

**Competency Framework  
for  
Sexual Health Advisers**

**January 2013**

## **Contents**

<b>Acknowledgements</b>	<b>page 3</b>
<b>Foreword</b>	<b>page 4</b>
<b>Executive summary</b>	<b>page 5</b>
<b>Introduction</b>	<b>page 6</b>
<b>The structure of the competency framework</b>	<b>page 10</b>
<b>How to use the competency framework</b>	<b>page 11</b>
<b>Case study</b>	<b>page 13</b>
<b>The domains, competencies and stages of competence development:</b>	<b>page 15</b>
<b>Domain 1 Professional, ethical and legal practice</b>	<b>page 16</b>
<b>Domain 2 Assessment, planning and delivery of care</b>	<b>page 18</b>
<b>Domain 3 Public health role and responsibilities</b>	<b>page 21</b>
<b>Domain 4 Personal and professional development</b>	<b>page 22</b>
<b>Appendices</b>	
<b>Appendix 1 Millers model of competence</b>	<b>page 23</b>
<b>Appendix 2 Template for summarising evidence in support of learning</b>	<b>page 24</b>
<b>References</b>	<b>page 25</b>
<b>Bibliography</b>	<b>page 26</b>

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The *Sexual and Reproductive Health Nursing Competency Portfolio* published by NHS Education Scotland<sup>1</sup> in September 2011 has proved an invaluable resource.

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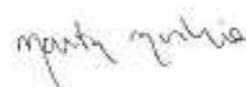
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## Foreword

Publication of this competency framework is the culmination of several years work by the Society of Sexual Health Advisers (SSHA).

Good sexual health is a vital aspect of health and well being and sexual health advisers have a key role in the delivery of public health interventions to support an individual's health and well being. Usually working within wider multi disciplinary teams sexual health advisers have until now not had a defined set of competencies for the role.

I believe that this competency framework has the potential to contribute to the on going development of sexual and reproductive healthcare services throughout the UK supporting both nursing and non nursing sexual health advisers, their clients and their managers.



**Martin Murchie**

**SSHA President  
January 2013**

## Executive Summary

This framework identifies the competencies upon which to focus education and training for those staff working in sexual and reproductive healthcare services fulfilling the role of sexual health adviser regardless of their professional background.

While it was developed specifically to support continuing professional development for sexual health advisers it may also have applicability to other health professionals involved in supporting patients diagnosed with an STI including nurses and health care assistants.

Importantly it provides a mechanism for quality assurance of the sexual health adviser workforce and can be used by individuals, managers of teams or services or by commissioners.

The framework defines four domains where competence is required each one covering a key aspect of sexual health advising practice. These are:

- 1. Professional, ethical and legal practice**
- 2. Assessment, planning and delivery of care**
- 3. Public health role and responsibilities**
- 4. Personal and professional development**

Each domain contains specific competencies which underpin sexual health adviser practice based on broad public health principles including partner notification, sexually transmitted infection management, health promotion/risk reduction.

For each competence there are four stages of competence development these are:

- |                |   |
|----------------|---|
| <b>Stage 1</b> | Activity observed, basic understanding of principles & concepts involved.   |
| <b>Stage 2</b> | Activity carried out under supervision, learner demonstrates a broad understanding of the principles and concepts involved. |
| <b>Stage 3</b> | The learner is capable of performing the activity independently but requires a senior colleague for support and advice.     |
| <b>Stage 4</b> | The activity is carried out competently without supervision and within agreed professional and legal frameworks.            |

## **Introduction**

This document sets out a competency framework for sexual health advisors (HAs) and is intended for use in healthcare settings where sexually transmitted infections (STIs) are managed. The framework aims to support individuals, services, managers and commissioners in the delivery and commissioning of high quality sexual health services and is applicable for use in the United Kingdom (UK) and the Republic of Ireland.

## **Background**

Sexual health advising is recognised in sexual health strategies across the UK as well as in Agenda for Change<sup>2</sup> and sexual health advisers are currently employed in a range of settings including genitourinary medicine services (GUM), sexual and reproductive health services, community sexual health services and within the national chlamydia screening programme (CSP).

