



**ICON College of Technology and Management**

**Course Handbook  
Health and Social Care (HSC)**



**ICON COLLEGE  
OF TECHNOLOGY AND MANAGEMENT**



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**Pearson BTEC Level 5 HND in Health and Social Care - QCF  
Course Code: CKP36**

**Unit Details**

| <b>Unit No</b> | <b>Mandatory Core Units (Six Units, 95 Credit Value)</b>        | <b>Unit Level</b> | <b>Unit Credit</b> |
|----------------|---|-------------------|--------------------|
| 1              | Communicating in Health and Social Care Organisations           | 4                 | 15                 |
| 2              | Principles of Health and Social Care Practice                   | 5                 | 15                 |
| 3              | Health and Safety in the Health and Social Care Workplace       | 4                 | 15                 |
| 4              | Personal and Professional Development in Health and Social Care | 4                 | 15                 |
| 5              | Working in Partnership in Health and Social Care                | 5                 | 15                 |
| 6              | Research Project  | 5                 | 20                 |

| <b>Unit No</b> | <b>Specialist Units (10 Units, 150 Credit Value)</b>   | <b>Unit Level</b> | <b>Unit Credit</b> |
|----------------|--|-------------------|--------------------|
| 9              | Empowering Users of Health and Social Care Services    | 4                 | 15                 |
| 10             | Safeguarding in Health and Social Care                 | 4                 | 15                 |
| 11             | The Role of Public Health in Health and Social Care    | 4                 | 15                 |
| 15             | Psychology for Health and Social Care                  | 4                 | 15                 |
| 16             | Understanding Specific Needs in Health and Social Care | 5                 | 15                 |
| 19             | Contemporary Issues in Health and Social Care          | 5                 | 15                 |
| 23             | Employability Skills                                   | 5                 | 15                 |
| 26             | Facilitating Change in Health and Social Care          | 5                 | 15                 |
| 27             | Managing Quality in Health and Social Care             | 5                 | 15                 |
| 29             | Health Promotion                                       | 5                 | 15                 |





Department of Health and Social Care

**Semester structure of Pearson BTEC Level 5 HND in Health and Social Care (HSC) at ICON College of Technology and Management (QCF)**

| Semester One  | Semester Two   |
|---|--|
| Unit 1* Communicating in HSC Organisation (L4)<br>Unit 9 Empowering Users of HSC Services (L4)<br>Unit 10 Safeguarding in HSC (L4)<br>Unit 11 The Role of Public Health in HSC (L4) | Unit 2* Principles of HSC Practice (L5)<br>Unit 3* Health and Safety in the HSC Workplace (L4)<br>Unit 4 * Personal and Professional Development in HSC (L4)<br>Unit 5* Working In Partnership in HSC (L5) |
| Semester Three  | Semester Four  |
| Unit 16 Understanding Specific Needs in HSC (L5)<br>Unit 29 Health Promotion (L5)<br>Unit 6* Research Project (L5)<br>Unit 26 Facilitating Change in HSC (L5)                       | Unit 15 Psychology for HSC (L4)<br>Unit 19 Contemporary Issues in HSC (L5)<br>Unit 23 Employability Skills (L5)<br><br>Unit 27 Managing Quality in HSC (L5)  |

**Total credits: 245**

\* Mandatory Core units

**Important Note**

The College reserves the right to amend the above table as and when required without prior notice.



# Course Specifications of Health and Social Care

## Course title

BTEC Higher National Diploma (HND) in Health and Social Care

## Awarding Institution

Pearson Educations Ltd

## Teaching Institution

ICON College of Technology and Management

## Accreditation

Pearson; Qualification Accreditation Number (QAN): **500/8362/4**

Approval from date: 01 September 2011

Approval to date: 31 December 2017

## Final award

Pearson BTEC Level 5 HND in Health and Social Care

## Progression

A progression path for Pearson HND learners is to the second or third year of a degree or honours degree Course, depending on the match of the Pearson BTEC Higher National units to the degree Course in question.

This qualification allows progression into or within employment in the health and social care sector either directly on achievement of the award or following further study to degree level.

## Admission requirements

To meet the entry criteria for admission to level 5 HND Courses:

A candidate must have either:

- a level 3 qualification
- a level 2 qualifications and relevant work experience
- or substantial work experience related to the field of proposed study

and,

- Demonstrate capability in English equivalent to CEFR level B2 e.g. IELTS 5.5 (including 5.5 for reading and writing), PTE 51 or equivalent.

and,

- Demonstrate a Commitment to Study and a reasonable expectation of success on the Course

International qualifications at the appropriate level will also be accepted. The College will use UK NARIC to determine the equivalence of any international qualifications.

Where applicants do not have a formal qualification to demonstrate capability in English, they will be required to undertake the Colleges written English Language test before an offer of a place on a Course is made. Judgement of their capability in spoken English will be assessed by the Head of Department at the interview. Suitable alternative arrangements to written tests will be made where a student declares a disability, specific learning difficulty or long-term health condition on their application form, e.g. oral questioning, amanuensis etc.

### **Aims of Course**

- equipping individuals with the knowledge, understanding and skills required for success in employment in the health and social care sector at supervisory or management levels.
- enabling progression to an undergraduate degree or related professional qualification.
- providing specialist study relevant to individual vocations and environments in which learners are currently working, or to which learners are aiming to work within the health and/or social care sector.
- developing learners' ability to contribute positively to good practice in the health and social care environment through effective use and combination of the knowledge and skills gained in different parts of the Course.
- developing skills and techniques, personal qualities and attributes essential for successful performance in working life and thereby enable learners to make an immediate contribution to employment.
- developing transferable skills and knowledge which will enable individuals to meet changing circumstances, whether within their own area of employment, or through promotion to a supervisory or management position, or to adapt to changes in the health/social care environment.
- motivating individuals to progress to further professional development through future study or as part of their chosen career.

### **Relevant external reference points**

QAA benchmark standards for health and social care undergraduate degree Course  
Pearson Health and Social Care Specification – QCF level 5  
Health and Care Professional Care Council (HCPC)

### **Credit value**

245 credits, See details in appendix A

### **Course learning outcomes**

#### **1. Knowledge and Understanding**

Learners will be expected to gain the following knowledge during the Course of study:

- developing the knowledge, understanding and skills of learners in the field of health and social care.

