and communities;
- select, from a range of health and social agencies, those which will assist and improve the health care of individuals, families, groups and communities;
- facilitate access to appropriate therapeutic options and provide support for individuals, families, groups and communities;
- work with vulnerable groups to promote social inclusion;
- initiate and participate in community development;
- contribute to the implementation of programmes to achieve health gain;
- engage in home-based and community-based activities to promote and maintain child health and initiate referral where appropriate;
- identify, prevent and manage conflict situations;
- initiate action to identify and minimise risk in relation to promoting child protection and safety, working in partnership with families, other professionals and agencies;
- establish strategies/programmes for the prevention and management of physical or psychological abuse and initiate referral to therapeutic pathways;
- contribute to the prevention, management and control of communicable diseases;
- prescribe medicines as permitted in legislation.

B4 Evaluation

The award holder should be able to:

- demonstrate a critical, reflective approach to practice;
- accept responsibility for continuing personal and professional development in health visiting;
- engage in the implementation and monitoring of quality assured standards of service provision;
- contribute to the development and evaluation of strategies to promote and improve individual and community health;
- use the outcomes of evaluation to monitor and improve health visiting practice and services.

C Health visiting: subject knowledge, understanding and associated skills

The award holder should be able to demonstrate:

C1 Knowledge and understanding:

- understanding of health and altered health states throughout the lifespan, with particular emphasis on maternal and child health and child development, to include identification of deviation from the norm, lifestyle factors, their influence on health and opportunities for prevention;
- understanding of social science, with particular emphasis on the processes contributing to differences in health experience, the problems of inequality, vulnerability and differential health needs of individuals, groups and communities;
- particular understanding of developmental, behavioural and social psychology, sociological and psychological perspectives on the family and how they can influence life experiences;

- understanding of social and health policy, and the mechanisms by which health visitors can contribute to its development in primary health care including methods of public involvement;
- understanding of child protection policies and procedures and the legal framework within which these operate;
- particular understanding of public health theory and practice, to include epidemiological, health, economic and sociological perspectives;
- understanding of different perspectives on health and how they influence health visiting practice, theoretical models underpinning health visiting practice, and the nature of health visiting professional practice to include boundaries, roles, responsibilities and opportunities for development;
- particular understanding of the nature of community and how this influences health and health care, including contexts, settings and sectors for health visiting practice, such as the home, clinic, schools etc;
- understanding of the use of ethical frameworks in a public health and primary care context;
- understanding of the multi-factorial nature of physical and psychological abuse, risk assessment, preventative strategies and therapeutic pathways;
- understanding of the legislation and legislative processes that govern and shape health visiting practice;
- understanding of communicable diseases and their prevention and control;
- understanding of pharmacology and related subjects, diagnostics and the legal and ethical issues relating to the prescription, supply and administration of medicines and the role of the health visitor and others in the prescribing and management of medicines;
- understanding of models of reflection and clinical supervision and their use in practice;
- understanding theories of learning and teaching, applied to individuals, groups and communities;
- understanding of autonomous practice, self-management and practising within personal and professional boundaries, and the importance of continuing professional development;
- understanding of management theory, to include resource management and the change process;
- understanding of leadership and team working in a multi-disciplinary/multi-agency context.

C2 Skills

Information gathering

- ability to gather, select and evaluate research findings pertaining to the principles, practice and outcomes of health visiting;
- ability to gather and evaluate outcomes of individual, family and community needs assessment;
- ability to seek out epidemiological data, community/case load profiles, and health visiting practice audit and evaluation data;
- ability to systematically invite and analyse feedback, evaluations and perspectives from users, carers and statutory and voluntary agencies;
- ability to carry out health surveillance and screening of individuals, families and communities;
- ability to use models of community health needs assessment and analyse data supporting the health visitor's contribution to health improvement.

Problem solving

- ability to reach judgements in practice by utilising the outcomes of experience, critical review and reflection including outcomes of clinical supervision and personal development planning and review;
- ability to analyse and assess human situations, taking into account the views of participants, theoretical concepts, research evidence, legislation and organisational policies and procedures;
- ability to investigate the impact of inequality and discrimination when working with individuals, families and communities and contribute to the formulation and implementation of appropriate interventions;
- ability to participate in the analysis and synthesis of information gathered, and the process of prioritisation in relation to influencing the provision of appropriate health visiting resources;

- ability to assess child development and identify deviations from the normal and initiate referral where appropriate;
- ability to engage in child protection procedures, taking into account the legal framework and associated policies;
- ability to identify, prevent and manage communicable diseases.

