

## SFHPHP17

Work in partnership with others to prevent the onset of adverse effects on health and wellbeing in populations



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### Overview

This standard covers preventing the onset of adverse effects on health and wellbeing in populations, often known as primary prevention. Primary prevention may relate to any aspect of health and wellbeing. The purpose of such interventions would include: improving people's resistance to adverse effects to their health and wellbeing; limiting people's exposure to adverse effects to their health and wellbeing; reducing the stressors that affect people's health and wellbeing.

When this standard is applied to specific forms of intervention, a range of legislation and good practice guidelines will apply. For example, it could be applied to different forms of prevention such as child protection, immunisation, food safety, or environmental pollution.

Users of this standard will need to be conscious of this broader context and the impact that it will have on the roles and responsibilities of practitioners.

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#### Performance criteria

- You must be able to:*
- P1 keep up-to-date with the range, application, effectiveness and public perception of primary preventive interventions
  - P2 identify who the target populations are for preventive interventions and the reasons
  - P3 work with others to identify:
    - P3.1 the best methods for contacting the target population in the local situation
    - P3.2 who is best placed to do this
    - P3.3 the best times for making contact
    - P3.4 a plan for taking the work forward
  - P4 effectively participate as a member of the prevention team
  - P5 communicate with people in the target population in a manner that:
    - P5.1 is appropriate to them
    - P5.2 encourages an open and frank exchange of views
    - P5.3 minimises any constraints
    - P5.4 is free from discrimination and oppression
  - P6 explain clearly to people in the target population:
    - P6.1 the purpose and benefits of the intervention
    - P6.2 its risks
  - P7 review the effectiveness of the identification and contact and identify how practice can be improved in the future
  - P8 prepare for the intervention in a manner that is:
    - P8.1 consistent with evidence-based practice
    - P8.2 appropriate to the methods being used
    - P8.3 appropriate for the setting
    - P8.4 appropriate to the people in the population receiving the intervention
  - P9 confirm the identity of the people in the population receiving the intervention and their readiness for it
  - P10 undertake the intervention:
    - P10.1 consistent with evidence-based practice
    - P10.2 appropriately for the setting
    - P10.3 appropriately for the people in the population receiving the intervention
    - P10.4 in a manner that maintains the health and safety of the people in the population, self and others
  - P11 take appropriate and immediate action when contingencies arise
  - P12 maintain legible records of:
    - P12.1 the people in the population receiving the intervention
    - P12.2 the interventions

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P12.3 any contingencies

P13 review the effectiveness of the interventions and identify how practice can be improved in the future

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#### Knowledge and understanding

*You need to know and understand:*

- K1 the social construction of health and illness and how this affects people's perceptions
- K2 the kinds of misinformation which people receive about health and wellbeing and how this can be counteracted
- K3 stressors to health and wellbeing: biological; chemical; physical; social; psychosocial
- K4 Inequality and discrimination and their impact on health and wellbeing, and how to recognise and address inequality and discrimination in the context of Human Rights legislation
- K5 risks to health and wellbeing - avoidable, relative and absolute risk, the context of the risk and the factors that may modify its impact, and how to set appropriate risk management objectives
- K6 the concept of acceptable risk and whose values define this (ie political, social, scientific, the community)
- K7 how to assess different types of risk, appraisal of the different strategies for managing such risks and the importance of taking action that is proportionate to the scale and seriousness of the risk so that fear is not disproportionate to the actual risk
- K8 the different forms of prevention:
  - K8.1 improving people's resistance to health effects
  - K8.2 limiting exposure to health effects
  - K8.3 reducing the stressors that affect people's health and wellbeing
- K9 the different forms of intervention that are used in prevention:
  - K9.1 advice and information
  - K9.2 specific interventions to prevent the onset of health effects
  - K9.3 specific interventions to reduce health effects
  - K9.4 specific interventions to prevent or reduce stressors
- K10 the increased risks to some individuals in populations relating to:
  - K10.1 age, sex, family history or ethnic background
  - K10.2 exposure (e.g. social, environmental)
- K11 the interventions that can be put in place to target individuals at increased risk, and the different methods of tracing and establishing contact with individuals
- K12 the range of different stakeholders with an interest in prevention programmes (disease prevention and screening programmes) (including the public and communities) and the nature of their interests and concerns
- K13 regulatory powers of enforcement in relation to prevention such as detention, arrest, enforceable medical examinations
- K14 the specific legislation, guidelines of good practice, charters and service

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- standards that relate to the work being undertaken and the impact of these on the work
- K15 the services, policies and priorities of the worker's agency and how it relates to other agencies in the sector
- K16 the data storage and retrieval systems used by agencies working in health improvement
- K17 codes of practice and protocols about confidentiality and information sharing between agencies working in partnership
- K18 effective communication skills with people in own agency, those in other agencies and with communities and the public; barriers to communication and ways of overcoming them
- K19 your own role and responsibilities and from whom assistance and advice should be sought if necessary
- K20 the application of the principles of equality, diversity and anti-discriminatory practice to work
- K21 the need to develop one's own competence and skills in line with changes in knowledge and practice; how the worker's area and scope of practice are changing, the evidence which is available on the work and the implications of this for their own skill and knowledge base

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### Additional Information

#### External Links

This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: HWB1 Promotion of health and wellbeing and prevention of adverse effects on health and wellbeing

Level: 3

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**Suite** Public Health

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