

Specification

IAO Level 4 Diploma for the Foot Health Care Practitioner

Qualification Number: 610/4007/1

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Change Control Sheet

Innovate Awarding will continuously review all support material to ensure its accuracy. All amendments will be recorded on the below change control table.

Version Number	Date Revised	Description of Revision	Page Affected

Innovate Awarding Organisation

Innovate Awarding is an Ofqual regulated awarding organisation offering a wide range of Regulated Qualifications Framework (RQF) approved Qualifications ranging from Level 1 to Level 7, including skills for life and bespoke Qualifications.

This Specification version number is V1. We will inform centres of any changes to this Specification. Centres can keep up to date from visiting our website www.innovateawarding.org

This Specification provides details on administration, Quality Assurance policies and requirements as well as responsibilities that are associated with the delivery of vocational qualifications.

For more information on our range of Qualifications, email contactus@innovateawarding.org

We have a Performance Pledge that details guaranteed response times. Copies of these can be found on our website www.innovateawarding.org.

Qualification Summary

Qualification Title	Level 4 Diploma for the Foot Health Care Practitioner		
Qualification Number (QN)	610/4007/1	RQF Level	4
Operational Start Date	1st May 2024		

Total Qualification Time (TQT)	Guided Learning Hours (GLH)	Qualification Credit Value
401	120	40

Qualification Objective

The objective of this qualification is to recognise learners' achievements within foot health care. It will develop learners' understanding of the roles and responsibilities and knowledge and skills required of foot health care practitioners. This qualification promotes awareness of preventing and treating common foot and skin disorders including professional referrals and managing client information effectively.

This qualification has been developed in line with the Standards for the Foot Health Workforce published by Health Education England in 2021.

Assessment Requirements

This qualification is internally assessed and internally quality assured by Centre staff and externally quality assured by Innovate Awarding External Quality Advisors (EQAs).

Learners must compile a portfolio of evidence demonstrating how they meet the assessment criteria.

To pass, the learner must demonstrate that they have met all the learning outcomes and their associated assessment criteria. If the learner has not demonstrated competence, they would be provided with feedback for the criteria not yet met.

Portfolio of Evidence

Portfolio of Evidence may include workplace documentation and workplace records, witness statements, annotated photographs, video clips, professional discussion with your tutor and observation by your tutor. This is not a definitive list; other evidence sources are allowed.

Statement of Authenticity

Learners will need to provide a Statement of Authenticity to confirm that work submitted for assessment is their own and that they have not copied it from someone else or allowed another learner to copy it from them.

Qualification Structure

Mandatory Units

Unit Number	Unit Title	Level	Credit Value	GLH
R/651/1119	Therapeutics, medications and instruments for the foot health care practitioner	4	5	10
A/651/1120	Treatment of dermatological pathologies for the foot health care practitioner	4	4	10
D/651/1121	Nail and skin dystrophies in foot health care	4	4	11
F/651/1122	Circulation for the foot health care practitioner	3	1	3
H/651/1123	Communicate and record information in a foot health care environment	4	4	5
J/651/1124	Infection prevention and control for foot care practitioners	3	4	6
K/651/1125	Supporting clients with diabetes in foot health care	3	4	10
L/651/1126	Principles of anatomy and physiology for the foot health care practitioner	3	6	25
M/651/1127	Conduct a foot examination	4	4	20

Optional Units – the learner must select one

Unit Number	Unit Title	Level	Credit Value	GLH
R/651/1128	Setting up a practice in foot health care	3	4	10
T/651/1129	Supporting the patient and healthcare professional before, during and after surgery	3	4	20

Target Audience

This competence-based qualification is designed for those people who are working in or wish to work in foot health care, specifically as a Foot Health Care Practitioner. There are two optional units for learners to choose from, depending on their career aims. Option A is for learners who intend to set up their own practice. Option B is for learners who aim to work in hospital or HEE governed settings.

This qualification is particularly suitable for those who have achieved any of the following apprenticeship standards:

- Level 2 Adult Care Worker
- Level 2 Healthcare Support Worker
- Level 3 Lead Adult Care Worker
- Level 3 Senior Healthcare Support Worker

This qualification was developed in consultation with stakeholders to ensure the content is full and relevant to ensure learners are occupationally competent in the workplace.

There are no formal entry requirements for this qualification.

This qualification is regulated for learners aged 18 years old and over.

Progression Opportunities

Learners who achieve this qualification could progress into employment working as a Foot Health Care Practitioner.

Learners could also progress to generic management qualifications, specialist management qualification for the health and social care sector, or further study or training such as the Level 5 Assistant Practitioner apprenticeship or foundation degree.

Support Materials

We have produced a Portfolio Evidence Locator for learners to document how they have covered all the requirements of the qualification.

Funding

For details on eligibility for government funding please refer to:

<https://www.qualifications.education.gov.uk/>

QUALIFICATION UNITS

Unit Title	Therapeutics, medications and instruments for the foot health care practitioner
Unit Number	R/651/1119
Level	4
Credit Value	5
GLH	10

Unit Aim

This unit gives the learner knowledge of medicines, therapeutics and materials and agents used in foot health care.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand treatments used in foot health care	1.1 Define the term "materia medica" 1.2 Explain preparations and their uses in foot health care 1.3 Explain the reasons why medications can cause risk in the foot health care environment
2. Understand the risks of medication in foot health care	2.1 Identify the corticosteroid drugs used in foot health care 2.2 Explain the uses of corticosteroids in foot health care 2.3 Explain the risks, issues and special precautions to be considered when using corticosteroids 2.4 Describe the types of over-the-counter topical medications currently available and explain their possible indications and contra indications 2.5 Explain what advice you would give to clients on the use of over-the-counter medications 2.6 Describe the types of over-the-counter self-treatments that are available for onychomycosis or skin pathology and any possible indications and contra-indications
3. Be able to apply medication, covers and dressing materials to the foot	3.1 Describe the types of over-the-counter covers and dressing materials currently available and how they are applied to the feet 3.2 Explain the importance of changing a dressing. 3.3 State who is responsible for changing a

	<p>dressing after it has been applied</p> <p>3.4 Demonstrate the safe use of:</p> <ul style="list-style-type: none"> • medications (within the scope of practice) • covers • dressings • pads <p>3.5 Apply infection control measures throughout the application of covers and dressing</p> <p>3.6 Perform a non-touch dressing technique</p> <p>3.7 Construct and apply appropriate padding and strapping</p> <p>3.8 Explain indications and contra-indications, including allergy for adhesive materials used on the feet</p>
<p>4. Be able to use foot health care instruments</p>	<p>4.1 Adhere to the processes for:</p> <ul style="list-style-type: none"> • sterilisation • waste • personal cleanliness <p>4.2 Use essential foot health care instruments</p> <p>4.3 Demonstrate the safe use of a scalpel</p>
<p>5. Be able to fit an orthosis to a client's shoe</p>	<p>5.1 Explain the purpose of orthoses</p> <p>5.2 Explain the importance of fitting orthoses correctly</p> <p>5.3 Measure the foot for a simple insole</p> <p>5.4 Create a template for the manufacture of an insole</p> <p>5.5 Fit an orthosis to a client's footwear</p> <p>5.6 Review the effectiveness of insoles and describe issues that may have arisen</p> <p>5.7 Adjust the orthosis if required</p>
<p>Additional information</p>	
<p>Please note that the types of medications and products listed below are subject to change. Tutors, assessors, training providers and learners must ensure their knowledge remains up to date.</p> <p>Preparations may include: Collodions; Ointments; Pastes; Plaster; Solutions; Absorbents; Analgesics; Applications; Gels; Lotions; Paints and Varnishes; Liniments; Creams; Aerosols; Poultices; Pre-Ops; Styptics and Haemostatics; Antiseptics; Caustics; Anti-inflammatory agents</p>	

