

Specification

IAO Level 5 Diploma in Leadership for Health and Social Care and Children and Young People's Services (England)

Qualification Number: 601/4259/5

Contents

Change Control Sheet	3
Innovate Awarding Organisation	4
Qualification Summary	5
Qualification Structure	7
Target Audience	28
Progression Opportunities	28
Support Materials	28
Funding	28
Qualification Units	29
The Regulated Qualifications Framework (RQF)	228
Skills for Care and Development Assessment Principles	230
Additional Information	245

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
5	March 2024	Removal of Adult pathways 4, 5 and 6	30
5	March 2024	Updated Skills for Care and Development Assessment Principles	231
6	December 2024	Correction to numbering of Assessment Criteria in Unit A/601/9370, Learning Outcome 1	48
6	December 2024	Updated list of acceptable assessor and internal quality assurer qualifications	239

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 V5. 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 5 Diploma in Leadership for Health and Social Care and Children and Young People’s Services (England)		
Qualification Number	601/4259/5	RQF Level	5
Operational Start Date	1st September 2014		

Total Qualification Time (TQT)	Guided Learning Hours (GLH)	Qualification Credit Value
900 hours	502-654 hours	90

Qualification Objective

This qualification is aimed at advanced practitioners in Health and Social Care and Children and Young People’s Services. The qualification provides learners with the skills and knowledge required to manage practice and lead others. It offers the following three pathways:

- Pathway 1: Children and Young People’s Residential Management
- Pathway 2: Children and Young People’s Management Pathway
- Pathway 3: Children and Young People’s Advanced Practice Pathway

Units cover a wide range of topics including safeguarding and protection, managing care services, supporting development, partnership working and promoting and developing best practice.

This qualification confirms competence in these areas.

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

Group A: Mandatory Units

Learners must complete all six mandatory units.

Unit Number	Unit Title	Level	Credit Value	GLH
F/602/2335	Use and develop systems that promote communication	5	3	24
L/602/2578	Promote professional development	4	4	33
Y/602/3183	Champion equality, diversity and inclusion	5	4	34
K/602/3172	Develop health and safety and risk management policies, procedures and practices in health and social care or children and young people's settings	5	5	33
A/602/3189	Work in partnership in health and social care or children and young people's settings	4	4	26
J/602/3499	Undertake a research project within services for health and social care or children and young people	5	10	80

Group B: Pathways

Pathway 1 – Children and Young People’s Residential Management Pathway

Learners choosing this pathway must complete all seven core units to gain 44 credits in Group P1A. Learners must achieve a minimum of 12 credits from the optional management units in Group P1B, a maximum of 6 credits from the optional knowledge units in Group P1C and a minimum of 4 credits from the units from the general optional units in Group P1D.

Group P1A - Children and Young People’s Residential Management - core units

Unit Number	Unit Title	Level	Credit Value	GLH
F/601/9449	Understand children and young person’s development	5	6	30
J/601/9369	Lead practice that supports positive outcomes for child and young person development	5	6	36
A/601/9370	Develop and implement policies and procedures to support the safeguarding of children and young people	5	6	26
A/602/3175	Lead and manage group living for children	5	6	43
H/602/3171	Lead and manage a team within a health and social care or children and young people’s setting	6	7	46
M/602/3187	Develop professional supervision practice in health and social care or children and young people’s work setting	5	5	39
J/602/2577	Lead practice in promoting the wellbeing and resilience of children and young people	5	8	53

Group P1B – Children and Young People’s Residential Management – optional management units

Unit Number	Unit Title	Level	Credit Value	GLH
J/602/2336	Develop procedures and practice to respond to concerns and complaints	5	6	40
R/602/2338	Recruitment and selection within health and social care or children and young people’s settings	4	3	26
Y/602/2339	Facilitate the development of effective group practice in health and social care or children and young people’s settings	5	6	42
L/602/2547	Facilitate coaching and mentoring of practitioners in health and social care or children and young people’s settings	5	6	43
T/602/2574	Manage induction in health and social care or children and young people’s settings	4	3	21
F/602/2612	Facilitate change in health and social care or children and young people’s settings	5	6	42
L/602/2743	Manage an inter-professional team in a health and social care or children and young people’s setting	6	7	48
T/602/2753	Manage finance within own area of responsibility in health and social care or children and young people’s setting	4	4	31
R/602/2758	Manage quality in health and social care or children and young people’s setting	5	5	36
Y/600/9588	Develop and evaluate operational plans for own area of responsibility	5	6	25
K/600/9711	Manage physical resources	4	3	25

Group P1C – Children and Young People’s Residential Management - optional knowledge units

Unit Number	Unit Title	Level	Credit Value	GLH
T/602/3188	Understand partnership working	4	1	7
D/602/3170	Understand how to manage a team	4	3	20
H/602/3185	Understanding professional supervision practice	4	3	22
J/601/3538	Understand the process and experience of dementia	3	3	22
J/601/6150	Understand physical disability	3	3	22
Y/601/6167	Understand the impact of Acquired Brain Injury on individuals	3	3	28
M/601/3467	Understand sensory loss	3	3	21
A/601/6274	Principles of supporting individuals with a learning disability regarding sexuality and sexual health	3	3	21

Group P1D – Children and Young People’s Residential Management - optional general units

Unit Number	Unit Title	Level	Credit Value	GLH
L/602/2337	Manage domiciliary services	5	6	39
F/602/2853	Lead the management of transitions	5	4	29
K/602/2572	Lead positive behavioural support	7	10	75
K/602/3074	Develop provision for family support	5	5	33
M/602/2380	Lead support for disabled children and young people and their carers	6	8	57
H/601/7354	Lead active support	5	5	35
K/601/7355	Active support: lead interactive training	5	4	30
J/601/5645	Promote access to healthcare for individuals with learning disabilities	5	6	44
A/601/5318	Promote good practice in the support of individuals with autistic spectrum conditions	5	7	53
M/601/5817	Support families who are affected by Acquired Brain Injury	3	3	30
D/601/5750	Support families who have a child with a disability	3	3	23
M/601/9494	Support the development of community partnerships	4	5	33
K/601/7906	Support individuals to access housing and accommodation services	3	4	24
T/601/9495	Support individuals at the end of life	3	7	53
F/601/9029	Work with families, carers and individuals during times of crisis	4	5	35
T/601/9738	Implement the positive behavioural support model	4	8	61

H/601/3546	Support individuals to access education, training or employment	4	4	31
M/601/5249	Promote awareness of sensory loss	5	3	19
H/601/5250	Support the use of assistive technology	6	4	31
K/601/5251	Explore models of disability	5	5	32
M/601/5252	Support individuals with sensory loss with communication	5	5	37
T/601/5253	Support individuals with multiple conditions and/or disabilities	5	5	34
T/600/9789	Support children's speech, language and communication	3	4	30
F/600/9777	Understand the needs of children and young people who are vulnerable and experiencing poverty and disadvantage	4	5	40
F/502/3295	Independent mental capacity advocacy	4	12	35
J/502/3296	Independent mental health advocacy	4	7	35
L/502/3297	Providing independent advocacy management	4	11	35
R/502/3298	Providing independent advocacy to adults	4	5	35
Y/502/3299	Independent advocacy with children and young people	4	7	35
F/502/3300	Providing independent mental capacity advocacy – deprivation of liberty safeguards	4	5	35
M/601/0648	Recognise indications of substance misuse and refer individuals to specialists	3	4	24
D/501/0585	Identify an act upon immediate risk of danger to substance misusers	3	4	24
F/504/2218	Understand professional management and leadership in	5	6	50

	health and social care or children and young people's settings			
D/504/2212	Lead and manage practice in dementia care	5	6	41

Pathway 2 – Children and Young People’s Management Pathway

Learners choosing this pathway must achieve 38 credits from the six core units in Group P2A. Learners must achieve a minimum of 12 credits from the optional management units in Group P2B, a maximum of 6 credits from the optional knowledge units in Group P2C and a minimum of 10 credits from the general optional units in Group P2D.

Group P2A - Children and Young People’s Management - core units

Unit Number	Unit Title	Level	Credit Value	GLH
F/601/9449	Understand children and young person’s development	5	6	30
J/601/9369	Lead practice that supports positive outcomes for child and young person development	5	6	36
A/601/9370	Develop and implement policies and procedures to support the safeguarding of children and young people	5	6	26
H/602/3171	Lead and manage a team within a health and social care or children and young people’s setting	6	7	46
M/602/3187	Develop professional supervision practice in health and social care or children and young people’s work setting	5	5	39
J/602/2577	Lead practice in promoting the wellbeing and resilience of children and young people	5	8	53

Group P2B – Children and Young People’s Management – optional management units

Unit Number	Unit Title	Level	Credit Value	GLH
J/602/2336	Develop procedures and practice to respond to concerns and complaints	5	6	40
R/602/2338	Recruitment and selection within health and social care or children and young people’s settings	4	3	26
Y/602/2339	Facilitate the development of effective group practice in health and social care or children and young people’s settings	5	6	42
L/602/2547	Facilitate coaching and mentoring of practitioners in health and social care or children and young people’s settings	5	6	43
T/602/2574	Manage induction in health and social care or children and young people’s settings	4	3	21
F/602/2612	Facilitate change in health and social care or children and young people’s settings	5	6	42
L/602/2743	Manage an inter-professional team in a health and social care or children and young people’s setting	6	7	48
T/602/2753	Manage finance within own area of responsibility in health and social care or children and young people’s setting	4	4	31
R/602/2758	Manage quality in health and social care or children and young people’s setting	5	5	36
Y/600/9588	Develop and evaluate operational plans for own area of responsibility	5	6	25
K/600/9711	Manage physical resources	4	3	25

Group P2C – Children and Young People’s Management - optional knowledge units

Unit Number	Unit Title	Level	Credit Value	GLH
T/602/3188	Understand partnership working	4	1	7
D/602/3170	Understand how to manage a team	4	3	20
H/602/3185	Understanding professional supervision practice	4	3	22
J/601/3538	Understand the process and experience of dementia	3	3	22
J/601/6150	Understand physical disability	3	3	22
Y/601/6167	Understand the impact of Acquired Brain Injury on individuals	3	3	28
M/601/3467	Understand sensory loss	3	3	21
A/601/6274	Principles of supporting individuals with a learning disability regarding sexuality and sexual health	3	3	21

Group P2D – Children and Young People’s Management - optional general units

Unit Number	Unit Title	Level	Credit Value	GLH
L/602/2337	Manage domiciliary services	5	6	39
F/602/2853	Lead the management of transitions	5	4	29
K/602/2572	Lead positive behavioural support	7	10	75
K/602/3074	Develop provision for family support	5	5	33
M/602/2380	Lead support for disabled children and young people and their carers	6	8	57
H/601/7354	Lead active support	5	5	35
K/601/7355	Active support: lead interactive training	5	4	30
J/601/5645	Promote access to healthcare for individuals with learning disabilities	5	6	44
A/601/5318	Promote good practice in the support of individuals with autistic spectrum conditions	5	7	53
M/601/5817	Support families who are affected by Acquired Brain Injury	3	3	30
D/601/5750	Support families who have a child with a disability	3	3	23
M/601/9494	Support the development of community partnerships	4	5	33
K/601/7906	Support individuals to access housing and accommodation services	3	4	24
T/601/9495	Support individuals at the end of life	3	7	53
F/601/9029	Work with families, carers and individuals during times of crisis	4	5	35
T/601/9738	Implement the positive behavioural support model	4	8	61

H/601/3546	Support individuals to access education, training or employment	4	4	31
M/601/5249	Promote awareness of sensory loss	5	3	19
H/601/5250	Support the use of assistive technology	6	4	31
K/601/5251	Explore models of disability	5	5	32
M/601/5252	Support individuals with sensory loss with communication	5	5	37
T/601/5253	Support individuals with multiple conditions and/or disabilities	5	5	34
T/600/9789	Support children's speech, language and communication	3	4	30
F/600/9777	Understand the needs of children and young people who are vulnerable and experiencing poverty and disadvantage	4	5	40
F/502/3295	Independent mental capacity advocacy	4	12	35
J/502/3296	Independent mental health advocacy	4	7	35
L/502/3297	Providing independent advocacy management	4	11	35
R/502/3298	Providing independent advocacy to adults	4	5	35
Y/502/3299	Independent advocacy with children and young people	4	7	35
F/502/3300	Providing independent mental capacity advocacy – deprivation of liberty safeguards	4	5	35
M/601/0648	Recognise indications of substance misuse and refer individuals to specialists	3	4	24
D/501/0585	Identify and act upon immediate risk of danger to substance misusers	3	4	24
F/504/2218	Understand professional management and leadership in	5	6	50

	health and social care or children and young people's settings			
D/504/2212	Lead and manage practice in dementia care	5	6	41

Pathway 3 – Children and Young People’s Advanced Practice Pathway

Learners choosing this pathway must achieve 26 credits from the four core units in Group P3A. Learners have a free choice of units from Group P3B, a maximum of 6 credits from the optional knowledge units in Group P3C and a minimum of 28 credits from the general optional units in Group P3D.

Group P3A - Children and Young People’s Advanced Practice - core units

Unit Number	Unit Title	Level	Credit Value	GLH
F/601/9449	Understand children and young person’s development	5	6	30
J/601/9369	Lead practice that supports positive outcomes for child and young person development	5	6	36
A/601/9370	Develop and implement policies and procedures to support the safeguarding of children and young people	5	6	26
J/602/2577	Lead practice in promoting the wellbeing and resilience of children and young people	5	8	53

Group P3B – Children and Young People’s Advanced Practice – optional management units

Unit Number	Unit Title	Level	Credit Value	GLH
J/602/2336	Develop procedures and practice to respond to concerns and complaints	5	6	40
R/602/2338	Recruitment and selection within health and social care or children and young people’s settings	4	3	26
Y/602/2339	Facilitate the development of effective group practice in health and social care or children and young people’s settings	5	6	42
L/602/2547	Facilitate coaching and mentoring of practitioners in health and social care or children and young people’s settings	5	6	43
T/602/2574	Manage induction in health and social care or children and young people’s settings	4	3	21
F/602/2612	Facilitate change in health and social care or children and young people’s settings	5	6	42
L/602/2743	Manage an inter-professional team in a health and social care or children and young people’s setting	6	7	48
T/602/2753	Manage finance within own area of responsibility in health and social care or children and young people’s setting	4	4	31
R/602/2758	Manage quality in health and social care or children and young people’s setting	5	5	36
Y/600/9588	Develop and evaluate operational plans for own area of responsibility	5	6	25
K/600/9711	Manage physical resources	4	3	25

Group P3C – Children and Young People’s Advanced Practice - optional knowledge units

Unit Number	Unit Title	Level	Credit Value	GLH
T/602/3188	Understand partnership working	4	1	7
D/602/3170	Understand how to manage a team	4	3	20
H/602/3185	Understanding professional supervision practice	4	3	22
J/601/3538	Understand the process and experience of dementia	3	3	22
J/601/6150	Understand physical disability	3	3	22
Y/601/6167	Understand the impact of Acquired Brain Injury on individuals	3	3	28
M/601/3467	Understand sensory loss	3	3	21
A/601/6274	Principles of supporting individuals with a learning disability regarding sexuality and sexual health	3	3	21

Group P3D – Children and Young People’s Advanced Practice - optional general units

Unit Number	Unit Title	Level	Credit Value	GLH
L/602/2337	Manage domiciliary services	5	6	39
F/602/2853	Lead the management of transitions	5	4	29
K/602/2572	Lead positive behavioural support	7	10	75
K/602/3074	Develop provision for family support	5	5	33
M/602/2380	Lead support for disabled children and young people and their carers	6	8	57
H/601/7354	Lead active support	5	5	35
K/601/7355	Active support: lead interactive training	5	4	30
J/601/5645	Promote access to healthcare for individuals with learning disabilities	5	6	44
A/601/5318	Promote good practice in the support of individuals with autistic spectrum conditions	5	7	53
M/601/5817	Support families who are affected by Acquired Brain Injury	3	3	30
D/601/5750	Support families who have a child with a disability	3	3	23
M/601/9494	Support the development of community partnerships	4	5	33
K/601/7906	Support individuals to access housing and accommodation services	3	4	24
T/601/9495	Support individuals at the end of life	3	7	53
F/601/9029	Work with families, carers and individuals during times of crisis	4	5	35
T/601/9738	Implement the positive behavioural support model	4	8	61

H/601/3546	Support individuals to access education, training or employment	4	4	31
M/601/5249	Promote awareness of sensory loss	5	3	19
H/601/5250	Support the use of assistive technology	6	4	31
K/601/5251	Explore models of disability	5	5	32
M/601/5252	Support individuals with sensory loss with communication	5	5	37
T/601/5253	Support individuals with multiple conditions and/or disabilities	5	5	34
T/600/9789	Support children's speech, language and communication	3	4	30
F/600/9777	Understand the needs of children and young people who are vulnerable and experiencing poverty and disadvantage	4	5	40
F/502/3295	Independent mental capacity advocacy	4	12	35
J/502/3296	Independent mental health advocacy	4	7	35
L/502/3297	Providing independent advocacy management	4	11	35
R/502/3298	Providing independent advocacy to adults	4	5	35
Y/502/3299	Independent advocacy with children and young people	4	7	35
F/502/3300	Providing independent mental capacity advocacy – deprivation of liberty safeguards	4	5	35
M/601/0648	Recognise indications of substance misuse and refer individuals to specialists	3	4	24
D/501/0585	Identify and act upon immediate risk of danger to substance misusers	3	4	24
F/504/2218	Understand professional management and leadership in	5	6	50

	health and social care or children and young people's settings			
D/504/2212	Lead and manage practice in dementia care	5	6	41

Barred units

Unit:	Barred against:
K/602/2572 Lead positive behavioural support	T/601/9738 Implement the positive behavioural support model
T/601/9738 Implement the positive behavioural support model	K/602/2572 Lead positive behavioural support
F/502/3295 Independent mental capacity advocacy	J/502/3296 Independent mental health advocacy L/502/3297 Providing independent advocacy management R/502/3298 Providing independent advocacy to adults Y/502/3299 Independent advocacy with children and young people F/502/3300 Providing independent mental capacity advocacy – deprivation of liberty safeguards
F/502/3300 Providing independent mental capacity advocacy – deprivation of liberty safeguards	F/502/3295 Independent mental capacity advocacy J/502/3296 Independent mental health advocacy L/502/3297 Providing independent advocacy management R/502/3298 Providing independent advocacy to adults Y/502/3299 Independent advocacy with children and young people
J/502/3296 Independent mental health advocacy	F/502/3295 Independent mental capacity advocacy L/502/3297 Providing independent advocacy management R/502/3298 Providing independent advocacy to adults Y/502/3299 Independent advocacy with children and young people F/502/3300 Providing independent mental capacity advocacy – deprivation of liberty safeguards

<p>L/502/3297 Providing independent advocacy management</p>	<p>F/502/3295 Independent mental capacity advocacy J/502/3296 Independent mental health advocacy R/502/3298 Providing independent advocacy to adults Y/502/3299 Independent advocacy with children and young people F/502/3300 Providing independent mental capacity advocacy – deprivation of liberty safeguards</p>
<p>R/502/3298 Providing independent advocacy to adults</p>	<p>F/502/3295 Independent mental capacity advocacy J/502/3296 Independent mental health advocacy L/502/3297 Providing independent advocacy management Y/502/3299 Independent advocacy with children and young people F/502/3300 Providing independent mental capacity advocacy – deprivation of liberty safeguards</p>
<p>Y/502/3299 Independent advocacy with children and young people</p>	<p>F/502/3295 Independent mental capacity advocacy J/502/3296 Independent mental health advocacy L/502/3297 Providing independent advocacy management R/502/3298 Providing independent advocacy to adults F/502/3300 Providing independent mental capacity advocacy – deprivation of liberty safeguards</p>

Target Audience

Learners will be advanced practitioners, managers or team leaders in Health and Social Care and Children and Young People's Services.

This qualification is regulated for learners aged 19 years and older.

It is recommended that learners hold a Level 3 qualification in a related area.

Progression Opportunities

This qualification provides learners with an opportunity to demonstrate their experience in management roles such as a Care Manager, Children's Centre Manager, Assistant Manager, Deputy Manager, Scheme Manager, Day Care Manager.

Learners may progress on to a wide range of job roles depending on the pathway taken. Learners may progress on to a degree in a related discipline.

Funding

For details on eligibility for government funding please refer to:

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

QUALIFICATION UNITS

Unit Title Use and develop systems that promote communication
Unit Number F/602/2335
Level 5
Credit Value 3
GLH 24

Unit Aim

This unit provides learners with the knowledge and skills required to develop communication systems for meeting individual outcomes and promoting partnership working. The unit explores the challenges and barriers to communication and the importance of effective management of information.

Learning outcome The learner will	Assessment criteria The learner can
1. Be able to address the range of communication requirements in own role	1.1 Review the range of groups and individuals whose communication needs must be addressed in own job role 1.2 Explain how to support effective communication within own job role 1.3 Analyse the barriers and challenges to communication within own job role 1.4 Implement a strategy to overcome communication barriers 1.5 Use different means of communication to meet different needs
2. Be able to improve communication systems and practices that support positive outcomes for individuals	2.1 Monitor the effectiveness of communication systems and practices 2.2 Evaluate the effectiveness of existing communication systems and practices 2.3 Propose improvements to communication systems and practices to address any shortcomings 2.4 Lead the implementation of revised communication systems and practices
3. Be able to improve communication systems to support partnership working	3.1 Use communication systems to promote partnership working 3.2 Compare the effectiveness of different communications systems for partnership working 3.3 Propose improvements to communication systems for partnership working
4. Be able to use systems for effective information management	4.1 Explain legal and ethical tensions between maintaining confidentiality and sharing information

	<p>4.2 Analyse the essential features of information sharing agreements within and between organisations</p> <p>4.3 Demonstrate use of information management systems that meet legal and ethical requirements</p>
<p>Additional information</p>	
<p>Means of communication may include:</p> <ul style="list-style-type: none"> • Verbal • Non-verbal • Sign • Pictorial • Written • Electronic • Assisted • Personal • Organisational • Formal • Informal • Public (information/promotional) <p>Partnership working: Working effectively together with people, professionals, agencies and organisations to enhance the wellbeing of people and support positive and improved outcomes.</p>	
<p>Assessment requirements specified by a sector or regulatory body (if appropriate)</p>	
<p>This unit must be assessed in accordance with Skills for Care and Development's RQF Assessment Principles.</p> <p>Learning Outcomes 1, 2, 3 and 4 must be assessed in the work setting.</p>	
<p>Details of the relationship of the unit and relevant national occupational standards</p>	
<p>LMCS E1 HSC 41</p>	

Unit Title Promote professional development
Unit Number L/602/2578
Level 4
Credit Value 4
GLH 33

Unit Aim

This unit provides learners with the knowledge and skills required to maintain the currency of their knowledge and skills and to continually reflect on and improve practice.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand principles of professional development	1.1 Explain the importance of continually improving knowledge and practice 1.2 Analyse potential barriers to professional development 1.3 Compare the use of different sources and systems of support for professional development 1.4 Explain factors to consider when selecting opportunities and activities for keeping knowledge and practice up to date
2. Be able to prioritise goals and targets for own professional development	2.1 Evaluate own knowledge and performance against standards and benchmarks 2.2 Prioritise development goals and targets to meet expected standards
3. Be able to prepare a professional development plan	3.1 Select learning opportunities to meet development objectives and reflect personal learning style 3.2 Produce a plan for own professional development, using an appropriate source of support 3.3 Establish a process to evaluate the effectiveness of the plan
4. Be able to improve performance through reflective practice	4.1 Compare models of reflective practice 4.2 Explain the importance of reflective practice to improve performance 4.3 Use reflective practice and feedback from others to improve performance 4.4 Evaluate how practice has been improved through: <ul style="list-style-type: none"> • reflection on best practice

	<ul style="list-style-type: none"> • reflection on failures and mistakes
Additional information	
<p>Sources and systems of support may include:</p> <ul style="list-style-type: none"> • Formal support • Informal support • Supervision • Appraisal • Mentoring • Within the organisation • Beyond the organisation <p>Standards and benchmarks may include:</p> <ul style="list-style-type: none"> • Codes of practice • Regulations • Minimum/essential standards 	
Assessment requirements specified by a sector or regulatory body (if appropriate)	
<p>This unit must be assessed in accordance with Skills for Care and Development's RQF Assessment Principles</p> <p>Learning Outcomes 2, 3 and 4 must be assessed in the work setting.</p>	
Details of the relationship of the unit and relevant national occupational standards	
<p>HSC 43, LMCS A1, D3 CCLD 429, LDSS/GCU6</p>	

Unit Title **Champion equality, diversity and inclusion**
Unit Number **Y/602/3183**
Level **5**
Credit Value **4**
GLH **34**

Unit Aim

This unit provides learners with the knowledge and skills required for a whole systems approach to equality, diversity and inclusion. The unit explores models of practice and requires demonstration of skills and understanding of systems and processes.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand diversity, equality and inclusion in own area of responsibility	1.1 Explain models of practice that underpin equality, diversity and inclusion in own area of responsibility 1.2 Analyse the potential effects of barriers to equality and inclusion in own area of responsibility 1.3 Analyse the impact of legislation and policy initiatives on the promotion of equality, diversity and inclusion in own area of responsibility
2. Be able to champion diversity, equality and inclusion	2.1 Promote equality, diversity and inclusion in policy and practice 2.2 Challenge discrimination and exclusion in policy and practice 2.3 Provide others with information about: <ul style="list-style-type: none"> • the effects of discrimination • the impact of inclusion • the value of diversity 2.4 Support others to challenge discrimination and exclusion
3. Understand how to develop systems and processes that promote diversity, equality and inclusion	3.1 Analyse how systems and processes can promote equality and inclusion or reinforce discrimination and exclusion 3.2 Evaluate the effectiveness of systems and processes in promoting equality, diversity and inclusion in own area of responsibility 3.3 Propose improvements to address gaps
4. Be able to manage the risks presented when balancing individual rights and professional duty of care	4.1 Describe ethical dilemmas that may arise in own area of responsibility when balancing individual rights and duty of care 4.2 Explain the principle of informed choice

	<p>4.3 Explain how issues of individual capacity may affect informed choice</p> <p>4.4 Propose a strategy to manage risks when balancing individual rights and duty of care in own area of responsibility</p>
Additional information	
Assessment requirements specified by a sector or regulatory body (if appropriate)	
<p>This unit must be assessed in accordance with Skills for Care and Development's RQF Assessment Principles</p> <p>Learning Outcomes 2 and 4 must be assessed in the work setting.</p>	
Details of the relationship of the unit and relevant national occupational standards	
<p>LMCS B1 HSC 45 LDSS/GCU 5 LDSS 408</p>	

Unit Title **Develop health and safety and risk management policies, procedures and practices in health and social care or children and young people’s settings**

Unit Number **K/602/3172**

Level **5**

Credit Value **5**

GLH **33**

Unit Aim

This unit provides learners with the knowledge and skills required for Health and Safety and Risk Management, including the development of policies, procedures and practices in health and social care or children and young people’s settings.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the current legislative framework and organisational health, safety and risk management policies, procedures and practices that are relevant to health, and social care or children and young people’s settings	1.1 Explain the legislative framework for health, safety and risk management in the work setting 1.1 Analyse how policies, procedures and practices in own setting meet health, safety and risk management requirements
2. Be able to implement and monitor compliance with health, safety and risk management requirements in health and social care or children and young people’s settings	2.1 Demonstrate compliance with health, safety and risk management procedures 2.2 Support others to comply with legislative and organisational health, safety and risk management policies, procedures and practices relevant to their work 2.3 Explain the actions to take when health, safety and risk management, procedures and practices are not being complied with 2.4 Complete records and reports on health, safety and risk management issues according to legislative and organisational requirements
3. Be able to lead the implementation of policies, procedures and practices to manage risk to individuals and others in health and social care or children and young people’s settings	3.1 Contribute to development of policies, procedures and practices to identify, assess and manage risk to individuals and others 3.2 Work with individuals and others to assess potential risks and hazards 3.3 Work with individuals and others to manage potential risks and hazards

<p>4. Be able to promote a culture where needs and risks are balanced with health and safety practice in health and social care or children and young people’s settings</p>	<p>4.1 Work with individuals to balance the management of risk with individual rights and the views of others</p> <p>4.2 Work with individuals and others to develop a balanced approach to risk management that takes into account the benefits for individuals of risk taking</p> <p>4.3 Evaluate own practice in promoting a balanced approach to risk management</p> <p>4.4 Analyse how helping others to understand the balance between risk and rights improves practice</p>
<p>5. Be able to improve health, safety and risk management policies, procedures and practices in health and social care or children and young people’s settings</p>	<p>5.1 Obtain feedback on health, safety and risk management policies, procedures and practices from individuals and others</p> <p>5.2 Evaluate the health, safety and risk management policies, procedures and practices within the work setting.</p> <p>5.3 Identify areas of policies, procedures and practices that need improvement to ensure safety and protection in the work setting</p> <p>5.4 Recommend changes to policies, procedures and practices that ensure safety and protection in the work setting</p>

Additional information

Others may include:

- Self
- Workers/practitioners
- Carers
- Significant others
- Visitors to the work setting
- Inspectors/regulators

An **individual** is someone accessing care or support.

