

SCDSS4

Identify and support the physical and sensory needs of individuals identified with complex needs



Overview

Elements of Competence

- 1 Contribute to the assessment and identification of the individual's full range of needs in partnership with that person and other key people
- 2 Plan and agree courses of action with individuals to promote their physical, mental, emotional and other health and well-being needs
- 3 Implement actions and evaluate their effectiveness as agreed with individuals.

About this standard

This standard involves liaising with other qualified personnel within the level and responsibility of your role to identify and support the physical and sensory needs of individuals identified with complex or multiple needs. The terminology relating to “other needs” may include mental health, physical, emotional well-being, multiple needs and any other additional difficulties or disabilities. The standard is relevant for all levels. Sections of the standard can be used for induction purposes, professional development and for training.

Although the primary responsibility for your professional development rests with you, the standard also requires management support to facilitate the continuing professional development of the workforce.

For this standard you need to be able to contribute to, or work with others to identify an individual’s physical health and sensory needs and their capability, or that of their carer, to address these needs within the limitations and risks to the situation. The individual themselves should be central to this process.

Evidencing your performance, knowledge and understanding

The **performance criteria** sections and the **knowledge and understanding** section indicate areas that you should be able to evidence in relation to your performance or knowledge and understanding.

Key principle

Communication underpins the entire standard and all the standards in this suite. It is vital that those working in the field of sensory services with children, young people and adults have the necessary and appropriate skills to communicate effectively with people who may use a range of communication tools/ techniques or methods. This standard relates to those working with people with a complex range of needs and all communication must be most appropriate. It is also important that workers recognise the need for specialist communication skills and the risk of miscommunication.

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Performance criteria

Contribute to the assessment and identification of the individual's full range of needs in partnership with that person and other key people

You must be able to:

- P1 maintain and update your knowledge about physical health, mental health, sensory needs, intellectual development, social and emotional well-being of individuals and other needs as and when required
- P2 build open and honest relationships using language appropriate:
 - P2.1 to the adult
 - P2.2 to the development of the child or young person and their family culture and background
- P3 encourage, empower and support individuals and significant others to contribute to the identification of the sensory and other needs
- P4 obtain appropriate and necessary background information about the sensory and other needs
- P5 work with the individual and significant others to identify the individual's full range of strengths and needs and their particular requirements
- P6 listen to concerns, recognise and take account of signs of changes in attitudes and behaviour
- P7 ensure your assessment of the individual's physical, emotional health and transitional needs provides a person-centred balanced picture, taking full and appropriate account of:
 - P7.1 their mental health and emotional well-being needs
 - P7.2 their sensory needs
 - P7.3 their non-sensory needs, (e.g. depression, dementia)
 - P7.4 their ability to undertake their own health care
 - P7.5 the capability of significant others to meet the individual's health care and sensory needs
 - P7.6 transitions from children to young person to adulthood and then within adulthood
 - P7.7 any risk to the individual, their carer, family, community or care practitioners
- P8 seek advice and support from an appropriate source when the needs of the individual and the complexity of their situation is beyond your role and capability
- P9 use information on the individual's physical and mental health and sensory needs as a whole to inform subsequent action
- P10 explain the agency and legislative requirements for sharing information with others to the individual you are working with
- P11 negotiate agreement with the individual and significant others on the information which will need to be shared and with whom it will be shared
- P12 ensure the individual and significant others are made aware of their right to access records within regulatory boundaries
- P13 maintain complete, accurate and legible records of your assessments in

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a format which allows other practitioners to use them easily

- P14 communicate records of assessments only to those authorised to see them in accordance with organisational, professional and regulatory requirements for confidentiality of personal information

Plan and agree courses of action with individuals to promote their physical, mental, emotional and other health and well-being needs

You must be able to:

- P15 communicate effectively with individuals and significant others in a manner that emphasises the two-way nature of the relationship and role of the individual as an informed equal partner in the process, or in the case of children with their family member or advocate
- P16 support the individual child, young person or adult to state their point of view
- P17 reassure children, young people, vulnerable adults and those caring for them by explaining what is happening
- P18 use communication that is appropriate when there are signs of increased vulnerability to ensure individuals are supported to express their full range of needs
- P19 explain the outcomes of the assessment to individuals in an appropriate manner, level and pace using their preferred method of communication
- P20 agree the subsequent action to be taken with the individual, based on:
P20.1 the consent and wishes of the child, young person or adult
P20.2 the information gained from the assessment of the individual's physical health, sensory and other needs
P20.3 input received from different professional roles
P20.4 an evaluation of the level of risk inherent in each option including the risk of non-consent and therefore nothing being done
P20.5 the resources required to meet the individual's mental and physical health needs
P20.6 the priorities of the services involved
- P21 before you refer the individual to another practitioner get the agreement of the individual and give them appropriate support and explanations so they can understand and co-operate with the decision
- P22 comply with agreed referral criteria and provide all necessary information when a referral to another practitioner is required
- P23 provide appropriate advice and guidance when it is agreed that the individual and/ or significant others are capable of managing their own health care
- P24 provide support to enable an individual, their carer/ family members to manage change and, transitions. for example, adapting to a new disability or to the use of new assistive technology
- P25 agree a course of action with the individual and significant others which achieves a balance between the interests of the individual, and inherent

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risks and the regulatory duty of care by:

- P25.1 maintaining a focus on partnership and shared decision making
- P25.2 encouraging the individual to make informed decisions and agree solutions to risk areas
- P25.3 agreeing strategies to manage risk within an understanding of costs, risks and alternatives wherever possible
- P26 maintain accurate, legible and complete records of agreements reached with individuals and the resulting actions to be taken
- P27 act to ensure that information transfers ahead of the child or young person when appropriate, and respect the needs of and constraints on other professionals when sharing information
- P28 communicate agreements and decisions about meetings, the physical and mental health, sensory and other needs of individuals with all those involved in implementing or monitoring the required actions. Ensure consistency with regulatory and organisational policies on confidentiality

Implement actions and evaluate their effectiveness as agreed with individuals

You must be able to:

- P29 implement and evaluate the course of action taken with the individual and significant others which achieves a balance between the interests of the individual, and inherent risks and the regulatory duty of care
- P30 identify opportunities to discuss the effects and results of transitions with individuals who use services and their carers
- P31 review the process undertaken and identify any changes or additions with individuals who use services and their carers
- P32 accurately record agreements, plans and outcomes reached with individuals who use services and their carers
- P33 agree with individuals a review timetable in order to review agreed outcomes and set practical milestones for achieving these
- P34 evaluate the effectiveness of collaborative, joint working and partnership arrangements in relation to the agreed actions

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Knowledge and understanding

You need to know and understand:

Core Values - Use and develop methods and systems to communicate, record and report

- K1 legal and organisational requirements on equality, diversity, discrimination, rights, confidentiality and sharing of information when communicating, recording and reporting with individuals, key people and others
- K2 knowledge and practice that underpin the holistic person-centred approach which enables you to work in ways that:
 - K2.1 place the individual's preferences and best interests at the centre of everything you do
 - K2.2 provide active support for the individuals
 - K2.3 recognise the uniqueness of individuals and their circumstances
 - K2.4 empower individuals to take responsibility (as far as they are able and within any restrictions placed upon them), and make and communicate their own decisions about their lives, actions and risks
- K3 methods and ways of communicating that:
 - K3.1 support equality and diversity
 - K3.2 support the rights of people to communicate in their preferred way, media and language
 - K3.3 are ethical and adhere to any codes of practice relevant to your work
 - K3.4 respect other people's ideas, values and principles
 - K3.5 ensure people's dignity and rights when identifying and overcoming barriers to communication
- K4 how to manage ethical dilemmas and conflicts for individuals, those who use services and staff/ colleagues, about communication, recording and reporting
- K5 how to challenge information, documents, systems, structures, procedures and practices that are discriminatory, especially in relation to individuals' communication and information needs

Core Values - Contribute to the development and maintenance of healthy and safe practices in the working environment

You need to know and understand:

- K6 legal and organisational requirements on equality, diversity, discrimination, rights, confidentiality and sharing of information when contributing to the development and maintenance of healthy and safe practices in the working environment
- K7 methods and ways of working that:
 - K7.1 support equality and diversity when contributing to the development and maintenance of healthy and safe practices in