Medications that **cause risk** include:

Aspirin; Corticosteroids; Warfarin; Beta-blockers; Diuretics; Steroids; Non-steroid anti-inflammatory drugs (NSAIDs)

Advice must include:

- Details of how learners would inform clients about potential complications
- The role of footwear in the management of foot health and care of dressings
- The importance of having dressings changed appropriately

Types of covers and dressing materials may include:

Tube gauze; 'Fleecyweb'; Adhesive tapes; Micropore; Fibre based tapes; 'Hapia band'; Adhesive cushioning; Polyurethane foams; Metatarsal pad; Dorsal roll; Plantar prop; Bunion cup; The crescent; Padding, adhesives, silicones, hydrogels and cross-linked polymers

Safe use – learners must demonstrate safe use in accordance with manufacturers' instructions and be aware of possible contra-actions when using medications/preparations, covers, dressings and paddings (permissible within the scope of practice).

Indications and contra-indications relating to **adhesive materials** should include: Signs and symptoms of possible contra-indications as a result of reactions caused by types of adhesive and or material used in covers, paddings and dressings. This includes, for example, lanolin, latex, adhesive.

Essential foot health care instruments may include:

Mosquito forceps; Halstead forceps; Dressing scissors; Spencer wells forceps; Scalpels; Arterial forceps; In growing nipper; Cantilever nipper; Tuning fork; Standard fibres; Black's files; Tendon hammer; Diagnostic straws; Tube gauze applicators; Files and abrasive devices

Orthoses

In this qualification, orthoses includes for example:

- hard or soft insoles
- half shoe/full shoe insoles
- plantar metatarsal bar.

The orthoses could be prefabricated or made from an appropriate material and fitted into a shoe.

Assessment requirements specified by a sector or regulatory body (if appropriate)

Assessment Criterion 2.4: Learners are expected to describe at least three types of over-the-counter topical medications.

Assessment Criterion 3.1: Learners are expected to describe at least three types of over-the-counter medication, covers and dressing materials.

Assessment Criterion 5.5: Learners are expected to fit the full insole and one other type of simple orthosis such as a plantar metatarsal pad.

Details of the relationship of the unit and relevant national occupational standards

This unit maps to NHS England Standards for the Foot Health Workforce; Level 4 Foot Health Practitioner; Clinical Domains:

2.1 Nail care: Healthy patient

2.2 Nail and skin care: Healthy patient

2.3 Nail and skin care: Non compromised patient

3.1 Dermatology: Healthy patient

3.2 Dermatology: Non compromised patient

4.2 Musculoskeletal health (MSK): Non compromised patient

4.7 Musculoskeletal health (MSK): All patients – orthoses fitting

5.1 Wound management: Healthy patient

Unit Title	Treatment of dermatological pathologies for the foot health care practitioner
Unit Number	A/651/1120
Level	4
Credit Value	4
GLH	10

Unit Aim

This unit aims to give learners the knowledge and skills to identify and safely treat dermatological pathologies within a foot health care consultation to organisational standards.

Learning outcome The learner will	Assessment criteria The learner can
1. Know the structure and function of the skin	1.1 Describe the structure of the: <ul style="list-style-type: none"> • dermis • epidermis 1.2 Describe the function of the skin 1.3 Outline the purpose of the epidermal ridge 1.4 Explain the effect of the ageing process on the skin
2. Understand the importance of nutrition for skin health	2.1 Explain the nutrient groups that would benefit skin health 2.2 Explain the effects of nutrient deficiencies on the skin of the feet
3. Understand disorders and conditions which affect the skin of the foot and appropriate treatments	3.1 Define the term "dermatology" 3.2 Define types of lesions that may appear on the skin 3.3 Explain skin disorders of the foot 3.4 Explain the treatments used for skin disorders of the foot
4. Understand dermatological pathologies of the foot	4.1 Describe sources of: <ul style="list-style-type: none"> • friction • pressure 4.2 Describe the effects of: <ul style="list-style-type: none"> • friction • pressure 4.3 Describe the formation of dermatological pathologies 4.4 Describe how to identify dermatological pathologies 4.5 Explain the treatment options for dermatological pathologies 4.6 Explain complications that may arise from hyperkeratotic lesions

<p>5. Be able to treat dermatological pathologies of the foot safely</p>	<p>5.1 Identify the client's treatment needs</p> <p>5.2 Gain consent</p> <p>5.3 Explain how to refer clients with contra-indications, infection or increased pain to relevant healthcare professionals</p> <p>5.4 Encourage clients to ask questions regarding treatment</p> <p>5.5 Apply the correct personal protective equipment before administering treatment</p> <p>5.6 Treat dermatological pathologies of the foot by:</p> <ul style="list-style-type: none"> • identifying treatment • selecting equipment • using safe techniques including sharp dissection <p>5.7 Use equipment safely whilst maximising clinical benefit</p> <p>5.8 Explain when it is not safe to use sharp dissection</p> <p>5.9 Carry out callus reduction by appropriate means</p>
<p>6. Be able to record details of treatment for legislative purposes</p>	<p>6.1 Explain the importance of confidentiality of personal information</p> <p>6.2 Record details to best practice requirements of:</p> <ul style="list-style-type: none"> • any treatment carried out • outcomes of appointment <p>6.3 Apply the principles of the current data protection legislation within own role</p>
<p>7. Be able to sanitise the work area after treatment</p>	<p>7.1 Apply the principles of infection control to:</p> <ul style="list-style-type: none"> • work area • equipment used <p>7.2 Follow organisational processes for:</p> <ul style="list-style-type: none"> • equipment • sharps <p>7.3 Remove waste according to organisational and legal procedures</p> <p>7.4 Risk assess area for preparation of next treatment appointment for:</p> <ul style="list-style-type: none"> • safety • cleanliness
<p>Additional information</p>	
<p>Types of lesions may include: Papule and nodule; Plaque; Vesicles and bullae; Pustules; Ulcers; Fissures; Cysts; Scales</p>	

Skin disorders of the foot may include:

Erythrasma; Intertrigo; Tinea pedis (Athlete's foot); Raynaud's phenomenon; Erythema pernio (Chilblain); Molluscum contagiosum; Vitiligo; Eczema and dermatitis; Atopic eczema; Irritant dermatitis; Allergic contact dermatitis; Vascular (varicose) eczema; Lichenification; Psoriasis; Viral infection (verrucae); Fungal infections; Dermatophyte infection; Yeast infections; Sweating disorders such as hyperhidrosis, anhidrosis, bromidrosis

Dermatological pathologies may include:

Callus; Heloma durum; Heloma mole; Heloma Millare; Subungual corn; Verruca; Candidiasis; Pustular psoriasis; Tinea pedis (athlete's foot); Erythema pernio (Chilblain)

Hyperkeratotic lesions may include:

Callus; Hard corns; Soft corns

Equipment may include:

Scalpel blade; Mandrill

Not safe to use sharp dissection: for example when the client has diabetes or takes blood thinning medication.