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

This unit must be assessed in accordance with Skills for Care and Development's RQF Assessment Principles.

Learning Outcomes 2, 3, 4 and 5 must be assessed in the work setting.

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

LMCS C1, HSC 42, MSC E5, E6, E7, CCLD 428

Unit Title	Work in partnership in health and social care or children and young people's settings
Unit Number	A/602/3189
Level	4
Credit Value	4
GLH	26

Unit Aim

This unit provides learners with the knowledge and skills required to implement and promote effective partnership working.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand partnership working	1.1 Identify the features of effective partnership working 1.2 Explain the importance of partnership working with: <ul style="list-style-type: none"> • Colleagues • Other professionals • Others 1.3 Analyse how partnership working delivers better outcomes 1.4 Explain how to overcome barriers to partnership working
2. Be able to establish and maintain working relationships with colleagues	2.1 Explain own role and responsibilities in working with colleagues 2.2 Develop and agree common objectives when working with colleagues 2.3 Evaluate own working relationship with colleagues 2.4 Deal constructively with any conflict that may arise with colleagues
3. Be able to establish and maintain working relationships with other professionals	3.1 Explain own role and responsibilities in working with other professionals 3.2 Develop procedures for effective working relationships with other professionals 3.3 Agree common objectives when working with other professionals within the boundaries of own role and responsibilities 3.4 Evaluate procedures for working with other professionals 3.5 Deal constructively with any conflict that may

	arise with other professionals
4. Be able to work in partnership with others	4.1 Analyse the importance of working in partnership with others 4.2 Develop procedures for effective working relationships with others 4.3 Agree common objectives when working with others within the boundaries of own role and responsibilities 4.4 Evaluate procedures for working with others 4.5 Deal constructively with any conflict that may arise with others
Additional information	
<p>Other professionals may include:</p> <ul style="list-style-type: none"> Workers from other agencies or organisations Advocates Independent visitors <p>Others may include:</p> <ul style="list-style-type: none"> Individuals Children and young people Families Carers Friends of the individual Advocates 	
Assessment requirements specified by a sector or regulatory body (if appropriate)	
<p>This unit must be assessed in accordance with Skills for Care and Development's RQF Assessment Principles.</p> <p>Learning Outcomes 2, 3 and 4 must be assessed in the work setting.</p>	
Details of the relationship of the unit and relevant national occupational standards	
LMCS B1, HSC 41, CCLD 405, 406	

Unit Title	Undertake a research project within services for health and social care or children and young people
Unit Number	J/602/3499
Level	5
Credit Value	10
GLH	80

Unit Aim

This unit provides learners with the knowledge and skills required to undertake a research project within services for health and social care or children or young people.

Learning outcome The learner will	Assessment criteria The learner can
1. Be able to justify a topic for research within services for health and social care or children and young people	1.1 Identify the area for the research project 1.2 Develop the aims and objectives of the research project 1.3 Explain ethical considerations that apply to the area of the research project 1.4 Complete a literature review of chosen area of research
2. Understand how the components of research are used	2.1 Critically compare different types of research 2.2 Evaluate a range of methods that can be used to collect data 2.3 Identify a range of tools that can be used to analyse data 2.4 Explain the importance of validity and reliability of data used within research
3. Be able to conduct a research project within services for health and social care or children and young people	3.1 Identify sources of support whilst conducting a research project 3.2 Formulate a detailed plan for a research project 3.3 Select research methods for the project 3.4 Develop research questions to be used within the project 3.5 Conduct the research using identified research methods 3.6 Record and collate data
4. Be able to analyse research findings	4.1 Use data analysis methods to analyse the data 4.2 Draw conclusions from findings 4.3 Reflect how own research findings substantiate initial literature review 4.4 Make recommendations related to area of research

	4.5 Identify potential uses for the research findings within practice
Additional information	
<p>Aims and objectives – the reasons, understanding and methods for conducting the research project</p> <p>Ethical considerations – confidentiality, sensitivity of data, seeking agreements with participants</p>	
Assessment requirements specified by a sector or regulatory body (if appropriate)	
This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.	
Details of the relationship of the unit and relevant national occupational standards	
CCLD 420 Undertake a research project	

Unit Title **Promote good practice in the support of individuals with autistic spectrum conditions**

Unit Number **A/601/5318**

Level **5**

Credit Value **7**

GLH **20**

Unit Aim

This unit is aimed at learners who manage and support others to provide quality outcomes for individuals with autistic spectrum conditions. It considers issues such as communication and support strategies, partnership working and ways of supporting staff. It also addresses the complexity of theory and practice in the area of autistic spectrum conditions.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand how the different and evolving theories about autism reflect the complexity of autistic spectrum conditions	1.1 Analyse the defining features of autistic spectrum conditions and the impact on practice 1.2 Evaluate the shift from the categorical view to the spectrum view of autism, with reference to different conditions on the autistic spectrum 1.3 Identify the implications for practice of controversies concerning the search for cures and interventions for autistic spectrum conditions 1.4 Review historical and current perspectives on the causes of autism 1.5 Explain the importance of a person centred approach, focussing on the individual not the diagnosis 1.6 Analyse how the stereotyped views and prejudice of others impact on the lives of individuals with an autistic spectrum condition
2. Understand the implications of the legal and policy framework underpinning the support of individuals with autistic spectrum conditions	2.1 Identify the legislation and national and local policies and guidance relevant to the support of individuals with autistic spectrum conditions 2.2 Explain the applicability of legislation, policies and guidance to people, services or situations 2.3 Explain the impact of legislation, policies and guidance on the provision of services 2.4 Explain the influence of autism advocacy groups in highlighting shortcomings in

	legislation/policy/guidance and in pressing for change
3. Be able to promote good practice in the support of individuals with an autistic spectrum condition	<p>3.1 Enable workers to apply different approaches, interventions and strategies according to the individual’s needs and wishes identified in their person centered support plan</p> <p>3.2 Develop practice guidance to maximize consistency and stability in the environment</p> <p>3.3 Ensure use of structured activities to optimise individuals’ learning</p> <p>3.4 Demonstrate ways of supporting others to minimise the vulnerability of individuals with autistic spectrum conditions</p> <p>3.5 Implement strategies which support others to apply, monitor and review positive behaviour support with individuals</p> <p>3.6 Support others to work in partnership with parents and/or other informal carers or support networks</p> <p>3.7 Evaluate working practices and strategies in order to maintain good practice and recommend changes</p>
4. Be able to promote to others positive communication strategies for individuals with an autistic spectrum condition	<p>4.1 Analyse the implications for practice of the link between behaviour and communication</p> <p>4.2 Develop strategies to support others to understand the link between behaviour and communication</p> <p>4.3 Liaise with family/carers and relevant professionals involved with individuals to maximise the effectiveness of communication</p> <p>4.4 Support others to implement alternative and augmented communication systems which enable individuals to communicate effectively with those around them</p>
5. Be able to implement strategies to support individuals with an autistic spectrum condition to manage their sensory world	<p>5.1 Explain the types of sensory and perceptual difficulties that many individuals with an autistic spectrum condition experience</p> <p>5.2 Develop, with appropriate professional support, a sensory management strategy Implement a sensory management strategy to meet the needs of individuals who have problems with sensory processing</p> <p>5.3 Create environments which prevent sensory overload or increase sensory stimulation, depending on the needs of the individual</p>

Additional information
<p>The terminology chosen to describe the Autistic Spectrum in this unit is Autistic Spectrum Condition (ASC), one of several different usages in this field. In diagnosis and other clinical and research settings, the more usual term is Autism Spectrum Disorders (ASDs). Other usages, such as 'autism' as an umbrella term for the spectrum, are also frequently used informally and by organisations such as the National Autistic Society. ASC has been chosen here since it forms a more neutral and less medical phrase than ASDs in this context.</p> <p>An individual is someone requiring care or support</p> <p>Different approaches should include multi-agency approaches</p> <p>Vulnerability covers areas such as: being exploited or abused; violating the law without realising s/he is doing something harmful; being the victim of cyber-bullying</p> <p>Behaviour includes non-verbal communication and behaviour that can present challenges</p> <p>Relevant Professionals can include: speech and language professionals, psychologists, specialist nurses</p>
Assessment requirements specified by a sector or regulatory body (if appropriate)
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p> <p>Learning Outcomes 3, 4 and 5 must be assessed in a real work environment.</p>
Details of the relationship of the unit and relevant national occupational standards
<p>N/A</p>

Unit Title Principles of supporting individuals with a learning disability regarding sexuality and sexual health
Unit Number A/601/6274
Level 3
Credit Value 3
GLH 21

Unit Aim

The unit introduces the principles of supporting individuals with a learning disability regarding sexuality and sexual health. It gives a broad summary of sexuality, sexual development and sexual health. The unit also introduces relevant legislation that relates to the development of sexuality for an individual with a learning disability.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the development of human sexuality	1.1 Define the terms: sexuality, sexual health, sexual orientation, and sexual expression 1.2 Explain main sexual development milestones throughout an individual’s lifespan
2. Understand how the sexual development of individuals with a learning disability can differ	2.1 Describe how genetic factors can influence the sexual development, sexual expression and sexual health of an individual with a learning disability 2.2 Describe how socio-cultural factors and religious beliefs can influence an individual’s sexual development 2.3 Explain how mental capacity can influence sexual development, sexual experiences, sexual expression and sexual health
3. Understand the issues of sexual health and how these can be supported	3.1 Explain the key features of sexual health and well-being and how this relates to an individual’s overall health and well-being 3.2 Identify sexual health issues that differently affect men and women 3.3 Explain how sexual health issues can be supported within plans for healthcare 3.4 Identify local services that exist to support sexual health for individuals

<p>4. Understand relevant legislation influencing the support of sexuality and sexual health for individuals with learning disabilities</p>	<p>4.1 Explain key parts of relevant legislation relating to sexuality and sexual health for individuals and how this influences practice</p>
<p>5. Know how to support the sexual expression of an individual with a learning disability</p>	<p>5.1 Explain how own values, belief systems and experiences may impact on support for individuals with learning disabilities</p> <p>5.2 Explain why the development of a meaningful relationship can be important to the development of an individual's sexuality</p> <p>5.3 Describe different ways an individual can express themselves sexually and how individual preferences can be supported</p> <p>5.4 Explain how to support an individual to keep safe sexually, to minimise sexual vulnerability, and to avoid instances of abusive experiences</p>

Additional information

An **individual** is someone requiring care or support.

The principles of human rights underpin this unit. Where **mental capacity** is referred to it should be remembered that the Mental Capacity Act (2007) states that everyone should be treated as able to make their own decisions until it is shown that they are not.

Key features of sexual health may include: contraception, hygiene, sexually transmitted infections, etc.

Plans for health care – in England this refers to / should include Health Action Plans.

Relevant legislation – any legislation related to supporting individuals with learning disabilities with sexuality and sexual health.

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

Links to HSC 311, 331, 332, 356

Unit Title **Develop and implement policies and procedures to support the safeguarding of children and young people**

Unit Number **A/601/9370**

Level **5**

Credit Value **6**

GLH **26**

Unit Aim

This unit is designed to prepare learners to develop and implement policies and procedures for safeguarding children and young people.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the impact of current legislation that underpins the safeguarding of children and young people	1.1 Outline the current legislation that underpins the safeguarding of children and young people within own UK Home Nation 1.2 Evaluate how national and local guidelines, policies and procedures for safeguarding affect day to day work with children and young people 1.3 Explain how the processes used by own work setting comply with legislation that covers data protection, information handling and sharing
1. Be able to support the review of policies and procedures for safeguarding children and young people	2.1 Investigate why inquiries and serious case reviews are required and how sharing of findings affects practice 2.2 Identify the policies and procedures required in the work setting for safeguarding children and young people 2.3 Develop the process for reviewing the process for safeguarding policies and procedures 2.4 Evaluate the impact of a child/young person centred approach to safeguarding on policies and procedures 2.5 Liaise with different organisations as part of the development or review process of policies and procedures for safeguarding children and young people
2. Be able to implement policies and procedures for safeguarding children and young people	3.1 Support the implementation of policies and procedures for safeguarding children and young people 3.2 Mentor and support other practitioners to develop the skills to safeguard children and young people

<p>3. Be able to lead practice in supporting children and young people’s wellbeing and resilience</p>	<p>4.1 Justify how promoting well-being and resilience supports the safeguarding of children and young people</p> <p>4.2 Review how children or young people’s resilience and well-being are supported in own work setting</p> <p>4.3 Support others to understand the importance of well-being and resilience in the context of safeguarding</p>
---	---

Additional information

- 1.2. Day to day work** e.g.:
- Childcare practice
 - Child protection
 - Risk assessment
 - Ensuring the voice of the child or young person is heard (e.g., providing advocacy services)
 - Supporting children and young people and others who may be expressing concerns
 - Working practices that protect practitioners and children/ young people
- 2.2. Policies and procedures required for safeguarding** e.g.
- Listening to children and young people
 - Sharing concerns and recording/ reporting incidents
 - Dealing with allegations
 - Duty of care
 - Whistleblowing
 - Propriety and behaviour
 - Physical contact/ Intimate personal care
 - Off site visits
 - Photography and video
 - Timely and accurate information sharing
 - Partnership working
- 2.5. Different Organisations** e.g.
- Social services
 - NSPCC
 - Health visiting
 - GP
 - Probation
 - Police
 - School
 - Psychology service

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

CCLD 402 Support policies, procedures and practice to safeguard children and ensure their inclusion and well-being

Unit Title **Lead and manage group living for children**
Unit Number **A/602/3175**
Level **5**
Credit Value **6**
GLH **43**

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills required to lead and manage the group living for children and young people.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the legal, policy, rights and theoretical framework for group living for children and young people	1.1 Review current theoretical approaches to group living provision for children and young people 1.2 Explain the legislative and rights frameworks that underpin work with children and young people in a group living provision 1.3 Analyse the impact of current policies, regulations and legislation on group living provision for children and young people 1.4 Describe how the frameworks are used to improve the life chances and outcomes of children and young people in group living provision
2. Be able to lead the planning, implementation and review of daily living activities for children and young people	2.1 Support others to plan and implement daily living activities that meet the needs, preferences and aspirations of children and young people 2.2 Develop systems to ensure children and young people are central to decisions about their daily living activities 2.3 Oversee the review of daily living activities
3. Be able to promote positive outcomes in a group living environment	3.1 Evaluate how group living can promote positive outcomes for children and young people 3.2 Ensure that children and young people are supported to maintain and develop relationships from inside or outside the group living environment 3.3 Demonstrate effective approaches to resolving any conflicts and tensions in group living

<p>4. Be able to manage a positive group living environment</p>	<p>4.1 Explain how the physical environment and ethos of the group living environment can promote the well-being of children and young people</p> <p>4.2 Evaluate the effects of the working schedules and patterns on a group living environment</p> <p>4.3 Recommend changes to working schedules and patterns as a result of evaluation</p> <p>4.4 Develop a workforce development plan for the group living environment</p> <p>4.5 Support staff to recognise professional boundaries whilst developing and maintaining positive relationships with children and young people</p> <p>4.6 Use appropriate methods to raise staff awareness of the group dynamics in a group living environment</p> <p>4.7 Review the effectiveness of approaches to resource management in maintaining a positive group living environment</p>
<p>5. Be able to safeguard children and young people in a group living environment</p>	<p>5.1 Implement systems to protect children and young people in a group living environment from risk of harm or abuse</p> <p>5.2 Review systems against legislation, policies and procedures and key messages from research and child protection inquiries for a group living environment</p>
<p>Additional information</p>	
<p>Well-being means a subjective state of being content and healthy.</p>	
<p>Assessment requirements specified by a sector or regulatory body (if appropriate)</p>	
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p> <p>Learning Outcomes 2, 3, 4 and 5 must be assessed in the work setting.</p>	
<p>Details of the relationship of the unit and relevant national occupational standards</p>	
<p>LMCS B7</p>	

Unit Title Identify and act upon immediate risk of danger to substance misusers
Unit Number D/501/0585
Level 3
Credit Value 4
GLH 24

Unit Aim

This unit is about identifying the immediate risk of danger to individuals who have used drugs, alcohol or other substances, acting upon the immediate risk of danger and supporting the individual once the risk of danger has passed.

Learning outcome The learner will	Assessment criteria The learner can
1. Identify immediate risk of danger to substance misusers	1.2 Describe the range of different substances subject to misuse and their effects (e.g., illegal drugs, prescription drugs, over the counter drugs, alcohol, solvents) 1.3 Describe any signs of immediate risk of danger which may include risk of <ul style="list-style-type: none"> • overdose • individuals causing injury or harm to themselves or others (e.g., family members) 1.5 Explain the relevant policies and procedures for dealing with risk of danger to individuals and others
2. Act upon immediate risk of danger to substance misusers	2.1 Describe how to make the individual aware that they are available and willing to help 2.2 Obtain information on the substance used from the individual or any person near the individual 2.3 Obtain personal details from the individual or any person near the individual 2.4 Encourage the individual to describe any pain or discomfort they may be experiencing 2.5 Take actions which are appropriate to the substance used and the effect it has had on the individual e.g. <ul style="list-style-type: none"> • calming the individual, if the individual is in an agitated state, if safe to do so • reviving the individual, if the individual seems to be in a withdrawn state 1.6 Show how to interact with the individual in a manner which recognises their needs and rights

	<p>1.7 Demonstrate how to make the environment as safe as possible, including how and when to move individuals for their safety</p> <p>1.8 Demonstrate when and how to request any first aid treatment/support</p> <p>1.9 Support and encourage the individual to recognise the consequences of the episode and to seek further support and assistance (e.g. to access to relevant agencies and services)</p> <p>2.4 Record all information and report to appropriate person in the required format.</p>
--	--

Additional information

The nature of this unit means that most of the evidence must come from real work activities.

Simulation can only be used in exceptional circumstances for example:
Where performance is critical or high risk, happens infrequently or happens frequently but the presence of an assessor/observer would prevent the Independent Advocacy relationship developing.

Simulation must be discussed and agreed in advance with the External Verifier. The evidence must reflect, at all times, the policies and procedures of the workplace, as linked to current legislation and the values and principles for good practice in independent advocacy.

Required sources of performance and knowledge evidence:
Direct Observation and/or Expert Witness Testimony are the required assessment method to be used to evidence some part of this unit.

If the assessor is unable to observe the candidate they will identify an expert witness in the workplace who will provide testimony of the learner’s work-based performance. The assessor or expert witness will observe the learner in real work activities and this is likely to provide most of the evidence for the assessment criteria for this unit.

Other sources of performance and knowledge evidence:
The assessor will identify other sources of evidence to ensure that the most reliable and efficient mix of evidence gathering methods from the list below. This will ensure that all learning outcomes and assessment criteria are met, and that the consistency of the learner’s performance can be established.

- Work products
- Professional discussion
- Learner reflective accounts
- Questions asked by assessors

- Witness testimonies
- Projects/Assignments/RPL
- Case studies

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

This unit is directly related to the Skills for Health/DANOS national occupational standard:

AB5 Identify and act upon immediate risk of danger to substance users

This also appears in Health and Social Care Standards as HSC342.

Unit Title **Lead and manage practice in dementia care**
Unit Number **D/504/2212**
Level **5**
Credit Value **6**
GLH **41**

Unit Aim

The purpose of this unit is to develop the learner’s knowledge, understanding and skills in leading and managing dementia care services.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand current policy and practice guidance for dementia care	1.1 Analyse how current policy and practice guidance underpin service provision in dementia care 1.2 Explain why a person-centred approach is the benchmark for practice in dementia care
2. Be able to support others to develop an understanding of current research of the impact of dementia on individuals and their families	1.1 Support others to develop an understanding of the causes of dementia syndrome 1.2 Support others to develop an understanding of the impact of early onset dementia on individuals and their families 1.3 Support others to develop an understanding of the impact on the individuals with dementia and their families of: <ul style="list-style-type: none"> • Diagnosis • Treatment of dementia
3. Be able to lead practice that promotes the wellbeing of individuals with dementia	3.1 Manage a service that demonstrates a person-centred approach 3.2 Lead practice that supports staff to explore the stories and histories of individuals 3.1 Lead practice that supports staff to evaluate how physical and social environments impact on the wellbeing of individuals with dementia 3.2 Lead practice that supports staff to influence changes to the physical environment that meet the needs of individuals with dementia 3.3 Lead practice that supports staff to influence changes to the social environment that meet the needs of individuals with dementia 3.4 Lead practice that supports staff to interact with individuals with dementia

	<p>3.5 Manage the ongoing assessment of the needs of individuals with dementia using a range of methods</p> <p>3.6 Support staff to contribute to care plans that reflect a person-centred approach.</p>
<p>4. Be able to lead practice that support staff to establish and maintain relationships with carers of individuals with dementia</p>	<p>4.1 Lead practice that supports staff to evaluate the impact on carers of supporting an individual with dementia</p> <p>4.2 Lead practice that supports staff to work in partnership with carers</p> <p>4.3 Lead practice that supports staff to improve carers in assessment and care planning</p> <p>4.4 Explain how to support staff to resolve conflicts with carers</p>
<p>5. Be able to support staff to deliver dementia care</p>	<p>5.1 Evaluate the potential impact on staff when supporting an individual with dementia.</p> <p>5.2 Implement strategies to support staff who are delivering dementia care</p> <p>5.3 Provide learning and development opportunities to staff to enhance their knowledge, understanding and skills for dementia care</p>
<p>6. Be able to develop own practice in leading the delivery of dementia care</p>	<p>6.1 Reflect on own practice in leading and managing the delivery of dementia care</p> <p>6.2 Develop plan to improve own practice in leading and managing dementia care</p>

Additional information

The **individual** is the person requiring care or support.

Influence may include:

- raising awareness in families
- suggested changes to care environment
- team meetings
- partnership working

Range of methods should include:

- family
- friends
- other unpaid carers

Strategies may include:

- supervision
- counselling
- peer mentoring
- team meetings

- care reviews
- learning and development opportunities

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

N/A

Unit Title **Support families who have had a child with a disability**
Unit Number **D/601/5750**
Level **3**
Credit Value **3**
GLH **23**

Unit Aim

This unit is aimed at those whose role includes supporting families who have a child with sensory, physical or learning disabilities. It addresses emotional needs and resource needs, and it also addresses working with other professionals and agencies.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the impact on a family of having a child with a disability	1.1 Describe the emotional impact that a diagnosis can have on families 1.2 Explain how the impact of having a child with a disability can be rewarding and/or challenging 1.3 Explain the emotional experience that families may have after diagnosis, using theories of loss 1.4 Explain how having a child with a disability may affect interpersonal relationships within a family 1.5 Identify the changes that may need to be made to family life, social life, work and accommodation 1.6 Explain why it is important for family members to have opportunities to explore feelings and experiences
2. Be able to support families who have a child with a disability	2.1 Establish with the family the support they require 2.2 Work with the family to identify different ways that needs can be met 2.3 Support family members to discuss feelings and experiences related to having a child with a disability
3. Be able to support families with a child with a disability to use informal networks and community resources	3.1 Explain what informal networks and community resources there are for children with disabilities and their families 3.2 Give information to a family about community resources and informal

	<p>networks to enable them to make choices</p> <p>3.3 Support a family to use community resources and informal networks</p>
<p>4. Be able to work in partnership with other professionals and agencies to support families with a child with a disability</p>	<p>4.1 Identify support and resources that a child with a disability may need</p> <p>4.2 Investigate the roles of other professionals and agencies that may provide support to families with a child with a disability</p> <p>4.3 Provide information to a family about professionals and agencies that may provide support</p> <p>4.4 Identify when referrals should be made to other professionals and/or agencies</p> <p>4.5 Demonstrate partnership working with other professionals and agencies to provide support to families with a child with a disability</p> <p>4.6 Review the outcomes for the family of partnership working</p> <p>4.7 Identify and report any additional support required by the family</p>

Additional information

Diagnosis e.g. a range of

- Physical disabilities
- Learning disabilities
- Sensory disabilities

Interpersonal relationships within the family
Examples are:

- Relationships with siblings
- Relationships between siblings and parents
- Relationships with grandparents

Other professionals and agencies

- Teachers
- Educational Psychologist
- Educational Welfare
- Physiotherapist
- Occupational Therapist
- Nurse
- GP
- Social Worker

- Dietician
- Speech and Language Therapist

Support can include:

- Support with personal care
- Support with equipment
- Advocacy
- Support with benefits
- Advice
- Housing

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

N/A

Unit Title Understand how to manage a team
Unit Number D/602/3170
Level 4
Credit Value 3
GLH 20

Unit Aim

The purpose of this unit is to assess the learner’s knowledge and understanding necessary to support and enable team development.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the attributes of effective team performance	1.1 Define the key features of effective team performance 1.2 Compare the models used to link individual roles and development with team performance
2. Know how to support team development	2.1 Analyse the stages of team development 2.2 Identify barriers to success and how these can be overcome 2.3 Analyse the effect group norms may have on team development 2.4 Differentiate between beneficial conflict and destructive conflict in teams 2.5 Evaluate methods of dealing with conflict within a team 2.4 Compare methods of developing and establishing trust and accountability within a team
3. Know how to promote shared purpose within a team	3.1 Evaluate ways of promoting a shared vision within a team 3.2 Review approaches that encourage sharing of skills and knowledge between team members
4. Know how to promote a 'no-blame culture' within a team	4.1 Define the meaning of a 'no blame' culture' 4.2 Evaluate the benefits of a 'no blame culture' 4.3 Describe how systems and processes can be used to support a no blame culture 4.4 Describe strategies for managing risks associated with a no blame culture

<p>5. Understand different styles of leadership and management</p>	<p>5.1 Compare different styles of leadership and management 5.2 Reflect on adjustments to own leadership and management style that may be required in different circumstances</p>
<p>Additional information</p>	
<p>Models may include:</p> <ul style="list-style-type: none"> • Team development activities • Induction into a new team <p>Approaches may include groups such as quality circles</p>	
<p>Assessment requirements specified by a sector or regulatory body (if appropriate)</p>	
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p>	
<p>Details of the relationship of the unit and relevant national occupational standards</p>	
<p>LMCS A1, B1 CCLD 413, 425</p>	

Unit Title Independent Mental Capacity Advocacy
Unit Number F/502/3295
Level 4
Credit Value 12
GLH 35

Unit Aim

The unit aims to support candidates to develop the practical skills and knowledge required to provide IMCA support within the Mental Capacity Act 2005.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand and use the Mental Capacity Act	1.1 Explain key principles of the Mental Capacity Act 2005 1.2 Analyse powers within the Mental Capacity Act 2005 1.3 Use research skills to identify a range of provisions within the Mental Capacity Act 2005 1.4 Explain who may be affected by the Mental Capacity Act 2005 and why 1.5 Use the Code of Practice
2. Provide Independent Mental Capacity Advocacy (IMCA)	2.1 Use the Mental Capacity Act 2005 to identify when there is a duty and a power to instruct an IMCA 2.2 Analyse the role and responsibilities of an IMCA 2.3 Summarise rights afforded to an IMCA within the Mental Capacity Act 2005 2.4 Prioritise a range of case work 2.5 Assess a range of potential challenges which IMCAs can face in practice 2.6 Resolve practice dilemmas 2.7 Evaluate the differences between IMCA and general Advocacy 2.8 Assess and resolve conflicts of interest 2.9 Summarise the role of commissioners 2.10 Commit to using supervision 2.11 Signpost qualifying people to other services
3. Work with the decision maker	3.1 Identify the decision maker

	<p>3.2 Identify good practice in partnership working between the decision maker and the IMCA</p> <p>3.3 Resolve a range of dilemmas and challenges which may be faced</p> <p>3.4 Use referral processes which identify legal requirements for accepting a new client</p> <p>3.5 Evaluate the correctness of the assessment of capacity</p> <p>3.6 Identify the requirements for accepting referral when family are involved</p> <p>3.7 Identify which IMCA service is responsible to represent an individual in different geographical areas</p> <p>3.8 Respond to decision makers who do not practice partnership working</p> <p>3.9 Present to decision makers on what an IMCA can contribute</p>
<p>4. Challenge decisions made by the decision maker</p>	<p>4.1 Map out the decision making process within each area an IMCA may be involved</p> <p>4.2 Raise concerns during the decision making process</p> <p>4.3 Highlight concerns after the decision is made</p>
<p>5. Work with people who lack capacity</p>	<p>5.1 Use a range of methods to communicate with of people who lack capacity</p> <p>5.2 Use non instructed advocacy to identify the wishes and preferences of people receiving IMCA support</p> <p>5.3 Use strategies to work with people with dementia or learning disabilities</p> <p>5.4 Ascertain the wishes and preferences of people who lack capacity</p>
<p>6. Work with accommodation and care review referrals</p>	<p>6.1 Research information and establish options</p> <p>6.2 Evaluate the differences and similarities in a range of types of accommodation</p> <p>6.3 Identify a range of possible care packages to enable people to stay at home</p> <p>6.4 Assess the suitability of types of accommodation to individual</p>

	<p>6.5 Assess the impact the decision will have on the individual</p> <p>6.6 Use a range of information sources to suggest alternative courses of action</p> <p>6.7 Explain the function of a range of regulatory bodies</p>
7. Work with serious medical treatment referrals	<p>7.1 Summarise the criteria for serious medical treatment</p> <p>7.2 Research and gather information</p> <p>7.3 Assess the impact the decision will have on the individual</p> <p>7.4 Use a range of information sources to suggest alternative courses of action</p> <p>7.5 Obtain a second medical opinion where appropriate</p> <p>7.6 Explain the importance of seeking a second medical opinion</p> <p>7.7 Identify risks, benefits and ethical issues connected to medical treatments</p> <p>7.8 Explain the process of referral in medical systems to access treatment</p>
8. Work with adult protection referrals	<p>8.1 Identify the different stages at which the IMCA may be instructed within Adult Protection Procedures</p> <p>8.2 Identify a range of situations the IMCA may represent the individual during adult protection meetings</p> <p>8.3 Analyse and use local and national adult protection procedures</p> <p>8.4 Use the guidelines for IMCA in adult protection proceedings referrals</p> <p>8.5 Research and gather information</p> <p>8.6 Attend meetings where necessary</p> <p>8.7 Identify a range of protection plans which may be formulated within Adult Protection strategy meetings</p> <p>8.8 Summarise the issues involved in communicating with families in adult protection cases</p>
9. Construct an IMCA written report that meets statutory requirements	<p>9.1 Identify a range of issues that should be addressed within an IMCA report</p> <p>9.2 Identify what should never be in an IMCA report</p> <p>9.3 Write an IMCA report</p>

	9.4 Identify good practice in recording case work
	9.5 Explain the impact of data protection legislation on the recording of work

Additional information

- **Challenges:** including working with people who cannot instruct, working with professionals, challenging decisions, time constraint of role
- **Differences:** a range of differences between IMCA and general advocacy including differences in confidentiality boundaries, information sharing, seeking consent, taking instructions, accepting referrals and securing outcomes.
- **Key principles:** including the five key principles and best interests framework
- **Provisions:** new provisions within the Act including advance decisions to refuse treatment, Court of Protection, office of public guardian, lasting power of attorney and Court appointed deputies.
- **Dilemmas and challenges:** dilemmas faced when taking referrals, challenging decisions and accessing information
- **Evaluate:** identify requirements of the assessment of capacity and how IMCAs can raise concerns about the person’s capacity to make the referral decision.
- **Area:** including serious medical treatment, change of accommodation, protection of vulnerable adults and accommodation review.
- **Range of methods:** including verbal and non-verbal communication.
- **Information:** taken from inspection reports
- **Types of accommodation:** including supported living, residential care, nursing homes, sheltered housing and receiving support in one’s own home
- **Regulatory bodies:** including CQC and CSM.
- **Decision:** the impact a range of decisions could have on the individual including end of life decisions and Do not Attempt Resuscitation orders.
- **Guidelines:** ADASS guidance on the criteria for the use of IMCAs in safeguarding adult cases.