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- the working environment
- K7.2 are effective when dealing with, and challenging information, documents, systems, structures, procedures and practices that are discriminatory
- K7.3 are ethical and adhere to any codes of practice relevant to your work
- K7.4 respect other people's ideas, values and principles when contributing to the development and maintenance of healthy and safe practices in the working environment

Core Values - Take responsibility for the continuing professional development of self and others

You need to know and understand:

- K8 up-to-date knowledge and practice of legal and organisational requirements for equality, diversity, discrimination, rights, confidentiality and sharing of information and how to update and develop your own, and the practice of other staff on these
- K9 how to access training and development to enable you to manage ethical dilemmas and conflicts for individuals, those who use services and staff

Legislation and Organisational Policy and Procedures

You need to know and understand:

- K10 relevant country specific legislation and how this should inform and guide the assessment of need such as The Mental Health Act 2007, The Mental Capacity Act 2005, The Children Act 2004 and statutory requirements in relation to "Safeguarding"
- K11 your regulatory status and your powers and responsibilities in relation to decision making and resource holding and how these may vary in different settings
- K12 your organisational status and your powers and responsibilities in relation to decision making and resource holding
- K13 the data protection act and its implications for the recording, storing and sharing of information
- K14 how the country specific legislative framework affects agency policy, assessment strategies used and information gathered
- K15 the policy and procedures to follow in situations where informed consent cannot be obtained
- K16 the roles, structures and functions of the different agencies to whom referrals may be made
- K17 how to determine whether a referral is appropriate to services provided by the agency concerned
- K18 knowledge relating to the ethical use of technology, i.e. to support and empower the individual rather than control their behaviour or using technology as a substitute for social contact

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- K19 how the various models of disability might have an impact on the assessment when other agencies are involved
- K20 know about organisational procedures and relevant regulatory frameworks, as well as appropriate referral routes within your own organisation and to other agencies
- K21 know about local resources and how to access information including, where appropriate, a common assessment

Theory and Good Practice - In relation to information

You need to know and understand:

- K22 why it is important to record situations in which preferred options are not feasible due to agency policy or resource constraints
- K23 who has the right of access to information held on records
- K24 the background information which is necessary for the assessment to proceed effectively
- K25 how to integrate and synthesise all of the information about an individual's physical, sensory and mental health needs so that they can be considered as a whole and what to do with pieces of information which seem inconsistent with the rest
- K26 how to structure assessment records so that they contain all of the necessary information and are suitable for others to use
- K27 the purpose of agreeing with individuals if and when a referral to another practitioner is required and how to provide them with sufficient and relevant information in a format they understand in order for them to give their informed consent
- K28 the quality, quantity and type of information which needs to be provided when making referrals and any differences that arise as a consequence of the information systems used by an agency
- K29 how to interpret the information provided by individuals and their significant others and feed this into the assessment process
- K30 the purpose of recording agreements reached with individuals and how to do this effectively
- K31 methods of communicating assessment information to others balancing the duty of confidentiality, any agreements made with the individual, risks and duty of care

Theory and Good Practice - In relation to communication

You need to know and understand:

- K32 methods of consulting with different groups including children, young people and adults, their organisations or groups and actively listening to their feedback
- K33 methods for collecting, analysing and interpreting feedback to enable decisions to be made about your support
- K34 understanding of the impact of multiple impairments. be aware of the

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- potential for miscommunication in these circumstances and therefore carefully plan how you will communicate with the individual and use or arrange the most effective communication methods
- K35 methods of language/ communication used to explain clearly to individuals and their significant others the outcomes of the assessment
 - K36 use of language/ communication in order to determine the subsequent actions which may be necessary depending on the outcomes from the assessment of the individual's physical health, sensory and non-sensory needs
 - K37 how to interpret signs from the individual as to their wishes, although they may not make these explicit
 - K38 how to encourage individuals and their significant others to assess their own needs and the reasons for doing this
 - K39 the different fears and concerns which individuals and their significant others may have about the assessment and its outcomes and how to recognise and respect these whilst at the same time being open and honest with those concerned
 - K40 how to encourage significant others to support the individual
 - K41 how the nature of the relationship between the significant other(s) and the individual may alter the extent to which you ask them to be involved, or the individual would wish for them to be involved
 - K42 be aware that individuals may prefer to express themselves using a different mode of communication compared with how they prefer to receive information and adapt how you communicate accordingly
 - K43 be resourceful when overcoming barriers to communication and barriers restricting the independence of the people you support