Best practice may include the use of known abbreviations and following the organisation's processes for recording information in a clear and accurate way

Details of the relationship of the unit and relevant national occupational standards

This unit maps to NHS England Standards for the Foot Health Workforce; Level 4 Foot Health Practitioner; Clinical Domains:

- 2.1 Nail care: Healthy patient
- 2.2 Nail and skin care: Healthy patient
- 2.3 Nail and skin care: Non compromised patient
- 3.1 Dermatology: Healthy patient
- 3.2 Dermatology: Non compromised patient
- 4.2 Musculoskeletal health (MSK): Non compromised patient

Unit Title	Nail and skin dystrophies in foot health care
Unit Number	D/651/1121
Level	4
Credit Value	4
GLH	11

Unit Aim

This unit aims to give learners knowledge and understanding of common nail and skin dystrophies and causes, and the skills to identify and treat nail and skin dystrophies in the treatment environment.

Learning outcome The learner will	Assessment criteria The learner can
1. Know the structure and function of nails	1.1 Describe the functions of nails 1.2 Describe the structure of the nail 1.3 Describe how nails are formed 1.4 Outline the effect of ageing on nail growth
2. Understand the importance of nutrition for clients' nail health	2.1 Explain the different nutrient groups that would benefit nail health 2.2 Explain the effects of nutrient deficiencies on the nails of the feet
3. Know the dystrophies of nails	3.1 Describe dystrophies of the nail, including: <ul style="list-style-type: none"> • congenital • pathogenic • systemic 3.2 Explain the causes of mechanical changes to the nail plate
4. Understand how to treat nail dystrophies safely	4.1 Identify nail dystrophies 4.2 Explain the classifications of onychomycosis 4.3 Explain the complications of onychocryptosis 4.4 Explain the treatment of nail dystrophies 4.5 Explain methods of preventing nail dystrophies
5. Be able to carry out treatment safely	5.1 Advise the client on how to prepare for any treatment recommended 5.2 Select: <ul style="list-style-type: none"> • techniques • products • equipment 5.3 Reduce pathological nails with a nail file or nail drill safely and effectively
6. Be able to apply nail cutting techniques safely	6.1 Explain the process for nail cutting 6.2 Use personal protective equipment when

	<p>carrying out nail cutting</p> <p>6.3 Apply infection control procedures</p> <p>6.4 Use the correct tool for the type of nail</p> <p>6.5 Demonstrate safe nail cutting techniques for:</p> <ul style="list-style-type: none"> • involuted nails • onychocryptosis • onychophosis <p>6.6 Explain conservative techniques that could be used to provide immediate relief and long-term resolution for ingrowing toenails</p> <p>6.7 Dispose of waste from nail cutting procedures safely</p>
<p>7. Be able to safely apply abrasion techniques for nails and skin</p>	<p>7.1 Explain the importance of abrasion</p> <p>7.2 Explain the importance of containing dust when filing</p> <p>7.3 Describe types of mechanical abrasion machines</p> <p>7.4 Apply the correct tools for the type of:</p> <ul style="list-style-type: none"> • nail to be filed • skin to be filed <p>7.5 Demonstrate safe techniques for:</p> <ul style="list-style-type: none"> • manual filing • mechanical filing <p>7.6 Apply personal protective equipment when filing</p> <p>7.7 Dispose of waste from abrasion procedures safely</p>

Additional information

Mechanical changes must include:

Involution; Onchophagia; Onycholysis; Onychocryptosis

Nail dystrophies may include:

Onychomycosis; Onychia; Paronychia; Onychauxis; Onychorrhaxis; Bronichal disease; Beaus lines; Onychomadesis; Involuted nails; Onycholysis; Koilonychia; Onychocryptosis

Classifications of onychomycosis must include:

Superficial white onychomycosis; Distal subungual onychomycosis; Candidal onychomycosis; Total dystrophic onychomycosis

Types of mechanical abrasion machines should include wet and dry methods.

Details of the relationship of the unit and relevant national occupational standards

This unit maps to NHS England Standards for the Foot Health Workforce; Level 4 Foot Health Practitioner; Clinical Domains:

- 2.1 Nail care: Healthy patient
- 2.2 Nail and skin care: Healthy patient
- 2.3 Nail and skin care: Non compromised patient

Unit Title **Circulation for the foot health care practitioner**
Unit Number **F/651/1122**
Level **3**
Credit Value **1**
GLH **3**

Unit Aim

This unit aims to give learners knowledge of the circulatory system with particular regard to the lower limb. Learners will also develop their knowledge of circulatory disorders that affect the lower limb in relation to foot health care.

Learning outcome The learner will	Assessment criteria The learner can
1. Know the importance of measuring blood pressure for foot health care	1.1 Define the clinical term "blood pressure" 1.2 Explain how to measure blood pressure 1.3 Explain why it is important to measure blood pressure of foot health care clients
2. Be able to check the circulation of the lower limb	2.1 Explain the arterial supply to the lower limb 2.2 Explain venous return from the lower limb 2.3 Demonstrate how to take a pulse in the lower limb
3. Understand circulatory disorders of the lower limb	3.1 Describe circulatory disorders that affect the lower limb 3.2 Explain how varicose veins develop 3.3 Explain the effect of exercise on circulatory disorders of the lower limb
Additional information	
Circulatory disorders must include: arterial stenosis; deep vein thrombosis	

Unit Title	Communicate and record information in a foot health care environment
Unit Number	H/651/1123
Level	4
Credit Value	4
GLH	5

Unit Aim

This unit provides the learner with the skills, knowledge and understanding to communicate and record information in a foot health care environment, ensuring standards and legislation are adhered to.

Learning outcome The learner will	Assessment criteria The learner can
1. Know how to communicate with clients and/or carers	1.1 Explain how to conduct a professional conversation: <ul style="list-style-type: none"> • to obtain a systematic history or review the client's history since last attendance • to gather information about subjective symptoms • to explain the nature of any examinations, treatment options, risks and likely outcomes • to encourage open exchange of views and information 1.2 Explain the importance of gaining informed consent 1.3 Explain how to gain informed consent
2. Be able to communicate with clients and/or carers	2.1 Conduct a professional conversation with clients and/or carers to obtain all relevant information. 2.2 Gather a client history in a systematic and clear way using open questioning 2.4 Gain informed consent from the client 2.5 Take a detailed history about the client's presenting condition 2.6 Confirm that the client understands the purpose and nature of any examinations 2.7 Communicate the treatment options, risks and likely outcomes to the client. 2.8 Agree the treatment plan with the client 2.9 Inform the client how they could obtain emergency treatment if required
3. Know how to keep accurate records meeting legal obligations	3.1 Summarise the legislation relevant to keeping accurate client records 3.2 Explain the reasons for keeping detailed records of changes to the treatment plan 3.3 Explain the importance of detailing

	progress of the treatment
4. Be able to record information relevant to foot health care	<p>4.1 Record relevant information from a consultation, to include:</p> <ul style="list-style-type: none"> • findings • actions • treatment discussed • treatment administered <p>4.2 Document a treatment plan which is agreed with the client and/or carer</p> <p>4.3 Record any modifications which are made to the agreed treatment plan</p> <p>4.4 Document the reasons for any modifications</p> <p>4.5 Document the progress of the treatment</p>
5. Understand how to communicate with other professionals	<p>5.1 Outline the importance of gaining consent before contacting a client's health care professional</p> <p>5.2 Explain how to record consent gained from clients</p> <p>5.3 Explain the importance, when communicating with professionals, of remaining:</p> <ul style="list-style-type: none"> • concise • clear • factual <p>5.4 Outline the importance of keeping records of communications sent to professionals</p>
6. Understand how to communicate self-care and self-management to clients and/or carers	<p>6.1 Describe the impact that footwear and exercise have on conditions affecting the foot</p> <p>6.2 Explain the importance of appropriate footwear in the maintenance of good foot health</p> <p>6.3 Explain how to communicate detailed and specific advice on self-care and self-management to clients and carers</p>