- equipping learners with knowledge, understanding and skills for success in employment in the health and social care sector.
- communication through internet and multimedia tools.
- providing opportunities for specialist study relevant to individual vocations and contexts
- developing the learner's ability in the health and social care sector through effective use and combination of the knowledge and skills gained in different parts of the Course.
- developing a range of skills and techniques, personal qualities and attributes essential for successful performance in working life and thereby enabling earners to make an immediate contribution to employment

## 2. Skills

Learners will be expected to develop the following skills during the Course of study:

- analysing, synthesising and summarising information critically.
- the ability to read and use appropriate literature with a full and critical understanding
- the ability to think independently and solve problems.
- the ability to take responsibility for their own learning and recognise their own learning style.
- obtaining and integrating several lines of subject-specific evidence to formulate and test hypotheses.
- applying subject knowledge and understanding to address familiar and unfamiliar problems.
- recognising the moral and ethical issues surrounding health and social care.
- the ability to appreciate the need for ethical standards and professional codes of conduct when designing, planning, conducting and reporting an investigations
- the ability to undertake investigations in health and social care in a responsible, safe and ethical manner.
- an appreciation of the interdisciplinary nature of health and social care provision.
- the capacity to give a clear and accurate account of a subject, marshal arguments in a mature way and engage in debate and dialogue both with specialists and non-specialists.

### Teaching, learning and assessment strategies

The generic components of teaching and learning strategy normally involve a variety of approaches and include delivering many of the following:

- Regular use of formal lecture sessions in all Courses.
- Regular assignment workshops and seminars in all Courses.
- Regular use of individual and/or team-based projects in all Courses.
- Regular use of self-directed and directed reading in all Courses.
- Regular use of library resources in all Courses.
- Regular use of tutor-and student-led discussion groups via e-learning platform; ICON VLE in many Courses.

The assessment of Pearson BTEC Higher National qualifications is criterion-referenced and learners' will be assessed against published learning outcomes and assessment criteria. All units will be individually graded as 'Pass', 'Merit' or 'Distinction'. To achieve a pass grade for the unit learners must meet the assessment criteria set out in the specifications. This gives transparency to the assessment process and provides for the establishment of national standards for each qualification.

The units in Pearson BTEC Higher National qualifications all have a standard format which is designed to provide guidance on the requirements of the qualification for learners, assessors and those responsible for monitoring national standards.

The assessment process is rigorous and comprises both assigned and time constraint assessments. Standardisations are undertaken at Assessment Board meetings.

### **Course structures**

All students take a total of 16 units over 2 years to gain an HND in Health and Social Care. Units are at level 4 (7 units) and level 5 (9 units).

#### **Mandatory Core Units – Six Units:**

|  |
|--|
| Communicating in Health and Social Care Organisations (L4)           |
| Principles of Health and Social Care Practice (L5)                   |
| Health and Safety in the Health and Social Workplace (L4)            |
| Personal and Professional Development in Health and Social Care (L4) |
| Working in Partnership in Health and Social Care (L5)                |
| Research Project (L5)  |

#### **Specialist Units – Ten Units:**

|   |
|---|
| Empowering Users of Health and Social Care Services (L4)    |
| Safeguarding in Health and Social Care (L4)                 |
| The Role of Public Health in Health and Social Care (L4)    |
| Psychology for Health and Social Care (L4)                  |
| Understanding Specific Needs in Health and Social Care (L5) |
| Contemporary Issues in Health and Social Care (L5)          |
| Employability Skills (L5)                                   |
| Facilitating Change in Health and Social Care (L5)          |
| Managing Quality in Health and Social Care (L5)             |
| Health Promotion (L5)                                       |

Please see Appendix B for details.

### **Mode of Study**

Full-time and Part-time.

Four semester taught full-time for all students, with minimum 15 hours study per week.

## **Assessment Regulations**

Health and Social Care units will be assessed using a variety of assessment methods, including case studies, assignments, portfolios, together with projects, performance observation and time constrained assessment. All the assessment material should be valid, reliable and fit for purpose.

Formative assessment is an important means of developing students learning and this is recognised within the College.

It is the College policy to allow an absolute maximum total assessment for a Course to take the form of time constrained assessment (TCA) and a student must pass the TCA. However, the main assessment for the Course should take the form of assignments (case studies/projects, etc.) and an overall grade of the unit will be based on the grade of the assignment.

## **Student support**

The teaching philosophy at ICON requires students to be exposed to a range of learning methods and materials.

All tutors now support their classes by the use of “ICON VLE”, a suite of electronic web-based materials that permits students to use the ICON intranet to access materials such as syllabi, Course plan, reading lists, reading assignments, and PowerPoint presentations for each of their Courses.

Student Survey is the primary method of obtaining and gauging student feedback at ICON. The survey form is comprised of both qualitative and quantitative elements. Also Student and Staff Liaison Panel meetings, held each semester, to discuss Course issues and concerns is another way to support the student.

The Personal Tutorial System is an essential part of the College’s Teaching and Learning and Assessment Strategy. It is also aimed at contributing to enhancement of the teaching and learning experience of the students. The College assigns every student a designated Personal Tutor who is available by appointment throughout the academic year as needed. The relationship between the student and the personal tutor is built on trust and confidentiality. Whether the problem is related to a financial hardship, accommodation matters, or learning disabilities and academic difficulties, the Personal Tutor is the first contact point at the College who would act as a mentor, and guide the student to the right person for further action.

## **Evaluation and revision**

The Assessment Board evaluates the external examiner’s reports every year and makes sure the action plans produced from their reports are well managed and the progress is reported to Academic Board. The College also conducts a feedback on assignments to students by a formative feedback (task-by-task) sheet which has been commended by standard verifiers of Pearson as supportive and effective.

Internal verification ensures that before any assignment brief is released to students, clear assessment criteria, and correct administrative information on assignment are included. Internal verifier teams identify what changes if any in the assignment brief are required and what

corrective action should be taken by assessor and should ensure that it is fit for purpose. Internal verifiers check a range of assessment decisions for all assessors and units by sampling the assignments. In case of unexpected assessment decisions, (e.g. everybody achieving Distinction in the assignment), additional sampling will be conducted on individual units/assessors.