Communication

- ability to use higher level communication skills pertinent to health visiting practice;
- ability to select from a range of teaching methods those appropriate to the context of health promotion and health education, and apply these in professional practice;
- ability to apply health promotion theory, demonstrating expertise in the use of self empowerment and community development approaches;

Numeracy

- ability to interpret numerical and statistical data;
- ability to organise and manipulate numerical and statistical data;
- ability to select appropriate formats for data presentation relevant to the information being conveyed and its intended purpose.

Information technology

- ability to engage with information management systems and technology relevant to health visiting practice, taking account of policies, procedures and data protection requirements regarding access and confidentiality.

Teaching, learning and assessment

Decisions about the strategies and methods for teaching, learning and assessment are for institutions to determine, but should complement the learning outcomes associated with health profession programmes. It is not for benchmark statements to promulgate any one, or combination of, approaches over others. However, this benchmark statement promotes an integrative approach to the application of theory and practice. It underlines the significance attached to the design of learning opportunities that facilitate the acquisition of professional capabilities and to assessment regimes that ensure these are being both delivered and rewarded to an appropriate standard. Fundamental to the basis upon which students are prepared for their professional career, is the provision of programmes of academic study and practice-based learning which lay the foundation for career-long professional development and lifelong learning to support best professional practice and the maintenance of professional standards.

Teaching, and learning in health visiting

The applied nature of health visiting as an academic subject means that practice is an essential and core element of the curriculum equal in value to learning of a theoretical nature. In this statement, 'practice' as an activity refers to experiential, action-based learning that takes place not only in health visiting practice placements but also in a variety of other experiential learning situations that reflect public health practice developments. In this sense, practice provides opportunities for students to improve and demonstrate their understanding through the application and testing of knowledge and skills. Practice learning opportunities are subject to professional regulations that further define educational requirements, standards and modes of assessment. An appropriately qualified practice assessor must facilitate the learning that takes place in practice placements.

Students should be offered a variety of teaching strategies that take account of individual learning styles and the needs of the curriculum.

Assessment strategies must explore the student's ability to conceptualise, compare and analyse issues from a range of sources and demonstrate the integration of theory and practice. The assessment strategy used within a health visiting programme must ensure the coherent and comprehensive assessment of the fitness of the student to enter the professional register as well as to meet the requirements of the academic programme.

Academic and practitioner standards

The standard expected of the threshold graduate is outlined below. Threshold is taken to mean the standard of achievement demonstrated at the end of the educational experience at the point of qualification for registration (ie at the lowest level of a third class honours award). All students graduating with an honours degree in health visiting must meet the requirements for professional registration.

It is recognised that the threshold standards indicate the minimum requirements for safe and competent practice as a health visitor. It is, however, acknowledged that most students will reach a higher level of attainment.

A Working as a professional in health visiting

The award holder should be able to:

- exercise professional autonomy in practice within the legal and ethical boundaries contained in the Professional Code of Conduct;
- demonstrate the ability to undertake safe practice in a variety of contexts;
- demonstrate an understanding of professional boundaries, roles and responsibilities in differing environments and contexts;
- show an ability to enhance professional knowledge and practice using a variety of strategies;
- demonstrate the ability to work effectively within multi-disciplinary and multi-agency teams to achieve health gain;
- work in partnership with clients and carers to promote their ability to influence factors affecting their health;
- demonstrate the use of appropriate communication, interpersonal, advocacy and counselling skills in professional and therapeutic relationships;
- use a critical, reflective approach within practice and engage in relevant professional development activities;
- support and guide the professional practice of team members and facilitate appropriate professional development;
- demonstrate an understanding of current developments in health and social policies and their effect on professional practice;
- demonstrate an understanding of the organisational structures that support professional practice;
- contribute to research and other activities which support the development of professional practice;
- apply the principles of clinical governance to health visiting practice.

B Application of principles and concepts

The award holder should be able to:

- demonstrate an awareness of the variety of factors that may influence the health status of individuals, families, groups and communities;
- demonstrate a proactive approach to the assessment of health need at an individual, family, group and community level;
- demonstrate the ability to plan, implement and evaluate strategies to meet identified health needs at an individual, family, group and community level;
- show an ability to collect and interpret health data from a variety of sources to inform the effective practice of health visiting at the individual, family group and community level;
- utilise a systematic approach in the evaluation of health visiting practice;
- demonstrate the ability to work effectively with individuals, families, groups and communities to promote client ability in the management of health needs;
- show an awareness of strategic planning in health services and the ability to work collaboratively with clients and different professional groups to achieve change;

- demonstrate the ability to undertake the full range of care provision strategies outlined in section B;
- demonstrate the ability to provide effective leadership within the health visiting context to ensure a strategic, evidence-based approach to practice, the effective management of finite resources and the appropriate support and development of team members;
- act as a source of expertise in public health issues within multi-disciplinary and multi-agency settings;
- use evidence-based strategies in professional practice and promote their use within the multi-disciplinary team;
- demonstrate an evaluative approach to professional practice utilising a variety of strategies such as critical reflection, audit and quality assurance.