Additional information

Conduct a professional conversation in accordance with local protocols and scope of practice, taking account of the client's

- emotional state
- level of understanding
- culture and background
- preferred ways of communicating
- social care needs

Details of the relationship of the unit and relevant national occupational standards

This unit maps to NHS England Standards for the Foot Health Workforce; Level 4 Foot Health Practitioner; Clinical Domains:

- 1.1 Health check: Healthy patient
- 2.1 Nail care: Healthy patient
- 3.1 Dermatology: Healthy patient
- 3.2 Dermatology: Non compromised patient
- 4.1 Musculoskeletal health (MSK): Healthy patient
- 5.1 Wound management: Healthy patient
- 5.2 Wound management: Non compromised patient

Unit Title	Infection prevention and control for foot care practitioners
Unit Number	J/651/1124
Level	3
Credit Value	4
GLH	6

Unit Aim

This unit aims to give learners knowledge and skills to prevent and control infection. Learners will be able to demonstrate how to maintain hand hygiene, sterilisation and disinfection techniques used by the foot care practitioner and how to dispose of waste safely.

Learning outcome The learner will	Assessment criteria The learner can
1. Know how infection of the feet is caused	1.1 Explain the terms: <ul style="list-style-type: none"> • pathogenic • non-pathogenic • skin breakdown 1.2 Identify all the stages of skin breakdown 1.3 Explain when to refer clients on to other professionals if skin breakdown requires additional intervention 1.4 Describe the characteristics of: <ul style="list-style-type: none"> • commensals • saprophytes • parasites • bacteria • viruses • fungi 1.5 Identify foot conditions caused by: <ul style="list-style-type: none"> • bacteria • viruses • fungi • parasites
2. Know how infection can spread	2.1 Describe the conditions required for growth of microorganisms 2.2 Outline how microorganisms can enter the body 2.3 Define the term "cross contamination" 2.4 Explain the chain of infection

3 Know how to minimise infection	3.1 Explain how to minimise cross infection, maintaining patient and practitioner safety 3.2 Explain the need for urgent intervention from a professional when deterioration or infection occurs
4. Be able to maintain hygiene when administering foot care	4.1 Prepare the client's feet in a manner consistent with the care to be provided 4.2 Maintain, according to industry and organisational requirements: <ul style="list-style-type: none"> • personal standards of hygiene • protection and appearance 4.3 Adhere to agreed infection control procedures
5. Be able to use sterilisation methods for foot health care	5.1 Explain the processes for: <ul style="list-style-type: none"> • sterilisation • disinfection 5.2 Carry out disinfection processes for the foot 5.3 Explain the use of disinfection agents 5.4 Explain sterilisation methods used for foot care instruments 5.5 Sterilise all tools and equipment
6. Be able to dispose of waste safely in a foot health care environment	6.1 Describe the term "hazardous waste" in the context of foot health care 6.2 Explain the legal requirements for the safe disposal of clinical waste 6.3 Safely dispose of: <ul style="list-style-type: none"> • hazardous waste • clinical waste • single use items • general waste 6.4 Leave the treatment areas clean and tidy for further use

Additional information

Disinfection agents must include:

Surgical spirit; Cetrimide; Chlorhexidine gluconate; CX 1; Chloroxylenol

Sterilisation methods must include:

Cold sterilisation; Ultrasonic cleaning; Autoclaving

Foot care instruments may include:

Scalpel handles; Double ended swan neck probe; Double spatula; Blacks file; Nippers; Foot File

Details of the relationship of the unit and relevant national occupational standards

This unit maps to NHS England Standards for the Foot Health Workforce; Level 4 Foot Health Practitioner; Clinical Domains:

- 2.1 Nail care: Healthy patient
- 2.3 Nail and skin care: Healthy patient
- 3.1 Dermatology: Healthy patient
- 4.2 Musculoskeletal health (MSK): Non compromised patient
- 5.1 Wound management: Healthy patient
- 5.2 Wound management: Non compromised patient

Unit Title **Supporting clients with diabetes in foot health care**
Unit Number **K/651/1125**
Level **3**
Credit Value **4**
GLH **10**

Unit Aim

This unit provides the learner with skills and knowledge related to diabetes and the approach to the client to support foot health care.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the regulation of blood sugar levels	1.1 Explain the role of the pancreas in the regulation of blood sugar 1.2 Explain the role of the liver in relation to the regulation of blood sugar
2. Understand diabetes in relation to foot health care	2.1 Explain the following conditions: <ul style="list-style-type: none"> • Diabetes Type 1 • Diabetes Type 2 2.2 Explain the symptoms and effects of diabetes 2.3 Define: <ul style="list-style-type: none"> • hypoglycaemia • hyperglycaemia 2.4 Explain the importance of treatment of diabetes 2.5 Outline the complications of diabetes in relation to foot health care
3. Be able to test for sensory function of the lower limb	3.1 Describe the term "reflex action" 3.2 Define the term "sensation testing" 3.3 Explain the methods that are used for sensation testing 3.4 Use equipment for sensory testing
4. Be able to support clients with diabetes in foot health care	4.1 Explain how to give advice to a diabetic on foot health care within ethical and legal limitations 4.2 Explain the treatments that would be suitable for diabetic clients 4.3 Demonstrate how to apply pads and dressings applicable for diabetic foot health care 4.5 Explain when to refer a client with diabetes to a professional or health care specialist 4.6 Demonstrate how to administer first aid safely to diabetics covering: <ul style="list-style-type: none"> • internal bruising

	<ul style="list-style-type: none">• bleeds• hyperglycaemia• hypoglycaemia <p>4.4 Explain the importance of recording all treatments and discussions in line with legal requirements</p>
Additional information	
Methods that are used for sensation testing should consider: diabetic clients; neural function	

Unit Title	Principles of anatomy and physiology for the foot health care practitioner
Unit Number	L/651/1126
Level	3
Credit Value	6
GLH	25

Unit Aim

This unit provides learners with knowledge of the anatomy and physiology of the main systems within the body.