# APPENDICES

## Appendix A

**Pearson BTEC Level 5 HND in  
Health and Social Care – (QCF)  
Course Code: CKP36**

### Unit Details

| <b>Unit No</b> | <b>Mandatory Core Units (Six Units, 95 Credit Value)</b>        | <b>Unit Level</b> | <b>Unit Credit</b> |
|----------------|---|-------------------|--------------------|
| 1              | Communicating in Health and Social Care Organisations           | 4                 | 15                 |
| 2              | Principles of Health and Social Care Practice                   | 5                 | 15                 |
| 3              | Health and Safety in the Health and Social Care Workplace       | 4                 | 15                 |
| 4              | Personal and Professional Development in Health and Social Care | 4                 | 15                 |
| 5              | Working in Partnership in Health and Social Care                | 5                 | 15                 |
| 6              | Research Project  | 5                 | 20                 |

| <b>Unit No</b> | <b>Specialist Units (Credit Value of 150)</b>          | <b>Unit Level</b> | <b>Unit Credit</b> |
|----------------|--|-------------------|--------------------|
| 9              | Empowering Users of Health and Social Care Services    | 4                 | 15                 |
| 10             | Safeguarding in Health and Social Care                 | 4                 | 15                 |
| 11             | The Role of Public Health in Health and Social Care    | 4                 | 15                 |
| 15             | Psychology for Health and Social Care                  | 4                 | 15                 |
| 16             | Understanding Specific Needs in Health and Social Care | 5                 | 15                 |
| 19             | Contemporary Issues in Health and Social Care          | 5                 | 15                 |
| 23             | Employability Skills                                   | 5                 | 15                 |
| 26             | Facilitating Change in Health and Social Care          | 5                 | 15                 |
| 27             | Managing Quality in Health and Social Care             | 5                 | 15                 |
| 29             | Health Promotion                                       | 5                 | 15                 |

**Total: 245 Credits**

## Appendix B

Unit syllabus



# Unit 1: Communicating in Health and Social Care Organisations

**Unit code:** T/601/1560

**QCF level:** 4

**Credit value:** 15

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- **Aim**

The aim of this unit is to develop learners' awareness of different forms of communication used in health and social care settings and its importance for effective service delivery.

- **Unit abstract**

Learners will investigate the communication processes in health and social care settings considering the barriers to communication and ways to overcome these barriers. Learners will explore the process of communication and how effective communication can affect how individuals feel about themselves. In addition, communication systems within organisations will be critically examined and learners will gain an understanding of the legal frameworks surrounding the recording of information about people. Learners will gain an understanding of the use of information and communication technology as a tool in health and social care settings.

Learners should note that any direct investigation of communication in health and social care placements or employment should be within the context of a job role. Due regard should be given to the confidentiality of information if used to support assessment evidence for this unit.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Be able to explore how communication skills are used in health and social care
- 2 Understand how various factors influence the communication process in health and social care
- 3 Be able to explore the use of information and communication technology (ICT) in health and social care.

## Unit content

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### 1 Be able to explore how communication skills are used in health and social care

*Relevant theories:* humanistic, behaviourist, cognitive, psychoanalytical

*Techniques and purposes:* techniques eg written, listening, verbal, non-verbal; purposes eg record keeping, giving information, challenging poor practice, educating, decision making, negotiating, advocacy, counselling, mentoring

*Inappropriate interpersonal communication:* barriers to communication eg inappropriate language, incongruent messages, misinterpretation, breach of confidentiality, breach of trust, invasion of privacy, power, threat, abuse; influences on individuals eg self-concept, self-esteem, self-image, ideal self, prejudice, stereotyping, values and beliefs, stress

*Supporting specific communication needs:* alternative language; language aids eg Braille, signing, Makaton; advocacy, interpretation, translation; environmental conditions, technological aids; processes for accessing additional support

*Maintaining confidentiality:* privacy, confidentiality, disclosure, protection of individuals, rights and responsibilities

### 2 Understand how various factors influence the communication process in health and social care

*Values and culture:* factors eg beliefs, age, sex, sexuality, ethnicity, gender, education, social class

*Legislation, charters and codes of practice:* national, European, United Nations (UN) as appropriate eg equality, diversity, discrimination, confidentiality and sharing information

*Organisational systems and policies:* information, documents, systems, structures, procedures, practices

*Good practice:* in accordance with practice and service standards, challenging discrimination, ethics, values, ensuring dignity and rights; data protection (recording, reporting, storage, security and sharing of information)

### 3 Be able to explore the use of information and communication technology (ICT) in health and social care

*Standard ICT software:* word-processing, spreadsheets, database, information retrieval, internet, intranet (if available), email, image software

*Benefits to users:* meeting individual needs, administration of treatments, efficiency of administrative processes, accuracy of records, communication, maintaining independence

*Benefits to care workers and organisations:* meeting needs of staff, business administration, efficiency, quality of service, meeting requirement of other agencies, accountability, audit

*Legal considerations:* health and safety eg postural, visual, stress; data protection eg accuracy, security, relevance, up to date, confidentiality, consequences of breaking data protection legislation; access to records

## Learning outcomes and assessment criteria

| Learning outcomes<br><br>On successful completion of this unit a learner will:                              | Assessment criteria for pass<br><br>The learner can:   |
|---|--|
| LO1 Be able to explore how communication skills are used in health and social care                          | 1.1 apply relevant theories of communication to health and social care contexts<br>1.2 use communication skills in a health and social care context<br>1.3 review methods of dealing with inappropriate interpersonal communication between individuals in health and social care settings<br>1.4 analyse the use of strategies to support users of health and social care services with specific communication needs                  |
| LO2 Understand how various factors influence the communication process in health and social care            | 2.1 explain how the communication process is influenced by values and cultural factors<br>2.2 explain how legislation, charters and codes of practice impact on the communication process in health and social care<br>2.3 analyse the effectiveness of organisational systems and policies in promoting good practice in communication<br>2.4 suggest ways of improving the communication process in a health and social care setting |
| LO3 Be able to explore the use of information and communication technology (ICT) in health and social care. | 3.1 access and use standard ICT software packages to support work in health and social care<br>3.2 analyse the benefits of using ICT in health and social care for users of services, care workers and care organisations<br>3.3 analyse how legal considerations in the use of ICT impact on health and social care.  |

## Guidance

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### Links

Demonstration and evaluation of learners' own use of communication skills can be assessed as part of *Unit 4: Personal and Professional Development in Health and Social Care*. The content of this unit underpins all work in health and social care and therefore has links with all units in the programme.

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

### Essential requirements

Access to ICT facilities, including the internet is essential to ensure sufficient competence can be demonstrated. Learners will need to be familiar with the systems and processes of record keeping (particularly of the Data Protection Act), and communication within the workplace.

Learners will also require opportunities to practise and demonstrate use of communication skills which can be assessed either in the workplace (as long as confidentiality is maintained and permissions obtained) or in a simulated environment.

### Employer engagement and vocational contexts

It would be useful for learners to engage in communication activities with users of health and social care services and practitioners in vocational contexts.

Input by specialists such as speech therapists or a sign language interpreter may help understanding of how to support individuals who have specific communication needs.

## Unit 2: Principles of Health and Social Care Practice

**Unit code:** Y/601/1566

**QCF level:** 5

**Credit value:** 15

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- **Aim**

The aim of this unit is to develop understanding of the values, theories and policies underpinning health and social care practice and the mechanisms that exist to promote good practice.