C Subject knowledge and understanding and associated skills

The award holder should be able to:

- show understanding of the key areas of study as specified in section C;
- draw on evidence from the range of sources specified in section C to plan, implement and evaluate health visiting interventions with individuals, families, groups and communities;
- use a variety of higher order communication skills pertinent to the effective practice of health visiting;
- draw on a knowledge of investigative methods introduced in section C to evaluate published materials in health visiting, public health and related fields;
- exercise professional judgement based on an awareness of key issues in health visiting, and demonstrate a problem solving approach to practice;
- show confidence in the use of technology to support and evaluate health visiting practice;
- demonstrate the ability to obtain, manipulate and interpret a range of data sources to inform health visiting practice.

Appendix 1

Health visiting benchmark group membership

| | |
|----------------------------------|---|
| Ms Hilary Compston | Salford Community Healthcare NHS Trust |
| Professor Susan Frost | University of Huddersfield |
| Ms Denise Knight | University of Hertfordshire |
| Mr Tom Langlands | English National Board for Nursing, Midwifery & Health Visiting |
| Mrs Susan Montague (facilitator) | University of Hertfordshire |
| Mrs Ann Pettit | Thameside Community NHS Trust |
| Mrs Jarina Rashid-Porter | Coventry Healthcare NHS Trust |
| Mrs Dianne Watkins | University of Wales College of Medicine |
| Mrs Sheena Wright | University of Glasgow |

Appendix 2

Benchmark steering group membership

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| Mrs Margaret Andrews | North East Wales Institute of Higher Education |
| Mr David Ashcroft | Society of Chiropractors & Podiatrists |
| Mrs Linda Auty | Leeds Metropolitan University |
| Miss Lesley Barrowman | National Board for Nursing, Midwifery & Health Visiting for Northern Ireland |
| Mrs Valerie Beale | Somerset Health Authority |
| Ms Mary Boyle | National Board for Nursing, Midwifery & Health Visiting for Scotland |
| Mrs Ann Clarke | Bedford Hospital NHS Trust |
| Ms Helen Davis | Royal Hallamshire Hospital, Sheffield |
| Professor Anne de Looy | Queen Margaret University College, Edinburgh |
| Miss Faye Doris | University of Plymouth |
| Mr Martin Duckworth | College of St Mark & St John, Plymouth |
| Mr Brian Ellis | Queen Margaret University College, Edinburgh |
| Miss Anne Fagan (deceased) | Hospital of St John & St Elizabeth, London |
| Mrs Janice Gosby | UK Central Council for Nursing, Midwifery & Health Visiting |
| Ms Valerie Hall | University of Brighton |
| Mrs Julia Henderson | University of Hertfordshire |
| Ms Anne Hopkins | University of Wales Swansea |
| Mr Stephen Hutchins | University of Salford |
| Mr Tom Langlands | English National Board for Nursing, Midwifery and Health Visiting |
| Ms June Leishman | University of Abertay, Dundee |
| Professor Jeffrey Lucas | University of Bradford |
| Professor Dame Jill Macleod-Clark (co-chair) | University of Southampton |
| Ms Diane Marks-Maran | Thames Valley University |
| Mrs Susan Montague | University of Hertfordshire |
| Mrs Christine Mullen | South Manchester University Hospital NHS Trust |
| Mr Luke O'Byrne | East Berkshire NHS Trust |
| Mrs Audrey Paterson | Canterbury Christ Church University College |
| Ms Robyn Phillips | Welsh National Board for Nursing, Midwifery & Health Visiting |
| Professor Mike Pittilo (co-chair) | Kingston University & St George's Medical Hospital |
| Ms Lorna Povey | Wolverhampton Health Care NHS Trust |
| Mrs Jarina Rashid-Porter | Coventry Healthcare NHS Trust |
| Mr Gwilym Roberts | College of Occupational Therapists |
| Ms Jenny Routledge | University of East Anglia |
| Mr Ian Rutherford | University of Nottingham |
| Mrs Sandra Sexton | University of Strathclyde |
| Ms Gail Stephenson | University of Liverpool |
| Professor Averil Stewart | Queen Margaret University College, Edinburgh |
| Professor Mary Watkins | University of Plymouth |