In 2008 the Society of Sexual Health Advisers, Unite the Union and the Department of Health published 'Sexual Health Advising: Developing the Workforce'<sup>3</sup> which attempted to provide guidance for not only sexual health advisers but academic institutions, strategic and public health leads and commissioners on the issues and arrangements for the education and preparation of sexual health advisers. Yet there remains no nationally recognised preparation programme for the role of sexual health advising.

## **Content**

SSHA currently represents approximately 90% of all sexual health advisers in the UK and the Republic of Ireland. This document has been produced by them in response to the challenges faced by individuals, service providers and commissioners in developing the competencies necessary to deliver high quality sexual health advising services.

The competencies should provide practitioners with a framework to support preparation for the sexual health advising role and services and commissioners with a framework to support the management of individuals and services.

## **Competency development**

This competency framework document was developed by a small working group comprising the current SSHA President, SHHA Education Secretary and a former SSHA President.

## **Scoping and determining content**

When determining the content of the competency framework the project team endeavoured to ensure that the competencies covered all areas of the sexual health advising role including the diagnosis and treatment of individuals and the public health responsibilities of the post. They do however acknowledge that all the competencies may not be relevant to an individual post.

The competency framework does not address:

- The skills, qualifications or professional background necessary to be employed as a sexual health adviser.
- Where sexual health advising roles are delivered. The competencies should be applicable regardless of the setting or employing organisation.
- How an individual, service or manager should use them in relation to the appraisal process.
- Current clinical guidance relating to the management of individual STIs.

## **Consultation**

Following development of a draft framework the competencies underwent a period of consultation. In June 2011 they were reviewed by those attending the Annual Society of Sexual Health Advisers Conference in Cardiff and following amendments were made available on the SSHA website for public consultation between 1<sup>st</sup> November 2011 and the 31<sup>st</sup> January 2012. At this time all SSHA members were e mailed asking for comments. In addition the draft competency framework was sent to the British Association for Sexual Health & HIV (BASHH) and the Genito-Urinary Nurses Association (GUNA) as well as all sexual health networks throughout the UK. Feedback from the consultation was considered by the project group and this document contains agreed amendments.

## **The competencies**

The competency framework is underpinned by the key principles of sexual health service provision in the UK which include those relating to confidentiality and access to free STI testing and treatment. In order to contextualise the competency framework relevant existing guidance is referenced and the document contains a bibliography which brings together a number of supporting documents.

The framework defines four domains where competence is required each one covering a key aspect of sexual health advising practice. These are:

- 5. Professional, ethical and legal practice**
- 6. Assessment, planning and delivery of care**
- 7. Public health role and responsibilities**
- 8. Personal and professional development**

Each domain contains specific competencies which underpin sexual health adviser practice based on broad public health principles including partner notification, sexually transmitted infection management, health promotion/risk reduction.

## **Application of the competencies**

The competency framework was developed to support continuing professional development in sexual health advising. It may also be used to assist HAs working towards an academic award, however it should be remembered that the level and amount of any credit awarded for the achievement of competence is decided at the discretion of the awarding institution. The

competency framework may also have applicability to other health professionals involved in supporting patients diagnosed with an STI including nurses and health care assistants.

The competency framework can be used by any individual, service or by commissioners. While not exhaustive the framework could be used in:

Assisting sexual health advisers wishing to:

1. Identify skill gaps and take appropriate action to fill them.
2. Plan the most effective way of achieving competence.
3. Develop and record competence.
4. Facilitate progress through the stages of competence.
5. Evidence achievement of competence.

Supporting managers by:

1. Enabling the development of detailed and standardised job descriptions that ensure practice is to common and agreed standards.
2. Informing the appraisal process.
3. Supporting personal and career development planning.
4. Supporting continuing professional development initiatives.

Assisting the commissioning of services by:

1. Articulating a set of competencies that have been reviewed across the UK and Republic of Ireland.
2. Supporting setting of standards to improve the quality and equity of patient care.
3. Informing development, delivery and commissioning of educational programmes
4. Providing a mechanism for quality assurance in the sexual health adviser workforce.