- **Unit abstract**

This unit develops understanding of the values and principles that underpin the practice of all those who work in health and social care. Learners will consider theories and policies that underpin health and social care practice and explore formal and informal mechanisms required to promote good practice by individuals in the workforce, including strategies that can influence the performance of others.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Understand how principles of support are implemented in health and social care practice
- 2 Understand the impact of policy, legislation, regulation, codes of practice and standards on organisation policy and practice
- 3 Understand the theories that underpin health and social care practice
- 4 Be able to contribute to the development and implementation of health and social care organisational policy.

## Unit content

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### 1 Understand how principles of support are implemented in health and social care practice

*Principles of support:* respecting individuality, rights, choice, privacy, independence, dignity, respect and partnership; equal opportunities; respecting diversity, different cultures and values; providing care, support and attention, eg for individuals, family, friends, carers, groups and communities

*Confidentiality:* importance of, limits of, policies about sharing information

*Person-centred approach:* supporting preferences, wishes and needs; supporting privacy and dignity; supporting others to make informed choices about the services they receive

*Protection from risk of harm:* assessing risk to self and others; right of individuals to take risks; informing relevant people about identified risks

### 2 Understand the impact of policy, legislation, regulation, codes of practice and standards on organisation policy and practice

*Current policy:* as relevant eg Every Child Matters, Rights to Action, Quality Protects, Children First; current policy guidance eg Procurement, working together to safeguard children: a guide to inter-agency working to safeguard and promote the welfare of children, Valuing People, Fulfilling the Promises

*Current legislation:* as relevant eg the Care Standards Act, 2000

*Current regulations:* as relevant eg Care Homes Regulations, 2001, The Care Homes (Wales) Regulations 2002

*Current codes of practice:* as relevant eg Code of Practice for Social Care Workers and Code of Practice for Employers of Social Care Workers, The Code: standards of conduct, performance and ethics for nurses and midwives

*Impact of initiatives:* changes to practice, development needs

### 3 Understand the theories that underpin health and social care practice

*Explanations for the characteristics and circumstances of individuals:* theories of human growth and development; managing loss and change; managing stress and behaviour

*Social processes:* leading to marginalisation, isolation and exclusion eg poverty, unemployment, poor health, disablement, lack of education and other sources of disadvantage; their impact on the demand for health and social care services

*Nature of health and social care services in a diverse society:* concepts eg prejudice, inter-personal, institutional and structural discrimination, empowerment and anti-discriminatory practices

*Inter-professional working:* significance of partnership working eg social care, education, housing, health, income maintenance and criminal justice services

4 **Be able to contribute to the development and implementation of health and social care organisational policy**

*Considerations:* supervision, roles and accountability; quality assurance systems; maintaining and upgrading knowledge and skills; support networks and professional registration; working with the regulators

## Learning outcomes and assessment criteria

| <b>Learning outcomes</b><br><br><b>On successful completion of this unit a learner will:</b>                                      | <b>Assessment criteria for pass</b><br><br><b>The learner can:</b>  |
|---|---|
| LO1 Understand how principles of support are implemented in health and social care practice                                       | 1.1 explain how principles of support are applied to ensure that individuals are cared for in health and social care practice<br><br>1.2 outline the procedure for protecting clients, patients, and colleagues from harm<br><br>1.3 analyse the benefit of following a person-centred approach with users of health and social care services<br><br>1.4 explain ethical dilemmas and conflict that may arise when providing care, support and protection to users of health and social care services |
| LO2 Understand the impact of policy, legislation, regulation, codes of practice and standards on organisation policy and practice | 2.1 explain the implementation of policies, legislation, regulations and codes of practice that are relevant to own work in health and social care<br><br>2.2 explain how local policies and procedures can be developed in accordance with national and policy requirements<br><br>2.3 evaluate the impact of policy, legislation, regulation, and codes of practice on organisational policy and practice   |
| LO3 Understand the theories that underpin health and social care practice   | 3.1 explain the theories that underpin health and social care practice<br><br>3.2 analyse how social processes impact on users of health and social care services<br><br>3.3 evaluate the effectiveness of inter-professional working   |
| LO4 Be able to contribute to the development and implementation of health and social care organisational policy.                  | 4.1 explain own role, responsibilities, accountabilities and duties in the context of working with those within and outside the health and social care workplace<br><br>4.2 evaluate own contribution to the development and implementation of health and social care organisational policy<br><br>4.3 make recommendations to develop own contributions to meeting good practice requirements.   |

## Guidance

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### Links

This unit links with and underpins many of the units directly connected with practice and with managing activities, in particular:

- *Unit 1: Communicating in Health and Social Care Organisations*
- *Unit 9: Empowering Users of Health and Social Care Services*
- *Unit 10: Safeguarding in Health and Social Care*
- *Unit 16: Understanding Specific Needs in Health and Social Care*
- *Unit 17: Community Development Work*
- *Unit 21: Supporting Significant Life Events*
- *Unit 22: Developing Counselling Skills for Health and Social Care*
- *Unit 28: Work-based Experience.*

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

### Essential requirements

Tutors must be appropriately qualified and experienced in the health and social care sector to cover the principles and management aspect of this unit.

Learners must be given time to develop their workplace experience, knowledge and understanding before assessment of this unit. They will be expected to present evidence based substantially on their work in health and social care.

Case study material is essential, and can be provided by the tutor or based on learners' work situations.

### Employer engagement and vocational contexts

A letter to employers which briefly outlines the learning outcomes of this unit may be helpful to support the learner's workplace learning needs.



## **Unit 3: Health and Safety in the Health and Social Care Workplace**

**Unit code:** K/601/1569

**QCF level:** 4

**Credit value:** 15

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- **Aim**

The aim of this unit is to develop learners' understanding about their responsibilities in ensuring the health and safety of the health and social care workplace and the people within it.

- **Unit abstract**

Health and safety is an essential consideration for all practitioners in health and social care and this unit will enable learners to develop an understanding of the importance of continually monitoring the implementation of health and safety legislation and policies within any health and social care setting.

Learners will gain a clear understanding of the implications of relevant legislation for their own role and the implementation of policies and systems in their own workplace. The importance of record keeping, monitoring and review health and safety policies and procedures will also be considered.

Elements of this unit should be contextualised, where possible, to an appropriate setting relevant to learners' workplace in health and social care.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Understand how health and safety legislation is implemented in the health and social care workplace
- 2 Understand the ways in which health and safety requirements impact on customers and the work of practitioners in the health and social care workplace
- 3 Understand the monitoring and review of health and safety in the health and social care workplace.