The nature of this unit means that most of the evidence must come from real work activities.

Simulation can only be used in exceptional circumstances for example: Where performance is critical or high risk, happens infrequently or happens frequently but the presence of an assessor/observer would prevent the Independent Advocacy relationship developing.

Simulation must be discussed and agreed in advance with the External Verifier. The evidence must reflect, at all times, the policies and procedures of the workplace, as linked to current legislation and the values and principles for good practice in independent advocacy.

Required sources of performance and knowledge evidence:

Direct Observation and/or Expert Witness Testimony are the required assessment method to be used to evidence some part of this unit.

If the assessor is unable to observe the candidate s/he will identify an expert witness in the workplace who will provide testimony of the candidate's work-based performance. The assessor or expert witness will observe the candidate in real work activities and this is likely to provide most of the evidence for the assessment criteria for this unit.

Other sources of performance and knowledge evidence:

The assessor will identify other sources of evidence to ensure that the most reliable and efficient mix of evidence gathering methods from the list below. This will ensure that all learning outcomes and assessment criteria are met and that the consistency of the candidate's performance can be established.

- Work products
- Professional discussion
- Candidate/ reflective accounts
- Questions asked by assessors
- Witness testimonies
- Projects/Assignments/RPL
- Case studies

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

AHP 17	Assist and support individuals to use total communication systems
GEN 12	Reflect on and evaluate your own values, priorities, interests and effectiveness
H16	Market and promote the service
H136	Communicate effectively with individuals and others
HSC 328	Contribute to care planning and review
HSC 368	Present individuals' needs and preferences
HSC 3199	Promote the values and principles underpinning best practice
HSC 41	Use and develop methods and systems to communicate record and report
HSC 45	Develop practices which promote choice, well-being and protection of all individuals
HSC 418	Work with individuals with mental health needs to negotiate and agree plans for addressing those needs
HSC 423	Assist individuals at formal hearings
HSC 431	Support individuals where abuse has been disclosed

HSC 434	Maintain and manage records and reports
HSC 437	Promote your organisation and its services to stakeholders
MH_1	Promote effective communication and relationships with people who are troubled or distressed

Unit Title Providing Independent Mental Capacity Advocacy - Deprivation of Liberty Safeguards
Unit Number F/502/3300
Level 4
Credit Value 5
GLH 35

Unit Aim

The unit aims to provide candidates with the practical skills and knowledge required to provide IMCA DOLS.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand legislation which affects people who may be subject to Deprivation of Liberty Safeguards or the formal provisions of the Mental Health Act	1.1 Identify when a IMCA DOLS must be instructed 1.2 Identify a range of factors which may determine whether a person is or is not being deprived of their liberty 1.3 Identify the managing authority and supervisory body in situations where someone may be deprived of their liberty 1.4 Analyse key principles and powers of the Mental Capacity Act 2005 1.5 Summarise the interplay between the Mental Capacity Act 2005 and Mental Health Act 1.6 Use the Code of Practice.
2. Provide the statutory IMCA DOLS service	2.1 Distinguish between standard and urgent authorisations 2.2 Identify the requirements of each of the six assessments for authorisations and who should undertake them 2.3 Summarise the roles and responsibilities for the three IMCA DOLS' roles 2.4 Identify factors which may or may not make a deprivation of liberty in a person's best interest. 2.5 Evaluate the different ways the IMCA can make representations in the assessment process

	<p>2.6 Use a range of methods to communicate with people who lack capacity</p> <p>2.7 Use non-instructed Advocacy to ascertain the wishes, feelings or preferences of an individual</p> <p>2.8 Provide a range of information to help an individual understand the process of deprivation of liberty</p> <p>2.9 Support an individual to engage with the process</p> <p>2.10 Represent an individual during assessment</p> <p>2.11 Support an individual to appeal.</p>
<p>3. Construct an IMCA DOLS written report that meets statutory requirements</p>	<p>3.1 Identify a range of issues that should be addressed within an IMCA DOLS report</p> <p>3.1 Write an IMCA DOLS report</p> <p>3.2 Identify good practice in recording case work</p> <p>3.3 Explain the impact of data protection legislation on the recording of work.</p>
<p>4. Challenge decisions</p>	<p>4.1 Map out the potential routes for formal challenges</p> <p>4.2 Know how to raise informal and formal concerns and provide feedback</p> <p>4.3 Use opportunities to highlight concerns.</p>
<p>Additional information</p>	
<p>Instructed: including:</p> <ol style="list-style-type: none"> 1) representing people who are being assessed for standard authorisation or being assessed for a potential unlawful deprivation of liberty (39A) 2) standing in as a person’s representative (39C) for people who are subject to an authorisation when no other representative is available 3) supporting the person who is subject to an authorisation or their representative where the person’s representative is unpaid (39D). <p>Methods: including non-verbal and verbal</p> <p>Information: including rights, the assessment process review of a standard authorisation and access to the Court of Protection.</p> <p>Report: including reports to assessors as part of the assessment process and IMCA reports provided to the supervisory body for 39A, 39C and 39D roles.</p> <p>Potential routes: formal routes to include complaints procedures, the review process for standard authorisation, access to the Court of Protection and alert of potential unlawful deprivation of liberty to a supervisory body.</p>	

The nature of this unit means that most of the evidence must come from real work activities. Simulation can only be used in exceptional circumstances for example: Where performance is critical or high risk, happens infrequently or happens frequently but the presence of an assessor/observer would prevent the Independent Advocacy relationship developing.

Simulation must be discussed and agreed in advance with the External Verifier. The evidence must reflect, at all times, the policies and procedures of the workplace, as linked to current legislation and the values and principles for good practice in independent advocacy.

Required sources of performance and knowledge evidence:
Direct Observation and/or Expert Witness Testimony are the required assessment method to be used to evidence some part of this unit.

If the assessor is unable to observe the candidate s/he will identify an expert witness in the workplace who will provide testimony of the candidate's work-based performance. The assessor or expert witness will observe the candidate in real work activities, and this is likely to provide most of the evidence for the assessment criteria for this unit.

Other sources of performance and knowledge evidence:
The assessor will identify other sources of evidence to ensure that the most reliable and efficient mix of evidence gathering methods from the list below. This will ensure that all learning outcomes and assessment criteria are met and that the consistency of the candidate's performance can be established.

- Work products
- Professional discussion
- Candidate/ reflective accounts
- Questions asked by assessors
- Witness testimonies
- Projects/Assignments/RPL
- Case studies

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

AHP 17	Assist and support individuals to use total communication systems
HSC 41	Use and develop methods and systems to communicate record and report

HSC 45	Develop practices which promote choice, well-being and protection of all individuals
H136	Communicate effectively with individuals and others
HSC 328	Contribute to care planning and review
HSC 335	Contribute to the protection of individuals from harm and abuse
HSC 368	Present individuals' needs and preferences
HSC 3111	Promote the equality, diversity, rights and responsibilities of individuals
HSC 3199	Promote the values and principles underpinning best practice
MH_1	Promote effective communication and relationships with people who are troubled or distressed
MH 43	Challenge injustice and inequalities in access to mainstream provision for individuals with mental health needs

Unit Title	Understand professional management and leadership in health and social care or children and young people’s settings
Unit Number	F/504/2218
Level	5
Credit Value	6
GLH	50

Unit Aim

The purpose of this unit is to assess the learner’s knowledge of theories of management and leadership and the relationship between professional management and leadership. It provides an introduction to the skills required of managers and leaders in health and social care and children and young people’s settings and the impact of policy drivers on those roles.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand theories of management and leadership and their application to health and social care or children and young people’s settings	1.1 Research theories of management and leadership 1.2 Analyse how theoretical models of management and leadership can be applied to a range of situations in a work setting 1.3 Analyse how the values and cultural context of an organisation influence the application of management and leadership models
2. Understand the relationship between professional management and leadership	2.1 Evaluate the interdependence between leadership and management 2.2 Analyse the conflicts between the application of management and leadership models 2.3 Describe how conflicts between management and leadership models can be addressed
3. Understand the skills of professional management and leadership in health and social care or children and young people’s settings	3.1 Analyse the skills required to be an <ul style="list-style-type: none"> • Effective manager • Effective leader 3.2 Explain why managers in health and social care or children and young people’s settings need both management and leadership skills

	<p>3.3 Analyse how leadership skills can influence the values of an organisation</p> <p>3.4 Explain why leadership styles may need to be adapted to manage different situations</p>
<p>4. Understand the impact of policy drivers on professional management and leadership in health and social care or children and young people's services</p>	<p>4.1 Identify factors that influence policy drivers</p> <p>4.2 Analyse emerging themes and trends that impact on management and leadership of health and social care and children or young people's services</p>
<p>Additional information</p>	
<p>Assessment requirements specified by a sector or regulatory body (if appropriate)</p>	
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p>	
<p>Details of the relationship of the unit and relevant national occupational standards</p>	
<p>N/A</p>	

Unit Title	Understand the needs of children and young people who are vulnerable and experiencing poverty and disadvantage
Unit Number	F/600/9777
Level	4
Credit Value	5
GLH	40

Unit Aim

To provide learners with an in depth understanding of the effects of poverty and disadvantage on children and young people.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the factors that may impact on the outcomes and life chances of children and young people	1.1 Identify the factors that impact on outcomes and life chances for children and young people 1.2 Explain the critical importance of poverty in affecting outcomes and life chances 1.3 Analyse a strategic national or local policy that has positive impact on outcomes and life chances for children and young people 1.4 Explain why strategic direction from national and local policy is required to address factors impacting on outcomes and life chances for children and young people and young people
2. Understand how poverty and disadvantage affect children and young people's development	2.1 Analyse how poverty and disadvantage may affect children and young people's: <ul style="list-style-type: none"> • Physical development • Social and emotional development • Communication development • Intellectual development • Learning.
3. Understand the importance of early intervention for children and young people who are disadvantaged and vulnerable	3.1 Explain what is meant by both disadvantage and vulnerability 3.2 Explain the importance of early intervention for disadvantaged and/or vulnerable children and young people

	3.3 Evaluate the impact of early intervention
4. Understand the importance of support and partnership in improving outcomes for children and young people who are experiencing poverty and disadvantage	4.1 Research the policy and guidance impacting on support services at national level and evaluate how this operates at local level. 4.2 Explain how carers can be engaged in the strategic planning of services. 4.3 Analyse how practitioners can encourage carers to support children and young people's learning and development 4.4 Explain how the interface with adult services is structured so that the needs of children and young people whose carers are users of services are taken into account.
5. Understand the role of the practitioner in supporting children and young people who are vulnerable and experiencing poverty and disadvantage	5.1. Explain how positive practice with children and young people who are experiencing poverty and disadvantage may increase resilience and self confidence 5.2. Explain why it is important for practitioners to have high expectations of, and ambitions for all children and young people regardless of their circumstances and background. 5.3 Analyse how and why practitioners should act as agents and facilitators of change in own work setting
Additional information	
1.1 Factors. There are many factors impacting on children and young people's life chances. The following are examples: <ul style="list-style-type: none"> • Poverty • Social and community pressures • Health status • Abuse and neglect • Violent and/or offending family or personal backgrounds • Race, gender, sexual orientation • Asylum seeking or victims of trafficking 	
3.2 Meaning of vulnerable child (young person):	

A child (young person) (and their family) who needs some additional support in order to reach the best outcomes, because of their social, economic, physical, emotional or family circumstances.

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

DCSF Narrowing the Gap Guidance 2008

Unit Title **Work with families, carers and individuals during times of crisis**
Unit Number **F/601/9029**
Level **4**
Credit Value **5**
GLH **35**

Unit Aim

This unit is aimed at health and social care workers working with individuals and their carers and families in times of crisis, to assess the urgency of requests for action, take and review the effectiveness of actions to meet needs and agree risk management strategies.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand relevant legislation, policy and practice when working with individuals, carers and families in times of crisis	1.1 Describe current legislation relevant to risk assessment and risk management 1.2 Describe legislation, policy and practice relating to the recording, storing and sharing of information by a service provider 1.3 Explain the different types of support and intervention available to individuals, carer and families in times of crisis 1.4 Explain the factors that influence the kinds of support offered
2. Be able to develop risk management strategies when working with individuals, carers and families in times of crisis	2.1 Assess the risk of crisis situations occurring 2.2 Encourage the participation of individuals, carers and families during the agreement and review of a risk management strategy 2.3 Provide opportunities for individuals, carers and families to contribute to the identification and agreement of a risk management strategy 2.4 Formulate a risk management strategy using risk assessments 2.5 Ensure that activities, roles and responsibilities within a risk management strategy are agreed, clarified and understood by all parties

	2.6 Complete documentation in line with agreed ways of working
3. Be able to respond during times of crisis	3.1 Evaluate the seriousness and urgency of a request for action 3.2 Work with families, carers and individuals to agree the response to a crisis situation 3.3 Record and communicate the agreed actions 3.4 Implement agreed actions promptly in line with agreed ways of working
4. Be able to review the outcomes of requests for action during times of crisis	4.1 Explain how to conduct a valid, reliable and comprehensive review 4.2 Review outcomes of actions taken and decisions made 4.3 Analyse the results of the review to inform future risk management strategies and actions to be taken

Additional information

Factors include:

- economic and social factors
- any illnesses which the individual may have
- risk assessment
- restrictions which may apply under legislation

Agreed ways of working will include policies and procedures where these exist.

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3 and 4 must be assessed in a real work environment.

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

Unit Title Understand children and young person’s development
Unit Number F/601/9449
Level 5
Credit Value 6
GLH 30

Unit Aim

This unit provides knowledge and understanding of how children and young people from birth to 19 years develop. The unit also explores actions which should be taken when differences in development are identified and the potential effects of transitions on children and young people’s development.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the pattern of development that would normally be expected for children and young people from birth-19 yrs.	1.1 Explain the sequence and rate of each aspect of development that would normally be expected in children and young people from birth – 19 years 1.2 Analyse the difference between sequence of development and rate of development and why the distinction is important 1.3 Analyse the reasons why children and young people’s development may not follow the pattern normally expected.
2. Understand the factors that impact on children and young people’s development	2.1 Analyse how children and young people’s development is influenced by a range of personal factors 2.2 Analyse how children and young people’s development is influenced by a range of external factors 2.3 Explain how theories of development and frameworks to support development influence current practice.
3. Understand the benefits of early intervention to support the development of children and young people	3.1 Analyse the importance of early identification of development delay 3.2 Explain the potential risks of late recognition of development delay 3.3 Evaluate how multi agency teams work together to support all aspects of development in children and young people

	3.4 Explain how play and leisure activities can be used to support all aspects of development of children and young people
4. Understand the potential effects of transition on children and young people’s development.	<p>4.1 Explain how different types of transitions can affect children and young people’s development</p> <p>4.2 Explain the importance of children and young people having positive relationships through periods of transition</p> <p>4.3 Evaluate the effectiveness of positive relationships on children and young people’s development</p>
5. Understand how assessing, monitoring and recording the development of children and young people informs the use of interventions	<p>5.1 Explain different methods of assessing, recording and monitoring children and young people’s development</p> <p>5.2 Explain how and in what circumstances different methods for assessing, recording and monitoring children and young people’s development in the work setting.</p> <p>5.3 Explain how different types of interventions can promote positive outcomes for children and young people where development is not following the pattern normally expected.</p> <p>5.4 Evaluate the importance of accurate documentation regarding the development of children and young people</p>

Additional information

1.1 **Aspect of development** include:

- Physical
- Communication
- intellectual / cognitive
- Social, emotional and behavioural
- Moral
- Identity

1.3 **Reasons** why development is not following expected pattern e.g.:

- Disability

- Emotional
- Physical
- Environmental
- Cultural
- Social
- Learning needs
- Communication
- Genetic

2.1. **Personal factors** include:

- health status
- disability
- sensory impairment
- learning difficulties
- genetic

2.2. **External factors** include:

- Poverty and deprivation
- History of abuse and neglect
- Family environment and background
- Behaviour of mother during pregnancy
- Personal choices
- Looked after/ care status
- Education

2.3. **Theories of development** include:

- Cognitive
- Psychoanalytic
- Humanist
- Social Learning
- Operant conditioning
- Behaviourist
- Attachment

2.3 **Frameworks to support development** include:

- Social pedagogy

4.1 **Types of transitions** include:

- emotional, affected by personal experience e.g. bereavement, entering/ leaving care
- physical e.g. moving to a new educational establishment, a new home/locality, from one activity to another, between a range of care givers on a regular basis
- physiological e.g. puberty, long term medical conditions
- intellectual e.g. moving from pre school to primary to post primary

5.1. **Methods** of assessing development needs e.g.:

- Assessment Framework/s
- Observation
- Standard measurements
- Information from parent, carers, children and young people, other professionals and colleagues

5.4. Different types of interventions e.g.:

- social worker
- speech and language therapist
- psychologist
- psychiatrist
- youth justice
- physiotherapist
- nurse specialist
- additional learning support
- assistive technology
- health visitors
- counsellor / therapist
- foster carers
- residential social workers

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

CCLD 403 Support programmes for the promotion of children's development
 CCLD 408 Evaluate, assess and support the physical, intellectual, emotional and social development of children

Unit Title **Lead the management of transitions**
Unit Number **F/602/2853**
Level **5**
Credit Value **4**
GLH **29**

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills required to support workers engaging with individuals who are experiencing transitions and changes.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the impact of change and transitions on the well-being of individuals	1.1 Explain ways in which transitions and significant life events affect individuals’ well-being 1.2 Analyse how theories on change inform approaches to the management of transitions. 1.3 Explain the concept of resilience in relation to transitions and significant life events 1.4 Analyse the factors that affect individuals’ ability to manage transitions and changes
2. Be able to lead and manage provision that supports workers to manage transitions and significant life events	2.1 Explain how solution focused practice is used to support the management of transitions. 2.2 Promote a culture that supports and encourages individuals to explore challenges. 2.3 Support workers to encourage individuals to identify their own strengths and abilities. 2.4 Support workers to engage with individuals and others to identify outcomes and targets that build on their strengths and abilities. 2.5 Ensure workers support individuals to implement plans to meet identified outcomes and targets 2.6 Enable workers to identify any additional support they may require

	to support individuals through transition and change
Additional information	
<p>Factors may include:</p> <ul style="list-style-type: none"> • Positive/negative identity and self esteem • Stable/unstable relationships and networks • Secure/insecure attachments • Experience of discrimination/social exclusion • Experience of abuse or harm <p>Others may include:</p> <ul style="list-style-type: none"> • Self • Workers / Practitioners • Carers • Significant others • Other professionals • People who use services <p>Additional support may include:</p> <ul style="list-style-type: none"> • Training • Emotional support • Support to manage tensions and dilemmas 	
Assessment requirements specified by a sector or regulatory body (if appropriate)	
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p> <p>Learning Outcome 2 must be assessed in the work setting.</p>	
Details of the relationship of the unit and relevant national occupational standards	
LMCS B3	

Unit Title	Support individuals to access education, training or employment
Unit Number	H/601/3546
Level	4
Credit Value	4
GLH	31

Unit Aim

The purpose of this unit is to provide the learner with the knowledge, understanding and skills required to support individuals to access education, training or employment.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the value of engagement in training, education or employment for individuals	1.1 Explain why engagement in education, training or employment opportunities can have a positive impact on the well-being and quality of life of individuals
2. Understand how legislation, guidance and codes of practice support an individual to access training, education or employment	2.1 Outline the legislation, guidance and codes of practice that support an individual to access training, education or employment 2.2 Explain how the duty to make reasonable adjustments by learning providers or employers impacts on support for individuals to access training, education or employment 2.3 Identify the assistance that is available to learning providers or employers to support individuals to access education, training or employment opportunities
3. Understand the support available to individuals' accessing education, training or employment	3.1 Identify the range of agencies that provide support to individuals accessing education, training or employment 3.2 Clarify the support provided by the various agencies
4. Be able to support an individual to identify and access education, training or employment that meet needs and preferences	4.1 Work with individuals to identify the education, training or employment opportunities taking account of their: <ul style="list-style-type: none"> • Aspirations

	<ul style="list-style-type: none"> • Skills and abilities • Interests • Experience • Qualifications • Support needs • Preferred career pathway • Personal circumstances • Language / communication needs <p>4.2 Work with the individual and / or others to source accessible information on education, training or employment opportunities</p> <p>4.3 Support the individual to select preferred education, training or employment</p> <p>4.4 Support the individual to complete applications to access education, training or employment</p> <p>4.5 Support the individual to prepare for interview or selection for education, training or employment</p>
<p>5. Be able to support individuals to undertake education, training or employment</p>	<p>5.1 Outline own role and role of others in providing support to an individual to undertake education, training or employment</p> <p>5.2 Work with the individual and / or others to identify assistive technology; resources and support that may be needed to undertake education, training or employment</p>
<p>6. Be able to evaluate engagement in education, training or employment</p>	<p>6.1 Review with the individual and / or others how well the education, training or employment opportunity has met expectations and identified outcomes</p> <p>6.2 Review with the individual and / or others the continued support required to undertake education, training or employment</p> <p>6.3 Agree with the individual and / or others adjustments to be made to education, training or employment arrangements to meet individual needs and preferences</p>

Additional information
<p>Well-being e.g.</p> <ul style="list-style-type: none"> • Emotional • Psychological • Physical <p>Others could include:</p> <ul style="list-style-type: none"> • Other professionals • Specialist employment agencies • Careers services • Job coach • Learning providers • Employers • Carers / family members • Advocates • Colleagues
Assessment requirements specified by a sector or regulatory body (if appropriate)
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p> <p>Learning Outcomes 4, 5 and 6 must be assessed in real work environment.</p>
Details of the relationship of the unit and relevant national occupational standards
<p>Sensory Services 5</p>

Unit Title **Support the use of assistive technology**
Unit Number **H/601/5250**
Level **5**
Credit Value **4**
GLH **31**

Unit Aim

This unit aims to support the learner to understand, plan, provide and review assistive technologies in order to best support the individual.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the contribution that assistive technology can make to the lives of individuals	1.1 Investigate and report on the range and availability of assistive technology 1.2 Research how the use of assistive technology can result in positive outcomes for individuals
2. Be able to facilitate the use of assistive technology	2.1 Research assistive technology solutions that meet identified needs 2.2 Explain how a range of assistive technology solutions can be adapted according to need and context 2.3 Assess the risks associated with the range of assistive technology solutions 2.4 Describe a range of assessment and referral processes which are used to secure assistive technology 2.5 Support the individual to secure the provision of appropriate assistive technology 2.6 Support the individual to use assistive technology
3. Be able to develop others to facilitate the use of assistive technology	3.1 Provide information to others about assistive technology 3.2 Provide guidance to others to facilitate the use of assistive technology
4. Be able to review the provision of assistive technology	4.1 Review the assessment and referral processes used to secure assistive technology 4.2 Review the outcomes of assistive technology support to individuals against identified needs

Additional information
<p>Assistive technology (AT) is defined as "any product or service designed to enable independence for disabled and older people" (Source: Kings Fund consultation, 2001). For example, this could include a range of human/animal/low or high tech devices to support the individual's daily living such as:</p> <ul style="list-style-type: none"> • human aids • assistance dogs • electrical/electronic devices • low vision aids • environmental aids <p>Others could include:</p> <ul style="list-style-type: none"> • Other professionals • Carers/family members • Advocates • Colleagues
Assessment requirements specified by a sector or regulatory body (if appropriate)
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p>
Details of the relationship of the unit and relevant national occupational standards
<p>Sensory Services 4,6,7,9,11</p>

Unit Title **Lead active support**
Unit Number **H/601/7354**
Level **5**
Credit Value **5**
GLH **35**

Unit Aim

The purpose of this unit is to provide the learner with the knowledge, understanding and skills to lead active support. It is aimed at those whose role includes managing others to deliver direct support and assistance to individuals.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand how the active support model translates values into person-centred practical action with individuals	1.1 Evaluate the extent to which the outcomes for a range of individuals conform to contemporary person-centred values and aims using the principles of the active support model 1.2 Analyse the practical changes which need to be made within a work setting to improve individuals' independence, informed choice and quality of life 1.3 Explain how to lead the implementation of practical changes within a work setting to improve individuals' independence, informed choice and quality of life
2. Be able to use practice leadership to promote positive interaction	2.1 Explain the principles behind practice leadership 2.2 Demonstrate how others are supported to understand positive interaction 2.3 Demonstrate how others are supported to develop skills to interact positively with individuals 2.4 Demonstrate how others are supervised and given constructive feedback to others on their positive interaction with individuals
3. Be able to use practice leadership in supporting others to develop and implement person-centred daily plans to promote participation	3.1 Demonstrate how others are supported to develop daily plans to promote participation

	<p>3.2 Demonstrate how others are supported to organise and deliver assistance to meet individuals' need and preferences</p> <p>3.3 Support others to identify and take remedial action to ensure a valued range of activities for individuals are available throughout the day, avoiding lengthy periods of disengagement</p>
<p>4. Be able to use practice leadership in supporting others to maintain individuals' quality of life</p>	<p>4.1 Demonstrate how others are supported to review and revise the quality of support provided to individuals</p> <p>4.2 Support others to interpret the extent to which individuals' participation over time represents the balance of activity associated with a valued lifestyle</p> <p>4.3 Support others to improve the quality of an individual's participation, addressing the range, frequency and duration of activities, and the individual's skills, personal preferences and social image.</p>

Additional information

Active support model comprises a person-centred model of how to interact positively with individuals combined with daily planning systems that promote participation and enhance quality of life.

Individual is someone requiring care or support.

Contemporary person-centred values and aims are derived from Social Role Valorisation and are commonly expressed as the five service accomplishments of Respect, Competence, Participation, Community Presence and Choice. This is in stark contrast to the practices seen in the hotel model, where carers undertake all the domestic tasks such as cooking and cleaning etc, while individuals remain unoccupied and are not or rarely encouraged to participate in caring for their own home. These are institutional style settings organised mainly around staffing needs. They are not person-centred and offer a poor quality of life to individuals.