Learning outcome The learner will	Assessment criteria The learner can
1. Know the structure and function of the circulatory system	1.1 Describe the structure and function of the heart 1.2 Describe the: <ul style="list-style-type: none"> • systemic circulatory system • pulmonary circulatory system 1.3 Describe the structure and function of blood vessels
2. Know how the respiratory system functions	2.1 Describe the function of the respiratory system 2.2 Describe the structure of the lungs 2.3 Outline the process of respiration
3. Understand the structure and function of the muscular skeletal system	3.1 Describe the function of the skeleton 3.2 Outline the structure of bones 3.3 Describe types of joints 3.4 Define the arches of the foot 3.5 Describe the function of different types of muscle 3.6 Identify the muscles in the lower limb 3.7 Describe the actions of muscles in the lower limb 3.8 Define "abnormal pronation" 3.9 Describe the effects of abnormal pronation
4. Know the structure and function of the nervous system	4.1 Outline the purpose of the nervous system 4.2 Outline the role of the different branches of the nervous system 4.3 Identify the nerves in the lower limb
5. Know the process of immunity	5.1 Define the term "immunity" 5.2 Outline the process of the immune response
6. Know the functions of systems that maintain balance within the body	6.1 Outline the role of the endocrine system 6.2 Describe the function of the digestive system 6.3 Describe the function of the urinary system 6.4 Outline the role of the lymphatic system

	6.5 Outline the following processes: <ul style="list-style-type: none"> • Reabsorption • Osmoregulation
7 Know the anatomy of the foot	7.1 Describe the anatomy of the foot 7.2 Define the term "bony landmarks" 7.3 Explain the weightbearing function of the foot 7.4 Explain how weightbearing pressures can be redistributed
Details of the relationship of the unit and relevant national occupational standards	
This unit maps to NHS England Standards for the Foot Health Workforce; Level 4 Foot Health Practitioner; Clinical Domains: <p>2.3 Nail and skin care: Non compromised patient</p> <p>4.2 Musculoskeletal health (MSK): Non compromised patient</p>	

Unit Title **Conduct a foot examination**
Unit Number **M/651/1127**
Level **4**
Credit Value **4**
GLH **20**

Unit Aim

This unit provides learners with the knowledge, understanding and skills for conducting a foot examination and agreeing and evaluating treatment and after-care.

Learning outcome The learner will	Assessment criteria The learner can
1. Be able to prepare the environment for foot care treatments	1.1 Explain the organisation's processes for preparing: <ul style="list-style-type: none"> • client • work area 1.2 Carry out risk assessments when preparing work areas 1.3 Explain the importance of disinfecting and sterilising: <ul style="list-style-type: none"> • work surfaces • equipment 1.4 Follow infection prevention and control procedures 1.5 Prepare equipment and products for ease of use and safety
2. Conduct examination of the foot and footwear	2.1 Ensure safe and comfortable positioning of the client and self 2.2 Explain the common foot pathologies and indications of trauma that may present 2.3 Identify <ul style="list-style-type: none"> • Gross foot deformities and conditions • Evidence of trauma • Change in appearance of lesions 2.4 Conduct an appropriate foot examination 2.5 Conduct tests needed for the specific condition using relevant equipment and sector information 2.6 Use instruments and equipment safely in line with health and safety guidelines 2.7 Identify the possible cause and pathophysiology of the presenting condition in order to make an effective referral to an appropriate professional 2.8 Explain your professional responsibility to only

	<p>undertake treatment that falls within your role</p> <p>2.9 Explain when and how to escalate issues outside your role boundaries and scope of practice</p> <p>2.10 Explain when to seek a second opinion or refer clients to other healthcare or medical professionals</p> <p>2.11 Identify any signs of deterioration, infection or abnormality in accordance with protocols</p> <p>2.12 Report any signs of infection or deterioration to your supervisor without delay</p> <p>2.13 Discuss the patient's footwear</p> <p>2.14 Assess the suitability of footwear for foot type and risk status</p>
3. Be able to agree treatment and management plans	<p>3.1 Provide the results of the examination to the client</p> <p>3.2 Agree the treatment plan with the client and/or carer</p> <p>3.3 Agree a long-term management plan with the client and/or carer</p> <p>3.4 Record any modifications to the agreed treatment plan</p> <p>3.5 Document reasons for variance</p>
4. Know how to recognise and report unsafe practices	<p>4.1 Describe unsafe practices that may affect the well-being of individuals</p> <p>4.2 Explain the actions to take if unsafe practices have been identified</p> <p>4.3 Describe the action to take if suspected abuse or unsafe practices have been reported but nothing has been done in response</p>
5. Be able to evaluate foot care treatments	<p>5.1 Explain how to respond to contra-actions that occur:</p> <ul style="list-style-type: none"> • pre treatment • post treatment <p>5.2 Provide aftercare consultation</p> <p>5.3 Evaluate the results of the treatment with the client</p>
6. Be able to agree second-line treatment plans	<p>6.1 Define second-line treatment</p> <p>6.2 Explain the information needed for a second-line treatment plan appropriate to the patient</p> <p>6.3 Conduct an examination of the affected nails or skin including size and site of the lesion(s)</p> <p>6.4 Agree a second-line treatment plan</p>
7. Understand wound management	<p>7.1 Explain the phases of wound healing</p> <p>7.2 Identify signs of infection</p> <p>7.3 Identify appropriate dressings</p>

Additional information

Conduct an appropriate foot examination must include key bony landmarks.

Conduct tests needed for the specific condition includes:

- taking account of national markers where appropriate
- testing for peripheral arterial disease, using appropriate techniques and equipment, including the use of a Doppler when necessary
- testing for peripheral sensory neuropathy using appropriate tools

Protocols: the multi-faceted guidelines by which foot health practitioners operate. For example:

- understanding when to refer
- boundaries
- scope of practice
- professional body guidelines.

Long-term management plan: The learner will need to ensure that the client understands the importance of maintaining oversight of foot health over time, including any changes that do not relate to the specific presenting condition. AC1 and AC2 should be within a formal framework.

Information: age of patient, lifestyle, skin type, site and size of the lesion.

Details of the relationship of the unit and relevant national occupational standards

This unit maps to NHS England Standards for the Foot Health Workforce; Level 4 Foot Health Practitioner; Clinical Domains:

- 1.1 Health check: Healthy patient
- 1.2 Health check: Non compromised patient
- 2.1 Nail care: Healthy patient
- 2.3 Nail and skin care: Non compromised patient
- 3.1 Dermatology: Healthy patient
- 3.2 Dermatology: Non compromised patient
- 4.1 Musculoskeletal health (MSK): Healthy patient
- 4.2 Musculoskeletal health (MSK): Non compromised patient
- 5.1 Wound management: Healthy patient
- 5.2 Wound management: Non compromised patient

Unit Title	Setting up a practice in foot health care
Unit Number	R/651/1128
Level	3
Credit Value	4
GLH	10

Unit Aim

This unit provides learners with the skills and knowledge required to set up a practice in foot health care. It gives learners a basic understanding of setting up a practice with consideration to their own circumstances.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand considerations of being self-employed	1.1 Describe features of: <ul style="list-style-type: none"> • self-employment • limited company • partner in a business partnership 1.2 Analyse skills that are required to be self-employed 1.3 Evaluate the financial considerations of being self-employed 1.4 Explain the importance of: <ul style="list-style-type: none"> • contacting the Inland Revenue • contacting an accountant • gaining insurance • joining a trade body 1.5 Identify sources of guidance on setting up a business
2. Understand the steps in assessing a business opportunity	2.1 Examine the critical success factors for a business opportunity 2.2 Research the potential for a foot health care business in your context 2.3 Explain the viability of a business opportunity by considering: <ul style="list-style-type: none"> • strengths • weaknesses • opportunities • threats 2.4 Explain how to obtain clients for the business
3. Be able to assess premises for a foot health care business	3.1 Give examples of the different environments in which a foot health care practitioner could operate 3.2 Assess a premises' requirements, considering:

	<ul style="list-style-type: none"> • size • equipment required • waiting rooms • furnishings • accessibility • functionality including privacy, storage of client records, facilities for waste management
4. Understanding client needs and competitor approaches to customer service	<p>4.1 Explain the importance of client feedback</p> <p>4.2 Evaluate different methods of collecting information on client needs</p> <p>4.3 Research customer service methods of competitors</p>
5. Understanding business finance	<p>5.1 Define:</p> <ul style="list-style-type: none"> • Profit • Loss • Cashflow • Income • Expenditure • Turnover <p>5.2 Calculate the potential costs associated with setting up own practice</p> <p>5.3 Produce a forecast of income and expenditure for own business</p> <p>5.4 Research methods of invoicing</p> <p>5.5 Research methods of recording business accounts</p>
6. Be able to demonstrate continuing professional development (CPD)	<p>6.1 Explain what is meant by the term continuing professional development</p> <p>6.2 Explain why it is important to maintain your own CPD</p> <p>6.3 Describe how you maintain your own CPD</p> <p>6.4 Describe the benefits of benchmarking with other practitioners</p>

Unit Title	Supporting the patient and healthcare professional before, during and after surgery
Unit Number	T/651/1129
Level	3
Credit Value	4
GLH	20

Unit Aim

This unit provides learners with the knowledge, understanding and skills for preparing the clinical area for surgery, supporting the healthcare professional and supporting the patient before, during and after surgery.

Learning outcome The learner will	Assessment criteria The learner can
1. Be able to prepare the clinical area	1.1 Explain local health and safety theatre guidelines 1.2 Identify where materials are stored 1.3 Explain how to prepare the clinical area 1.4 Prepare the pre-surgical and surgical clinical environment 1.5 Identify equipment needed for the safe administration of local anaesthesia 1.6 Prepare the instrumentation for the administration of local anaesthesia 1.7 Handle medicines required once they have been prepared
2. Be able to prepare the patient	2.1 Explain local protocols relating to patient preparation 2.2 Explain the medicolegal requirements for informed consent 2.3 Check all relevant consents have been signed 2.4 Check with the patient that nothing has changed 2.5 Check the patient's understanding of consent given 2.6 Prepare the patient according to local protocols 2.7 Undertake pre-surgical tests and complete relevant documentation 2.8 Explain how to maintain patient comfort and safety during local anaesthesia 2.9 Position the patient for the administration of local anaesthesia
3. Know the requirements for children undergoing surgery	3.1 Explain the importance of supporting children throughout the procedure

	<p>3.2 Explain how to agree parental support throughout the procedure</p> <p>3.3 Explain the positioning of the parent throughout the procedure</p>
4. Be able to support the patient during surgery	<p>4.1 Explain the importance of your role in maintaining patient wellbeing during surgery</p> <p>4.2 Reassure the patient during anaesthesia and surgery</p> <p>4.3 Explain how to check on the patient throughout surgery</p> <p>4.4 Explain what changes you need to escalate to colleagues</p> <p>4.5 Monitor the patient throughout surgery</p> <p>4.6 Explain how to safely move the patient within the clinical area if needed</p>
5. Be able to support the healthcare professional undertaking surgery	<p>5.1 Assist the healthcare professional in donning sterile gown and gloves using a strict no-touch protocol</p> <p>5.2 Assist the healthcare professional in draping the surgical area without compromising the sterile field</p> <p>5.3 Provide additional items as required</p> <p>5.4 Explain the importance of monitoring the time taken for critical interventions for patient safety</p> <p>5.5 Explain how to administer basic life support</p> <p>5.6 Explain how to support the healthcare professional in a clinical emergency</p>
6. Be able to provide support post-surgery	<p>6.1 Explain the importance of minimising trauma immediately after surgery</p> <p>6.2 Explain how to sensitively meet the needs of patients and carers</p> <p>6.3 Explain what to look for when checking a post-surgical dressing</p> <p>6.4 Check that the patient will be able to return home safely after surgery</p> <p>6.5 Explain the importance of full patient involvement in wound management</p> <p>6.6 Check that the patient will be able to follow post-surgical dressing protocol</p> <p>6.7 Check that the patient knows how to obtain emergency care if needed</p> <p>6.8 Check that the patient understands post-surgical advice</p> <p>6.9 Ensure that the patient has written post-surgical advice and a follow up appointment</p>

- 6.10 Explain how to safely dispose of soiled materials and sharps
- 6.11 Restore the clinical area using local protocols

Additional information

Pre-surgical and surgical clinical environment includes:

- local anaesthesia
- surgical packs
- following local protocols and health and safety requirements

Informed consent includes:

- joint parental consent
- Gillick competency

Pre-surgical tests:

- Pulse
- O2 saturation
- Blood pressure

Additional items may include:

- Dressings
- Instruments

Critical interventions may include:

- Tourniquet application
- Caustic application

What to look for when checking a post-surgical dressing to include signs of haemorrhage

Post-surgical dressing protocol includes wound management and appropriate footwear

Details of the relationship of the unit and relevant national occupational standards

This unit maps to NHS England Standards for the Foot Health Workforce; Level 4 Foot Health Practitioner; Clinical Domain:

6.0 Assisting in theatre

APPENDIX

The Regulated Qualifications Framework (RQF)

What is the RQF?

The Regulated Qualifications Framework (RQF) is an Ofqual regulated system of cataloguing qualifications. Qualifications on the RQF can be found by their size or level. Qualifications at a given level can differ depending on their content and purpose.

All of Innovate Awarding's qualifications are on the RQF.

Qualification Level

The level reflects the challenge or difficulty of the qualification. There are eight levels of qualification from 1 to 8, supported by three 'Entry' levels.

Qualification Size

The size of a qualification reflects the estimated total amount of time it would take the average learner to study and be assessed. The size of a qualification is expressed in terms of Total Qualification Time (TQT). The time spent being taught or supervised, rather than studying alone, is the Guided Learning Hours (GLH).

Qualifications can sit at different levels but require similar amounts of study and assessment. Similarly, qualifications at the same level can take different amounts of time to complete.

Credit Values

Every unit and qualification on the RQF has been given a credit value, which denotes the number of credits that will be awarded to each candidate who successfully completes the unit or qualification.

- **1** credit represents **10** notional learning hours.

Notional learning hours represent the amount of time a learner is expected to take, on average, to complete the learning outcomes of the unit to the standard required within the assessment criteria. It is important to note that notional learning hours is not the same as guided learning hours (GLH). GLH represents the hours during which a tutor or trainer is present and contributing to the learning process. Notional learning hours represents the hours which are needed to successfully cover all the learning required to achieve the unit, either guided or independently.

RQF Terminology

Whilst the evidence outcomes required from RQF and NVQ units are the same, the RQF units use different terminology to the NVQ units. The assessment criteria for NVQ units are 'what you must do' and 'what you must know' whereas the RQF units are all 'the Learner can' or 'the Learner is able to'.