Theory and Good Practice - In relation to partnerships and collaboration with others

You need to know and understand:

- K44 the principles of needs-led assessment and person-centred planning for individuals with a range of needs
- K45 how an individual's physical, sensory, mental health and transition needs may be linked and impact on one another and why it is important to be aware of this, e.g. mental health issues as they relate to a person who is Deaf, hard of hearing, vision impaired, blind or Deafblind
- K46 knowledge of possible negative psychosocial and social impacts of disability and the use of Assistive Technology and of how to counter this to enable individuals and family members to manage change
- K47 knowledge and understanding of congenital as opposed to acquired sensory needs and the implications for child development
- K48 how routine ageing and maturing processes can influence physical health and sensory needs and the impact this can have on mental health needs

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- K49 the risks which there may be in various courses of action for the individual and how to assess these realistically
- K50 how to balance risks, the assessed needs of an individual, resource availability and service priorities
- K51 services:
 - K51.1 the resources which are available to meet the individual's needs within your own and other services, including specific provision catering for children, young people, adults and older people
 - K51.2 the priorities of the services for different groups and how these affect the services you are able to provide or refer people to
- K52 how to determine whether the individual's needs are eligible for support and if resourcing of the service makes it difficult to know what to do
- K53 the arrangements that may need to be put into place for further assessment or interventions and the capacity of the service to provide these
- K54 awareness of power issues in various work settings and the impact these have on service outcomes, e.g. domiciliary settings, sheltered housing settings etc.

Theory and Good Practice - In relation to transitions

You need to know and understand:

- K55 consider issues of identity, delayed effects of change and be aware of possible signs that someone is going through a particular transition
- K56 know about the likely impact of key transitions, such as divorce, bereavement, family break-up, puberty, move from primary to secondary school, unemployment and leaving home or care
- K57 understand patterns of transition from childhood to adulthood and appreciate that it may be different from your own or past experiences
- K58 be aware that children and young people are often at a vulnerable stage of their development when transitions occur and be aware of the issues of dealing with people at these times in their lives. in particular know how to promote good mental health in children and young people who have a sensory impairment. this is often best achieved by good quality support services and networks, so workers need to be aware of these services and able to offer or refer young people on to suitable support services that use their preferred language/ communication method
- K59 understand that children and young people with disabilities or additional educational needs may need additional support to manage transitions and know when to seek specialist advice
- K60 know that children and young people can be influenced by peer group behaviour and that this may vary according to culture

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Additional Information

Values

The values underpinning this standard have been derived from the key purpose statement*. You must work within the principles and values of the relevant service standards, guidance and codes of practice/ conduct for health and social care in the four countries to achieve this standard.

(*The key purpose of the sensory services workforce is to empower people who use these services to maximise their independence, opportunities, strengths and skills.)

Glossary

This section provides explanations of the key words and concepts used quite common to find words or phrases used that you will be familiar with, but which, in the detail of the standards, may be used in a very particular way. Therefore, we would encourage you to read this section carefully before you begin working with the standard and to refer back to this section as required.

Acquired

Acquired Deafblindness is when a person is born without a sensory impairment and at some time in their life develops both or is born with a single sensory impairment and at some time in their life develops the second. This may be due to an accident, illness, a genetic condition, e.g. a syndrome such as Usher, Alstrom, and Stickler, etc. or as a result of aging in later life. In children and young people if these problems occur later in life, this is called acquired Deafblindness.

Active support

Support that encourages the individual to maximise their independence and promotes lifestyle choices. In the case of children and young people this would also be relevant to the role of parent/ carer or the children themselves as a part of their own care planning process.