### Assessment of practice

A multifaceted approach to assessing competence is a widely accepted practice within healthcare with learners demonstrating knowledge, appropriate attitudes and skills. Miller’s simple model of competence (Appendix 1) identifies at which stage of learning different methods of assessment might be appropriate and it is for the learner and their assessor to agree methods that are suitable to the competence in question. Below are suggestions for the types of assessment that might be useful to assess competence.

Knowledge	Attitudes	Skills
<ul style="list-style-type: none"> <li>• Written tests</li> <li>• multiple choice questions</li> </ul>	<ul style="list-style-type: none"> <li>• Written and oral feedback from peers and patients</li> <li>• Reflective diaries</li> <li>• Role play</li> </ul> <p>Patient consultations</p>	<ul style="list-style-type: none"> <li>• OSCEs</li> <li>• Work based / clinical assessment</li> <li>• Case based discussion</li> <li>• Feedback from peers, patients</li> </ul>

## **Review and updating**

To ensure that the competency framework remains applicable, SSHA intend to review and update this document three years after publication.

# The structure of the competency framework

## Domains

The framework defines four domains where competence is required each one covering a key aspect of sexual health advising practice. These are:

1. Professional, ethical and legal practice
2. Assessment, planning and delivery of care
3. Public health role and responsibilities
4. Personal and professional development

## Competencies

Each domain contains a number of competencies which detail the elements a sexual health adviser requires to be deemed effective and competent.

## Stages of competence

For each competence there are four stages of competence development these are:

- |                |   |
|----------------|---|
| <b>Stage 1</b> | Activity observed, basic understanding of principles & concepts involved.   |
| <b>Stage 2</b> | Activity carried out under supervision, learner demonstrates a broad understanding of the principles and concepts involved. |
| <b>Stage 3</b> | The learner is capable of performing the activity independently but requires a senior colleague for support and advice.     |
| <b>Stage 4</b> | The activity is carried out competently without supervision and within agreed professional and legal frameworks.            |

## How to use the competency framework

1. Identify an individual competent in sexual health advising who can act as your mentor. This may require negotiation with your manager and you may need to look outside your own service.
2. Read the list of competencies under each domain. You can find this in the domains, competencies and stages of competence development section which starts on page 16. Assess which stage of competence you are currently at using the stages 1-4. Ensure that you can clearly evidence this self assessment. Leave blank those competencies where you assess yourself as being below stage one i.e. you have little or no understanding of the knowledge, skills and attitudes to achieve the competence.
3. Identify with your manager / mentor those areas in which you require development.
4. Agree with your mentor how you will develop your competence.
5. Ensure you have a record of achieving the desired stage of competence, using the 'Summary of evidence in support of learning' template (see Appendix 2). Ensure that with the template you keep the evidence used to demonstrate achieving competence for example documents, reports, literature reviews, reflective practice diaries and so on. Once you have demonstrated competence and your mentor is satisfied, your competence can be signed off.

While the steps above require you to work with your mentor, the process puts you in charge of your own learning and allows you to be proactive in relation to developing competence and to plan your own personal and professional development. The assessment of competence may be undertaken by several experienced practitioners but overall responsibility for signing off the competence will be with your mentor.

### Evidence to demonstrate competence

Below are listed examples of the type of evidence that may reasonably be used to support competence. It is worth referring to the table on page 8 to determine which are effective at assessing knowledge, attitudes and skills:

- Supervised practice
- Evidence of your reading and its application to practice.
- Personal reports
- Exams written/oral
- Essays
- Reflective accounts
- Appraisal Reports
- Testimonials of your skill
- Project/workbooks
- Dissertation/Thesis
- Guideline documents
- Supervision documentation

- Literature reviews
- Research and Audits
- Evidence of learning from study days.

## Case Study

To illustrate how to use the competency framework lets assume you want to achieve a competency in partner notification in relation to a man who has sex with men (MSM) who has been diagnosed with gonorrhoea.

There are a number of competencies relevant to this example and you therefore need to determine which of the competency or competencies you will focus on in each of the following domains:

1. **Professional, ethical and legal practice**
2. **Assessment, planning and delivery of care**
3. **Public health role and responsibilities**
4. **Personal and professional development**

Once you have done this you need to agree an action plan with your mentor.

