

## SFHPHP18

Work in partnership with others to contact, assess and support individuals in populations who are at risk from identified hazards to health and wellbeing



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### Overview

This standard covers the early detection of specific health effects in populations so that prompt effective interventions can be made, often known as secondary prevention. Its specific focus is tracing and making contact with individuals who are at risk, or place others at risk, from hazards to health and wellbeing and assisting individuals to participate in secondary preventive interventions. When this standard is applied to specific forms of intervention, a range of legislation and good practice guidelines will apply. For example, this could be applied to different forms of secondary prevention such as child protection, immunisation, food safety, or environmental pollution.

Users of this standard will need to ensure that practice reflects up to date information and policies.

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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 secondary preventive interventions
- P2 work in partnership with others to
  - P2.1 assess the risk of the hazard
  - P2.2 identify the nature of the action that needs to be taken to contain the hazard
  - P2.3 assess the risks related to such preventive actions
  - P2.4 identify the target populations for preventive interventions and the reasons for
  - P2.5 identify appropriate levels at which decisions on the hazards should be made and who should be leading on the interventions
- P3 contact as a matter of urgency other relevant people who are better placed to make decisions about prevention when the risks of the team acting are too great to proceed
- P4 work in partnership with others on matters in own area of responsibility to
  - P4.1 identify the best methods for contacting the target population in the specific situation
  - P4.2 who is best placed to do this
  - P4.3 the best times for making contact
  - P4.4 a plan for taking the work forward
- P5 effectively participate as a member of the prevention team
- P6 make every reasonable effort to contact individuals who are at risk from the hazard seeking information from relevant sources if initial difficulties are encountered
- P7 communicate with people in the target population in a manner that
  - P7.1 is appropriate to them
  - P7.2 encourages an open and frank exchange of views
  - P7.3 minimises any constraints
  - P7.4 is free from discrimination and oppression
- P8 explain clearly to people in the target population
  - P8.1 the nature of the hazard
  - P8.2 the purpose and benefits of the intervention
  - P8.3 the risks of the intervention
  - P8.4 the regulatory powers of different agencies to take action to reduce risks
  - P8.5 the nature of the actions that these agencies can take
  - P8.6 the confidentiality of information and the disclosure of information to others

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- P9 review the effectiveness of tracing and contacting people and identify how practice can be improved in the future
- P10 communicate with individuals in a manner that
  - P10.1 is appropriate to them
  - P10.2 encourages an open and frank exchange of views
  - P10.3 minimises any constraints
  - P10.4 is free from discrimination and oppression
- P11 provide clear, up-to-date information to individuals in the target population about
  - P11.1 health and wellbeing
  - P11.2 stressors to health and wellbeing
  - P11.3 identified hazards to health and wellbeing
  - P11.4 the benefits of early action to address hazards
  - P11.5 regulatory powers of enforcement
- P12 explore with individuals
  - P12.1 their attitudes to compliance
  - P12.2 reasons they may not wish to comply
  - P12.3 any concerns they have about the interventions or the effects of the interventions on themselves and others
- P13 agree with individuals how to proceed
- P14 prepare for the intervention in a manner that is
  - P14.1 consistent with evidence-based practice
  - P14.2 appropriate to the methods being used
  - P14.3 appropriate for the setting
  - P14.4 appropriate to the people in the population receiving the intervention
- P15 confirm the identity of the people in the population receiving the intervention and their readiness for it
- P16 undertake the intervention
  - P16.1 consistent with evidence-based practice
  - P16.2 appropriately for the setting
  - P16.3 appropriately for the people in the population receiving the intervention
  - P16.4 in a manner that maintains the health and safety of the people in the population, self and others
- P17 take appropriate and immediate action when contingencies arise
- P18 maintain legible records of
  - P18.1 the people in the population receiving the intervention
  - P18.2 the interventions
  - P18.3 any contingencies
- P19 review the effectiveness of 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 these 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 importance of the context of the risk and the factors that may modify its impact
- K6 appropriate risk management objectives
- K7 the concept of acceptable risk and whose values define this (ie political, social, scientific, the community), assessment of different types of risk and 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: age, sex, family history or ethnic background; exposure (e.g. social, environmental); and the interventions that can be put in place to target individuals at increased risk
- K11 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 of regulatory powers of enforcement in relation to prevention such as

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- detention, arrest, enforceable medical examinations
- K14 the specific legislation, guidelines of good practice, charters and service 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 own role and responsibilities and from whom assistance and advice should be sought if necessary
- K20 how to apply 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: HWB3 Protection of health and wellbeing

Level: 3

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**Relevant occupations** Health and Social Care; Healthcare and Related Personal Services

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**Suite** Public Health

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**Key words** Secondary prevention, contact tracing, risk reduction, hazards, stressors, legislation, regulatory powers, enforcement, target populations