Background information

Refers to the individual's medical history. This is important as to interpret medical information/ terms from health service colleagues you will need considerable and specific knowledge of terminology, both in relation to sensory needs and other aspects of brain/ neurological disturbance, as well as the possible impact of medications. It also refers to education terminology, e.g. for additional educational needs reports, the terminology of other practitioners and information from the individual and/ or their significant others.

Communication

This standard makes it explicit that you:

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- 1 Must have the skills to be able to effectively communicate with the individual you are supporting, or in a case where specialist communicators are needed arrange for these to be put in place
- 2 Should use the individual's preferred means of communication both receptively and expressively in the most appropriate format and should listen actively
- 3 Need to be constantly aware that communicating will be complex and that the risk of misunderstanding is significant

Complex needs and sensory impairment

Complex needs refers to cases of multiple disability. Multiple disability is "where one impairment has a knock on effect on one or more disabilities. This means that they are compounded. Multiple disability requires a radically different approach from that employed by workers whose training has traditionally focused on the medical aspects of each separate impairment. A knowledge of the possible consequences of the individual impairments is required, and the skill to know which technique to use, adapt or combine and when new approaches need to be adopted to cope with the multiplicity of problems and prejudices". (Source: CCETSW 1993)

Congenital

When someone is born with combined sight and hearing difficulties this is called congenital Deafblindness. Examples of this include conditions such as Rubella or CHARGE. Congenital can also refer to people who have lost vision/ hearing before the acquisition of language, i.e. in their very early years.

Disadvantage, discrimination and social exclusion

This relates to race, gender, religion, sectarianism, language, age, class, disability (including sensory disability), poverty, culture, belief and sexual orientation.

In practice you must take account of the relevant policies and procedures within your organisation or agency.

Empowerment

Empowerment is a process of enabling individuals (children, young people and adults) who are at a disadvantage at both personal and organisational levels to gain more autonomy and control over their lives.

Individuals

In the standard "individual" refers to children, young people and adults who may require health and/or social care and children's, educational or training services. It also refers to advocates and interpreters or people who work with

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them to express their views, wishes or feelings and to speak on their behalf.

Issues

Issues means, what impacts on the individual with complex needs or is relevant to their experience. The use of the word "issue" does not imply a difficulty, but simply an aspect of the person's life that is the focus of the current work.

Key people

Key people include: family, communicator guides, intervenors, Deafblind workers, friends, carers, social worker, support worker, role model, befriender, advocates, habilitation/ rehabilitation workers and others with whom the individual has a supportive relationship.

Particular requirements

Refers to the individual's mental health needs, the individual's personal beliefs and preferences, the individual's age, sex and physical condition, communication and sensory needs, emotional and psychological support and advocacy.

Partnership working

The process of working collaboratively with other professionals or organisations, e.g. Optometrists, Eye Clinic Liaison Officers, Hospital Departments, those in education or training, Local Societies and Voluntary and Community Services (Third Sector Organisations) to raise the profile of complex/ multiple sensory support issues and to offer appropriate support.

Priorities

Priorities are the target groups for that service, the level of need for an individual to qualify for the service, organisational commitments and priorities and national commitments and priorities.

Rehabilitation/ habilitation

Rehabilitation involves a wide range of support that aims to maximise independence, skills and confidence. Rehabilitation can involve helping people to regain abilities or functions lost due to illness or injuries.

Habilitation defines the coordinated use of medical, social, educational, and vocational measures to help people develop their functional ability. This contrasts with helping people to regain abilities lost due to illness or injuries rather than people who have been born with impairments.

Relevant others

This refers to other professionals who have a connection to the individual.

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Rights

The rights that individuals have to:

- 1 Be respected
- 2 Be treated equally and not be discriminated against
- 3 Be treated as an individual
- 4 Be treated in a dignified way
- 5 Have privacy
- 6 Be protected from danger and harm
- 7 Be cared for in a way they choose
- 8 Have access to information about themselves
- 9 Communicate using their preferred methods of communication and language

In the case of children and young people, they have the right to be actively involved in the decisions that affect them.