## Decide on an action plan

**Having identified the competencies you wish to work on you need to agree an action plan with your mentor. In this example the following actions have been agreed:**

- 1 To select a consultation in which you were involved and use information from this on which to base your learning. Discuss the history and the needs of the client with your mentor.
- 2 Access research based evidence and guidelines relating an MSM with gonorrhoea, and then critically analyse them. Ensure you critique any evidence to check if it is valid and reliable and then document your conclusions.
- 3 Indicate how you applied what you learned to this particular case. For example in are there are relevant partner notification guidelines for an MSM with gonorrhoea? If so, what do they recommend for best practice?
- 4 Produce a reflective account in order to demonstrate your learning and help you inform future practice. There are many models of reflection that can be used as a template but the overall aim is that reflection enables you to learn from experience. Your written reflection should include the following:
  - What learning did you bring to the consultation?
  - How do you feel the consultation went?
  - Were there any ethical/legal issues relating to this case?
  - How could your practice be improved?
  - Did research/guidelines support your decisions and actions?
  - Link all theory to learning and ensure that all research/guidelines are should be referenced.

Discuss your reflective account and learning with your mentor and provide the appropriate evidence to show that you have achieved the relevant competency. Once this has been agreed your mentor can “sign off” the competency. Keep this and a summary of evidence in support of learning (Appendix 2) in your portfolio and ensure that you make a note of the new stage of competence you have reached next to each of the competencies you have worked on.

**The domains, competencies and  
stages of competence development**

<b>1. PROFESSIONAL, ETHICAL AND LEGAL PRACTICE</b>		<b>Stage 1</b>	<b>Stage 2</b>	<b>Stage 3</b>	<b>Stage 4</b>
1.1	Demonstrate knowledge and understanding of legal, ethical and practice issues and dilemmas likely to arise in sexual health advising				
1.2	Demonstrates knowledge and understanding of relevant statutory and local policy and guidance eg safeguarding, child protection				
1.3	Understand the effects of legislation, guidelines and codes of conduct on the practice of sexual health advising and other relevant professional standards.				
1.4	Acknowledge the concepts of equality and diversity and promotes these as they apply to sexual health advising practice				
1.5	Demonstrates an awareness of the impact of personal attitudes and beliefs regarding human sexuality and behaviour upon the individual and his/her care				
1.6	Demonstrates an ability to work in partnership with those with sexual health problems or concerns, within an ethical framework and professional guidelines				
1.7	Understands confidentiality in relation to sexually transmitted infections, disclosure and the use of data sharing protocols.				
1.8	Uses professional judgement to make decisions on the appropriateness of sharing information and with whom it should be shared				
1.9	Demonstrates a critical awareness of the discourses in professional power				
1.10	Demonstrates an understanding of the law and consent in relation to sexual health and the assessment of a client's capacity to provide valid consent including the assessment of Under 16 year olds				
1.11	Understands the relevance of the broad health & social policy agenda and their influence on sexual health services				
1.12	Contributes to policy development related to sexual health and wellbeing				

1.13	Able to advocate appropriately on behalf of clients in the planning of care where requested or required				
1.14	Demonstrates awareness of interpersonal skills that are need to respond to sexual health need of individuals or referring appropriately				
1.15	Critique the application of risk management theories and models to sexual health advising practice				
1.16	Demonstrates awareness of the changing political and health care context and the implications for sexual health care provision				
1.17	Demonstrates knowledge and understanding of: <ul style="list-style-type: none"> <li>• clinical governance</li> <li>• quality assurance</li> <li>• audit</li> <li>• evaluation</li> </ul>				
1.18	Demonstrates knowledge and understanding of models and theories of: <ul style="list-style-type: none"> <li>• Counselling</li> <li>• Behaviour change (e.g Motivational Interviewing or CBT)</li> <li>• Risk reduction</li> <li>• Supervision</li> </ul> and their application to sexual health advising practice				