Practice leadership refers to the development and maintenance of high quality support, involving a constant focus on promoting an optimum quality of life for individuals. Key elements include: organising others to deliver support when and how individuals need and want it; coaching others to deliver better support by observing

them, providing constructive feedback and modelling good practice; and reviewing the quality of support provided in regular supervision and finding ways to improve it.

Positive interaction refers to supportive interaction using the level of assistance, task analysis and positive reinforcement that helps an individual to participate in constructive activity.

Valued range of activities refers to the balance of activities that contribute to a good quality of life for individuals, incorporating vocational, domestic, personal, leisure, educational and social activities.

Disengagement means doing no constructive or meaningful activity, and can include aimlessly wandering about, pacing, staring, sitting, lying down, purposelessly fiddling with items and so on, with no social contact.

Valued lifestyle refers to the balance of activities that contribute to a good quality of life for individuals, incorporating vocational, domestic, personal, leisure, educational and social activities.

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, and 4 must be assessed in real work environment

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

Active Support is referenced throughout the majority of the HSC NOS
Links to HSC 45, 411, 416

Unit Title **Lead and manage a team within a health and social care or children and young people’s setting**

Unit Number **H/602/3171**

Level **6**

Credit Value **7**

GLH **46**

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills required to lead and manage a team in a health and social care or children and young people’s setting.

Learning outcome The learner will	Assessment criteria The learner can
<p>1. Understand the features of effective team performance within a health and social care or children and young people’s setting</p>	<p>1.1 Explain the features of effective team performance</p> <p>1.2 Identify the challenges experienced by developing teams</p> <p>1.3 Identify the challenges experienced by established teams</p> <p>1.4 Explain how challenges to effective team performance can be overcome</p> <p>1.5 Analyse how different management styles may influence outcomes of team performance</p> <p>1.6 Analyse methods of developing and maintaining:</p> <ul style="list-style-type: none"> • trust • accountability <p>1.7 Compare methods of addressing conflict within a team</p>
<p>2. Be able to support a positive culture within the team for a health and social care or children and young people’s setting</p>	<p>2.1 Identify the components of a positive culture within own team</p> <p>2.2 Demonstrate how own practice supports a positive culture in the team</p> <p>2.3 Use systems and processes to support a positive culture in the team</p> <p>2.4 Encourage creative and innovative ways of working within the team</p>
<p>3. Be able to support a shared vision within the team for a health and social care or children and young people’s setting</p>	<p>3.1 Identify the factors that influence the vision and strategic direction of the team</p>

	<p>3.2 Communicate the vision and strategic direction to team members</p> <p>3.3 Work with others to promote a shared vision within the team</p> <p>3.4 Evaluate how the vision and strategic direction of the team influences team practice</p>
<p>4. Be able to develop a plan with team members to meet agreed objectives for a health and social care or children and young people’s setting</p>	<p>4.1 Identify team objectives</p> <p>4.2 Analyse how the skills, interests, knowledge and expertise within the team can meet agreed objectives</p> <p>4.3 Facilitate team members to actively participate in the planning process</p> <p>4.4 Encourage sharing of skills and knowledge between team members</p> <p>4.5 Agree roles and responsibilities with team members</p>
<p>5. Be able to support individual team members to work towards agreed objectives in a health and social care or children and young people’s setting</p>	<p>5.1 Set personal work objectives with team members based on agreed objectives</p> <p>5.2 Work with team members to identify opportunities for development and growth</p> <p>5.3 Provide advice and support to team members to make the most of identified development opportunities.</p> <p>5.4 Use a solution focused approach to support team members to address identified challenges</p>
<p>6. Be able to manage team performance in a health and social care or children and young people’s setting</p>	<p>6.1 Monitor and evaluate progress towards agreed objectives</p> <p>6.2 Provide feedback on performance to:</p> <ul style="list-style-type: none"> • the individual • the team <p>6.3 Provide recognition when individual and team objectives have been achieved</p> <p>6.4 Explain how team members are managed when performance does not meet requirements</p>
<p>Additional information</p>	
<p>Others may include:</p> <ul style="list-style-type: none"> • Workers / Practitioners • Carers • Significant others 	

- Other professionals
- People who use services

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, 4, 5 and 6 must be assessed in the work setting.

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

LMCS A1, B1 CCLD 413, 425

Unit Title **Understanding professional supervision practice**
Unit Number **H/602/3185**
Level **4**
Credit Value **3**
GLH **22**

Unit Aim

The purpose of this unit is to assess the learner’s knowledge and understanding of professional supervision practice. It could be used to support those wishing to prepare for a supervisory role or to enhance the practice of those already in such a role.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the purpose of supervision	1.1 Evaluate theoretical approaches to professional supervision 1.2 Analyse how the requirements of legislation, codes of practice, policies and procedures impact on professional supervision
2. Understand how the principles of supervision can be used to inform performance management	2.1 Explain key principles of effective professional supervision 2.2 Analyse the importance of managing performance in relation to: <ul style="list-style-type: none"> • governance • safeguarding • key learning from critical reviews and inquiries
3. Understand how to support individuals through professional supervision	3.1 Analyse the concept of anti oppressive practice in professional supervision 3.2 Explain methods to assist individuals to deal with challenging situations 3.3 Explain how conflict may arise within professional supervision 3.4 Describe how conflict can be managed within professional supervision
4. Understand how professional supervision supports performance	4.1 Explain the responsibility of the supervisor in setting clear targets and performance indicators 4.2 Explain the performance management cycle 4.3 Compare methods that can be used to measure performance

	4.4 Describe the indicators of poor performance 4.5 Explain how constructive feedback can be used to improve performance 4.6 Evaluate the use of performance management towards the achievement of objectives
Additional information	
Assessment requirements specified by a sector or regulatory body (if appropriate)	
This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.	
Details of the relationship of the unit and relevant national occupational standards	
LMCS A1, B1, HSC 41, 43, 45	

Unit Title **Independent Mental Health Advocacy**
Unit Number **J/502/3296**
Level **4**
Credit Value **7**
GLH **35**

Unit Aim

The unit will support learners to develop the skills and knowledge required to provide Independent Health Advocacy (IMHA) as detailed within the Mental Health Act.

Learning outcome The learner will	Assessment criteria The learner can
1. Know how Mental Health legislation affects IMHA qualifying patients	1.2 Explain key principles of Mental Health legislation 1.3 Analyse powers within the Mental Health Act 1983 as amended by the Mental Health Act 2007 1.4 Use the Mental Health Act 1983 as amended by the Mental Health Act 2007 to explain the process of compulsion 1.5 Research a range of safeguards enshrined within the Mental Health Act 1983 as amended by the Mental Health Act 2007.
2. Provide Independent Mental Health Advocacy	2.1 Use the Mental Health Act 1983 as amended by the Mental Health Act 2007 to identify when an individual is entitled to receive IMHA support 2.2 Analyse the roles and responsibilities of an IMHA 2.3 Summarise rights afforded to an IMHA within the Mental Health Act 2.4 Prioritise a range of case work 2.5 Assess a range of potential dilemmas which IMHAs can face in practice 2.6 Resolve practice dilemmas 2.7 Summarise and respond to a range of common advocacy issues for qualifying patients

	<p>2.8 Understand treatment options available to an individual who is subject to compulsion under the Mental Health Act</p> <p>2.9 Signpost qualifying patients to other services</p> <p>2.10 Identify a range of information that should and must be recorded</p> <p>2.11 Work within different environments</p> <p>2.12 Understand how physical environment can impact on individuals.</p>
<p>3. Respond to requests for IMHA support</p>	<p>3.1 Identify a range of people who can refer to the IMHA service</p> <p>3.2 Use referral processes</p> <p>3.3 Implement and review referral processes</p> <p>3.4 Respond to referrals</p> <p>3.5 Know when to refer to a range of advocacy services.</p>
<p>4. Engage with professionals</p>	<p>4.1 Research and identify a range of people and services the IMHA is likely to come into contact with</p> <p>4.2 Communicate the IMHA's role to a range of people</p> <p>4.3 Use strategies to negotiate with professionals</p> <p>4.4 Respond to dilemmas and challenges which may be faced.</p>
<p>5. Respond to individuals who have diverse needs</p>	<p>5.1 Describe how having mental health needs can impact on daily living</p> <p>5.2 Offer support to individuals who have mental health needs</p> <p>5.3 Use a range of methods to communicate with people who have mental health needs</p> <p>5.4 Respond the cultural and spiritual needs of an individual</p> <p>5.5 Identify dimensions of diversity</p> <p>5.6 Signpost a range of specialist support services that a qualifying patient may wish to access</p> <p>5.7 Evaluate how the personal and cultural identity of an IMHA can impact on the advocacy relationship.</p>

6. Work safely	6.1 Identify situations that present potential risks 6.2 Respond to risk 6.3 Summarise adult (or) child protection procedures 6.4 Commit to using supervision
----------------	--

Additional information

Mental Health legislation: including the Mental Health Act 1983 and Codes of Practice (England and Wales)

Process of compulsion: for individual patients who are detained or who are liable to be detained; individuals under guardianship or SCT

Safeguards: including the Tribunal, Hospital Managers’ hearing and statutory advocacy.

Roles and responsibilities: including listening, accessing information and promoting rights

Rights: including access to records, patients and staff

Potential dilemmas: including information sharing, supporting people who may experience delusional beliefs and supporting people affected by mental distress

Common advocacy issues: including appeals, complaints, accessing information, changing medication, applying for leave and discharge

How: impact on the individual such as living on locked wards, accessing private spaces.

Range of people: including the individual, nearest relative, RC, AMHP, therapist, care manager

Range of advocacy services: including IMCA, generic and specialist advocacy services (ie older people).

Range of people and services: people and services the IMHA is likely to come into contact with, including RC, AMHP and care manager

Communicate: communicate the IMHA role to a range of people including AMHP, RC nearest relative, care manager.

Impact on daily living: living with a range of mental health needs including hearing voices, having delusional beliefs and paranoia

Needs of an individual: including individuals from BME groups and people who use languages other than English

Specialist support services: including specialist BME services

Personal and cultural identity: impact on the advocacy relationship of different aspects of identify including age, ethnicity, sexual orientation, geographical location and religious beliefs.

The nature of this unit means that most of the evidence must come from real work activities. Simulation can only be used in exceptional circumstances for example: Where performance is critical or high risk, happens infrequently or happens frequently but the presence of an assessor/observer would prevent the Independent Advocacy relationship developing.

Simulation must be discussed and agreed in advance with the External Verifier. The evidence must reflect, at all times, the policies and procedures of the workplace, as linked to current legislation and the values and principles for good practice in independent advocacy.

Required sources of performance and knowledge evidence:
Direct Observation and/or Expert Witness Testimony are the required assessment method to be used to evidence some part of this unit.

If the assessor is unable to observe the candidate s/he will identify an expert witness in the workplace who will provide testimony of the candidate's work-based performance. The assessor or expert witness will observe the candidate in real work activities and this is likely to provide most of the evidence for the assessment criteria for this unit

Other sources of performance and knowledge evidence:
The assessor will identify other sources of evidence to ensure that the most reliable and efficient mix of evidence gathering methods from the list below. This will ensure that all learning outcomes and assessment criteria are met and that the consistency of the candidate's performance can be established.

- Work products
- Professional discussion
- Learner / reflective accounts
- Questions asked by assessors
- Witness testimonies
- Projects/Assignments/RPL
- Case studies

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

HSC 3111	Promote the equality, diversity, rights and responsibilities of individuals
GEN 12	Reflect on and evaluate your own values, priorities, interests and effectiveness
H16	Market and promote the service
HSC 23	Develop your knowledge and practice
HSC 328	Contribute to care planning and review
HSC 366	Support individuals to represent their own needs and wishes at decision making forums
HSC 367	Help individuals identify and access independent representation and advocacy
HSC 368	Present individuals' needs and preferences

HSC 3199	Promote the values and principles underpinning best practice
HSC 45	Develop practices which promote choice, well-being and protection of all individuals
HSC 418	Work with individuals with mental health needs to negotiate and agree plans for addressing those needs
HSC 419	Provide advice and information to those who enquire about mental health needs and related services
HSC 423	Assist individuals at formal hearings
HSC 431	Support individuals where abuse has been disclosed
HSC 434	Maintain and manage records and reports
HSC 437	Promote your organisation and its services to stakeholders
MH_1	Promote effective communication and relationships with people who are troubled or distressed
MH 43	Challenge injustice and inequalities in access to mainstream provision for individuals with mental health needs

Unit Title Understand the process and experience of dementia
Unit Number J/601/3538
Level 3
Credit Value 3
GLH 22

Unit Aim

This unit provides the knowledge of the neurology of dementia to support the understanding of how individuals may experience dementia.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the neurology of dementia	1.1 Describe a range of causes of dementia syndrome 1.2 Describe the types of memory impairment commonly experienced by individuals with dementia 1.3 Explain the way that individuals process information with reference to the abilities and limitations of individuals with dementia 1.4 Explain how other factors can cause change in an individual's condition that may not be attributable to dementia 1.5 Explain why the abilities and needs of an individual with dementia may fluctuate
2. Understand the impact of recognition and diagnosis of dementia	2.1 Describe the impact of early diagnosis and follow up to diagnosis 2.2 Explain the importance of recording possible signs or symptoms of dementia in an individual in line with agreed ways of working 2.3 Explain the process of reporting possible signs of dementia within agreed ways of working 2.4 Describe the possible impact of receiving a diagnosis of dementia on: <ul style="list-style-type: none"> • the individual • their family and friends

<p>3. Understand how dementia care must be underpinned by a person centred approach</p>	<p>3.1 Compare a person centred and a non-person centred approach to dementia care</p> <p>3.2 Describe a range of different techniques that can be used to meet the fluctuating abilities and needs of the individual with dementia</p> <p>3.3 Describe how myths and stereotypes related to dementia may affect the individual and their carers</p> <p>3.4 Describe ways in which individuals and carers can be supported to overcome their fears</p>
<p>Additional information</p>	
<p>Dementia syndrome: Dementia caused by a combination of conditions, sometimes called a mixed dementia.</p> <p>An individual is someone requiring care or support.</p> <p>Carers e.g.</p> <ul style="list-style-type: none"> • Partner • Family • Friends • Neighbours 	
<p>Assessment requirements specified by a sector or regulatory body (if appropriate)</p>	
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p>	
<p>Details of the relationship of the unit and relevant national occupational standards</p>	

Unit Title Promote access to healthcare for individuals with learning disabilities
Unit Number J/601/5645
Level 5
Credit Value 6
GLH 44

Unit Aim

The unit is aimed at those who are leading, supervising or influencing others to support individuals with learning disabilities to access healthcare and meet their healthcare needs.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand issues related to access to healthcare services for individuals with learning disabilities	1.1 Explain the rights based approach to accessing healthcare services 1.2 Identify inequalities in access to healthcare services in different sections of the population 1.3 Analyse how different investigations, inquiries and reports have demonstrated the need for improved access and services for individuals with learning disabilities 1.4 Describe the impact of legislation, policy or guidance underpinning the need for healthcare services to enable access to individuals with a learning disability 1.5 Analyse how legislation, policy or guidance on capacity and consent should be used with regards to individuals considering and receiving treatment
2. Understand the healthcare needs that may affect individuals with learning disabilities	2.1 Analyse trends of healthcare needs among individuals with learning disabilities 2.2 Explain systematic approaches that may support better health and healthcare for individuals with a learning disability

	2.3	Research the difficulties in diagnosing some health conditions in individuals with a learning disability
3. Understand good practice in supporting people with a learning disability to access healthcare services	3.1	Analyse the effectiveness of existing communication systems and practices in supporting individuals to meet their healthcare needs
	3.2	Evaluate different ways of working in partnership to support individuals to meet their healthcare needs
	3.3	Explain how to promote access to healthcare through the use of reasonable adjustments
	3.4	Analyse the rights of others significant to the individual to be involved in planning healthcare services
4. Understand how to support others to develop, implement, monitor and review plans for healthcare	4.1	Explain how to champion a person-centred focus to the healthcare planning process
	4.2	Explain factors to consider when supporting others to develop and implement plans for healthcare
	4.3	Explain how to support others to monitor and review plans for healthcare
	4.4	Explain how to challenge healthcare providers and services when required to advocate with or on behalf of individuals
	4.5	Explain how to support others to raise concerns and challenge healthcare services
5. Be able to develop processes to support others to meet the healthcare needs of individuals with a learning disability	5.1	Develop a person-centred strategy to underpin work with an individual to identify and meet their healthcare needs
	5.2	Develop systems to support others to work across a range of healthcare services to meet the health needs of individuals with a learning disability
	5.3	Ensure systems are used by others in meeting the healthcare needs of individuals

	5.4 Evaluate the impact of systems in meeting individual's healthcare needs
6. Be able to promote good practice to others in their support of individuals with learning disabilities accessing healthcare	6.1 Promote effective use of communication methods to enable individuals to understand their healthcare needs and what options are available to them 6.2 Promote partnership working to meet the healthcare needs of individuals with learning disabilities 6.3 Promote awareness of the use of reasonable adjustments to enable individuals with learning disabilities to access healthcare services 6.4 Ensure the appropriate involvement of others significant to the individual in planning and delivering healthcare

Additional information

Legislation, policy or guidance – relevant to the appropriate UK country. This may include Codes of Practice.

Others significant to the individual may include:

- The individual
- Colleagues
- Families or carers
- Friends
- Other professionals
- Members of the public
- Advocates

Others may include:

- The individual
- Colleagues
- Families or carers
- Friends
- Other professionals
- Members of the public
- Advocates

Plans for healthcare – In England this refers to / should include Health Action Plans.

Healthcare needs – includes: medication, regular check-ups etc.

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2 and 4 must be assessed in the work setting.

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

Links to HSC 415, 416, 417, 418, 419

Unit Title Understand physical disability
Unit Number J/601/6150
Level 3
Credit Value 3
GLH 22

Unit Aim

This unit covers an understanding of physical disability, the impact of a physical disability on a person’s life and the role played by society. The unit promotes a person-centred approach as an underpinning value in working with individuals with physical disabilities.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the importance of differentiating between the individual and the disability	1.1 Explain the importance of recognising the centrality of the individual rather than the disability 1.2 Explain the importance of an assessment being person centred 1.3 Compare the difference in outcomes that may occur between focusing on an individual’s strengths and aspirations rather than their needs only
2. Understand the concept of physical disability	2.1 Define the term physical disability 2.2 Describe the following terminology used in relation to physical disability: <ul style="list-style-type: none"> • congenital • acquired • neurological 2.3 Compare a congenital disability with a neurological disability, including causes 2.4 Explain the emotional impact of a progressive disability on the individual 2.5 Compare the different impacts on individuals that congenital and progressive disabilities can have
3. Understand the impact of living with a physical disability within society	3.1 Describe environmental and social barriers that can have a disabling effect on an individual with a physical disability

	<p>3.2 Analyse the socio-economic effects of physical disability on an individual</p> <p>3.3 Explain the changes that have occurred in society as a result of Disability legislation</p> <p>3.4 Analyse the extent of improvements for the individual as a result of Disability legislation</p> <p>3.5 Explain the effects of physical disability on an individual's life choices</p> <p>3.6 Explain how attitudes either promote a positive or negative perception of disability</p>
<p>4. Understand the importance of promoting inclusion and independence</p>	<p>4.1 Explain the importance of independence and inclusion for individuals with physical disabilities</p> <p>4.2 Analyse ways that inclusion and independence can be promoted</p> <p>4.3 Explain the importance of the individual having control of choices and decisions</p> <p>4.4 Analyse the importance of positive risk-taking for the individual with physical disabilities</p> <p>4.5 Explain how to encourage the individual to take positive risks while maintaining safety</p> <p>4.6 Explain strategies you may use to challenge stereotypes, prejudicial or discriminatory attitudes</p>

Additional information

The **individual** is the person requiring care or support.

Congenital can include:

- Cerebral palsy
- Cystic fibrosis
- Spina bifida
- Congenital heart conditions
- Muscular dystrophy
- Congenital hip disorder

Acquired disabilities can include:

- Arthritis

- Rheumatism
- Cardiac conditions
- Pulmonary conditions from work conditions or smoking e.g. emphysema, pulmonary fibrosis

Neurological conditions can include:

- Multiple sclerosis
- Parkinson's Disease
- Stroke

Progressive can also include neurological and some congenital conditions:

- Motor Neurone Disease

Life choices

- Physical health
- Education
- Housing
- Employment
- Access to cultural/leisure activities
- Mobility
- Sexuality

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

Unit Title **Lead practice that supports positive outcomes for child and young person development**

Unit Number **J/601/9369**

Level **5**

Credit Value **6**

GLH **36**

Unit Aim

The purpose of this unit is to provide learners with the knowledge, understanding and skills to lead practice that supports positive outcomes for child and young person development.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand theoretical approaches to child and young person development	1.1 Explain different theories and frameworks of child and young person development 1.2 Explain the potential impact on service provision of different theories and approaches 1.3 Critically analyse the move towards outcomes based services for children and young people
2. Be able to lead and support developmental assessment of children and young people	2.1 Support use of different methods of developmental assessment and recording for children and young people 2.2 Work in partnership with other professionals in assessing development of children and young people 2.3 Develop strategies to encourage child or young person and carers' participation in developmental assessment 2.4 Evaluate the effectiveness of strategies to encourage child or young person and carers' participation in developmental assessment

<p>3. Be able to develop and implement programmes with children or young people requiring developmental support</p>	<p>3.1 Support use of assessments to develop programmes of support</p> <p>3.2 Explain circumstances where referrals to other agencies may be required</p> <p>3.3 Explain how referrals to other agencies are managed</p> <p>3.4 Support use of early interventions to promote positive outcomes for children and young people’s development</p> <p>3.5 Lead the implementation of a personalised programme of support for children or young people</p>
<p>4. Be able to evaluate programmes for children or young people requiring developmental support</p>	<p>4.1 Review programmes of developmental support</p> <p>4.2 Implement strategies for improvement for programmes of development support</p>
<p>5. Be able to lead and promote support for children experiencing transitions</p>	<p>5.1 Explain how evidence based practice can be used to support children and young people experiencing transitions</p> <p>5.2 Lead the implementation of evidence based practice to support children or young people experiencing transition</p> <p>5.3 Evaluate the implementation of evidence based practice to support children or young people experiencing transitions</p>

Additional information

Theories of development including:

- Cognitive
- Psychoanalytic
- Humanist
- Social Learning
- Operant conditioning
- Behaviourist
- Attachment

Frameworks to support development including

- Social pedagogy

Carers e.g.

- Families
- Paid carers

Positive behaviour support e.g.

- Least restrictive principle
- Reinforcing positive behaviour
- Modelling/ positive culture
- Looking for reasons for inappropriate behaviour and adapting responses
- Individual behaviour planning
- Phased stages
- Planning interventions to reduce inappropriate behaviour
- De-escalate and diversion
- Containment
- Following management plans
- Boundary setting and negotiation
- Supporting children and young people's reflection on and management of own behaviour
- Anti-bullying strategies

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, 4, 5 and 6 must be assessed in a real work environment.

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

CCLD 403 Support programmes for the promotion of children's development

Unit Title **Develop procedures and practice to respond to concerns and complaints**
Unit Number **J/602/2336**
Level **5**
Credit Value **6**
GLH **40**

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills required to developing, implementing and reviewing procedures and practices to address concerns and complaints. It covers the relevant regulatory requirements, codes of practice and relevant guidance, and analyses the impact of these on service provision.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the regulatory requirements, codes of practice and relevant guidance for managing concerns and complaints	1.1 Identify the regulatory requirements, codes of practice and relevant guidance for managing concerns and complaints in own area of work 1.2 Analyse how regulatory requirements, codes of practice and relevant guidance for managing concerns and complaints affect service provision within own area of work
2. Be able to develop procedures to address concerns and complaints	2.1 Explain why individuals might be reluctant to raise concerns and make complaints 2.2 Outline steps that can be taken to encourage individuals to raise concerns or complaints 2.3 Work with others in the development of procedures to address concerns and complaints 2.4 Ensure information on how to raise concerns and make complaints is available in accessible formats 2.5 Review the procedures that have been developed against regulatory requirements, codes of practice and relevant guidance

<p>3. Be able to lead the implementation of procedures and practice for addressing concerns and complaints</p>	<p>3.1 Promote a person centred approach to addressing concerns and complaints</p> <p>3.2 Ensure that others are informed about the procedure for raising concerns or making complaints</p> <p>3.3 Use supervision to support workers to recognise and address concerns and complaints.</p> <p>3.4 Implement systems and procedures which address concerns and complaints and fully inform the complainant of the outcome within agreed time frames</p>
<p>4. Be able to review the procedures and practices for addressing concerns and complaints</p>	<p>4.1 Monitor the use of systems for addressing concerns and complaints</p> <p>4.2 Evaluate the effectiveness of systems for addressing concerns and complaints</p> <p>4.3 Involve others in the review of procedures and practices for addressing concerns and complaints.</p> <p>4.4 Show how own management practice has provided a culture where the organisation can learn from concerns and complaints</p> <p>4.5 Demonstrate how recommendations from concern and complaint investigations have been used to improve the quality of service</p>

Additional information

Others may include:

- Workers / Practitioners
- Carers
- Significant others
- Other professionals
- People who use services

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3 and 4 must be assessed in the work setting.

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

LMCS E9

Unit Title **Lead practice in promoting the well-being and resilience of children and young people**

Unit Number **J/602/2577**

Level **5**

Credit Value **8**

GLH **53**

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills required to lead practice in support of children and young people’s well-being and resilience. It includes the promotion of health as well as promoting self-esteem and supporting children to recognise and value who they are. The unit includes evaluation and development of practice.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand how different approaches to promoting positive well-being and resilience in children and young people impact on practice	1.1 Explain the importance of well-being for children and young people 1.2 Explain the importance of resilience for children and young people 1.3 Critically analyse different approaches to promoting well-being and resilience of children and young people
2. Be able to lead practice in supporting children and young people’s well-being and resilience	2.1 Lead practice that supports others to engage with children and young people to build their self esteem 2.2 Support others to work with children or young people in a manner that is open, trustworthy, respectful and reliable 2.3 Demonstrate through own practice ways to encourage and support children or young people to express their feelings, views and hopes 2.4 Explain how to challenge practices that act as barriers to children and young people’s well-being and resilience
3. Be able to lead practice in work with carers who are supporting children and young people	3.1 Develop strategies to support carers’ understanding and involvement with the well-being and resilience needs of a child or young person

	<p>3.2 Lead practice that supports carers to engage with children and young people to build their self esteem</p> <p>3.3 Monitor the involvement of carers in supporting children and young people’s well-being and resilience</p> <p>3.4 Evaluate strategies used to engage with carers who are supporting a child or young person</p>
4. Be able to lead practice in responding to the health needs of children and young people	<p>4.1 Lead practice that supports children and young people to make positive choices about their health needs</p> <p>4.2 Assess any risks to or concerns about the health of children and young people</p> <p>4.3 Support others to recognise and record concerns about a child or young person’s health following agreed procedures</p> <p>4.4 Work with others to take action to address concerns identified about the health of children and young people</p>
5. Be able to lead the development of practice with children or young people to promote their well-being and resilience	<p>5.1 Develop methods of evaluating own practice in promoting children or young people’s well-being and resilience</p> <p>5.2 Develop methods of evaluating organisational practice in promoting children or young people’s well-being and resilience</p> <p>5.3 Lead others in practice that supports solution focused approaches for supporting children or young people’s well-being and resilience</p> <p>5.4 Lead others in developing areas of practice that promote children or young people’s well-being and resilience</p>
Additional information	
<p>Well-being may include:</p> <ul style="list-style-type: none"> • Attachment • Relationships • Emotional security 	

- Health
- Self esteem
- Diet
- Exercise
- Rest and sleep
- Prompt medical/dental attention when needed
- Preventive health programmes

Others may include:

- Human resource personnel
- Workers / Practitioners
- Carers
- Significant others

To **build their self-esteem** could include:

- Identifying with their own self-image and identity
- Recognising and valuing their own abilities, talents and achievements
- Being involved in decisions and have as much control as possible over their lives
- Setting goals and targets that contribute towards building their well-being and resilience

Health needs may include:

- Physical
- Mental
- Sexual

Concerns may include:

- Illness
- Injury
- Use of illegal substances
- Emotional distress
- Poor lifestyle choices
- Bullying (either as victim or perpetrator)
- Exploitative behaviour (either as victim or perpetrator)
- Harm or abuse
- Changes in behaviour

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, 4 and 5 must be assessed in the work setting.

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

Professional Practice in residential child care

Standards: 1.5, 2.2, 2.3 and 4.3 (England)

Training Support and Development Standards for Foster Care: 3.3 and 5.2
(England)

HSC 44 CCLD 402 403 408 LMC B2

Unit Title **Manage physical resources**
Unit Number **K/600/9711**
Level **4**
Credit Value **3**
GLH **25**

Unit Aim

This unit will enable the learner to identify resource requirements, select and obtain the necessary resources and monitor the quality and effectiveness of their use.