Risks

Risk is the inevitable consequence of people taking decisions about their lives. But it means different things to different people. There is no one definition. In social care, as in the rest of life, risk can be viewed negatively. Because of perceptions of risk which may or may not be real, a person might be prevented from doing things which most people take for granted. So perceived risk must be tested and assessed against the likely benefits of taking an active part in the community, learning new skills and gaining confidence. What needs to be considered is the consequence of an action and the likelihood of any harm from it. By taking account of the benefits in terms of independence, well-being and choice, it should be possible for a person to have a support plan which enables them to manage identified risks.

A decision about the perceived or actual risk needs to be taken in conjunction with the person using services themselves, as well as the professionals involved. Just as taking a risk is a personal choice, levels of risk are perceptions, and a judgement about an acceptable level of risk should be a joint decision.

Services

Refers to services provided by your own organisation or other agencies.

Significant others

Is used here to mean any people whom the individual wishes to involve in their care programme. This may include partner, relative and/ or friend, but also includes other members of the community or other workers such as volunteers, other care practitioners, an advocate, an interpreter and a police

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or prison officer. For regulatory reasons, in the case of children, significant others are likely to be family members unless the child is subject to a care order.

Social Model of disability

The Social Model of disability says that disability is caused **by the way society is organised**, rather than by a person's impairment or difference.

The Social Model of disability looks at ways of **removing barriers which restrict life choices** for people with impairments* or differences.

When barriers are removed, disabled people can be independent and equal in society, with choice and control over their own lives.

Disabled people developed the Social Model of disability because the traditional medical model did not explain their personal experience of disability or help to develop more inclusive ways of living.

(* Impairment is defined as the limitation of a person's physical, mental or sensory function on a long-term basis.) Extract from children in the picture www.childreninthepicture.org.uk/au_socialmodel

Sources of information

Will include a wide variety of current information. For example from:

- 1 Professional organisations, e.g. professional bodies, trade associations and trade unions
- 2 Professional contacts, e.g. colleagues, mentor, supervisor, tutors/ lecturers and researchers
- 3 Written sources, e.g. professional journals, research reports and policy documents
- 4 Networks such as black and minority ethnic groups to consider cultural issues, e.g. fasting, festivals and priorities

Subsequent action

Refers to further assessment, referral, intervention or support, advice and guidance to enable the individual and/ or significant others to undertake the appropriate health care.

Supervision

Supervision involves a process of supportively reviewing a person's work decisions to develop their practice. It can be formal, informal, provided from within your organisation, provided from outside your organisation (Note, it is recognised that supervision in relation to work with children and young people is different to the supervision of work with adults).

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Support

Refers to the support you provide. It includes: verbal explanation, written information, accompanying the individual or arranging for this to happen.

Transitions

Transitions are daily and intermittent changes in a person's life that may affect their well-being, the way they behave and develop and their ability to continue to learn and cope with other changes.

There are two major types of transitions: the first includes transitions within daily life, for example with adults moving from and to home/ the provision to a day centre, and for children going from and to home/ the provision to school. They also involve changing activities and routines within the day where there are differing expectations and requirements from the child, young person or adult.

The second is intermittent and involves a significant change for the person. These transitions can be divided into three categories. First, those that are common to most people; for example, when people move from one form of accommodation and living environment to another. Second, those that are shared by a significant number of peers, such as families separating. Third, those that are personal and may not be shared or understood by others.

For children and young people, the first will include transferring between years in the same school, or college or transferring from one school to another. It could also include transitional experiences such as physical changes, e.g. the onset of puberty. The second may be their parents divorcing. The third being in foster or residential care, having a parent or carer who abuses drugs or alcohol, or being a young carer.

(Source: Leadership and management NOS Ref: LMC B3)

Values and principles

Are those specified by: professional bodies, government, your employer, service users and their carers and by relevant national bodies.

External Links

The knowledge and understanding for this standard will relate to country specific regulatory requirements and codes of practice applicable to the scope of your work and those of colleagues. It will also relate to your role and the level of responsibility you have within your organisation to undertake activities to achieve a high quality service.

Competent practice is a combination of the application of skills and knowledge informed by values and ethics. This specification details the

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knowledge and understanding required to carry out competent practice for the performance described in this standard.

When using this specification **it is important to read the knowledge requirements in relation to the expectations and requirements of your job role.**

You need to show that you know, understand and can apply in practice according to your level of experience and seniority:

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