<b>2. ASSESSMENT, PLANNING AND DELIVERY OF CARE</b>		<b>Stage 1</b>	<b>Stage 2</b>	<b>Stage 3</b>	<b>Stage 4</b>
<b>ASSESSMENT</b>					
2.1	Assesses an individuals sexual and reproductive health/wellbeing needs utilising frameworks for assessment				
2.2	Demonstrates an understanding of the skills involved in eliciting a sexual history and identifies risks in relation to: <ul style="list-style-type: none"> <li>• Sexually Transmitted Infections</li> <li>• HIV, Hepatitis B &amp; C</li> <li>• Reproductive Health</li> <li>• Counselling &amp; Support</li> </ul>				
2.3	Demonstrates an understanding of what constitutes sexual risk taking behaviour				
2.4	Demonstrates an understanding of HIV / BBV risk factors				
2.5	Is able to assess psychological and social issues that influence client management				
2.6	Communicates with people in a form and manner that is consistent with their background, culture and understanding and encourages effective participation				
2.7	Identifies situations where referral to colleagues for evaluation and advice is required				
2.8	Ensure that clients have clear and concise information in order to make informed choices about their care				
<b>PLANNING</b>					
2.9	Demonstrates knowledge of standards and protocols underpinning sexual and reproductive healthcare				
2.10	Demonstrates an understanding of examination and clinical procedures and the available investigations				
2.11	Demonstrates a knowledge and understanding of the appropriate type and timing of diagnostic tests including those for chain of evidence in the case of sexual assault				
2.12	Demonstrates an understanding of the labelling, preparation and storage of specimens and samples				
2.13	Demonstrates knowledge and understanding of clinical findings and how they are interpreted				

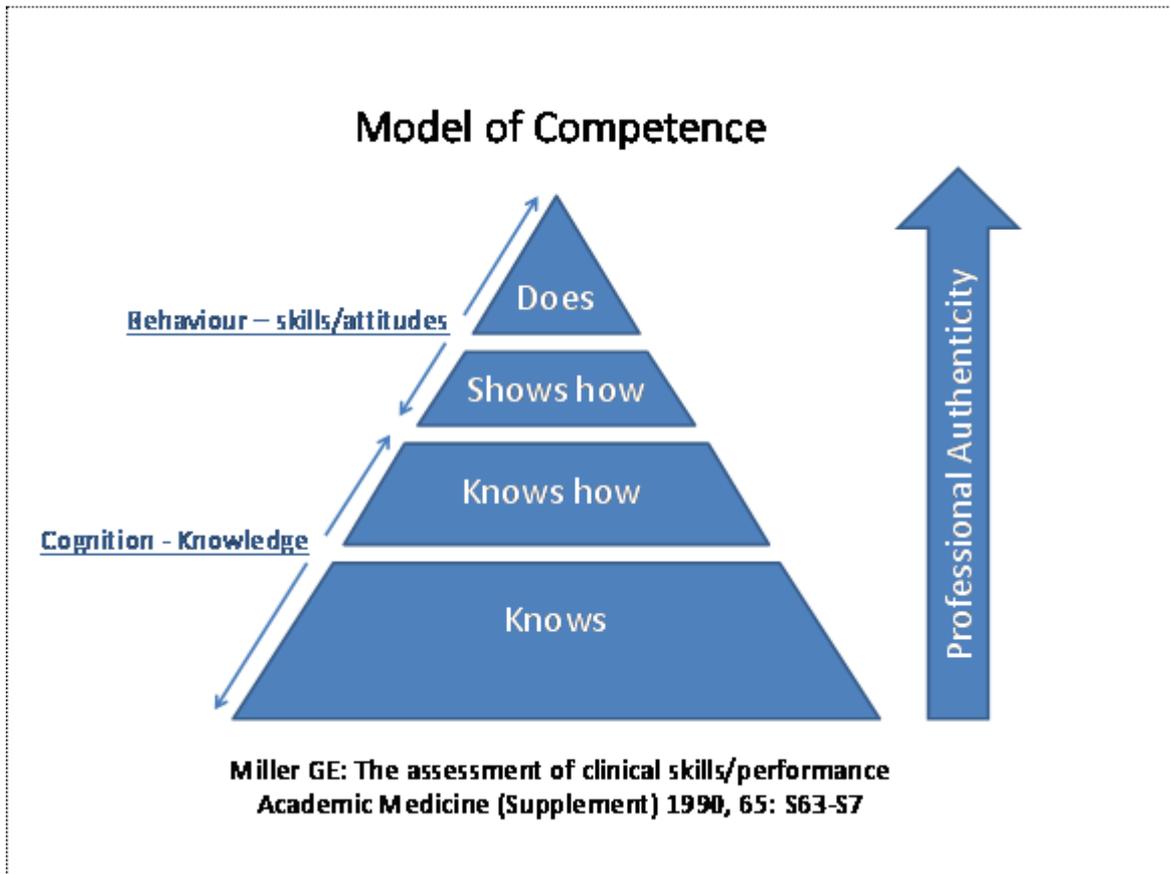
2.14	Demonstrates knowledge, understanding of the local policy regarding the management of results				
<b>DELIVERY</b>					
2.15	Undertakes pre and post test discussion for HIV and other blood borne viruses demonstrating an awareness of specific issues and skills needed to achieve this				
2.16	Formulates and documents in conjunction with the client a specific and appropriate management plan for their sexual health needs				
2.17	Interprets assessment data and test results for future management				
2.18	As part of a complete episode of care provides effective partner notification for those individuals diagnosed with STI/ HIV / BBVs considering patient referral, provider referral or conditional referral				
2.19	Demonstrates an understanding of the main treatments and vaccinations for STIs / BBVs and is able to discuss these with clients				
2.20	Administer medication according to agreed policy to manage sexual health problems as appropriate to qualifications and service needs				
2.21	Demonstrates an ability to work in partnership with patients/clients to facilitate adherence to treatment / management plan				
2.22	Demonstrate accurate and confidential record keeping with relation to the principles and practice of partner notification				
2.23	Participate in the monitoring and management of those with sexually transmitted infections and HIV / BBVs managing recall arrangements in accordance with local policies				
2.24	Provide brief therapeutic interventions as appropriate using motivational techniques to empower clients				
2.25	Provide support to individuals to reduce risk and maintain positive sexual health choices				