Learning outcome The learner will	Assessment criteria The learner can
1. Be able to identify resource requirements for own area of responsibility	1.1 Consult with colleagues to identify their planned activities and corresponding resource needs 1.2 Evaluate past resource use to inform expected future demand 1.3 Identify resource requirements for own area of responsibility
2. Be able to obtain required resources for own area of responsibility	2.1 Submit a business case to procure required resources 2.2 Review and agree required resources with relevant individuals 2.3 Explain an organisation’s processes for procuring agreed resources 2.4 Explain how to order and acquire resources in own area of responsibility
3. Understand the importance of sustainability when using physical resources	3.1 Explain the importance of using sustainable resources 3.2 Explain the potential impact of resource use on the environment 3.3 Describe actions one can take to minimise any adverse environmental impact of using physical resources
4. Be able to monitor and review the quality and usage of resources in own area of responsibility	4.1 Monitor the quality of resources against required specifications 4.2 Analyse the effectiveness and efficiency of resource use in own area of responsibility 4.3 Make recommendations to improve the effectiveness and efficiency of resource use

Additional information
Assessment requirements specified by a sector or regulatory body (if appropriate)
This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.
Details of the relationship of the unit and relevant national occupational standards

Unit Title Explore models of disability
Unit Number K/601/5251
Level 5
Credit Value 5
GLH 32

Unit Aim

This unit provides the knowledge and skills needed to understand models of disability, develop others' understanding and review how they impact on individuals and organisations.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the complexities of models of disability	1.1 Explain different theoretical models of disability 1.2 Analyse how individuals experience different theoretical models of disability 1.3 Analyse how different theoretical models of disability shape organisational structures and outcomes
2. Be able to review how models of disability underpin organisational practice	2.1 Analyse how agreed ways of working can promote particular models of disability 2.2 Make recommendations for agreed ways of working that actively promote empowerment and participation 2.3 Implement agreed actions in the context of own role
3. Develop others' awareness of models of disability	3.1 Develop activities that increase others' understanding of <ul style="list-style-type: none"> • models of disability • how they are experienced by individuals • how they shape organisational structure and agreed ways of working 1.2 Implement planned activities 1.3 Review the outcomes of planned activities

Additional information
Others could include: <ul style="list-style-type: none">• Other professionals• Carers/family members• Advocates• Colleagues
Assessment requirements specified by a sector or regulatory body (if appropriate)
This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.
Details of the relationship of the unit and relevant national occupational standards
Sensory Services 1, 2, 3, 10, 11

Unit Title **Active support: lead interactive training**
Unit Number **K/601/7355**
Level **5**
Credit Value **4**
GLH **30**

Unit Aim

The purpose of this unit is to provide the learner with the knowledge, understanding and skills to deliver interactive training. It is aimed at those whose role includes managing or training others to deliver direct support and targeted assistance to individuals.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the theoretical background to person-centred interactive training	1.1 Explain what is meant by person-centred interactive training 1.2 Clarify the key factors that make training effective in improving others performance and the service outcomes 1.3 Explain how the three-stage training model can be used in interactive training 1.4 Summarise the theory of positive interaction 1.5 Explain the process of person-centred interactive training
2. Be able to plan person-centred interactive training sessions to enhance whole team performance	2.1 Involve key others in developing the training plan, to ensure the needs of individuals are met 2.2 Develop a timetable of scheduled in situ training sessions for others working directly with individuals 2.3 Explain to others the preparation required prior to person-centred interactive training
3. Be able to lead person-centred interactive training sessions in situ	3.1 Clarify aims and process of person-centred interactive training sessions with others to be trained 3.2 Assess the performance of others through direct observation using a structured format

	3.3	Demonstrate required skills and process during direct observation of others
4. Be able to provide support to improve the performance of others	4.1	Give constructive feedback to others on their performance, using a structured format
	4.2	Demonstrate required skills and values when giving feedback to others
	4.3	Act as a role-model to demonstrate desired performance to others
	4.4	Assess when others have achieved a satisfactory level of performance

Additional information

Key factors that make training effective

Traditional classroom training approaches are inadequate due to problems of generalisation. Combinations of different techniques, including training in the environment where the desired performance is required, are most effective in changing staff behaviour and maintaining improved ways of working.

Three-stage training model

Training is complete when the required skills are demonstrated in the workplace. The three stages in this process are: demonstration of verbal competence; demonstration of competence via role play in a simulated situation; demonstration of competence in the workplace or natural environment.

Positive interaction refers to supportive interaction using the levels of assistance, task analysis and positive reinforcement that helps an individual to participate in constructive activity.

Process of person-centred interactive training

This is an iterative process: the trainer observes others positively interacting with individuals, provides constructive feedback for improvement, observes again and so on until the required performance is achieved.

Key others

The trainer should involve others' - manager or team leader - in organising rotas and individuals' activities to facilitate a sufficient number of two-hour interactive training sessions with minimal interruption. The manager should also attend most of the sessions, as on-going management attention is a further key factor in training effectiveness.

Timetable is planned by the trainer and the member of staff being trained, with the times agreed in advance to fit with the normal routine of the individual.

Preparation required prior to interactive training

Others to be trained need to know the process of interactive training, as well as which individuals they will be supporting. They should also identify a range of activities to undertake and make any necessary preparations for this.

Structured format

Observations of other’s performance should be conducted in a systematic way and cover the following aspects:

- Preparation of the environment e.g. equipment available, distractions minimised
- Presentation of activity to the individual e.g. positive, encouraging, clear, promoting informed choice
- Task analysis, i.e. breaking activity into steps and sequencing steps to facilitate participation
- Hierarchy of assistance, i.e. providing only enough help to enable the individual to participate, using levels of help flexibly according to the individual’s need for support
- Reinforcement, i.e. ensuring appropriate range of rewards for participation are given promptly
- Style, e.g. tone of voice, facial gesture, body language, verbal economy, age-appropriate interaction, appropriate corrective feedback, positioning

Required skills and process during direct observation of others

Trainer maintains a discreet distance but remains able to observe clearly, interrupts activity only, when necessary, takes notes during observation and interacts respectfully with the individual and others

Required skills and values when giving feedback to others

Feedback is based on the structured observation. Positive performance is highlighted first, suggestions for improvement are constructive and specific, other is put in lead role. Feedback is conducted in private, and a friendly, supportive atmosphere is created.

Role model – the task is undertaken to demonstrate best practice

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, and 4 must be assessed in a real work environment.

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

Active Support is referenced throughout the majority of the HSC NOS
Links to HSC 45, 411, 416

Unit Title	Support individuals to access housing and accommodation services
Unit Number	K/601/7906
Level	3
Credit Value	4
GLH	24

Unit Aim

This unit is aimed at those working in a wide range of settings. It provides the learner with the knowledge and skills required to support individuals to access housing and accommodation services.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand support available to access housing and accommodation services	1.1 Identify sources of funding and benefits that are available for housing and accommodation services 1.2 Analyse the range of housing and accommodation services available 1.3 Explain how and where to access specialist information and advice about housing and accommodation services
2. Be able to work with individuals to identify housing and accommodation services that meet their needs	2.1 Work with an individual to identify their accommodation requirements 2.2 Work with the individual to understand the range of accommodation services that could meet their needs 2.3 Support the individual to understand requirements that may be made by housing and accommodation services
3. Be able to work with individuals to plan to access housing and accommodation services	3.1 Work with the individual and others to agree a plan for accessing housing and accommodation services 3.2 Establish with an individual which housing and accommodation services will be approached
4. Be able to work with individuals to access housing and accommodation services	4.1 Support the individual to prepare to attend meetings with housing and accommodation services 4.2 Work with the individual to provide accurate and complete information to

	<p>express their requirements and preferences</p> <p>4.3 Support the individual to understand the outcome of decisions made by a housing or accommodation service</p> <p>4.4 Describe ways to challenge discrimination in accessing housing and accommodation services</p>
5. Be able to work with housing and accommodation services to meet the needs of individuals	<p>5.1 Provide housing and accommodation services with information about own role and responsibilities</p> <p>5.2 Demonstrate continued contact with housing and accommodation staff to ensure individual needs are being met</p>
6. Be able to contribute to the review of housing and accommodation services for individuals	<p>6.1 Work with the individual and others to:</p> <ul style="list-style-type: none"> • monitor the effectiveness and consistency of the service in meeting the individual's needs and preferences • identify any additional support needed <p>6.2 Consult with others about any problems and proposed solutions</p> <p>6.3 Record and report on the review in line with agreed ways of working</p>

Additional information

An **individual** is someone requiring care or support.

A **plan** may include:

- realistic and achievable goals
- actions the individual will take
- the level and type of support required
- roles and responsibilities
- timescales
- how and when progress towards goals will be reviewed

Others may include:

- carers
- friends and relatives
- professionals
- others who are important to the individual's well-being

Agreed ways of working will include policies and procedures where these exist.

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.
--

Learning Outcomes 2, 3, 4, 5, and 6 must be assessed in a real work environment.
--

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

Unit Title **Lead positive behavioural support**
Unit Number **K/602/2572**
Level **7**
Credit Value **10**
GLH **75**

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills required to lead the promotion of positive behaviour and safe responses to instances of challenging behaviour. It is aimed at those who lead services for individuals who have complex needs and behaviour which severely challenge services.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the theoretical background and current policy context of Positive Behavioural Support	1.1 Analyse theories underpinning Positive Behavioural Support 1.2 Evaluate how current policy informs Positive Behavioural Support practice
2. Be able to conduct a functional analysis of an individual requiring Positive Behavioural Support	2.1 Explain the importance of ensuring functional analysis is based on formal assessment 2.2 Work with others to produce behavioural assessment reports 2.3 Apply indirect assessment schedules and collect direct observation data 2.4 Triangulate and analyse data collected 2.5 Formulate and test hypotheses on the function of identified challenging behaviours
3. Be able to design and lead person-centred, primary prevention strategies	3.1 Determine a set of primary prevention interventions with others to address all fast and slow behavioural triggers identified via a functional analysis of challenging behaviour 3.2 Develop a schedule of structured activities and required support with others to maximise an individual’s participation throughout each day

	<p>3.3 Design a detailed skill teaching procedure with others to address an identified challenging behaviour</p> <p>3.4 Lead the implementation of agreed person centred primary prevention interventions</p> <p>3.5 Apply tests of social validity to all primary interventions designed for an individual</p>
<p>4. Be able to design and lead secondary prevention strategies</p>	<p>4.1 Identify and define with others the early warning signs of agitation for an individual</p> <p>4.2 Construct with others a set of secondary prevention strategies derived from the functional analysis of an individual’s behaviour</p> <p>4.3 Lead the implementation of agreed person centred secondary prevention interventions</p> <p>4.4 Apply tests of social validity to all secondary interventions designed for an individual</p>
<p>5. Be able to assess the appropriateness of reactive strategy use</p>	<p>5.1 Critically compare the use of non aversive and aversive reactive strategies</p> <p>5.2 Justify the use or absence of reactive strategies for an individual</p> <p>5.3 Identify the post-incident support needs of an individual and others to include:</p> <ul style="list-style-type: none"> • immediate • intermediate • longer term
<p>6. Be able to lead the implementation of a Positive Behavioural Support Plan</p>	<p>6.1 Collaborate with others to produce a Positive Behavioural Support Plan for an individual to promote a helpful culture and environment which contains:</p> <ul style="list-style-type: none"> • primary strategies • secondary strategies • reactive strategies <p>6.2 Support others to understand the detail of the Positive Behavioural Support Plan</p>

	<p>6.3 Support others to develop knowledge, understanding and skills to implement the Positive Behavioural Support Plan</p> <p>6.4 Provide others with constructive feedback on their implementation of the Positive Behavioural Support Plan</p>
7. Be able to manage and review the implementation of Positive Behavioural Support Plans	<p>7.1 Explain how the attitudes and skills of others may impact on a Positive Behavioural Support Plan</p> <p>7.2 Work with others to review the plan using the Positive Behaviour Support Plan Checklist</p> <p>7.3 Make required amendments to the Positive Behavioural Support Plan</p> <p>7.4 Construct and implement a Positive Monitoring Process</p> <p>7.5 Develop an individualised Periodic Service Review</p>

Additional information

Positive Behavioural Support

An approach to intervention from social, behavioural, educational and biomedical science that emphasizes proactive, preventative strategies to achieve reductions in challenging behaviour and improved quality of life. See Association for Positive Behavioural Support (2003).

Formal assessments must be undertaken by those who are professionally qualified to do so.

Others may include:

- The individual
- Family members
- Paid carers
- Advocates
- Other professionals

Behavioural Assessment Report refers to a detailed report on an individual based on a functional analysis of their behaviour. The report should include such information as personal history and service use, health status, strengths and needs, motivational analysis, operational description of behaviours, risk factors, early indicators, slow and fast triggers, maintaining consequences and summary statements or hypotheses.

Indirect assessment schedules refer to assessments of skills, behaviours, mental health, participation in activities and so on, usually administered by interview with carers. Examples include the Functional Assessment Interview (O'Neill et al, 1997), the Motivational Assessment Scale (Durand & Crimmins, 1988), the PAS-ADD (Moss et al, 1993), the Contextual Assessment Inventory (McAtee et al, 2004), The AAMR Adaptive Behaviour Scale (Nihira et al, 1993), the Aberrant Behaviour Checklist (Aman et al, 1995) and so on.

Direct observation data refers to information on an individual's behaviour collected through directly observing them using structured methods, such as ABC charts, Scatterplots, Momentary Time Sampling, Continuous Time Sampling, Partial Interval Recording and so on.

Triangulate refers to the drawing together of results from a variety of different sources, to assess consistency in findings.

Challenging Behaviour may include behaviours that are:

- Repetitive / obsessive
- Withdrawn
- Aggressive
- Self-injurious
- Disruptive
- Anti-social or illegal
- Verbally abusive

Primary Prevention refers to strategies that involve changing aspects of a person's living, working and recreational environments so that the possibility of challenging behaviour occurring is reduced.

Contributory factors that lead to behaviour being defined as challenging can include competence and capacity of settings, social norms, frequency, intensity, duration and ability to communicate.

Schedule of structured activities is a detailed daily participation plan for an individual that includes scheduled and optional activities, and indicates who will provide the necessary support to maximise participation throughout the day.

Skill teaching refers to structured developmental work undertaken with an individual to teach specific skills that may reduce their challenging behaviour. It can include a full teaching plan and detailed teaching steps based on task analysis.

Social validity refers to interventions that are ethical. That is, they address socially significant problems, have clear benefits for the individual, are acceptable to the individual and others, and use the least restrictive or intrusive approach.

Secondary prevention refers to strategies that apply when a person’s challenging behaviour begins to escalate, in order to prevent a major incident.

Non aversive and aversive reactive strategies

Reactive strategies are ways of responding to challenging behaviours that have not been prevented. Non aversive strategies are designed not to be unpleasant for the individual: they avoid pain and punishment and can include physical interventions that comply with the British Institute of Learning Disabilities (BILD) code of practice for the use of physical interventions.

Aversive strategies are punishment based. They work by causing an unpleasant experience for the individual, such as pain, discomfort, seclusion, infringement of rights, removal of possessions and so on.

Positive Monitoring is a process that avoids managers being distanced or having a mainly administrative role, by helping them maintain close contact with service users and staff in a structured and constructive way. It specifies exactly what staff need to do, with managers giving frequent feedback on what they are doing well, identifying areas for improvement and helping them to find solutions.

(See Porterfield, 1987)

Periodic Service Review provides a way of improving and maintaining the quality of services committed to implementing PBS. It is based on positive behavioural approaches to staff management and focuses on motivating and supporting staff to improve service quality (See LaVigna, et al, 1994).

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, 4, 5, 6 and 7 must be assessed in the work setting.

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

N/A

Unit Title	Develop provision for family support
Unit Number	K/602/3074
Level	5
Credit Value	5
GLH	33

Unit Aim

The purpose of this unit is to assess the learner's knowledge, understanding and skills required to develop provision for family support.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the key policies and legislative frameworks that govern the provision of family support in UK home nation	1.1 Outline the current key policies and legislative frameworks that govern the provision for family support 1.2 Analyse the impact of key policies and legislative frameworks on the range of provision for family support
2. Be able to develop provision for family support	2.1 Develop the aims and purpose of the provision to meet identified needs 2.2 Plan how the aims and purpose of the provision will be achieved 2.3 Provide detailed, factual and accessible information to others about the provision
3. Be able to implement provision for family support	3.1 Work with families and others to identify the specific provision required to meet their needs 3.2 Support workers to identify a range of interventions, tools and resources available to meet the needs of families 3.3 Monitor workers practice in the provision of family support 3.4 Provide constructive feedback to workers on practice in provision of family support 3.5 Work with families and others to evaluate how their needs have been met by provision

	3.6	Ensure that information that will be shared with others is clarified with families
4. Be able to support others to establish positive relationships with families	4.1	Explain the principles of establishing positive relationships with families
	4.2	Support workers to use a solution focussed approach to address difficulties in establishing relationships with families
	4.3	Support workers to share best practice in relation to establishing positive relationships with families
Additional information		
Assessment requirements specified by a sector or regulatory body (if appropriate)		
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p> <p>Learning Outcomes 2, 3 and 4 must be assessed in a real work environment.</p>		
Details of the relationship of the unit and relevant national occupational standards		
<p>CCLD 422 Co-ordinate work with families</p> <p>CCLD 412 Evaluate and co-ordinate the environment for children and families</p>		

Unit Title Providing Independent Advocacy Management
Unit Number L/502/3297
Level 4
Credit Value 11
GLH 35

Unit Aim

The unit develops practical skills in how to manage an Independent Advocacy service or scheme.

Learning outcome The learner will	Assessment criteria The learner can
1. Manage advocacy services	1.1 Select and use a range of management strategies 1.2 Explain the purpose and principles of supervision 1.3 Provide supervision 1.4 Implement an appraisal system 1.5 Review a range of policy and procedures 1.6 Implement advocacy policy and procedures 1.7 Maintain and review policy documents 1.8 Produce and share policy documents 1.9 Use standards in the running of the service.
2. Implement record keeping systems	2.1 Explain the importance of keeping different types of records 2.2 Review and manage internal record keeping systems 2.3 Compare and contrast between good and poor examples of record keeping.
3. Recruit and induct Independent Advocates	3.1 Create job descriptions and person specifications for the Independent Advocacy role 3.2 Implement good practice within recruitment processes, recognising diversity and fairness 3.3 Adhere to legal requirements in the recruitment of advocates 3.4 Explain the purpose of advocacy induction

	<p>3.5 Design and implement induction packages</p> <p>3.6 Identify support needs of new advocates</p>
4. Facilitate service user involvement in the running of the Independent Advocacy Service	<p>4.1 Use a range of opportunities to involve service users</p> <p>4.2 Explain why service users should be involved in the running of the services</p> <p>4.3 Offer support and training to skill service users to secure their involvement</p>
5. Construct a business plan	<p>5.1 Identify key features of a business plan</p> <p>5.2 Construct a business plan</p> <p>5.3 Present the business plan to the organisation</p> <p>5.4 Review the business plan</p>
6. Measure advocacy outcomes	<p>6.1 Analyse different types of outcomes</p> <p>6.2 Use available data to measure quantitative outcomes</p> <p>6.3 Implement strategies to measure qualitative outcomes</p> <p>6.4 Evaluate results in order to implement changes</p>
7. Negotiate a Service Level Agreement	<p>7.1 Explain the purpose and function of a Service Level Agreement</p> <p>7.2 Construct a Service Level Agreement</p> <p>7.3 Negotiate a Service Level Agreement which upholds key advocacy principles with funders or commissioners</p>
8. Establish relationships with commissioners of advocacy services	<p>8.1 Explain the role of commissioners and commissioning bodies</p> <p>8.2 Develop successful working relationships</p> <p>8.3 Identify and address potential barriers which can prevent effective working relationships</p>
9. Promote Independent Advocacy and the service.	<p>9.1 Use opportunities and a range of methods to promote advocacy</p> <p>9.2 Establish user-friendly referral processes</p>
Additional information	

- **Supervision:** a range of different approaches to supervision such as peer support meetings, 1:1 supervision, group supervision and quality assurance of case files
- **Policy and Procedures:** range of policies including child/adult protection, whistle blowing, information sharing and confidentiality.
- **Good practice:** range of good practice checks including securing CRB checks and references.
- **Involve service users:** including at board level, through evaluation and feedback of the service, in training and recruitment, in developing policy or business plans, in promoting the service and creating marketing literature.
- **Key features:** including funding opportunities, aims of the service and threats
- **Present:** to a range of people including trustees, management board and staff.
- **Outcomes:** including qualitative and quantitative types.
- **Key advocacy principles:** including independence, being client led and confidentiality within the SLA.
- **Opportunities:** including attending conferences, delivering training, visiting places where people receive services and a range of methods including producing leaflets, marketing products, and word of mouth.

The nature of this unit means that most of the evidence must come from real work activities.

Simulation can only be used in exceptional circumstances for example:

Where performance is critical or high risk, happens infrequently or happens frequently but the presence of an assessor/observer would prevent the Independent Advocacy relationship developing.

Simulation must be discussed and agreed in advance with the External Verifier.

The evidence must reflect, at all times, the policies and procedures of the workplace, as linked to current legislation and the values and principles for good practice in independent advocacy.

Required sources of performance and knowledge evidence:

Direct Observation and/or Expert Witness Testimony are the required assessment method to be used to evidence some part of this unit.

If the assessor is unable to observe the candidate s/he will identify an expert witness in the workplace who will provide testimony of the candidate's work-based performance.

The assessor or expert witness will observe the candidate in real work activities and this is likely to provide most of the evidence for the assessment criteria for this unit.

Other sources of performance and knowledge evidence:

The assessor will identify other sources of evidence to ensure that the most reliable and efficient mix of evidence gathering methods from the list below. This will ensure that all learning outcomes and assessment criteria are met, and that the consistency of the candidate's performance can be established.

- Work products

- Professional discussion
- Candidate/ reflective accounts
- Questions asked by assessors
- Witness testimonies
- Projects/Assignments/RPL
- Case studies

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

HSC 41	Use and develop methods and systems to communicate record and report
H16	Market and promote the service
HSC48	Demonstrate a style of leadership that ensures an organisational culture of open and participatory management and practice
HSC 367	Help individuals identify and access independent representation and advocacy
HSC 45	Develop practices which promote choice, well-being and protection of all individuals
HSC 411	Manage a service which achieves the best possible outcomes for the individual
HSC 431	Support individuals where abuse has been disclosed
HSC 434	Maintain and manage records and reports
HSC 435	Manage the development and direction of the provision
HSC 437	Promote your organisation and its services to stakeholders
HSC 440	Support effective governance
HSC 441	Contribute to the selection, recruitment and retention of staff to develop a quality service
HSC 445	Recruit and place volunteers
HSC 449	Represent one's own agency at other agencies' meetings
HSC 451	Lead teams to support a quality provision
HSC 452	Contribute to the development, maintenance and evaluation of systems to promote the rights, responsibilities, equality and diversity of individuals
LMC A1.2	Manage and develop workers through supervision and performance reviews
LMC A1.4	Enhance the quality and safety of your provision through workforce development
LMC A2.3	Promote a positive image of your provision and its contribution to the lives of people
LMC A3	Actively engage in the safe selection and recruitment of workings and their retention in care services

LMC B1	Lead and manage provision of care services that respects, protects and promotes the rights and responsibilities of people
LMC B1.1	Lead and manage provision that complies with legislation, registration, regulation and inspection requirements
LMC B1.2	Lead and manage provision that promotes rights and responsibilities
LMC B2.1	Lead and manage provision that involves people in decisions about the outcomes they wish to achieve
LMC B1.3	Lead and manage provision that protects people
LMC E1.2	Manage effective communication
LMC E1.3	Manage and maintain recording and reporting systems and procedures and use them effectively
LMC E5.1	Develop and review operational plans for your provision
LMC E5.3	Evaluate whether and to what extent resources meet current and future demands
LMC E7.1	Develop a business plan for your provision
LMC E7.2	Implement, monitor and review the business plan
LMC E7.3	Evaluate policies, procedures and practices for business planning
LMC E13	Market, cost and contract to ensure the viability of your provision
CPC 414 A	Identify and evaluate opportunities for change and improvements in services, provisions and systems
CPC 415 A	Analyse information and prepare the business case
CPC 503 A	Evaluate internal and external trends and changes

Unit Title	Manage domiciliary services
Unit Number	L/602/2337
Level	5
Credit Value	6
GLH	39

Unit Aim

The purpose of this unit is to assess the learner's knowledge, understanding and skills required to manage domiciliary care services supporting the practice of a dispersed workforce.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand factors that influence the management of domiciliary services	1.1 Evaluate how the current legislative framework, evidence based research and organisational protocols impact on the management of domiciliary services. 1.2 Explain how person centred practice influences the management of domiciliary services 1.3 Analyse ethical dilemmas and conflicts experienced by managers and practitioners' domiciliary services
2. Be able to manage domiciliary services	2.1 Select and provide suitable practitioners to support individuals' needs 2.2 Support practitioners to develop awareness of their duties and responsibilities 2.3 Support clear communication and information sharing with individuals and others 2.4 Manage record keeping to meet legislative and regulatory requirements 2.5 Explain systems that calculate and justify charges for domiciliary care
3. Be able to implement systems for working safely in domiciliary services	3.1 Implement agreed ways of working that support individuals' and others' safety and protection

	<p>3.2 Support practitioners to anticipate, manage and report risks</p> <p>3.3 Manage systems for risk or incident reporting, action and follow-up</p>
<p>4. Be able to supervise and support practitioners in order to promote individual's needs and preferences in domiciliary services</p>	<p>4.1 Support practitioners to place the individual's needs and preferences at the centre of their practice</p> <p>4.2 Manage systems to monitor and evaluate the effectiveness of practitioners in promoting individual needs and preferences</p> <p>4.3 Explain the importance of supporting practitioners to challenge systems and ways of working</p> <p>4.4 Support practitioners to develop innovative and creative approaches to their work</p> <p>4.5 Support practitioners to balance the needs and preferences of individuals with the potential risks</p>
<p>5. Be able to respond to day to day changes and emergencies in domiciliary services</p>	<p>5.1 Explain the challenges associated with addressing day to day changes and emergencies in domiciliary services</p> <p>5.2 Demonstrate how day to day changes and emergencies are managed in domiciliary services</p>
<p>6. Be able to manage human resources required for domiciliary services</p>	<p>6.1 Plan human resource requirements for domiciliary services</p> <p>6.2 Review contingency arrangements for planned or unforeseen circumstances</p> <p>6.3 Implement systems for supervision of a dispersed workforce</p> <p>6.4 Arrange for practitioners to be inducted and trained to support roles and individual needs</p> <p>6.5 Support practitioners to comply with agreed ways of working</p> <p>6.6 Explain the actions should be taken when practitioners do not comply with agreed ways of working</p>
<p>Additional information</p>	
<p>Others may include:</p>	

- Self
- Workers / Practitioners
- Carers
- Significant others
- Visitors to the work setting

Agreed ways of working will include policies and procedures where these exist.

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, 4, 5 and 6 must be assessed in the work setting.

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

Unit Title **Facilitate coaching and mentoring of practitioners in health and social care or children and young people’s settings**

Unit Number **L/602/2547**

Level **5**

Credit Value **6**

GLH **43**

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills to support coaching and mentoring of practitioners in health and social care or children and young people’s settings. It includes the ability to understand the benefits of coaching and mentoring and to plan implement and evaluate the impact of coaching and mentoring in the work setting.

Learning outcome The learner will	Assessment criteria The learner can
<p>1. Understand the benefits of coaching and mentoring practitioners in health and social care or children and young people’s settings</p>	<p>1.1 Analyse the differences between coaching and mentoring</p> <p>1.2 Explain circumstances when coaching would be an appropriate method of supporting learning at work</p> <p>1.3 Explain circumstances when mentoring would be an appropriate method of supporting learning at work</p> <p>1.4 Explain how coaching and mentoring complement other methods of supporting learning</p> <p>1.5 Analyse how coaching and mentoring at work can promote the business objectives of the work setting</p> <p>1.6 Evaluate the management implications of supporting coaching and mentoring in the work setting</p> <p>1.7 Explain how coaching and mentoring in the work setting can contribute to a learning culture</p> <p>1.8 Explain the importance of meeting the learning needs of coaches and mentors</p>

<p>2. Be able to promote coaching and mentoring of practitioners in health and social care or children and young people’s settings</p>	<p>2.1 Promote the benefits of coaching and mentoring in the work setting</p> <p>2.2 Support practitioners to identify learning needs where it would be appropriate to use coaching</p> <p>2.3 Support practitioners to identify learning needs where it would be appropriate to use mentoring</p> <p>2.4 Explain the different types of information, advice and guidance that can support learning in the work setting</p> <p>2.5 Demonstrate a solution-focused approach to promoting coaching and mentoring in the work setting</p>
<p>3. Be able to identify the coaching and mentoring needs of practitioners in health and social care or children and young people’s settings</p>	<p>3.1 Use different information sources to determine the coaching and mentoring needs of practitioners in the work setting</p> <p>3.2 Plan coaching and mentoring activities</p>
<p>4. Be able to implement coaching and mentoring activities in health and social care or children and young people’s settings</p>	<p>4.1 Support the implementation of coaching and mentoring activities</p> <p>4.2 Select the most appropriate person to act as coach or mentor</p> <p>4.3 Explain the support needs of those who are working with peers as coaches or mentors</p> <p>4.4 Provide coaching in a work setting according to the agreed plan</p> <p>4.5 Provide mentoring in a work setting according to the agreed plan</p>
<p>5. Be able to review the outcomes of coaching and mentoring in health and social care or children and young people’s settings</p>	<p>5.1 Review how the use of coaching and mentoring in the work setting has supported business objectives</p> <p>5.2 Evaluate the impact of coaching and mentoring on practice</p> <p>5.3 Develop plans to support the future development of coaching and mentoring in the work setting</p>

Additional information

Different information sources may include:

- Strategic/business plans

- New legislation/regulation
- Supervision agreements/professional development plans
- Availability and expertise of coaches and mentors in the work setting
- Service users who have different needs

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, 4 and 5 must be assessed in the work setting.