## Unit content

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### 1 Understand how health and safety legislation is implemented in the health and social care workplace

*Concept of risk, safety and security:* minimum risk, zero risk; risk for individuals and property; public liability; hazard; restraint; accident prevention; first aid; protection from harm; security versus safety; substances; practices; equipment; premises

*Systems, policies and procedures for communicating information:* exemplar pro formas; training; organisational culture; use of different media; exchange of information; record keeping; enforcement; compliance

*Responsibilities for management of health and safety:* organisational responsibilities (employers; employees; external agencies; visitors eg users of service, carers); monitoring and evaluating processes; auditing; inspecting the workplace; management structure and representation

*Legislative requirements:* current legislation, regulations and codes of practice relevant to health and safety in health and social care settings eg Health and Safety at Work Act 1974, Health and Safety (First Aid) Regulations 1981, Management of Health and Safety Regulations 1999, Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995, Control of Substances Hazardous to Health 2002, Manual Handling Operations Regulations 1992, Food Safety Act 1990, Food Safety (General Food Hygiene) Regulations 1995, Workplace (Health, Safety and Welfare) Regulations 1992, Health and Social Care Act 2008, Care Standards Act 2000, Mental Health Act 2007, Disability Discrimination Act 1995, Mental Health Act 2007, Children Act 2004

*Implementation:* safety aids eg walking aid, wheelchair, hoist; security systems eg door locks, cameras, gates, alarms, patrol; maintenance eg ventilation, temperature control, buildings; consequences of malfunction/breakdown of equipment

### 2 Understand the ways in which health and safety requirements impact on customers and the work of practitioners in the health and social care workplace

*Care planning:* meeting needs; ensuring safety; security; maximising wellbeing; principles of good practice

*Dilemmas:* risk-benefit analysis; risk to self and others; resource implications; differing priorities between stakeholders

*Implications of non-compliance:* financial; legal; moral; physical; health

### 3 Understand the monitoring and review of health and safety in the health and social care workplace

*Monitor and review:* audit of risks; review of practice; learning from experience; updating of policies and procedures

*Positive health and safety culture:* individuals; teams; managers; organisational levels

*Own contributions:* responsibilities; compliance; training; practices; interactions with individuals, groups and agencies

## Learning outcomes and assessment criteria

| Learning outcomes<br><br>On successful completion of this unit a learner will:  | Assessment criteria for pass<br><br>The learner can:   |
|---|--|
| LO1 Understand how health and safety legislation is implemented in the health and social care workplace   | 1.1 review systems, policies and procedures for communicating information on health and safety in the health and social care workplace in accordance with legislative requirements<br><br>1.2 assess the responsibilities in a specific health and social care workplace for the management of health and safety in relation to organisational structures<br><br>1.3 analyse health and safety priorities appropriate for a specific health and social care workplace  |
| LO2 Understand the ways in which health and safety requirements impact on customers and the work of practitioners in the health and social care workplace | 2.1 analyse how information from risk assessments informs care planning for individuals and organisational decision making about policies and procedures<br><br>2.2 analyse the impact of one aspect of health and safety policy on health and social care practice and its customers<br><br>2.3 discuss how dilemmas encountered in relation to implementing systems and policies for health, safety and security may be addressed<br><br>2.4 analyse the effect of non-compliance with health and safety legislation in a health and social care workplace |
| LO3 Understand the monitoring and review of health and safety in the health and social care workplace   | 3.1 explain how health and safety policies and practices are monitored and reviewed<br><br>3.2 analyse the effectiveness of health and safety policies and practices in the workplace in promoting a positive, healthy and safe culture<br><br>3.3 evaluate own contributions to placing the health and safety needs of individuals at the centre of practice.   |

## Links

This unit has links with, for example:

- *Unit 4: Personal and Professional Development in Health and Social Care*
- *Unit 9: Empowering Users of Health and Social Care Services*
- *Unit 10: Safeguarding in Health and Social Care.*

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit may also have links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

## Essential requirements

Tutors must be conversant with the application of health and safety legislation in relevant settings.

The learner's evaluative account of one aspect of health and safety in the workplace must be validated. This could be in the form of a witness statement from a workplace supervisor, or an observation record from their assessor.

Learners must be given the opportunity to carry out a risk assessment within the workplace. Ideally this would be in a setting relevant to their occupational sector, but if this is not possible a simulation of the setting will suffice.

## Employer engagement and vocational contexts

Visiting speakers from relevant settings and health and safety specialists would help learners to understand of legislative requirements and their management – especially for those learners undertaking a simulated risk assessment.

## Unit 4: Personal and Professional Development in Health and Social Care

**Unit code:** K/601/1572

**QCF level:** 4

**Credit value:** 15

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### ● Aim

The aim of this unit is to encourage learners to develop as reflective practitioners by applying their understanding and skills to their own health and social care setting.

### ● Unit abstract

This unit provides learners with an opportunity to develop as reflective practitioners. A minimum of 200 hours of work experience will be completed in order to achieve the unit. This practice will provide the basis of evidence for assessment of the unit.

Learners' practice, observations and learning in the workplace will be supplemented with wider understanding and knowledge from all parts of the course.

Evidence of learning will be presented through a portfolio that reflects the learner's ability as a reflective practitioner. Planning, monitoring and revision of personal development plans would be appropriate evidence for achieving personal targets and learning outcomes.

Evidence from workplace settings should be validated and authenticated by appropriately qualified expert witnesses.

It is essential that learners and assessors respect the confidentiality of information from the workplace at all times.

### ● Learning outcomes

**On successful completion of this unit a learner will:**

- 1 Understand how personal values and principles influence individual contributions to work in health and social care settings
- 2 Be able to produce, monitor, revise and evaluate plans for personal progress in developing the skills and abilities required of a health and social care practitioner
- 3 Understand the application of principles of professional engagement with users of health and social care services
- 4 Be able to demonstrate development of own skills and understanding in relation to working with others in health and social care practice.