<b>3. PUBLIC HEALTH ROLE AND RESPONSIBILITIES</b>		<b>Stage 1</b>	<b>Stage 2</b>	<b>Stage 3</b>	<b>Stage 4</b>
3.1	Demonstrates specialist clinical knowledge of the nature of sexually transmitted infections and blood borne viruses				
3.2	Demonstrate an understanding of the principles and practice of partner notification from both an individual and public health perspective				
3.3	Advise and supports others providing partner notification				
3.4	Collate data from a variety of sources to inform the process of health and social sexual needs assessment e.g. Health Protection Agency				
3.5	Critically evaluate the sexual health promotion evidence base and its application to individuals or groups				
3.6	Demonstrates an understanding of the public health agenda				
3.7	Plan deliver manage and evaluate programmes and developments to improve the sexual health and wellbeing and experience of individuals and groups				
3.8	Demonstrate the ability to analyse data, current practice and policy drivers in order to identify specific health and/or social needs				
3.9	Evaluate sexual health service provision and support networks for individuals, families and groups in the local area or setting				
3.10	Obtain, verify, analyse, interpret and contribute data and/or information to improve the health and wellbeing outcomes of individuals and populations				
3.11	Participates in / delivers education / training to other people or professional groups				

<b>4. PERSONAL AND PROFESSIONAL DEVELOPMENT</b>		<b>Stage 1</b>	<b>Stage 2</b>	<b>Stage 3</b>	<b>Stage 4</b>
4.1	Understands and utilises experiential learning and reflective practice				
4.2	Engages and learns from practice through the process of supervision				
4.3	Maintains and develops clinical skills and practice				
4.4	Identifies learning needs and formulates professional development plans				
4.5	Communicates appropriately with mentors / assessors to achieve learning objectives				
4.6	Communicates effectively with colleagues and engages in partnership working				
4.7	Uses written and verbal communication effectively				
4.8	Demonstrates knowledge and understanding of evidence based practice				
4.9	Demonstrates knowledge and understanding of guidelines and protocols ensuring safe and effective sexual health advising practice				
4.10	Recognise and act within the limits of their own competence seeking advice when needed				
4.11	Participates in clinical audit and research in relation to sexual health adviser practice				

## APPENDIX 1

### Miller's model of competence



**Template for summarising evidence in support of learning**

Domain	Competency number	Learning objectives	Examples of evidence	Assessor signature	Date

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