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

ENTO CM20
CCLD 429

Unit Title Facilitate change in health and social care or children and young people’s settings
Unit Number F/602/2612
Level 5
Credit Value 6
GLH 43

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills to facilitate organisational change in health and social care or children and young people’s settings.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the principles of change management in health and social care or children and young people’s settings	1.1 Analyse factors that drive change 1.2 Describe underpinning theories of change management 1.3 Describe approaches, tools and techniques that support the change process 1.4 Explain the importance of effective change management for service provision
2. Be able to facilitate a shared understanding of the need for change in health and social care or children and young people’s settings	2.1 Promote the benefits of change 2.2 Analyse challenges that may arise during the process of change 2.3 Enable others to express views about proposed change 2.4 Agree with others the changes that need to be made
3. Be able to develop an approved change management plan in health and social care or children and young people’s settings	3.1 Analyse the impact of a proposed change to the service provision 3.2 Produce a change management plan that takes account of the identified impact 3.3 Establish criteria against which the plan can be evaluated 3.4 Secure any approvals required for the change management plan
4. Be able to gain support for a proposed change in health and social care or children and young people’s settings	4.1 Ensure own actions serve as a positive role model when introducing change

	<p>4.2 Identify others who can promote the vision for change</p> <p>4.3 Use strategies that address resistance to change</p> <p>4.4 Implement a communication strategy to support others to understand a proposed change</p>
5. Be able to implement approved change management plans in health and social care or children and young people’s settings	<p>5.1 Agree roles and responsibilities for implementing change management plan</p> <p>5.2 Support others to carry out their agreed roles in a change management plan</p> <p>5.3 Adapt a change management plan to address issues as they arise</p> <p>5.4 Establish strategies for ensuring that the quality of service for individuals is maintained during a period of change</p>
6. Be able to evaluate the change management process in health and social care or children and young people’s settings	<p>6.1 Agree systems to monitor the effectiveness of the change management plan</p> <p>6.2 Work with others to review the change management plan against identified criteria</p> <p>6.3 Evaluate outcomes of the change for individuals.</p>

Additional information

Factors may include:

- Internal
- External

Challenges may include:

- anxiety
- stress
- resistance
- fear
- resources
- competence

Others may include:

- individuals
- practitioners

- families and friends of individuals
- advocates
- colleagues
- other professionals within and beyond the organisation
- others with an interest in the service

Impact may include:

- risks
- costs
- benefits

Service provision may include:

- individuals
- team members
- practitioners
- stakeholders
- service delivery

Change Management plan may include:

- a workforce development plan
- a resources plan
- a support plan for individuals and others affected by the change
- a communication plan
- contingency plans

The **communication strategy** will reflect the needs and preferences of its audiences and may incorporate:

- using a range of styles and formats
- adjusting the pace of information-giving
- repeating key messages over time
- clarifying and summarising key points
- updating information as necessary

Individuals are those accessing care or services

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, 4, 5 and 6, must be assessed in the work setting.

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

LMC A2
MSC C5

Unit Title **Manage an inter-professional team in a health and social care or children and young people’s setting**

Unit Number **L/602/2743**

Level **6**

Credit Value **7**

GLH **48**

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills to manage inter-professional team in health and social care or children and young people’s settings.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the principles of inter-professional working within health and social care or children and young people’s settings	1.1 Analyse how inter-professional working promotes positive outcomes for individuals 1.2 Analyse the complexities of working in inter-professional teams 1.3 Explain how inter-professional teamwork is influenced by: <ul style="list-style-type: none"> • legislative frameworks, • regulation • government initiatives • professional codes of practice or • professional standards • service objectives
2. Be able to manage service objectives through the inter-professional team in health and social care or children and young people’s setting	2.1 Work with others to identify how team objectives contribute to service objectives 2.2 Establish plans to meet service objectives 2.3 Allocate roles and responsibilities to meet service objectives
3. Be able to promote inter-professional team working in health and social care or children and young people’s settings	3.1 Establish governance arrangements within inter-professional working arrangements to include: <ul style="list-style-type: none"> • Accountability • Lines of communication • Professional supervision • Continuing professional development

	<p>3.2 Establish protocols within inter-professional working arrangements to include;</p> <ul style="list-style-type: none"> • Confidentiality and information sharing • Record keeping • Resources • Concerns and complaints <p>3.3 Identify supports available to enhance inter-professional working</p> <p>3.4 Support others to understand distinctive roles within the team</p> <p>3.5 Facilitate communication within the inter-professional team</p> <p>3.6 Work with the team to resolve dilemmas that may arise</p>
<p>4. Be able to manage processes for inter-professional work with individuals in health and social care or children and young people’s setting</p>	<p>4.1 Ensure that plans for individuals are based on a formal assessment</p> <p>4.2 Work with the team to identify the lead practitioners for the implementation of individuals’ plans</p> <p>4.3 Agree roles and responsibilities of all those involved in implementing plans</p> <p>4.4 Ensure that information pertinent to the implementation of plans is exchanged between those involved</p> <p>4.5 Develop processes for the review of individuals’ plans</p>
<p>5. Be able to evaluate the effectiveness of inter-professional team work in health and social care or children and young people’s setting</p>	<p>5.1 Work with others to monitor the effectiveness of the inter-professional team against service objectives</p> <p>5.2 Work with others to identify:</p> <ul style="list-style-type: none"> • areas of best practice • areas for improvement <p>5.3 Work with others to develop an action plan to improve inter-professional team work</p>
<p>Additional information</p>	
<p>An individual is someone accessing care or support.</p> <p>Inter-professional: where team membership comprises different professions and occupational groups (with whom they normally work) and people working together as a team to make assessments and decisions.</p>	

Supports may include training, team building, team meetings, professional supervisions, case discussions, dissemination of best practice.

Others may include:

- individuals
- team members
- external professionals
- carers

Dilemmas: Issues where there is a divided opinion or ethical concerns about a course of action.

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, 4 and 5 must be assessed in the work environment.

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

LMC D3
CCLD 423

Unit Title **Recognise indications of substance misuse and refer individuals to specialists**
Unit Number **M/601/0648**
Level **3**
Credit Value **4**
GLH **24**

Unit Aim

This unit covers recognising signs which may indicate that someone may be misusing drugs (illegal, prescription or over the counter), alcohol, solvents or other substances. It also includes referring individuals with indications of substance misuse to service providers where this is the appropriate action.

Learning outcome The learner will	Assessment criteria The learner can
1. Recognise indications of substance misuse	1.1 Identify the range of substances which may be misused and their effects (e.g. illegal drugs, prescription drugs, over the counter drugs, alcohol, solvents) 1.2 Identify possible indications of substance misuse (e.g. physical, behavioural, social, emotional) 1.3 Identify other factors which produce indications that may be interpreted as caused by substance misuse 1.4 Show how to obtain specialist assistance where required 1.5 Show how to keep personal knowledge about substances and possible indications of substance misuse up to date
2. Asses and monitor risk	2.1 Assess the risk to the individual and to others which may result from substance misuse, in accordance with organisational procedures 2.2 Review the assessment of risk and explain why this is important 2.3 Demonstrate appropriate action which may be required in the light of changes to the situation and level of risk

<p>3. Handle information and maintain records</p>	<p>3.1 Identify situations and actions taken in line with organisational requirements and explain the importance of doing so</p> <p>3.2 Identify the rights of individuals and the principle of confidentiality</p>
<p>4. Refer individuals to appropriate services</p>	<p>4.1 Identify the range of services relevant to substance misuse available locally and nationally</p> <p>4.2 Demonstrate how to refer individuals to services in line with organisational requirements</p> <p>4.3 Provide appropriate services with complete and accurate information about the situation in line with organisational requirements</p>

Additional information

The nature of this unit means that most of the evidence must come from real work activities.

Simulation can only be used in exceptional circumstances for example:

Where performance is critical or high risk, happens infrequently or happens frequently but the presence of an assessor/observer would prevent the Independent Advocacy relationship developing.

Simulation must be discussed and agreed in advance with the External Verifier.

The evidence must reflect, at all times, the policies and procedures of the workplace, as linked to current legislation and the values and principles for good practice in independent advocacy.

Required sources of performance and knowledge evidence:

Direct Observation and/or Expert Witness Testimony are the required assessment method to be used to evidence some part of this unit.

If the assessor is unable to observe the candidate s/he will identify an expert witness in the workplace who will provide testimony of the candidate's work-based performance.

The assessor or expert witness will observe the candidate in real work activities and this is likely to provide most of the evidence for the assessment criteria for this unit.

Other sources of performance and knowledge evidence:

The assessor will identify other sources of evidence to ensure that the most reliable and efficient mix of evidence gathering methods from the list below. This will ensure that all learning outcomes and assessment criteria are met and that the consistency of the candidate's performance can be established.

- Work products
- Professional discussion
- Candidate/ reflective accounts
- Questions asked by assessors
- Witness testimonies
- Projects/Assignments/RPL
- Case studies

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

This unit is directly related to the Skills for Health/DANOS national occupational standards:
AA1 Recognise indications of substance misuse and refer individuals to appropriate services and
AF1 Carry out screening and referral assessment
HSC362 and HSC338

Unit Title **Understand sensory loss**
Unit Number **M/601/3467**
Level **3**
Credit Value **3**
GLH **21**

Unit Aim

The purpose of this unit is to provide the learner with introductory knowledge and understanding about sensory loss.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the factors that impact on an individual with sensory loss	1.1 Analyse how a range of factors can impact on individuals with sensory loss 1.2 Analyse how societal attitudes and beliefs impact on individuals with sensory loss 1.3 Explore how a range of factors, societal attitudes and beliefs impact on service provision
2. Understand the importance of effective communication for individuals with sensory loss	2.1 Explain the methods of communication used by individuals with: <ul style="list-style-type: none"> • Sight loss • Hearing loss • Deafblindness 2.2 Describe how the environment facilitates effective communication for people with sensory loss 2.3 Explain how effective communication may have a positive impact on lives on individuals with sensory loss
3. Understand the main causes and conditions of sensory loss	3.1 Identify the main causes of sensory loss 3.2 Define congenital sensory loss and acquired sensory loss 3.3 Identify the demographic factors that influence the incidence of sensory loss in the population
4. Know how to recognise when an individual may be experiencing sight	4.1 Identify the indicators and signs of: <ul style="list-style-type: none"> • Sight loss

<p>and / or hearing loss and actions that may be taken</p>	<ul style="list-style-type: none"> • Hearing loss • Deafblindness <p>4.2 Explain actions that should be taken if there are concerns about onset of sensory loss or changes in sensory status</p> <p>4.3 Identify sources of support for those who may be experiencing onset of sensory loss</p>
<p>Additional information</p>	
<p>Sensory Loss could include:</p> <ul style="list-style-type: none"> • Sight loss • Hearing loss • Deafblindness <p>Factors could include:</p> <ul style="list-style-type: none"> • Communication • Information • Familiar layouts and routines • Mobility 	
<p>Assessment requirements specified by a sector or regulatory body (if appropriate)</p>	
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p>	
<p>Details of the relationship of the unit and relevant national occupational standards</p>	
<p>Sensory Services 1, 2, 3, 4, 5, 6, 7, 8, 9, 11</p>	

Unit Title	Promote awareness of sensory loss
Unit Number	M/601/5249
Level	5
Credit Value	3
GLH	19

Unit Aim

This unit aims to provide workers with the knowledge and skills to devise, implement and review strategies to promote awareness of sensory loss in the context of an individual's life.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand how to raise awareness of sensory loss	1.1 Identify methods for raising awareness of sensory loss 1.2 Explain how different agencies can provide opportunities to raise awareness
2. Be able to raise awareness of sensory loss	2.1 Select and agree actions with the individual and/or others to promote awareness of sensory loss 2.2 Support others to carry out the agreed actions
3. Be able to review action to promote awareness of sensory loss	3.1 Review the outcomes of awareness raising in relation to <ul style="list-style-type: none"> • individuals with sensory loss • own work • partnership work 3.2 Review the effectiveness of agreed ways of working in relation to awareness raising 3.3 Provide feedback on the effectiveness of an awareness raising activity
Additional information	
<p>Sensory loss could include:</p> <ul style="list-style-type: none"> • Sight loss • Hearing loss • Deafblindness <p>Others could include:</p> <ul style="list-style-type: none"> • Other professionals • Carers/family members 	

- Advocates
- Colleagues

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

Sensory Services 1, 2, 3

Unit Title	Support individuals with sensory loss with communication
Unit Number	M/601/5252
Level	5
Credit Value	5
GLH	37

Unit Aim

This unit provides the knowledge and skills needed to discriminate between language and communication and to support the use of a range of communication methods.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand language development	1.1 Explain the difference between language and communication 1.2 Analyse the relationship between culture and language 1.3 Explain how an understanding of language and communication informs practice
2. Understand factors that affect the language and communication of an individual with sensory loss	2.1 Compare and contrast the impact of congenital and acquired sensory loss on <ul style="list-style-type: none"> • communication • language 2.2 Explain the potential impacts of a deteriorating condition on an individual's communication
3. Understand the complexities of specialist communication systems	3.1 Identify when specialist communication systems may be used 3.2 Evaluate the strengths and weakness of specialist communication systems
4. Be able to support the individual with communication	4.1 Evaluate the suitability of a range of communication methods to meet the needs of the individual 4.2 Demonstrate a range of suitable communication methods to the individual and/or others 4.3 Adapt communication methods according to need and context
5. Be able to support others to make use of specialist communication	5.1 Advise others about specialist communication

	5.2 Support others to make use of specialist communication with the individual
6. Review communication work	6.1 Review how communication support to individuals meets identified needs in relation to <ul style="list-style-type: none"> • Own work • Agreed ways of working • Work with others
Additional information	
<p>Sensory loss could include:</p> <ul style="list-style-type: none"> • Sight loss • Hearing loss • Deafblindness <p>Others could include:</p> <ul style="list-style-type: none"> • Other professionals • Carers/family members • Advocates • Colleagues 	
Assessment requirements specified by a sector or regulatory body (if appropriate)	
This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.	
Details of the relationship of the unit and relevant national occupational standards	
Sensory Services 4, 5, 6, 7, 8, 9, 11	

Unit Title **Support families who are affected by Acquired Brain Injury**
Unit Number **M/601/5817**
Level **3**
Credit Value **3**
GLH **30**

Unit Aim

This unit is aimed at those whose role involves supporting families of people with an acquired brain injury. It covers the impact on the family/carers including putting them at the centre of the intervention, recognising the emotional impact of acquired brain injury on a variety of relationships. It also addresses the ability to access support from other professionals and agencies where appropriate.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the impact on families who care for an individual who is in a minimally responsive or vegetative state	1.1 Explain the impact on family of caring for an individual in a minimally responsive or vegetative state 1.2 Describe how theories of loss and grief provide a framework for practice 1.3 Describe the long term adjustments families and friends may need to make
2. Understand the long term effects of acquired brain injury on family	2.1 Explain the emotional impact of acquired brain injury on families 2.2 Compare the difference for families between caring for an individual with mild to moderate brain injury and an individual with severe brain injury 2.3 Describe the socio-economic impact on the family of the long term effects of acquired brain injury 2.4 Explain the impact on families of personality changes in the individual 2.5 Describe changes that may occur in relationships as a result of acquired brain injury
3. Understand legislation that is relevant to carers of an individual effected by acquired brain injury	3.1 Identify legislation and policy specific to carers

	<p>3.2 Explain the key principles within legislation and policy which are applicable to carers of an individual</p> <p>3.3 Outline the obligations on social care organisations as a result of legislation</p>
4. Be able to assess the support required by families who hold the primary caring role	<p>4.1 Assess with primary carers the support they require</p> <p>4.2 Agree with the primary carer a plan of support</p> <p>4.3 Identify support which can best be provided by others</p> <p>4.4 Report where there are unmet needs</p>
5. Be able to work in partnership with other professionals and agencies	<p>5.1 Explain the role of other professionals and agencies working with individuals with acquired brain injury</p> <p>5.2 Work in partnership with other professionals and agencies to support families</p> <p>5.3 Evaluate outcomes for families of partnership working</p>

Additional information

The individual is the person with acquired brain injury.

Theories of loss and grief

- Elizabeth Kublar Ross
- Warden

Personality changes e.g.

- Irritability
- Disinhibited behaviour
- Frustration
- Loss of social skills
- Lack of self-awareness

Relationships

- Spouse/partner
- Child
- Parent
- Sibling
- Friend

Primary carers

- Spouse/partner

- Child
- Parent
- Sibling
- Friend

Other professionals and agencies may include

- Carers organisations
- Social Workers
- GPs
- Supervisor
- Advocate
- Carers/family members
- Colleagues

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

Unit Title **Support the development of community partnerships**
Unit Number **M/601/9494**
Level **4**
Credit Value **5**
GLH **33**

Unit Aim

This unit is aimed at those working in a wide range of settings. It provides the learner with the knowledge and skills required to support the development of community partnerships.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the role of community partnerships	1.1 Explain the concept of community partnerships 1.2 Analyse the benefits of community partnerships 1.3 Describe the range of agencies, networks, organisations and individuals who may be involved in community partnerships
2. Be able to identify where community partnerships could inform and support practice	2.1 Work with others to identify needs that could be met through community partnerships 2.2 Gather and disseminate information about existing community partnerships that may meet identified needs 2.3 Contribute to evaluating information about existing community partnerships and identifying gaps 2.4 Work with others to determine how a community partnership could fill a gap in provision
3. Be able to bring people together to set up community partnerships	3.1 Identify individuals, agencies, organisations and networks who might wish to be involved in a partnership to fill a gap in provision 3.2 Disseminate information about the proposed partnership to those identified 3.3 Invite participation in the proposed partnership

<p>4. Be able to support the setting up of community partnerships</p>	<p>4.1 Gather information about good practice from partnerships with similar purposes</p> <p>4.2 Gather information on potential costs and sources of funding for the partnership</p> <p>4.3 Provide information gathered to potential members of the partnership</p> <p>4.4 Work with others to agree:</p> <ul style="list-style-type: none"> • Membership of the partnership • Aims and objectives • Roles and responsibilities <p>4.5 Activities and practices</p>
<p>5. Be able to contribute to the running of community partnerships</p>	<p>5.1 Carry out own responsibilities to support the purpose of the partnership</p> <p>5.2 Support the community partnership to operate effectively</p> <p>5.3 Describe ways to support the partnership when a member disengages</p>
<p>6. Be able to contribute to the review of community partnerships</p>	<p>6.1 Support members of the partnership to monitor its activities</p> <p>6.2 Support members of the partnership to agree processes, participants and criteria for evaluating its effectiveness in meeting objectives</p> <p>6.3 Contribute to evaluating the partnership</p> <p>6.4 Contribute to agreeing changes to the partnership's practice</p>

Additional information

Others may include:

- Individuals
- Families and friends of individuals
- Colleagues within the organisation
- Colleagues outside the organisation

Roles and responsibilities may include:

- Contribution of resources
- Commitment of time
- Allocation of tasks

Operating effectively will include:

- Working inclusively

- Respecting and valuing all members
- Supporting members to participate
- Abiding by agreements
- Resolving conflicts

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, 4, 5 and 6 must be assessed in a real work environment.

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

HSC3101
HSC3102
HSC3104

Unit Title **Lead support for disabled children and young people and their carers**
Unit Number **M/602/2380**
Level **6**
Credit Value **8**
GLH **57**

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills that are required to support others to lead service provision that supports disabled children and young people and their carers.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand how legislation and policy influences provision for disabled children and young people and their carers	1.1 Evaluate how emergent thinking and research have influenced legislation and policy over time 1.2 Evaluate how the development of legislation and policies has influenced current provision
2. Understand the potential impact of disability on children and young people and their carers	2.1 Research the prevalence and cause of disabilities in children and young people 2.2 Explain how disabilities may impact on children and young people 2.3 Explain how disabilities experienced by children and young people may impact on carers 2.4 Explain how early intervention is linked to positive outcomes for disabled children and young people and their carers
3. Be able to lead child and young person centred provision	3.1 Explain the features of child and young people centred provision 3.2 Promote an ethos that focuses on the child or young person rather than the disability 3.3 Lead work with children and young people to develop accessible information about service provision 3.4 Lead child and young person centred assessments that focus on strengths

	<p>and abilities to identify the support required</p> <p>3.5 Work with others to plan provision that meets the identified needs of children and young people</p> <p>3.6 Implement provision that meets the identified needs of children and young people</p> <p>3.7 Evaluate with children and young people and their carers how well the service provision meets their needs</p>
4. Be able to work in partnership with others to promote services for children and young people and their carers	<p>4.1 Analyse how specialist agencies and other professionals impact on wider opportunities for children and young people and their carers</p> <p>4.2 Share information with others to promote the wellbeing and positive outcomes for children, young people and their carers</p> <p>4.3 Work in partnership with others to obtain additional support for children, young people and their carers</p>
Additional information	
<p>Others may include:</p> <ul style="list-style-type: none"> • Workers / Practitioners • Colleagues • Carers • Volunteers • Students • Other professionals • Advocates 	
Assessment requirements specified by a sector or regulatory body (if appropriate)	
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p> <p>Learning Outcomes 2 and 3 must be assessed in the work setting.</p>	
Details of the relationship of the unit and relevant national occupational standards	
CCLD414	Co-ordinate and support provision for disabled children and those with special educational needs

Unit Title	Develop professional supervision practice in health and social care or children and young people’s work settings
Unit Number	M/602/3187
Level	5
Credit Value	5
GLH	39

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills required to undertake professional supervision of others.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the purpose of professional supervision in health and social care or children and young people’s work settings	1.1 Analyse the principles, scope and purpose of professional supervision 1.2 Outline theories and models of professional supervision 1.3 Explain how the requirements of legislation, codes of practice and agreed ways of working influence professional supervision 1.4 Explain how findings from research, critical reviews and inquiries can be used within professional supervision 1.5 Explain how professional supervision can protect the: <ul style="list-style-type: none"> • individual • supervisor • supervisee
2. Understand how the principles of professional supervision can be used to inform performance management in health and social care or children and young people’s work settings	2.1 Explain the performance management cycle 2.2 Analyse how professional supervision supports performance 2.3 Analyse how performance indicators can be used to measure practice
3. Be able to undertake the preparation for professional supervision with supervisees in health and social care or children and young people’s work settings	3.1 Explain factors which result in a power imbalance in professional supervision 3.2 Explain how to address power imbalance in own supervision practice

	<p>3.3 Agree with supervisee confidentiality, boundaries, roles and accountability within the professional supervision process</p> <p>3.4 Agree with supervisee the frequency and location of professional supervision</p> <p>3.5 Agree with supervisee sources of evidence that can be used to inform professional supervision</p> <p>3.6 Agree with supervisee actions to be taken in preparation for professional supervision</p>
<p>4. Be able to provide professional supervision in health and social care or children and young people’s work settings</p>	<p>4.1 Support supervisees to reflect on their practice</p> <p>4.2 Provide positive feedback about the achievements of the supervisee</p> <p>4.3 Provide constructive feedback that can be used to improve performance</p> <p>4.4 Support supervisees to identify their own development needs</p> <p>4.5 Review and revise professional supervision targets to meet the identified objectives of the work setting</p> <p>4.6 Support supervisees to explore different methods of addressing challenging situations</p> <p>4.7 Record agreed supervision decisions</p>
<p>5. Be able to manage conflict situations during professional supervision in health and social care or children and young people’s work settings</p>	<p>5.1 Give examples from own practice of managing conflict situations within professional supervision</p> <p>5.2 Reflect on own practice in managing conflict situations experienced during professional supervision process</p>
<p>6. Be able to evaluate own practice when conducting professional supervision in health and social care or children and young people’s work settings</p>	<p>6.1 Gather feedback from supervisee/s on own approach to supervision process</p> <p>6.2 Adapt approaches to own professional supervision in light of feedback from supervisees and others</p>
<p>Additional information</p>	

Agreed ways of working will include policies and procedures where these exist.

An **individual** is someone accessing care or support.

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 3, 4, 5 and 6 must be assessed in the work setting.

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

LMCS A1, B1, HSC 41, 43, 45, CCLD 328, 427

Unit Title Providing Independent Advocacy to Adults
Unit Number R/502/3298
Level 4
Credit Value 5
GLH 35

Unit Aim

The unit aims to provide learners with a detailed understanding and the practical skills needed to provide Independent Advocacy to adults in a range of settings including: care homes, hospital wards, community settings, secure settings, supported housing, prisons, day centres and police stations.

Learning outcome The learner will	Assessment criteria The learner can
1. Provide Independent Advocacy support to adults in a range of settings	1.1 Identify a range of settings and their impact on adults who may require the support of an advocate 1.2 Analyse and address the potential negative impact of the environment 1.3 Promote the advocacy service in a range of settings 1.4 Identify and address a range of dilemmas advocates can face in practice 1.5 Support adults to self-advocate 1.6 Apply local or national standards .
2. Treat the individual receiving advocacy support as an individual	2.1 Identify personal values 2.2 Use communication methods appropriate to the individual 2.3 Resolve barriers that can prevent people being treated as an individual 2.4 Use underpinning advocacy principles of empowerment and person centred to treat people as individuals 2.5 Describe how cultural backgrounds can impact on the advocacy relationship 2.6 Recognise common myths and assumptions about different people 2.7 End the advocacy relationship a positive manner.

<p>3. Assist the individual receiving advocacy support to explore choices and potential consequences</p>	<p>3.1 Help individuals to access a range of sources of information on options available</p> <p>3.2 Support an individual to explore options available and make choices</p> <p>3.3 Use UK and European legislation to identify human, service and legal rights</p> <p>3.4 Act on the choices and preferred options of an individual.</p>
<p>4. Support adults through a range of meetings</p>	<p>4.1 Explain the purpose and function of a range of meetings</p> <p>4.2 Describe the roles and responsibilities of a range of people who attend meetings</p> <p>4.3 Support an individual to participate in a range of meetings</p> <p>4.4 Review and take further steps as appropriate.</p>
<p>5. Work safely</p>	<p>5.1 Use supervision to identify good practice and areas for improvement</p> <p>5.2 Maintain accurate records</p> <p>5.3 Summarise local adult protection procedures</p> <p>5.4 Use adult protection procedures to identify when it is appropriate to disclose information and breach confidentiality</p> <p>5.5 Respond to disclosures of abuse.</p>

Additional information

- **Settings:** including prisons, day centres, hospital and locked wards and their impact on the adult receiving advocacy support
- **Dilemmas:** including maintaining confidentiality, remaining person led and information sharing
- **Local or national standards:** UKAN, Mind, Action 4 Advocacy: Advocacy Charter and Code of Practice.
- **Communication methods:** verbal and non verbal methods of communication
- **Barriers:** including financial, time, personal and organisational
- **Different people** common myths and assumptions about people including those with learning and physical disabilities, sensory impairments, mental health needs and dementia.
- **Sources of information:** including reports, records, medical information and rights.

- **Legislation:** including the Human Rights Act 1998, NHS + Community Care Act 1990, Mental Health Acts 1983 and 2007, Disability and Discrimination Act 2005, Care Standards Act 2000.
- **Meetings:** including review, assessment, planning, safeguarding and complaints meetings.
- **Range of people:** including social workers, care managers, day centre staff, therapists, GP's, managers
- **Support:** including attending a meeting, empowering an individual, representing an individual at the meeting and working with an individual before the meeting
- **Review and take further steps:** review the outcome of the meeting and help the individual decide if any further action is required

The nature of this unit means that most of the evidence must come from real work activities.

Simulation can only be used in exceptional circumstances for example:

Where performance is critical or high risk, happens infrequently or happens frequently but the presence of an assessor/observer would prevent the Independent Advocacy relationship developing.

Simulation must be discussed and agreed in advance with the External Verifier.

The evidence must reflect, at all times, the policies and procedures of the workplace, as linked to current legislation and the values and principles for good practice in independent advocacy.

Required sources of performance and knowledge evidence:

Direct Observation and/or Expert Witness Testimony are the required assessment method to be used to evidence some part of this unit.