Rules of Combination (RoC)

Every qualification on the RQF is structured through Rules of Combination. Rules of Combination are important because they define the number of credits which need to be achieved and where these credits must come from in order for a Learner to achieve the qualification. Rules of Combination also state what the potential is for Learners who wish to transfer credits between qualifications and awarding organisations.

Assessment Principles

Learners must be registered with the Awarding Organisation before formal assessment commences.

Assessors must be able to evidence and justify the assessment decisions that they have made.

Where an assessor is occupationally competent but not yet qualified as an assessor, assessment decisions must rest with a qualified assessor. This may be expressed through a robust countersigning strategy that supports and validates assessment decisions made by as yet unqualified assessors, until the point where they meet the requirements for qualification.

Assessment of knowledge-based learning outcomes:

- May take place in or outside of a real work environment
- Must be made by an occupationally qualified and knowledgeable assessor, qualified to make assessment decisions
- Must be robust, reliable, valid, and current; any assessment evidence using pre-set automated tests, including e-assessment portfolios, must meet these requirements and can only contribute to overall decisions made by the assessor.

Those involved in assessment must demonstrate their continuing professional development, up to date skills, knowledge and understanding of practice at or above the level of the unit.

Regardless of the form of recording used for assessment evidence, the guiding principle must be that evidence gathered for assessment must comply with policy and legal requirements in relation to confidentiality and data protection. Assessors must ensure they are satisfied the evidence presented is traceable, auditable and authenticated and meets assessment principles.

Quality Assurance

Internal quality assurance is key to ensuring that the assessment of evidence is of a consistent and appropriate quality. Those carrying out internal quality assurance must be occupationally knowledgeable in the unit they are assuring and be qualified to make quality assurance decisions.

Those involved in internal quality assurance must have the authority and the resources to monitor the work of assessors. They have a responsibility to highlight and propose ways to address any challenges in the assessment process (e.g. to ensure suitable assessors are assigned to reflect the strengths and needs of particular learners).

Those carrying out external quality assurance must be occupationally knowledgeable and understand the policy and practice context of the qualifications in which they are involved.

Those involved in external quality assurance have a responsibility to promote continuous improvement in the quality of assessment processes.

Skills for Health Assessment Principles for Qualifications that Assess Occupational Competence

Version 5, September 2022

1. Introduction

- 1.1 Skills for Health is the Sector Skills Council (SSC) for the UK health sector.
- 1.2 This document sets out principles and approaches to the assessment of regulated qualifications not already described by the qualifications regulators in England, Wales and Northern Ireland. This information is intended to support the quality assurance processes of Awarding Organisations that offer qualifications in the sector, and should be read alongside these. It should also be read alongside individual unit assessment requirements.
- 1.3 These principles will ensure a consistent approach to those elements of assessment which require further interpretation and definition, and support sector confidence.
- 1.4 These principles apply to qualifications and the units therein that assess occupational competence.¹
- 1.5 Throughout this document the term *unit* is used for simplicity but this can mean module or any other similar term.

2. Assessment Principles

- 2.1 Learners must be registered with the Awarding Organisation before formal assessment commences.
- 2.2 Assessment decisions for competence based units must be made by an occupationally competent assessor primarily using evidence generated in the workplace during the learners normal work activity. Any knowledge evidence integral to these learning outcomes may be generated outside of the work environment.
- 2.3 Assessment decisions for competence units must be made by an assessor who meets the requirements set out in the qualification's assessment strategy. Where the Awarding Organisation requires that the assessor holds, or is working toward, a formal assessor qualification, that qualification should be the Level 3 Certificate in Assessing Vocational Achievement. Assessors holding the D32/33 or A1 qualifications are not required to re-qualify. Where an Awarding Organisation does not expect the assessor to hold or be working toward a formal qualification we would expect that Awarding Organisation to ensure that the assessor meets the same standards of assessment practice as set out in the Learning and Development National Occupational Standard 09 Assess learner achievement.

¹ These are qualifications which confirm competence in an occupational role to the standards required and/or confirm the ability to meet 'licence to practice' or other legal requirements made by the relevant sector, professional or industry body

- 2.4 Competence based units **must** include direct observation² in the workplace as the primary source of evidence.
In some instances, direct observation² may take place with the assessor being remote from the learner. This **must** be defined in the unit assessment strategy and **must** be agreed with Skills for Health.
A risk assessment must be conducted and documented prior to the assessment commencing to ensure that the privacy, dignity or confidentiality of any individual will not be compromised by the use of remote technologies.
- 2.5 Simulation may only be utilised as an assessment method for learning outcomes that start with 'be able to' where this is specified in the assessment requirements of the unit. The use of simulation should be restricted to obtaining evidence where the evidence cannot be generated through normal work activity.
Where this may be the case the use of simulation in the unit assessment strategy will be agreed with Skills for Health.
- 2.6 Expert witnesses can be used for direct observation where they have occupational expertise for specialist areas or the observation is of a particularly sensitive nature. The use of expert witnesses should be determined and agreed by the assessor.
- 2.7 Assessment decisions for knowledge only units must be made by an assessor qualified to make these assessment decisions as defined in the unit assessment strategy.

3. Internal Quality Assurance

- 3.1 Internal quality assurance is key to ensuring that the assessment of evidence for units is of a consistent and appropriate quality. Those carrying out internal quality assurance must be occupationally knowledgeable in the area they are assuring and be qualified to make quality assurance decisions.
- 3.2 Skills for Health would expect that where the Awarding Organisation requires those responsible for internal quality assurance to hold formal internal quality assurance qualifications that these would be the Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice or the Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice, as appropriate depending on the role of the individual. Those responsible for internal quality assurance holding the D34 or V1 qualifications are not required to re-qualify. Where an Awarding Organisation does not expect those responsible for internal quality assurance to hold or be working toward a formal internal quality assurance qualification we would expect that Awarding Organisation to ensure that those responsible for internal quality assurance meet the standard of practice set out in the Learning and Development National Occupational Standard 11 Internally monitor and maintain the quality of assessment.

² Direct observation will typically involve the assessor being in the workplace with the learner.

4. Definitions

4.1 Occupationally competent:

This means that each assessor must be capable of carrying out the full requirements within the competence unit/s they are assessing. Occupational competence must be at unit level which might mean different assessors across a whole qualification. Being occupationally competent means they are also occupationally knowledgeable. This occupational competence should be maintained through clearly demonstrable continuing learning and professional development. This can be demonstrated through current statutory professional registration.

4.2 Occupationally knowledgeable:

This means that each assessor should possess relevant knowledge and understanding, and be able to assess this in units designed to test specific knowledge and understanding, or in units where knowledge and understanding are components of competency. This occupational knowledge should be maintained through clearly demonstrable continuing learning and professional development.

4.3 Qualified to make assessment decisions:

This means that each assessor must hold a relevant qualification or be assessing to the standard specified in the unit/qualification assessment strategy.

4.4 Qualified to make quality assurance decisions:

Awarding Organisations will determine what will qualify those undertaking internal quality assurance to make decisions about that quality assurance.

4.5 Expert witness:

An expert witness must:

- have a working knowledge of the qualification units on which their expertise is based;
- be occupationally competent in their area of expertise;
- have EITHER a qualification in assessment of workplace performance OR a professional work role which involves evaluating the everyday practice of staff.