## Unit content

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### 1 Understand how personal values and principles influence individual contributions to work in health and social care settings

*Personal values:* influences of eg beliefs and preferences, culture, political perspectives, interests and priorities, change over lifespan

*Culture and experiences:* influences of eg family, ethnicity, belief, education, employment, age and gender, life events

*Values and principles:* equal rights, diversity, confidentiality, protection from abuse and harm

*New developments:* legislation, policies, research, priorities and targets

*Change to personal values:* influences of eg overcoming of tensions between personal values and principles of good practice; differences relating to values of others eg users of service, workplace organisations, other people with whom you work

### 2 Be able to produce, monitor, revise and evaluate plans for personal progress in developing the skills and abilities required of a health and social care practitioner

*Own abilities and learning styles:* planning cycle, practical skills, interpersonal skills, application to practice, level of performance, learning experiences and preferred learning style

*Personal development plan:* for acquiring new skills, updating practice, learning, career development; three months, one year, five years

### 3 Understand the application of principles of professional engagement with users of health and social care services

*Professional relationships:* with individuals, their family and friends, team members, line managers, workers in other agencies; rights and responsibilities of users of service versus care workers and others; professional codes; trust; advocacy; empowerment

*Models of support:* medical health versus social model; individual benefit versus organisational benefit

*Dilemmas:* risk, abuse, challenging behaviour, conflict, ethics, confidentiality versus disclosure, expectations changing over time, conflicts between principles of good practice and values of others

*Own practice:* roles eg meeting needs of users of service, provider of health and social care services, facilitator, advocate, adviser, counsellor, mentor

*Barriers:* miscommunication, different professional codes of practice, group cohesiveness, personalities

**4 Be able to demonstrate development of own skills and understanding in relation to working with others in health and social care practice**

*Own contribution:* skills, knowledge, understanding, communication information, responsibilities; models of reflection, critical reflection

*Collective effectiveness of teams:* meeting needs and expectations of users of service, improving team performance, supporting other team members, meeting objectives, formal and informal roles within organisational structures and systems

*Barriers:* interpersonal interactions; professional codes, differing priorities, expectations, experience, accountability

## Learning outcomes and assessment criteria

| <b>Learning outcomes</b><br><br><b>On successful completion of this unit a learner will:</b>  | <b>Assessment criteria for pass</b><br><br><b>The learner can:</b>  |
|---|---|
| LO1 Understand how personal values and principles influence individual contributions to work in health and social care settings   | 1.1 compare personal values and principles with the principles of support for working in health and social care<br><br>1.2 assess how personal culture and experience influence own role in supporting users of services and others in health and social care settings<br><br>1.3 discuss how new developments and changes to personal values can impact on work in health and social care                              |
| LO2 Be able to produce, monitor, revise and evaluate plans for personal progress in developing the skills and abilities required of a health and social care practitioner | 2.1 assess current skills ability and learning style<br><br>2.2 produce a holistic development plan with short-medium- and long-term goals<br><br>2.3 monitor progress against the plan according to the requirements of a health and social care practitioner, revising the plan as required<br><br>2.4 evaluate the effectiveness of the development plan to own development as a health and social care practitioner |
| LO3 Understand the application of principles of professional engagement with users of health and social care services   | 3.1 explain the nature of different professional relationships in health and social care contexts<br><br>3.2 evaluate personal effectiveness in promoting and supporting the rights of the individual<br><br>3.3 discuss ways to resolve issues encountered in professional relationships   |
| LO4 Be able to demonstrate development of own skills and understanding in relation to working with others in health and social care practice.                             | 4.1 evaluate the effectiveness of personal contributions when working with others in health and social care practice<br><br>4.2 explain how the limits of own work role impacts on work with others<br><br>4.3 analyse own role in minimising barriers to effective teamwork in health and social care practice<br><br>4.4 discuss how to improve personal contributions to the collective effectiveness of a team.     |

## Guidance

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### Links

This unit has links with, for example:

- *Unit 23: Employability Skills*
- *Unit 28: Work-based Experience.*

This unit should be completed prior to progressing onto these optional units.

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

### Essential requirements

A minimum of 200 hours of work experience must be completed to achieve this unit. Liaison with work-based mentors is recommended to ensure learner experience in practice settings is appropriate in addressing all the learning outcomes and assessment criteria.

Learners will need individual support through tutorials and meetings with work-place mentors to devise appropriate development plans.

Learners will need guidance about presenting evidence so that it effectively reflects their abilities as a developing care worker in the field of health or social care.



## Unit 5: Working in Partnership in Health and Social Care

**Unit code:** F/601/1576

**QCF level:** 5

**Credit value:** 15

### ● Aim

The aim of this unit is to enable learners to develop understanding of the importance of working positively in partnership with others in health and social care.

### ● Unit abstract

Working in partnership is a key element of practice within health and social care. The concepts of power sharing, consultation and joint ways of working are essential for effective service provision. Health and social care professionals need to understand the importance of promoting autonomy with individuals. They also need to be aware of their own roles and responsibilities and how they relate to others within the sector.

Learners will explore the nature of partnership on three levels. First they will examine partnerships with users of services that empower individuals to make informed decisions and encourage independence. Second they will consider partnerships between different professionals within health and social care and explore inter-agency working. Finally, they will investigate organisational partnerships and examines different ways of joint working at a strategic level. Learners will study a range of theories and research findings relating to partnership philosophies and joint working practices. Methods of promoting positive partnership working will be analysed along with relevant legislation and organisational policies and procedures. Learners will also examine strategies to improve the outcomes of partnership working for users of services, professionals and organisations.

### ● Learning outcomes

**On successful completion of this unit a learner will:**

- 1 Understand partnership philosophies and relationships in health and social care services
- 2 Understand how to promote positive partnership working with users of services, professionals and organisations in health and social care services
- 3 Be able to evaluate the outcomes of partnership working for users of services, professionals and organisations in health and social care services.

## Unit content

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### 1 Understand partnership philosophies and relationships in health and social care services

*Partnership philosophies:* empowerment; independence; autonomy; respect; power sharing; making informed choices

*Partnership relationships:* with users of services eg children, elderly, young people in care, people with disabilities, people with learning difficulties, people with mental health issues, patients, refugees, asylum seekers; with professional groups eg social workers, health workers, educationalists, therapists, support workers; with organisations eg statutory, voluntary, private, independent, charitable, community forums

### 2 Understand how to promote positive partnership working with users of services, professionals and organisations in health and social care services

*Positive partnership working:* empowerment; theories of collaborative working; informed decision making; information sharing; confidentiality; professional roles and responsibilities; models of working eg unified, coordinated, coalition and hybrid models; management structures; communication methods; current inter-disciplinary and inter-agency working eg Multi-Area Agreements (MAA), Local Area Agreements (LAA); joint working agreements

*Legislation affecting partnership working:* current and relevant legislation eg relating to health, social care, safeguarding children and young people, mental health, disability, data protection, diversity, equality and inclusion

*Organisational practices and policies:* current and relevant practices; agreed ways of working; statutory, voluntary and private agency practices; local, regional and national policy documents produced by eg government departments, specialists units, voluntary agencies; risk assessment procedures; employment practices; service planning procedures

### 3 Be able to evaluate the outcomes of partnership working for users of services, professionals and organisations in health and social care services