If the assessor is unable to observe the candidate s/he will identify an expert witness in the workplace who will provide testimony of the candidate's work-based performance. The assessor or expert witness will observe the candidate in real work activities, and this is likely to provide most of the evidence for the assessment criteria for this unit.

Other sources of performance and knowledge evidence:

The assessor will identify other sources of evidence to ensure that the most reliable and efficient mix of evidence gathering methods from the list below. This will ensure that all learning outcomes and assessment criteria are met and that the consistency of the candidate's performance can be established.

- Work products
- Professional discussion
- Candidate/ reflective accounts
- Questions asked by assessors
- Witness testimonies
- Projects/Assignments/RPL
- Case studies

Assessment requirements specified by a sector or regulatory body (if appropriate)	
This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.	
Details of the relationship of the unit and relevant national occupational standards	
HSC 330	Support individuals to access and use services and facilities
HSC 3111	Promote the equality, diversity, rights and responsibilities of individuals
AHP 17	Assist and support individuals to use total communication systems
HSC 31	Promote effective communication for and about individuals
GEN 12	Reflect on and evaluate your own values, priorities, interests and effectiveness
H16	Market and promote the service
H136	Communicate effectively with individuals and others
HSC 328	Contribute to care planning and review
HSC 335	Contribute to the protection of individuals from harm and abuse
HSC 366	Support individuals to represent their own needs and wishes at decision making forums
HSC 367	Help individuals identify and access independent representation and advocacy
HSC 368	Present individuals' needs and preferences
HSC 3199	Promote the values and principles underpinning best practice
HSC 45	Develop practices which promote choice, well-being and protection of all individuals
HSC 423	Assist individuals at formal hearings
HSC 429	Work with groups to promote individual growth, development and independence
HSC 431	Support individuals where abuse has been disclosed
HSC 434	Maintain and manage records and reports
HSC 437	Promote your organisation and its services to stakeholders.

Unit Title Recruitment and selection within health and social care or children and young people’s settings
Unit Number R/602/2338
Level 4
Credit Value 3
GLH 26

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills required to recruit and select in health and social care or children’s and young people’s settings.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the recruitment and selection processes in health and social care or children and young people’s settings	1.1 Explain the impact on selection and recruitment processes, in own setting, of: <ul style="list-style-type: none"> • Legislative requirements • Regulatory requirements • Professional codes • Agreed ways of working 1.2 Explain circumstances when it is necessary to seek specialist expertise in relation to recruitment and selection 1.3 Analyse how serious case reviews and inquiries have contributed to the establishment of policies and procedures within recruitment which safeguard vulnerable adults, children and young people.
2. Be able to contribute to the recruitment process in health and social care or children’s and young people’s settings	2.1 Review job descriptions and person specifications to meet work setting objectives 2.2 Work with others to establish the criteria that will be used in the recruitment and selection process 2.3 Work with others to establish the methods that will be used in the recruitment and selection process 2.4 Involve individuals in the recruitment process

<p>3. Be able to participate in the selection process in health and social care or children’s and young people’s settings</p>	<p>3.1 Use agreed methods to assess candidates 3.2 Use agreed criteria to select candidates 3.3 Communicate the outcome of the selection process according to the policies and procedures of own setting</p>
<p>4. Be able to evaluate the recruitment and selection processes in health and social care or children’s and young people’s settings</p>	<p>4.1 Evaluate the recruitment and selection methods and criteria used in own setting 4.2 Recommend changes for improvement to recruitment and selection processes in own setting</p>

Additional information

Agreed ways of working will include policies and procedures where these exist.

Others may include:

- human resource personnel
- Workers / Practitioners
- Carers
- Significant others

Individual is someone accessing care or support.

Recruitment process can include consultation or practical involvement in the process.

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, and 4 must be assessed in the work setting.

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

LMCS A3, HSC 444, CCLD 333, MSC D3, D4, D5

Unit Title **Manage quality in health and social care or children and young people’s setting**

Unit Number **R/602/2758**

Level **5**

Credit Value **4**

GLH **36**

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills required to manage quality assurance systems in own work setting.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the context of quality assurance in a health and social care or children and young people’s setting	1.1 Analyse how legislative and regulatory frameworks inform quality standards that apply to the work setting 1.2 Analyse how quality standards influence positive outcomes for individuals 1.3 Evaluate a range of methods that can be used to measure the achievement of quality standards
2. Be able to implement quality standards in a health and social care or children and young people’s setting	2.1 Work with team members and others to <ul style="list-style-type: none"> • agree quality standards for the service • select indicators to measure agreed standards • identify controls to support the achievement of agreed standards 2.2 Develop systems and processes to measure achievement of quality standards 2.3 Support team members to carry out their roles in implementing quality controls 2.4 Explain how quality assurance standards relate to performance management
3. Be able to lead the evaluation of quality processes in a health and social care or children and young people’s setting	3.1 Support team members to carry out their roles in monitoring quality indicators

	<p>3.2 Use selected indicators to evaluate the achievement of quality standards</p> <p>3.3 Work with others to identify:</p> <ul style="list-style-type: none"> • areas of best practice • areas for improvement <p>3.4 Work with others to develop an action plan to improve quality of service</p>
<p>Additional information</p>	
<p>Individuals are those accessing care or support.</p> <p>Others may include:</p> <ul style="list-style-type: none"> • Individuals • Advocates • Family members • Others important to the individual’s well-being 	
<p>Assessment requirements specified by a sector or regulatory body (if appropriate)</p>	
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p> <p>Learning Outcomes 2 and 3 must be assessed in a real work environment.</p>	
<p>Details of the relationship of the unit and relevant national occupational standards</p>	
<p>LMC E3 LMC A5 CCLD 427 MSC F13 HSC436</p>	

Unit Title	Support children’s speech, language and communication
Unit Number	T/600/9789
Level	3
Credit Value	4
GLH	30

Unit Aim

The unit aims to provide a basis for understanding the importance of speech, language and communication for a child’s overall development and explores the ways in which those working with children can support the development of speech, language and communication skills.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the importance of speech, language and communication for children’s overall development	1.1 Explain each of the terms: <ul style="list-style-type: none"> • Speech • Language • Communication • Speech, language and communication needs 1.2 Explain how speech, language and communication skills support each of the following areas in children’s development: <ul style="list-style-type: none"> • Learning • Emotional • Behaviour • Social 1.3 Describe the potential impact of speech, language and communication difficulties on the overall development of a child, both currently and in the longer term
2. Understand the importance and the benefits of adults supporting the speech, language and communication development of the children in own setting	2.1 Explain the ways in which adults can effectively support and extend the speech, language and communication development of children during the early years 2.2 Explain the relevant positive effects of adult support for the children and their carers

	<p>2.3 Explain how levels of speech and language development vary between children entering early years provision and need to be taken into account during settling in and planning</p>
<p>3. Be able to provide support for the speech, language and communication development of the children in own setting</p>	<p>3.1 Demonstrate methods of providing support taking into account the:</p> <ul style="list-style-type: none"> • age • specific needs • abilities • home language where this is different to that of setting • interests of the children in own setting <p>3.2 Demonstrate how day to day activities within the setting can be used to encourage speech, language and communication development in young children</p> <p>3.3 Demonstrate in own practice how to work with children to develop speech, language and communication in:</p> <ul style="list-style-type: none"> • 1:1 basis • Groups <p>3.4 Evaluate the effectiveness of speech, language and communication support for children in own setting</p>
<p>4. Be able to contribute to maintaining a positive environment that supports speech, language and communication</p>	<p>4.1 Explain the importance of the environment in supporting speech, language and communication development</p> <p>4.2 Review evidence about the key factors that provide a supportive speech, language and communication environment</p> <p>4.3 Demonstrate how settings use the environment to provide effective support for speech, language and communication for all children</p>
<p>Additional information</p>	
<p>Communication is a complex, two-way process, reliant on a wide range of skills including listening, understanding and means of expression as well as interaction skills. Consideration of the complexity of this process and the many factors which can affect it underpins effective communication in practice.</p>	

1.1 Explain

Taken from a leaflet produced by the Communications Consortium 'Explaining Speech, Language and Communication Needs (SLCN)':

"Children and young people with speech, language and communication needs (SLCN) have difficulties in communicating with others; it may be that they cannot express themselves effectively or they may have difficulties in understanding what is being said to them. Alternatively, those who support them may not understand their way of communicating.

Children and young people may have difficulties across one or many of the different elements of speech, language and communication resulting in a communication breakdown. This may be minor and temporary, or it may be complex and long-term. Under this umbrella term, there will be many different labels used. The term 'needs' refers both to the needs of the individual and to what society can do to support their inclusion. It implicitly looks both at the individual and the environment in which children play, learn, communicate and live."

2.1 Ways may include:

- The words and levels of language adults use with children (including the use of questions)
- Their conversations / interactions with children
- Information and activities used
- Work with parents / carers

2.2 Positive effects may include improvements in:

- speech, language and communication skills
- social interaction
- behaviour
- emotional development / self confidence

3.1 Methods may include:

- adapting own language
- scaffolding the child's language
- giving children the time and opportunity to communicate
- facilitating communication between children with each other
- learning through play
- working with carers

4.2 Key factors may include:

- the physical environment
- staff roles and responsibilities
- training needs and opportunities
- views of the child
- appropriate involvement of carers

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 3 and 4 must be assessed in a real work environment.

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

CCLD 301 Develop and promote positive relationships

CCLD 312 Plan and implement positive environments for babies and children under 3 years

Speech, language and communication framework

This unit covers, or links to competences from the SLCF

Universal: A1, A5, A6, A8, A9, B1, B5, C1, C2, C3, C5, D1, D2

Enhanced: A4, B7, C1, C2, C3, C4, C15

Unit Title Support individuals with multiple conditions and/or disabilities
Unit Number T/601/5253
Level 5
Credit Value 5
GLH 34

Unit Aim

The purpose of this unit is to provide the knowledge and skills needed review and improve service provision for individuals with multiple conditions/disabilities.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand the implications of multiple conditions and/or disabilities for the individual	1.1 Explain the correlation between conditions and <ul style="list-style-type: none"> • disability • gender • age • ethnicity • socio-economic status 1.2 Explain how multiple conditions and/or disabilities can impact on the individual 1.3 Make recommendations for modifications to service delivery that can result in improved outcomes for individuals with multiple conditions and/or disabilities
2 Be able to support an individual with multiple conditions and/or disabilities	2.1 Work collaboratively with the individual and/or others to support the individual 2.2 Provide advice and expertise to support the assessment and/or referral of an individual with multiple conditions and/or disabilities 2.3 Use referral processes to secure services for the individual
3 Be able to develop others to support the individual with multiple conditions and/or disabilities	3.1 Advise and inform others about the implications of multiple conditions 3.2 Devise strategies to improve the practice of others <ul style="list-style-type: none"> • at and individual level

	<ul style="list-style-type: none"> at an organisational level
4 Be able to review service provision in respect of individuals with multiple conditions and/or disabilities	<p>4.1 Reflect on own role in relation to providing a service for individuals with multiple conditions and/or disabilities</p> <p>4.2 Evaluate, with others, the extent to which provision meets the needs of individuals with multiple conditions and/or disabilities</p> <p>4.3 Implement actions agreed as a result of evaluation within own role</p>
<p>Multiple conditions and/or disabilities could include a combination of factors relating to:</p> <ul style="list-style-type: none"> Sensory loss Physical health Mental health Physical disability Learning difficulty/disability Emotional health <p>Others could include:</p> <ul style="list-style-type: none"> Other professionals Carers/family members Advocates Colleagues 	
<p>Assessment requirements specified by a sector or regulatory body (if appropriate)</p>	
<p>This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.</p>	
<p>Details of the relationship of the unit and relevant national occupational standards</p>	
<p>Sensory Services 4</p>	

Unit Title **Support individuals at the end of life**
Unit Number **T/601/9495**
Level **3**
Credit Value **7**
GLH **53**

Unit Aim

This unit is aimed at those working in a wide range of settings. It provides the learner with the knowledge and skills required to support end of life care.

Learning outcome The learner will	Assessment criteria The learner can
1 Understand the requirements of legislation and agreed ways of working to protect the rights of individuals at the end of life	1.1 Outline legal requirements and agreed ways of working designed to protect the rights of individuals in end of life care 1.2 Explain how legislation designed to protect the rights of individuals in end of life care applies to own job role
2 Understand factors affecting end of life care	2.1 Outline key points of theories about the emotional and psychological processes that individuals and key people may experience with the approach of death 2.2 Explain how the beliefs, religion and culture of individuals and key people influence end of life care 2.3 Explain why key people may have a distinctive role in an individual's end of life care 2.4 Explain why support for an individual's health and well-being may not always relate to their terminal condition
3 Understand advance care planning in relation to end of life care	3.1 Describe the benefits to an individual of having as much control as possible over their end of life care 3.2 Explain the purpose of advance care planning in relation to end of life care 3.3 Describe own role in supporting and recording decisions about advance care planning

	3.4 Outline ethical and legal issues that may arise in relation to advance care planning
4 Be able to provide support to individuals and key people during end of life care	<p>4.1 Support the individual and key people to explore their thoughts and feelings about death and dying</p> <p>4.2 Provide support for the individual and key people that respects their beliefs, religion and culture</p> <p>4.3 Demonstrate ways to help the individual feel respected and valued throughout the end of life period</p> <p>4.4 Provide information to the individual and/or key people about the individual's illness and the support available</p> <p>4.5 Give examples of how an individual's well-being can be enhanced by:</p> <ul style="list-style-type: none"> • environmental factors • non-medical interventions • use of equipment and aids • alternative therapies <p>4.6 Contribute to partnership working with key people to support the individual's well-being</p>
5 Understand how to address sensitive issues in relation to end of life care	<p>5.1 Explain the importance of recording significant conversations during end of life care</p> <p>5.2 Explain factors that influence who should give significant news to an individual or key people</p> <p>5.3 Describe conflicts and legal or ethical issues that may arise in relation to death, dying or end of life care</p> <p>5.4 Analyse ways to address such conflicts</p>
6 Understand the role of organisations and support services available to individuals and key people in relation to end of life care	<p>6.1 Describe the role of support organisations and specialist services that may contribute to end of life care</p> <p>6.2 Analyse the role and value of an advocate in relation to end of life care</p> <p>6.3 Explain how to establish when an advocate may be beneficial</p>

	<p>6.4 Explain why support for spiritual needs may be especially important at the end of life</p> <p>6.5 Describe a range of sources of support to address spiritual needs</p>
7 Be able to access support for the individual or key people from the wider team	<p>7.1 Identify when support would best be offered by other members of the team</p> <p>7.2 Liaise with other members of the team to provide identified support for the individual or key people</p>
8 Be able to support individuals through the process of dying	<p>8.1 Carry out own role in an individual's care</p> <p>8.2 Contribute to addressing any distress experienced by the individual promptly and in agreed ways</p> <p>8.3 Adapt support to reflect the individual's changing needs or responses</p> <p>8.4 Assess when an individual and key people need to be alone</p>
9 Be able to take action following the death of individuals	<p>9.1 Explain why it is important to know about an individual's wishes for their after-death care</p> <p>9.2 Carry out actions immediately following a death that respect the individual's wishes and follow agreed ways of working</p> <p>9.3 Describe ways to support key people immediately following an individual's death</p>
10 Be able to manage own feelings in relation to the dying or death of individuals	<p>10.1 Identify ways to manage own feelings in relation to an individual's dying or death</p> <p>10.2 Utilise support systems to deal with own feelings in relation to an individual's dying or death</p>

Additional information

Legislation and agreed ways of working will include policies and procedures where these apply, and may relate to:

- equality, diversity and discrimination
- data protection, recording, reporting, confidentiality and sharing information
- the making of wills and living wills

- dealing with personal property of deceased people
- removal of medical equipment from deceased people
- visitors
- safeguarding of vulnerable adults

Systems for advance care planning may include:

- Gold Standard Framework
- Preferred Priorities for Care

An **individual** is the person requiring end of life care

Key people may include:

- Family members
- Friends
- Others who are important to the well-being of the individual

Support organisations and specialist services may include:

- nursing and care homes
- specialist palliative care services
- domiciliary, respite and day services
- funeral directors

Other members of the team may include:

- line manager
- religious representatives
- specialist nurse
- occupational or other therapist
- social worker
- key people

Actions may include:

- Attending to the body of the deceased
- Reporting the death through agreed channels
- Informing key people

Agreed ways of working will include policies and procedures where these exist.

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 4, 7, 8, 9 and 10 must be assessed in a real work environment in ways that do not intrude on the care of an individual at the end of life.

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

Unit Title **Implement the Positive Behavioural Support model**
Unit Number **T/601/9738**
Level **4**
Credit Value **8**
GLH **61**

Unit Aim

This unit is aimed at those working with individuals who have complex needs / continuing health care / severe challenging behaviour. It provides the learner with knowledge, understanding and skills required to implement the Positive Behavioural Support model.

Learning outcome The learner will	Assessment criteria The learner can
1 Understand the context of the Positive Behavioural Support model	1.1 Explain how Positive Behavioural Support has been influenced by: <ul style="list-style-type: none"> • Applied Behaviour Analysis (ABA) • Social Role Valorisation (SRV) 1.2 Summarise current legislation and policy guidance relating to Positive Behavioural Support
2 Understand the term 'challenging behaviour'	2.1 Define the term ' challenging behaviour ' 2.2 Explain the reasons for the term challenging behaviour coming into use 2.3 Analyse key factors that lead to a behaviour being defined as challenging
3 Understand the context in which challenging behaviour occurs	3.1 Summarise key environmental risk factors for challenging behaviours 3.2 Explain how slow and fast triggers contribute to challenging behaviour 3.3 Analyse the role of reinforcement in maintaining behaviour 3.4 Explain the time intensity model
4 Be able to contribute to the functional analysis in relation to an individual's challenging behaviour	4.1 Describe the key components of functional analysis 4.2 Explain the key methods of analysing behaviour 4.3 Complete accurate records of behaviour using a structured method

	<p>4.4 Identify environmental risk factors for an individual’s challenging behaviour</p> <p>4.5 Identify possible slow and fast triggers for an individual’s challenging behaviour</p> <p>4.6 Identify factors that may contribute to reinforcement of an individual’s challenging behaviour</p> <p>4.7 Evaluate the importance of functional analysis in effective person centred behavioural intervention for individuals</p>
5 Understand the key characteristics of Positive Behavioural Support	<p>5.1 Describe the key characteristics of Positive Behavioural Support</p> <p>5.2 Explain the role within Positive Behavioural Support of:</p> <ul style="list-style-type: none"> • primary prevention strategies • secondary prevention strategies • non aversive reactive strategies <p>5.3 Explain the importance of social validity in the Positive Behavioural Support model</p>
6 Be able to implement primary prevention strategies produce	<p>6.1 Summarise the key primary prevention strategies</p> <p>6.2 Implement an agreed primary prevention strategy using least restrictive practice, respecting the individual’s dignity, rights and choice</p> <p>6.3 Explain the importance of effective communication and positive interaction in primary prevention for individuals</p> <p>6.4 Positively interact with an individual by providing the level of help and reinforcement that enables them to participate in an activity</p> <p>6.5 Use effective communication with an individual to promote positive behaviour</p> <p>6.6 Evaluate the social validity of an agreed primary prevention strategy for an individual</p>
7 Be able to use a person centred approach to develop plans that promote participation	<p>7.1 Explain how Active Support can help prevent challenging behaviour by improving an individual’s quality of life</p>

	<p>7.2 Analyse the role of structure and daily planning in primary prevention for individuals</p> <p>7.3 Review an individual's daily activities to identify areas for increasing participation and choice</p> <p>7.4 Review an individual's routine to identify opportunities for increasing participation and choice</p> <p>7.5 Develop a participation plan with an individual that contributes to the reduction of challenging behaviour by actively supporting their engagement in a specific task</p> <p>7.6 Work with an individual to identify skills that could be developed to enable greater participation in day-to-day activities</p>
<p>8 Be able to implement secondary prevention strategies</p>	<p>8.1 Summarise key secondary prevention strategies</p> <p>8.2 Explain when secondary prevention strategies should be used with individuals</p> <p>8.3 Identify early warning signs of behavioural agitation in an individual</p> <p>8.4 Identify possible secondary prevention strategies that may be used with an individual</p> <p>8.5 Implement an agreed secondary prevention strategy using least restrictive practice, respecting the individual's dignity, rights and preferences</p>
<p>9 Be able to implement non aversive reactive strategies</p>	<p>9.1 Explain when reactive strategies should be used with individuals</p> <p>9.2 Describe the key characteristics and types of reactive strategies</p> <p>9.3 Assess the risks in the use of reactive strategies</p> <p>9.4 Identify possible reactive strategies that may be used for an individual</p> <p>9.5 Implement an agreed non aversive reactive strategy using least restrictive</p>

	<p>practice, respecting the individual’s dignity, rights and preferences</p> <p>9.6 Establish an individual’s preferred post-incident support</p> <p>9.7 Identify own preferred post-incident support</p>
10 Be able to understand and implement Positive Behavioural Support Plans	<p>10.1 Explain the purpose and importance of Positive Behaviour Support Plans for individuals</p> <p>10.2 Identify the key components of a Positive Behaviour Support Plan for individuals</p> <p>10.3 Implement agreed procedures in an individual’s Positive Behavioural Support Plan</p> <p>10.4 Contribute to the review of an individual’s Positive Behavioural Support Plan</p>

Additional information

Positive Behavioural Support

An approach to supporting individuals who challenge that combines the technology of Applied Behaviour Analysis with the values base of Social Role Valorisation and the individualised focus of Person-Centred Planning.

Applied Behaviour Analysis (ABA)

A scientific process of examining what causes and maintains behaviour, in order to bring about positive change.

Social Role Valorisation (SRV)

Promotes valued social roles for individuals who are socially disadvantaged, to help them get some of the good things in life.

Challenging behaviour may include behaviours that are:

- Repetitive / obsessive
- Withdrawn
- Aggressive
- Self-injurious
- Disruptive
- Anti-social or illegal
- Verbally abusive

Factors that lead to behaviour being defined as challenging may include

- culture
- competence and capacity of settings
- social norms
- frequency, intensity and duration of the behaviour
- ability to communicate effectively

Environmental risk factors will include features that are physical or social, such as:

- Uncomfortable levels of stimulation (eg too busy, boring)
- Institutional-style setting (eg block treatment, rigid routines)
- Poor service organisation (eg. inexperienced carers)
- Inappropriate social environment (eg overly restrictive, limited choice)
- Environmental pollutants (eg. temperature, noise levels)

Triggers are factors that make challenging behaviours more likely to occur. They include:

- Slow triggers, which are aspects of a person's environment or daily routines that do not necessarily happen immediately before the challenging behaviours, but still affect whether these behaviours are performed.
- Fast triggers, which are specific events that occur immediately prior to the behaviour. Their impact upon behaviour is rapid or immediate.

Reinforcement strengthens behaviour and is of two types – positive and negative. Positive reinforcement works because individuals gain access to things or events that they like or want while negative reinforcement works because individuals get rid of things that they don't like.

Time intensity model

The stages of increasing agitation to crisis point and back again. This helps to understand the emotional and physiological changes experienced during a severe episode of challenging behaviour.

Functional analysis

The process for identifying or analysing the function or purpose of someone's behaviour, using a range of structured measures.

Structured methods

Measures for monitoring and recording behaviour; may include

- ABC charts
- Scatterplots
- Incident forms
- Behaviour monitoring forms
- Direct observation

Primary prevention

Proactive strategies that involve changing aspects of a person's living, working and recreational environments so that the possibility of challenging behaviour occurring is reduced.

Secondary prevention

Strategies that apply when a person's challenging behaviour begins to escalate, in order to prevent a major incident.

Non-aversive reactive strategies are ways of responding safely and efficiently to challenging behaviours that have not been prevented. They can include physical interventions that do not cause pain and do minimise discomfort and comply with the British Institute of Learning Disabilities (BILD) code of practice for the use of physical interventions.

Social validity refers to interventions that are ethical. That is, they address socially significant problems, have clear benefits for the individual, are acceptable to the individual and others, and use the least restrictive or intrusive approach.

Positive interaction concerns the performance of those supporting an individual. It consists of providing different levels of help, breaking activities into manageable steps; and positive reinforcement to promote participation.

Levels of help

Graduated levels of assistance, from simple verbal reminders providing the lowest level of support to actual physical guidance providing the highest level. Assistance should be given flexibly according to the individual's need for help and should be focused on encouraging as much independence as possible.

Active Support

A person-centred model of how to interact with individuals combined with daily planning systems that promote participation and enhance quality of life.

Review should take place involving the individual as much as is possible

Post-incident support may include:

- Emotional support
- Time away from the setting
- First aid
- Quiet time
- Space
- Temporary redeployment
- Additional training
- Personal reflection
- Counselling
- Opportunity to express feelings

Positive Behaviour Support Plan

A document containing the key information that those who support individuals with challenging behaviour must have, in order to provide consistent support on a daily basis.

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 4, 5, 6, 7, 8, 9 and 10 must be assessed in a real work environment. Simulation will be accepted to assess ACs 6.2, 8.5 and 9.5 if real work assessment is not possible.

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

Unit Title	Manage induction in health and social care or children and young people's settings
Unit Number	T/602/2574
Level	4
Credit Value	3
GLH	21

Unit Aim

The purpose of this unit is to assess the learner's knowledge, understanding and skills for managing induction in health and social care or children and young people's settings.

Learning outcome The learner will	Assessment criteria The learner can
1 Understand the purpose of induction for health and social care or children and young people's settings	1.1 Explain why induction is important for practitioners, individuals and organisations 1.2 Identify information and support materials that are available to promote effective induction 1.3 Explain the link between induction processes, qualifications and progression routes in the sector 1.4 Analyse the role of the induction process in supporting others to understand the values, principles and agreed ways of working within a work setting 1.5 Analyse the role of induction in safeguarding individuals and others within a work setting
2 Be able to manage the induction process in health, social care and children and young people's work settings	2.1 Explain the factors that influence induction processes for practitioners 2.2 Develop an induction programme in agreement with others 2.3 Manage the induction process for practitioners
3 Be able to support the implementation of induction processes in health, social care and children and young people's work settings	3.1 Identify different methods that can be used to support the induction process for practitioners 3.2 Support others involved in the induction of practitioners

	<p>3.3 Obtain feedback from others on practitioners' achievement of identified induction requirements</p> <p>3.4 Support practitioners to reflect on their learning and achievement of induction requirements</p> <p>3.5 Provide feedback to practitioners on achievement of induction requirements</p> <p>3.6 Support personal development planning for a practitioner on completion of induction</p>
4 Be able to evaluate the induction process in health and social care or children and young people's settings	<p>4.1 Explain the importance of continuous organisational improvement in the provision of induction</p> <p>4.2 Obtain feedback on the induction process from practitioners</p> <p>4.3 Obtain feedback on the induction process from others in the work setting</p> <p>4.4 Use feedback to identify areas for improvement within the induction process</p>
5 Be able to implement improvements to the induction process in health and social care or children and young people's settings	<p>5.1 Work with others to identify improvements within the induction process</p> <p>5.2 Work with others to implement changes required to address areas for improvement within the induction process</p>

Additional information

Practitioners could include:

- new recruits
- existing employees who have taken on additional responsibilities
- existing employees who have taken on a new role
- temporary or agency workers
- workers transferring from another setting
- students on placement
- volunteers

Individuals are those accessing care or services.

Agreed ways of working will include policies and procedures where these exist.

Factors that influence could include:

- job descriptions
- levels of responsibility
- previous experience
- qualification status
- availability of others
- organisational culture
- organisational requirements
- individual needs

Others may include:

- Workers / Practitioners
- Carers
- Significant others
- Individuals who access services
- Line managers
- Other professionals

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, 4 and 5 must be assessed in the work setting.

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

HSC 444 LMC A1 A3

Unit Title	Manage finance within own area of responsibility in health and social care or children and young people’s settings
Unit Number	T/602/2753
Level	4
Credit Value	4
GLH	31

Unit Aim

The purpose of this unit is to assess the learner’s knowledge, understanding and skills required to manage finance in own area of responsibility in a health and social care or children and young people’s setting.