Occupational Competence Requirements

Tutors, Assessors and Quality Assurance Staff

Required Criteria

All Tutors, Assessors and Quality Assurance Staff must:

- Have a specific qualification equivalent to the qualification or units being taught/assessed or quality assured
- Have relevant industry experience
- Demonstrate active involvement in a process of industry relevant Continued Professional Development during the last two years (this may be discipline/context specific or relevant to tutoring assessing or quality assurance)

Types of Assessor Qualifications

- D32 Assess Candidate Performance and D33 Assess Candidate Using Differing Sources of Evidence
- A1 Assess Candidate Performance Using a Range of Methods and A2 Assessing Candidates' Performance through Observation QCF Level 3 Award in Assessing Competence in the Work Environment (for competence/skills learning outcomes only)
- QCF Level 3 Award in Assessing Vocationally Related Achievement (for knowledge learning outcomes only)
- QCF Level 3 Certificate in Assessing Vocational Achievement
- Qualified Teacher Status
- Certificate in Education in Post Compulsory Education (PCE)
- Social Work Post Qualifying Award in Practice Teaching
- Certificate in Teaching in the Lifelong Learning Sector (CTLTS)
- Diploma in Teaching in the Lifelong Learning sector (DTLLS)
- Mentorship and Assessment in Health and Social Care Settings
- Mentorship in Clinical/Health Care Practice
- L&D9DI - Assessing workplace competence using Direct and Indirect methods (Scotland)
- L&D9D - Assessing workplace competence using Direct methods (Scotland)
- NOCN – Tutor/Assessor Award
- Level 3 Awards and Certificate in Assessing the Quality of Assessment (QCF)
- Level 4 Awards and Certificates in Assuring the Quality of Assessment (QCF)
- Level 3 Award in Education and Training JABQG Sept 2014 - Version 5
- Level 4 Certificate in Education and Training
- Level 5 Diploma in Education and Training
- Level 3 Certificate in Assessing Vocational Achievement (RQF)

Tutors

Tutors must hold or be working towards a teaching qualification. The following are acceptable:

- Level 3 Award, Level 4 Certificate or Level 5 in Education and Training
- Level 3 Award in Preparing to Teach in the Lifelong Learning Sector (PTTLS)
- Level 4 Award in Preparing to Teach in the Lifelong Learning Sector (PTTLS)
- Level 4 Certificate in Teaching in the Lifelong Learning Sector (CTTLS)
- Level 5 Diploma in Teaching in the Lifelong Learning Sector (DTTLS) Relevant predecessor NQF tutor qualifications

Assessors

Assessors must hold or be working towards any of the following:

- Level 3 Award in Assessing Vocationally Related Achievement
- Level 3 Award in Assessing Competence in the Work Environment
- Level 3 Certificate in Assessing Vocational Achievement
- A1 (previously D32, D33) or
- Relevant predecessor NQF assessor qualifications

Assessors holding historical qualifications such as unit A1, unit A2, and/or unit D32, and/or unit D33, are required to demonstrate that they meet the same standards of assessment practice as set out in the Learning and Development National Occupational Standard - Standard 9 Assess Learner Achievement. Suggested evidence that demonstrates this requirement may include CPD records, a Personal Development Plan (PDP) and/or records of work completed.

Internal Quality Assurers

Internal quality assurers must hold or be working towards any of the following:

- Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice
- Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice
- V1 (previously D34)
- Relevant predecessor NQF internal quality assurance qualifications

Internal Verifiers holding historical qualifications such as unit V1 – Conduct internal quality assurance of the assessment process and/or unit D34, are required to demonstrate that they meet the same standards for monitoring assessment processes and decisions as set out in the Learning and Development National Occupational Standard – Standard 11 Internally monitor and maintain the quality of

assessment. Suggested evidence that demonstrates this requirement may include CPD records, a Personal Development Plan (PDP) and/or records of work completed.

It is recommended that internal quality assurance staff also hold a relevant assessing qualification as detailed above.

External Quality Assurers

External Quality Assurers must hold or be working towards any of the following:

- Level 4 Award in the External Quality Assurance of Assessment Processes and Practice
- Level 4 Certificate in Leading the External Quality Assurance of Assessment Processes and Practice
- V2 (previously D35)

External verifiers holding historical qualifications such as unit V2 – Conduct external quality assurance of the assessment process and/or unit D35, are required to demonstrate that they meet the same standards for monitoring assessment processes and decisions as set out in the Learning and Development National Occupational Standard – Standard 12 Externally monitor and maintain the quality of assessment. Suggested evidence that demonstrates this requirement may include CPD records, a Personal Development Plan (PDP) and/or records of work completed.

It is recommended that external quality assurance staff also hold a relevant assessing and internal quality assurance qualifications as detailed above.

All new assessors and quality assurance staff must be given a clear action plan for achieving the appropriate qualification(s) and should be countersigned by an appropriately qualified individual until the qualification(s) are achieved.

Additional Information

Centre Approval

We approve organisations such as colleges, schools, providers and employers as approved centres. As an approved centre you will be able to deliver our qualifications.

To become an approved centre complete our Centre Approval Application Form which can be download from our website. Our support team will contact you within two working days to help you through the process.

Feedback

Your feedback is very important to us. We're always open to suggestions when it comes to enhancing and improving our services, products and systems.

Email contactus@innovateawarding.org or call 0117 314 2800.

Complaints

If we do get things wrong, we will make every effort to resolve your issues quickly and efficiently. If you'd like to raise a formal complaint, then we recommend you read our Complaints Procedure which can be found on our website.

Fees

Our fees structure is transparent and straightforward. Our fees are published on our website in a clear format with no hidden charges. Unlike other awarding organisations, we do not charge an annual centre fee. Visit our website to compare our fees.

Enquiries and Appeals

We recognise that sometimes decisions are made that a centre (or learner) may wish to appeal. We have an Enquiries and Appeals Policy and Process on our website that sets out guidelines on grounds for appeal and the process.

Data Protection

Innovate Awarding takes the protection of data seriously; we have a data protection statement outlining how we and our centres, comply with the current legislation on data protection. This statement can be found on our website.

Equality and Diversity

Innovate Awarding is committed to giving everyone who wants to gain one of our qualifications an equal opportunity of achieving it in line with current UK legislation (Equality Act 2010) and EU directives.

Centres are required, as conditions of approval, to use an equality and diversity policy that works together with ours and that they maintain an effective complaint and appeals process. We expect centres to tell learners how to find and use their own equality and diversity and appeals processes. For information, please visit our website.

Reasonable Adjustment and Special Consideration

All learners must be treated fairly and equally and be given every opportunity to achieve our/the qualifications. A copy of our policy on Reasonable Adjustments and Special Considerations, and application form, can be found on our website.

Malpractice and Maladministration

Innovate Awarding has a responsibility to do everything it can to prevent any malpractice or maladministration from occurring, and where it has already occurred, ensuring action is taken proportionate to the gravity and scope of the occurrence.

A copy of our policy and procedure on Malpractice and Maladministration is available on our website.

Recognition of Prior Learning (RPL)

RPL recognises how the contribution of a learner's previous experience could contribute to a qualification or unit. Innovate Awarding have produced guidance on RPL, and this can be found within our Information and Guidance for Centres on our website.

Please note the above is not a comprehensive guide to running qualifications. Once approved centres must adhere to the Centre Agreement and Information and Guidance for Centres.



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