*Outcomes for users of services:* positive outcomes eg improved services, empowerment, autonomy, informed decision making; negative outcomes eg neglect, abuse, harm, anger, miscommunication, information overload, confusion, frustration, duplication of service provision, disempowerment

*Outcomes for professionals:* positive outcomes eg coordinated service provision, professional approach, clear roles and responsibilities, organised communication, avoidance of duplication, preventing mistakes, efficient use of resources; negative outcomes eg professional rivalry, miscommunication, time wasting, mismanagement of funding

*Outcomes for organisations:* positive outcomes eg coherent approach, shared principles, comprehensive service provision, common working practices, integrated services; negative outcomes eg communication breakdown, disjointed service provision, increased costs, loss of shared purpose

*Barriers to partnership working:* lack of understanding of roles and responsibilities; negative attitudes; lack of communication, not sharing information; different priorities; different attitudes and values

*Strategies to improve outcomes:* communication, information sharing; consultation; negotiation; models of empowerment; collective multi-agency working; dealing with conflict; stakeholder analysis

## Learning outcomes and assessment criteria

| <b>Learning outcomes</b><br><br><b>On successful completion of this unit a learner will:</b>   | <b>Assessment criteria for pass</b><br><br><b>The learner can:</b>  |
|--|---|
| LO1 Understand partnership philosophies and relationships in health and social care services   | 1.1 explain the philosophy of working in partnership in health and social care<br><br>1.2 evaluate partnership relationships within health and social care services   |
| LO2 Understand how to promote positive partnership working with users of services, professionals and organisations in health and social care services  | 2.1 analyse models of partnership working across the health and social care sector<br><br>2.2 review current legislation and organisational practices and policies for partnership working in health and social care<br><br>2.3 explain how differences in working practices and policies affect collaborative working        |
| LO3 Be able to evaluate the outcomes of partnership working for users of services, professionals and organisations in health and social care services. | 3.1 evaluate possible outcomes of partnership working for users of services, professionals and organisations<br><br>3.2 analyse the potential barriers to partnership working in health and social care services<br><br>3.3 devise strategies to improve outcomes for partnership working in health and social care services. |

## Guidance

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### Links

This unit has links with, for example:

- *Unit 1: Communicating in Health and Social Care Organisations*
- *Unit 2: Principles of Health and Social Care Practice*
- *Unit 17: Community Development Work*
- *Unit 21: Supporting Significant Life Events.*

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

### Essential requirements

Tutors must have sound knowledge of the working practices of a range of different services in health and social care, housing and education. The philosophy of working in partnership will need to be outlined with reference to the Children Act 2004, the NHS and Community Care Act 1990 and the Working Together 1999 document and current and emerging policy initiatives.

### Employer engagement and vocational contexts

The delivery of this unit relies heavily on employer engagement and would benefit from professional input. Access to policy on partnership from different organisations would be useful as would case studies from a range of health and social care contexts.



## Unit 6: Research Project

**Unit code:** K/601/0941

**QCF level:** 5

**Credit value:** 20

- **Aim**

This unit aims to develop learners' skills of independent enquiry and critical analysis by undertaking a sustained research investigation of direct relevance to their higher education programme and professional development.

- **Unit abstract**

This unit is designed to develop learners' understanding and confidence in the use of techniques and methods appropriate for research in health and social care. Learners will be expected to consider the elements that make up formal research, including the proposal, and methodologies. They will also action plan carry out the research and presenting their findings. Learners will also consider ethical aspects of formal research.

The topic of the research project is dependent on the learner's focus of interest within the context of their programme of study and experience in health and social care, with due regard to ethical constraints of research in this sector. The unit gives learners the opportunity to draw together learning from several aspects of their study into a coherent holistic piece of work that makes a positive contribution to their area of interest. Learners should seek approval from their tutors before starting the study.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Understand how to formulate a research specification
- 2 Be able to implement the research project within agreed procedures and to specification
- 3 Be able to evaluate the research outcomes
- 4 Be able to present the research outcomes.

## Unit content

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### 1 Understand how to formulate a research specification

*Types of research:* qualitative; quantitative; tools for gathering primary data eg questionnaires, interviews; use of participants; sampling; validity; reliability eg variables and their control; resources; data storage; statistical techniques for data analysis eg distribution, statistical significance

*Outline specifications of possible projects:* aims and objectives; rationale for selection; literature review; hypothesis or research question; methodology for data collection and analysis; possible outcomes from suggested projects

*Research project selection:* critique of outline specifications eg scope, limitations; implications eg resources, ethical issues

*Key references:* books; journals; internet

*Research project specification:* aims and objectives; rationale for their selection; hypothesis or research question; justification (through literature review, skills and knowledge to be gained, resource availability including time); methodology for gathering primary data and data analysis

*Ethical considerations:* codes of practice; relating to participants eg informed consent, confidentiality of data, right to withdraw; data storage; analysis; audience for reporting of project

*Plan:* overall strategy and duration; tasks with target dates; presentation of results; scheduled monitoring process; recording of amendments to plan

### 2 Be able to implement the research project within agreed procedures and to specification

*Match resources:* to agreed plan; terms of reference; hypothesis or research question; ethical boundaries

*Implementation:* according to approved research plan; test for validity eg pilot research tools; estimates for reliability

*Data collection:* selection of participants; selection of appropriate tools for data collection, eg question and questionnaire design, interview questions; systematic recording of data eg in transcripts; methodological problems eg bias, variables and their control, validity and reliability

### 3 Be able to evaluate the research outcomes

*Evaluation of outcomes:* judgement of the success or failure of the planned project justified eg in relation to research plan, aims and objectives, evidence and findings, sources of error, validity, reliability of data collected; difficulties

*Data analysis and interpretation:* quantitative eg using specialist software, statistical techniques; qualitative eg interpreting transcripts; sources of error; bias; comparisons; trends; additional secondary research as required; extent to which hypothesis proved or disproved or research question answered; significance of research investigation to health and social care eg benefits, furthering understanding, application of research results; limitations of the investigation; conclusion(s)

*Recommendations:* for further development eg areas for further research, improvements, changes to practice

### 4 Be able to present the research outcomes

*Format:* professional delivery format appropriate to the audience eg oral presentation, written report; answering questions from audience on research project; use of academic referencing

## Learning outcomes and assessment criteria

| Learning outcomes<br>On successful completion of this unit a learner will:                  | Assessment criteria for pass<br>The learner can:  |
|---|---|
| LO1 Understand how to formulate a research specification                                    | 1.1 formulate and record possible research project outline specifications<br>1.2 identify the factors that contribute to the process of research project selection<br>1.3 undertake a critical review of key references<br>1.4 produce a research project specification<br>1.5 provide an appropriate plan and procedures for the agreed research specification |
| LO2 Be able to implement the research project within agreed procedures and to specification | 2.1 match resources efficiently to the research question or hypothesis<br>2.2 undertake the proposed research investigation in accordance with the agreed specification and procedures<br>2.3 record and collate relevant data where appropriate  |
| LO3 Be able to evaluate the research outcomes   | 3.1 use appropriate research evaluation techniques<br>3.2 interpret and analyse the results in terms of the original research specification<br>3.3 make recommendations and justify areas for further consideration   |
| LO4 Be able to present the research outcomes  | 4.1 use an agreed format and appropriate media to present the outcomes of the research to an audience.  |

## Guidance

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### Links

This unit may be linked to one or more units in the programme, depending on the research topic undertaken.