Learning outcome The learner will	Assessment criteria The learner can
1 Understand financial management in own work setting	1.1 Explain the importance of effective financial management systems within own work setting 1.2 Outline sources of funding that are used to construct the budget for own work setting 1.3 Outline the roles, responsibilities and accountability of all those involved in financial management of the budget for own work setting
2 Be able to plan budget requirement for own area of responsibility	2.1 Work with others to calculate the financial resources required to meet objectives within own area of responsibility 2.2 Communicate budget requirements within remit of role and responsibility to inform overall budget build 2.3 Analyse the impact of an insufficient budget on service delivery 2.4 Work with others to prioritise budget allocation in own area of responsibility
3 Be able to manage a budget	3.1 Explain the financial management systems that are available to monitor budget for own area of responsibility 3.2 Agree roles and responsibilities of others in recording financial expenditure

	<p>3.3 Calculate planned expenditure over the financial period</p> <p>3.4 Monitor actual spend against planned expenditure</p> <p>3.5 Analyse variances between planned and actual expenditure</p> <p>3.6 Implement corrective action to address any variances</p> <p>3.7 Make revisions to the budget to take account of variances and new developments</p>
4 Be able to evaluate financial expenditure within own area of responsibility	<p>4.1 Review actual expenditure against planned expenditure within financial period</p> <p>4.2 Report findings from budget reviews</p> <p>4.3 Make recommendations for adjustments for budget planning and management</p>

Additional information

Others may include:

- Individuals and those important to them
- Team members
- Trustees, owners or other senior decision-makers
- Regulators or commissioners

Financial period may include:

- Monthly
- Quarterly
- Half year
- Full year

New developments may include:

- Change to service provision
- External economic factors
- Government initiatives
- Human Resource requirements

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3 and 4 must be assessed in the work setting.

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

LMC E8 CCLD 4424 MSC E1 MSC E2d

Unit Title Understand partnership working
Unit Number T/602/3188
Level 4
Credit Value 1
GLH 7

Unit Aim

The purpose of this unit is to assess the learner’s knowledge required to understand partnership working.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand partnership working	1.1 Identify the features of effective partnership working 1.2 Explain the importance of partnership working with <ul style="list-style-type: none"> • Colleagues • Other professionals • Others 1.3 Analyse how partnership working delivers better outcomes 1.4 Explain how to overcome barriers to partnership working
Additional information	
Others may include: <ul style="list-style-type: none"> • Individuals • Children and young people • Families • Carers • Friends of the individual • Advocates 	
Assessment requirements specified by a sector or regulatory body (if appropriate)	
This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.	
Details of the relationship of the unit and relevant national occupational standards	

LMCS B1 HSC 41 CCLD 405, 406

Unit Title	Independent Advocacy with Children and Young People
Unit Number	Y/502/3299
Level	4
Credit Value	7
GLH	35

Unit Aim

The unit will support learners to develop the skills and knowledge required to provide Independent Advocacy to children and young people, particularly:

- children in need
- children who are looked after by the local authority
- children who are involved in family group or child protection conferences
- young people in the secure estate
- disabled children and young people
- children and young people in education
- children and young people receiving mental health support.

Learning outcome The learner will	Assessment criteria The learner can
1. Provide Independent Advocacy support to children and young people	1.1 Analyse which groups of children and young people access advocacy support 1.2 Analyse the roles and responsibilities of a children’s advocate 1.3 Assess a range of common advocacy issues for children and young people 1.4 Respond to a range of common advocacy issues 1.5 Identify a range of dilemmas children’s advocates can face in practice 1.6 Respond to practice dilemmas 1.7 Support children and young people to self-advocate 1.8 Select and use skills to support children and young people to express their wishes, feelings and preferred course(s) of action

	<p>1.9 Distinguish between best interests and wishes and feelings</p> <p>1.10 Select and apply relevant standards which govern the service and practitioner</p> <p>1.11 Use a variety of methods to communicate with children and young people</p> <p>1.12 Recognise the impact on communication of behaviour, emotional state, feelings, confidence and of gender</p> <p>1.13 Make positives endings when the advocacy relationship finishes.</p>
<p>2. Use UK, European and International legislation to promote children’s rights</p>	<p>2.1 Summarise key principles and powers in a range of legislation and guidance affecting children</p> <p>2.2 Use the Children Act 1989 and 2004 to identify a range of safeguards and rights</p> <p>2.3 Use opportunities to promote the rights of children and young people</p> <p>2.4 Explain to young people the rights they are entitled to claim</p> <p>2.5 Empower young people with strategies to claim rights.</p>
<p>3. Respond to requests for advocacy support</p>	<p>3.1 Identify a range of people who can refer to children’s advocates</p> <p>3.2 Implement child-friendly referral processes</p> <p>3.3 Refer to a range of support services.</p>
<p>4. Assist the child or young person to explore choices and potential consequence</p>	<p>4.1 Use UK and European legislation to identify children’s service, ethical and legal rights</p> <p>4.2 Treat the child as an individual and accept their preferred choices</p> <p>4.3 Access information to allow children and young people to make informed choices</p> <p>4.4 Support children and young people who wish to make complaints or</p>

	<p>representations about the services they receive</p> <p>4.5 Support children and young people to understand the potential short, medium and long term consequences of the choice(s) they are making.</p>
<p>5. Support children and young people through a range of meetings and decision making processes</p>	<p>5.1 Explain the purpose and function of a range of meetings</p> <p>5.2 Summarise the role of an Independent Advocate within a range of meetings</p> <p>5.3 Attend a range of meetings</p> <p>5.4 Support a child or young person to attend a range of meetings</p> <p>5.5 Represent a child or young person at meetings</p> <p>5.6 Support a young person to have his/her voice heard at a range of meetings</p> <p>5.7 Support a young person to evaluate the outcomes of a range of meetings.</p>
<p>6. Engage with professionals</p>	<p>6.1 Explain the role of a children's advocate to a range of people</p> <p>6.2 Summarise a range of services and systems children and young people are likely to come into contact with</p> <p>6.3 Represent the views and wishes of children and young people to professionals responsible for making decisions</p> <p>6.4 Summarise the roles and responsibilities of a range of people who support children and young people</p> <p>6.5 Explain jargon and terminology to children and young people.</p>
<p>7. Use child protection systems to keep children and young people safe.</p>	<p>7.1 Explain the role of Safeguarding Boards</p> <p>7.2 Summarise local child protection procedures</p> <p>7.3 Use child protection procedures to identify when it is appropriate to disclose information and breach confidentiality</p>

	7.4 Respond to disclosures or concerns of abuse.
--	--

Additional information

- **Groups:** including disabled children, looked after children, care leavers children in need, children with mental health needs and children in the secure estate
- **Common advocacy issues:** including support with complaints, attending meetings, contact or accessing services
- **Standards:** select and apply National Minimum Standards for the Provision of Children’s advocacy Services
- **Variety of methods:** variety of communication methods including verbal and non verbal.
- **Key principles:** key principles of a range of legislation including Children Act 1989 and 2004, United Nations Convention on the Rights of the Child, Working Together and Human Rights Act 1998.
- **People:** including the child, parent, carer, social worker and IRO
- **Range of support services:** including counselling, social services, connexions and YOT.
- **Complaints:** stages of Local Authority Complaints Procedure (under Children Act 1989) and a range of options from negotiation to judicial review.
- **Meetings:** including statutory review, child protection conferences, family group conferences, appeals and complaint meetings.
- **Range of people:** including children and young people, social workers, foster carers, elected members and residential staff
- **Services and systems:** including social services, health, education and youth justice
- **Range of people:** including social workers, judges, guardian, CAMHS workers, IRO’s and personal advisor.

The nature of this unit means that most of the evidence must come from real work activities.

Simulation can only be used in exceptional circumstances for example: Where performance is critical or high risk, happens infrequently or happens frequently but the presence of an assessor/observer would prevent the Independent Advocacy relationship developing.

Simulation must be discussed and agreed in advance with the External Verifier. The evidence must reflect, at all times, the policies and procedures of the workplace, as linked to current legislation and the values and principles for good practice in independent advocacy.

Required sources of performance and knowledge evidence:
Direct Observation and/or Expert Witness Testimony are the required assessment method to be used to evidence some part of this unit.

If the assessor is unable to observe the candidate s/he will identify an expert witness in the workplace who will provide testimony of the candidate's work-based performance. The assessor or expert witness will observe the candidate in real work activities and this is likely to provide most of the evidence for the assessment criteria for this unit.

Other sources of performance and knowledge evidence:

The assessor will identify other sources of evidence to ensure that the most reliable and efficient mix of evidence gathering methods from the list below. This will ensure that all learning outcomes and assessment criteria are met and that the consistency of the candidate's performance can be established.

- Work products
- Professional discussion
- Candidate/ reflective accounts
- Questions asked by assessors
- Witness testimonies
- Projects/Assignments/RPL
- Case studies

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

H136	Communicate effectively with individuals and others
HSC 330	Support individuals to access and use services and facilities
HSC 366	Support individuals to represent their own needs and wishes at decision making forums
HSC 367	Help individuals identify and access independent representation and advocacy
HSC 368	Present individuals' needs and preferences
HSC 3199	Promote the values and principles underpinning best practice
HSC 3111	Promote the equality, diversity, rights and responsibilities of individuals
AHP 17	Assist and support individuals to use total communication systems
HSC 44	Develop practices which promote choice, well-being and protection of children and young people
HSC 45	Develop practices which promote choice, well-being and protection of all individuals
HSC 46	Independently represent and advocate with, and on behalf of, children and young people
HSC 49	Develop and maintain an environment which safeguards and protects children and young people
HSC 431	Support individuals where abuse has been disclosed

HSC 434	Maintain and manage records and reports
HSC 437	Promote your organisation and its services to stakeholders
GEN 12	Reflect on and evaluate your own values, priorities, interests and effectiveness
H16	Market and promote the service
CCLD 301	Develop and promote positive relationships
CCLD 305	Protect and promote children's rights
CCLD 226	Safeguard children from harm
CCLD 338	Develop productive working relationships with colleagues
CCLD 404	Reflect on, review and develop own practice

Unit Title	Develop and evaluate operational plans for own area of responsibility
Unit Number	Y/600/9588
Level	5
Credit Value	6
GLH	25

Unit Aim

The aim of this unit is to enable you to develop and evaluate operational plans within your area of responsibility. It will involve the alignment of your areas of responsibility with those of the organisation, the implementation, monitoring and evaluation of operational plans.

Learning outcome The learner will	Assessment criteria The learner can
1. Be able to align objectives of own area of responsibility with those of own organisation	1.1 Identify operational objectives within own area of responsibility. 1.2 Analyse objectives of own area of responsibility in relation to those of own organisation.
2. Be able to implement operational plans in own area of responsibility	2.1 Assess risks associated with operational plans and include contingency arrangements. 2.2 Identify support from relevant stakeholders. 2.3 Implement operational plan within own area of responsibility.
3. Be able to monitor and evaluate operational plans in own area of responsibility	3.1 Monitor procedures within the operational plan. 3.2 Evaluate operational plans and implement any necessary actions.
Additional information	
Assessment requirements specified by a sector or regulatory body (if appropriate)	
This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.	

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

Unit Title Understand the impact of Acquired Brain Injury on individuals
Unit Number Y/601/6167
Level 3
Credit Value 3
GLH 28

Unit Aim

The aim of the unit is to acquire knowledge to support people who have an Acquired Brain Injury. It covers both the impact on the individual who has the Acquired Brain Injury and their carers.

Learning outcome The learner will	Assessment criteria The learner can
1. Understand Acquired Brain Injury	1.1 Define Acquired Brain Injury 1.2 Describe possible causes of Acquired Brain Injury 1.3 Explain the difference between a Traumatic Brain Injury and other forms of Acquired Brain Injury 1.4 Describe brain injuries that are: <ul style="list-style-type: none"> • mild • moderate • severe
2. Understand the impact on individuals of Acquired Brain Injury	2.1 Discuss initial effects of Acquired Brain Injury on the individual 2.2 Explain the long term effects of Acquired Brain Injury to include <ul style="list-style-type: none"> • physical • functional • cognitive • behavioural effects 2.3 Explain the concepts of loss in relation to Acquired Brain Injury for individuals and carers
3. Understand the specialist communication needs of an individual with Acquired Brain Injury	3.1 Define dysphasia and dysarthria 3.2 Explain the effects of dysphasia and dysarthria on communication 3.3 Compare the different techniques required to support an individual with dysphasia and dysarthria

	3.4 Evaluate different intervention strategies and assistive tools that support communication
4. Understand the impact that personality changes can have on an individual and those providing support	4.1 Explain the impact of personality changes on the individual 4.2 Explain the impact of personality changes on those caring for the individual 4.3 Explain how lack of self awareness /insight may affect the individual 4.4 Explain the skills needed to support the individual and family/ carers to come to terms with personality changes
5. Understand the impact of challenging behaviour	5.1 Explain behaviours which are considered challenging 5.2 Analyse the importance of own attitudes, values and skills when supporting an individual to manage their behaviour 5.3 Explain measures that should be taken to manage the risk from challenging behaviour 5.4 Explain the process for reporting and referring challenging behaviour

Additional information

The individual is the person requiring support. An advocate may need to act on behalf of an individual.

Functional - relates to the individual's ability to carry out day to day tasks, i.e. dressing, washing, cooking. It does not solely mean the physical ability but also can mean concentration, motivation for doing tasks.

Concepts of loss – consider stages of grief as outlined by Elizabeth Kublar Ross and Warden

Personality changes

- Irritability
- Disinhibited behaviour
- Frustration
- Loss of social skills
- Lack of self awareness

Self Awareness – ability to understand the impact of behaviour on others

Carers

- Spouse/partner
- Child
- Parent
- Sibling
- Friend

Challenging behaviour

- Physical attack
- Threatening language
- Sexual disinhibition

Measures – actions required to manage risk e.g.

- Policies
- Supervision
- Support from colleagues
- Make a risk assessment
- Risk management plan

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

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

Unit Title **Facilitate the development of effective group practice in health and social care or children and young people’s settings**

Unit Number **Y/602/2339**

Level **5**

Credit Value **6**

GLH **42**

Unit Aim

This purpose of this unit is assessing the learner’s knowledge, understanding and skills required to facilitate groups, support individuals’ rights within the group process and enable groups to deal with conflicts.

Learning outcome The learner will	Assessment criteria The learner can
<p>1. Understand how groups develop and function in health and social care or children and young people’s work settings</p>	<p>1.1 Analyse the impact of theories and models on group work practice</p> <p>1.2 Explain how to form and maintain a cohesive and effective group</p> <p>1.3 Explain how different facilitation styles may influence</p> <ul style="list-style-type: none"> • Group dynamics • Lifecycle of the group • Group outcomes • Development of roles within the group <p>1.4 Explain why it is important to be clear about the purpose and desired outcomes for the group</p> <p>1.5 Analyse the importance of participant engagement in achieving group outcomes</p>
<p>2. Be able to create a climate that facilitates effective groups in health and social care or children and young people’s work settings</p>	<p>2.1 Evaluate methods that may be utilised in facilitating groups</p> <p>2.2 Prepare an environment that is conducive to the functioning of the group</p> <p>2.3 Work with a group/s to agree acceptable group and individual behaviour</p> <p>2.4 Work with a group to negotiate and agree tasks, desired outcomes and ways of working</p>

<p>3. Be able to facilitate a group in health and social care or children and young people’s work settings</p>	<p>3.1 Use a range of methods to accommodate different learning styles within the group</p> <p>3.2 Provide a group experience where participants are engaged and stimulated</p> <p>3.3 Intervene effectively in a group session to improve the learning process</p>
<p>4. Be able to enhance learning through the constructive use of power, authority and influence in group work in health and social care or children and young people’s work settings</p>	<p>4.1 Demonstrate inclusive practice when facilitating groups</p> <p>4.2 Support consensus and manage conflict within a group</p> <p>4.3 Explain how to challenge excluding or discriminatory behaviour</p> <p>4.4 Demonstrate how to manage diverse group behaviours</p> <p>4.5 Explain when to refer issues and areas of concern</p>
<p>5. Be able to monitor and review the work of a group in health and social care or children and young people’s work settings</p>	<p>5.1 Work with a group to agree monitoring and review processes</p> <p>5.2 Implement systems and processes to monitor and review the progress of a group</p> <p>5.3 Assess the effectiveness of a group in relation to identified outcomes</p> <p>5.4 Reflect on strengths and areas for development in own practice of facilitating groups</p>

Additional information

Conflict may include:

- negative comments
- disagreements
- discrimination
- power imbalance
- threats
- body language
- non compliance

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

This unit needs to be assessed in line with the Skills for Care and Development RQF Assessment Principles.

Learning Outcomes 2, 3, 4 and 5 must be assessed in the work setting.

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

AG27 HSC 429 LDSS 418

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.

Skills for Care and Development Assessment Principles

1. Introduction

- 1.1 Skills for Care and Development (SfCD) is an alliance of key organisations from England, Northern Ireland, Ireland, Scotland and Wales with varied roles across social care, social work and early years and with remits across workforce development and regulation.
- 1.2 This document sets out the minimum expected principles and approaches to assessment and should be read alongside qualification regulatory arrangements and any specific requirements set out for particular qualifications. Additional information and guidance regarding assessment can be obtained from Awarding Organisations and from SfCD partner organisations.
- 1.3 The information is intended to support the quality assurance processes of Awarding Organisations that offer qualifications in the Sector.
- 1.4 Where Skills for Care and Development qualifications are jointly supported with Skills for Health, Skill for Health assessment principles should also be considered.
- 1.5 Throughout this document the term unit is used for simplicity, but this can mean module or any other similar term.
- 1.6 In all work we would expect assessors to observe and review learners practising core values and attitudes required for quality practice. These include embracing dignity and respect, rights, choice, equality, diversity, inclusion, individuality and confidentiality. All learners should follow the appropriate standards for conduct and all those involved in any form of assessment must know and embrace the values and standards of practice set out in these documents.
- 1.7 Assessors should ensure that the voices and choices of people who use services drive their practice and that of their learner. This will be apparent throughout the evidence provided for a learner's practice'.

2. Good practice dictates the following:

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

- 2.2 Assessors must be able to evidence and justify the assessment decisions that they have made.
- 2.3 Assessment decisions for skills based learning outcomes must be made during the learner's normal work activity by an occupationally qualified, competent and knowledgeable assessor.
- 2.4 Skills based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time. Evidence should be naturally occurring and so minimise the impact on individuals who use care and support, their families and carers.

Clarification about direct observation

Direct observation should continue to act as the preferred main source of evidence for skills based assessment criteria within work based qualifications in the sector.

Direct observation as an assessment activity should be carried out by an occupationally competent and qualified assessor in person with the learner in the workplace.

Direct observations of the learners practice should be carried out and demonstrated over an appropriate period of time. An appropriate period of time needs to reflect the learner's journey on their qualification e.g. from start to end of the qualification and not the time period of the actual direct observations carried out e.g., a 2 hour time period where observation has been carried out.

The amount of direct observations required will be appropriate to the qualification time, level and content of the qualification and take account of the learner's circumstances, which could include individual learning needs, breadth of practice, emerging competency, recognition of relevant prior learning and achievement and any additional factors associated to the workplace. Centres can explore this further through the standardisation process and discussion with the awarding organisation.

There are a range of additional factors which need to be considered when planning for and carrying out direct observations e.g., upholding person-centred values, gaining permission from and minimising distress to individuals who use care and support services, ensuring the environment is safe for the assessor and if there are any security/access restrictions. An additional factor is where direct observations could be difficult to gain during the **period** of the learner's qualification.

Therefore, if there is an additional factor in being able to meet direct observation requirements, approaches **must be** discussed and agreed prior with the awarding organisation.

This should not be confused with reasonable adjustments or special considerations.

- 2.5 Any knowledge evidence integral to skills based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.
- 2.6 Assessment decisions for skills based learning outcomes must be made by an assessor qualified to make assessment decisions. It is the responsibility of the Awarding Organisation to confirm that their assessors are suitably qualified to make assessment decisions.
- 2.7 Simulation may not be used as an assessment method for skills based learning outcomes except where this is specified in the assessment requirements. In these cases, the use of simulation should be restricted to obtaining evidence where the evidence cannot be generated through normal work activity. Video or audio recording should not be used where this compromises the privacy, dignity or confidentiality of any individual or family using services.
- 2.8 Where the assessor is not occupationally competent in a specialist area, expert witnesses can be used for direct observation where they have occupational expertise in the specialist area. The use of expert witnesses should be determined and agreed by the assessor, in line with internal quality assurance arrangements and Awarding Organisation requirements for assessment of units within the qualification and the sector. The assessor remains responsible for the final assessment decision.
- 2.9 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.
- 2.10 Witness testimony from others, including those who use services and their families, can enrich assessment and make an important contribution to the evidence used in assessment decisions.

- 2.11 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
- 2.12 It is the responsibility of the Awarding Organisation to ensure that those involved in assessment can demonstrate their continuing professional development, up to date skills, knowledge and understanding of practice at or above the level of the unit.
- 2.13 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. Information collected must be traceable for internal and external verification purposes. Additionally assessors must ensure they are satisfied the evidence presented is traceable, auditable and authenticated and meets assessment principles.
3. **Quality Assurance**
- 3.1 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. It is the responsibility of the Awarding Organisation to confirm that those involved in internal quality assurance are suitably qualified for this role.
- 3.2 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).
- 3.3 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. It is the responsibility of the Awarding Organisation to confirm that those involved in external quality assurance are suitably qualified for this role.

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

4. Definitions

4.1 **Occupationally competent:** This means that each assessor must be capable of carrying out the full requirements of the area they are assessing. Occupational competence may be at unit level for specialist areas: this could mean that different assessors may be needed across a whole qualification while the final assessment decision for a qualification remains with the lead assessor. Being occupationally competent means also being occupationally knowledgeable. This occupational competence should be maintained annually through clearly demonstrable continuing learning and professional development.

4.2 **Occupationally knowledgeable:** This means that each assessor should possess, knowledge and understanding relevant to the qualifications and / or units they are assessing. Occupationally knowledgeable assessors may assess at unit level for specialist areas within a qualification, while the final assessment decision for a qualification remains with the lead assessor. This occupational knowledge should be maintained annually through clearly demonstrable continuing learning and professional development.

4.3 **Qualified to make assessment decisions:** This means that each assessor must hold a qualification suitable to support the making of appropriate and consistent assessment decisions. Awarding Organisations will determine what will qualify those making assessment decisions according to the unit of skills under assessment. The Joint Awarding Body Quality Group maintains a list of assessor qualifications, see Appendix A.

4.4 **Qualified to make quality assurance decisions:** Awarding Organisations will determine what will qualify those undertaking internal and external quality assurances to make decisions about that quality assurance.

4.5 **Expert witness:** An expert witness must:

- have a working knowledge of the units for which they are providing expert testimony
- be occupationally competent in the area for which they are providing expert testimony
- have EITHER any qualification in assessment of workplace performance OR a work role which involves evaluating the everyday practice of staff within their area of expertise.

- 4.6 Witness testimony: Witness testimony is an account of practice that has been witnessed or experienced by someone other than the assessor and the learner. Witness testimony has particular value in confirming reliability and authenticity, 5 particularly in the assessment of practice in sensitive situations. Witness testimony provides supporting information for assessment decisions and should not be used as the only evidence of skills.

Clarification on the use of expert witness

The use of an expert witness does not replace the need for direct observation. If there is an additional factor in which this needs to be explored to support achievement of the learner, then again this must be discussed and agreed prior with the awarding organisation.

An expert witness in the workplace can be used to provide direct observation evidence when the assessor is not occupationally competent in a specialist area e.g., specialist healthcare tasks.

The use of an expert witness could also be used to enrich, supplement, and add triangulation to the main direct observations which have been carried out in person by the assessor.

When an expert witness is used, it remains that overall assessment decisions relating to a learner's competency must be made by the assessor and be subject to the internal quality assurance process.

Requirements for an expert witness are stated in the existing assessment principles and centres need to establish appropriate processes to recruit, induct, support, and standardise suitable expert witnesses from within the workplace.

Use of technology in the assessment process

We know that use of technology in the assessment process brings many benefits for all involved and when done well it can enhance the assessment experience, outcomes and develop skills of the learner. We know that technology, platforms, and e-portfolios support the assessment process well. This can include and is not limited to planning, review and feedback aspects along with carrying out and recording professional discussions. We also know that the workforce is making wider use of technology and some roles in the sector are functioning more remotely than they did before. Using technology in the assessment process should and can be used appropriately and care needs to be taken to ensure:

- recording, storage, and accessibility issues comply with legal requirements in relation to confidentiality and data protection
- centre practices with using different methods of technology are supported by robust centre policies, standardised practices and meet requirements set by the awarding organisation and Ofqual as the regulatory body.

Using technology to carry out direct assessment e.g., remote observation (the assessor observing the learner on-line carrying out a work activity)

Whilst we take valuable learning forward and embrace developments, we must not lose sight of the nature of qualifications in the sector. They are competence and work based and there needs to be appropriate consideration and balance when technology is being used to carry out assessment of a qualification e.g., observing skills and practice of a learner. Carrying out a remote observation does not replace the need for direct observation in person.

When could it be considered appropriate to carry out a remote observation with the use of the technology?

When the work activity is task orientated and does not include or require the presence of an individual accessing care or their families. Also, as an approach to enrich, enhance and triangulate the main direct observations and other assessment methods which have been planned and carried out.

Good practice for direct observation and remote observation assessment activity

All observations should be **planned** well to ensure:

- evidence is naturally occurring, and it will enable the learner to demonstrate a range of competencies from within the qualification they are undertaking
- they are non-obtrusive and minimise any impact on individuals who use care and support, their families and carers
- permission and informed consent are gained from individuals who use care and support, including families and carers and others who may form part of the learners assessment, this should include confirming permission and consent at the time of each assessment activity and not just as prior planning activity
- confidentiality is protected and maintained for everyone involved in the assessment process, this should include consideration of the learner, work setting, individuals, families, carers and other relevant people who may form part of the learners assessment
- the privacy and dignity of the individual who uses care and support is always maintained, this relates to personal information of the individual and the practice being observed. It is not appropriate or required to observe or listen to care and support of a sensitive nature e.g., personal/intimate and end of life care

- individuals who use care and support and others are not captured inadvertently in recordings of evidence.

Evidencing and recording of observation activity:

- method of observation should be stated clearly in the audit trail e.g., direct observation or remote observation.
- all assessment recordings must comply with policy and legal requirements in relation to confidentiality and data protection, this should also be guided by robust centre policies, standardised practices and meet requirements set by the awarding organisation.
- should be documented within the appropriate records to evidence the associated planning, review and feedback provided for the assessment.
- the observation recording/outcome of assessment should be in enough detail to ensure that it is valid, traceable, auditable and authenticated.
- assessors must be able to fully evidence and justify the assessment decisions that they have made through the assessment records presented.
- if remote observation has been used then a rationale to support this choice of approach should be provided by the assessor showing clear endorsement by the IQA, in line with the principles laid out in this guidance.

Internal quality assurance

Internal quality assurance activity remains key to ensuring that the assessment process and cycle is consistently of good quality and that it meets the assessment principles and assessment strategy of the awarding organisation.

Internal quality assurance methodologies and approaches should be reviewed by centres to account for and enabling monitoring of assessment practices in using technology safely.

Requirements for quality assurance are clearly stated in the existing assessment principles and centres and awarding organisations need to ensure that they are applied consistently.

Appendix A: Joint Awarding Body Quality Group List of Acceptable Qualifications

Acceptable Assessor Qualifications include:

- Level 3 Learning and Skills Assessor Apprenticeship (March 2023)
- Level 5 Learning and Skills Teacher Apprenticeship (January 2019)
- L&D9DI - Assessing workplace competence using Direct and Indirect methods (Scotland) (2015)
- L&D9D - Assessing workplace competence using Direct methods (Scotland) (2015)
- Level 5 Diploma in Education and Training (2014)
Relevant assessing units:
 - o Teaching, learning and assessment in education and training
 - o Developing teaching, learning and assessment in education and training
- Level 4 Certificate in Education and Training (2014)
Relevant assessing units:
 - o Assessing learners in education and training
 - o Assess occupational competence in the work environment
 - o Assess vocational skills, knowledge and understanding
- D32 Assess Candidate Performance and D33 Assess Candidate Using Differing Sources of Evidence (2012)
- Diploma in Teaching in the Lifelong Learning Sector (DTLLS) (2012)
- Teaching Certificate in Teaching in the Lifelong Learning Sector (CTLLS) (2012, 2007)
- Level 3 Award in Assessing Competence in the Work Environment (for competence/skills learning outcomes only) (2010)
- Level 3 Award in Assessing Vocationally Related Achievement (for knowledge learning outcomes only) (2010)
- Level 3 Certificate in Assessing Vocational Achievement (2010)
- A1 Assess Candidate Performance Using a Range of Methods and A2 Assessing Candidates' Performance through Observation (2002)
- HEI Certificate in Education
- Qualified Teacher Status Certificate in Education in Post Compulsory Education (PCE)
- Post Graduate Certificate in Education

Acceptable Internal Quality Assurer Qualifications include:

- Level 5 Diploma in Education and Training (2014)
Relevant IQA unit:
 - o Internally assure the quality of assessment
- Level 4 Certificate in Education and Training (2014)
Relevant IQA units:
 - o Assessing learners in education and training
 - o Internally assure the quality of assessment

- Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice (2014) or
- Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice (2014)
- D34 Unit Internally verify the assessment process (2012)
- V1 Verifiers Award (2012)
- L&D11- Internally Monitor and Maintain the Quality of Workplace Assessment (Scotland) (2010)

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.

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.



Innovate Awarding
Block F, 291 Paintworks, Arnos Vale,
Bristol, BS43AW

 innovateawarding.org

 contactus@innovateawarding.org

 +44 (0)117 314 2800