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

### Essential requirements

It is advised that this unit is delivered longitudinally over a period of one year. The ethical issues that arise in health and social care research should be discussed in detail and should encompass aspects relating to protection of participants as well as data analysis and reporting of results. Learners should also be introduced to simple statistical analyses and selection of the appropriate method for presenting continuous and discontinuous statistical information, for example in tables, charts and graphs.

Although work-based experience may well generate ideas for research, any research carried out within a health or social care setting will require ethical approval from the relevant NHS strategic health authority. Any research carried out in a health or social care workplace may also depend upon the employed status of the learner in that setting.

The tutor should establish early on the employment and qualification status of individual learners and any constraints on research in their place of work that may apply. Every project in which the workplace is involved should have written consent consistent with the ethical guidelines of the workplace and the tutor should check that these are fully in place before any primary research commences.

The research proposal should contain detailed consideration of the ethical issues relating to the project. Evidence for learning outcome 2 should include evidence of small-scale piloting of the research tools to be used as a test for their validity and reliability.

Before approving projects, the tutor will need to establish that each learner has sufficient access to suitable resources to support their project proposal.

### Employer engagement and vocational contexts

Engagement with health and social care employers would be beneficial for both learners who are employees and those on work placement in settings. An understanding of the broad assessment requirements, the unit could be shared with employer.

## Unit 9: Empowering Users of Health and Social Care Services

**Unit code:** D/601/1598

**QCF level:** 4

**Credit value:** 15

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- **Aim**

The aim of this unit is to enable learners to explore how to empower individuals using health and social care services in order to maximise their independence.

- **Unit abstract**

It is essential for all health and social care professionals to understand that the service they deliver enables individuals to participate in the decisions that are made about their lives.

First, learners will explore how legislation and the sector skills standards regarding the design and review of services promote independence, which in turn is captured within organisational policies and procedures. Second, learners will investigate factors that can affect participation, independence and choice, including systems for assessing and minimising risk. Finally, learners will investigate the administration of medicine and the effectiveness of policies and procedures for administering medication in achieving the best possible outcomes for users of services. Learners will study legislation and factors that affect the care that is received. Learners will also examine strategies to promote the best possible outcomes for individual users of services.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Understand how the design and review of services promotes and maximises the rights of users of health and social care services
- 2 Understand how to promote the participation and independence of users of health and social care services
- 3 Understand the responsibility of managing and monitoring risks in health and social care settings
- 4 Understand how good practice in the administration of medicine is essential for users of health and social care services.

### 1 Understand how the design and review of services promotes and maximises the rights of users of health and social care services

*Legislation and sector skills standards:* current legislation and sector skills standards that are relevant to promoting the rights of individuals; inspection processes, powers, duties, responsibilities, accountabilities, entitlements; organisations: providing services for vulnerable people

*Factors:* policies, procedures; staffing eg staffing levels, shift patterns, continuing professional development; individual eg level of dependence, changing health status

*Communication:* methods to overcome differences in communication eg second language, disability; recording information for continuous improvement eg best outcome for users of services, feedback, complaints, comments, inspection, recommendations for improvement

### 2 Understand how to promote the participation and independence of users of health and social care services

*Factors affecting independence and choice:* dependence, independence, choice, constraints, empowerment; physical, social, emotional, intellectual factors; changing needs, access to information, participation in decision making

*Organisational systems:* ensuring performance of workers, sources of information for individuals, empowering individuals

*Considerations:* possible tensions eg safety versus independence, rights responsibilities; individuals, others

### 3 Understand the responsibility of managing and monitoring risks in health and social care settings

*Risks:* from harm; from abuse; from failure to protect

*Effective management of risks:* relevant legislation; acceptable and unacceptable risks; protection from unacceptable risk; national service standards; assessing and recording risk, complaints procedures; leadership style, whistleblowing policy

### 4 Understand how good practice in the administration of medication is essential for users of health and social care services

*Handling of medication:* ordering and maintaining, administration, storage, recording, disposal

*National standards:* current standards and legislation; codes of practice and policies; national inquiries eg the Shipman inquiry; ethical issues; service user choice; acceptable risk; standard for medication

## Learning outcomes and assessment criteria

| Learning outcomes<br><br>On successful completion of this unit a learner will:   | Assessment criteria for pass<br><br>The learner can:  |
|--|---|
| LO1 Understand how the design and review of services promotes and maximises the rights of users of health and social care services | 1.1 explain how current legislation and sector skills standards influence organisational policies and practices for promoting and maximising the rights of users of health and social care services<br><br>1.2 analyse factors that may affect the achievement of promoting and maximising the rights of users of health and social care services<br><br>1.3 analyse how communication between care workers and individuals contribute to promoting and maximising the rights of users of health and social care services |
| LO2 Understand how to promote the participation and independence of users of health and social care services                       | 2.1 explain factors that may contribute to loss of independence, non-participation and social exclusion for vulnerable people<br><br>2.2 analyse how organisational systems and processes are managed to promote participation and independence of users of health and social care services<br><br>2.3 analyse the tensions that arise when balancing the rights of the individual to independence and choice against the care provider's duty to protect   |
| LO3 Understand the responsibility of managing and monitoring risks in health and social care settings                              | 3.1 use a case study from a health or social care setting to identify the extent to which individuals are at risk of harm<br><br>3.2 analyse the effectiveness of policies, procedures and managerial approach within a health or social care setting for promoting the management of risks   |
| LO4 Understand how good practice in the administration of medication is essential for users of health and social care services.    | 4.1 review current legislation, codes of practice and policy that apply to the handling of medication<br><br>4.2 evaluate the effectiveness of policies and procedures within a health and social care setting for administering medication.  |

## Guidance

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### Links

This unit has links with, for example:

- *Unit 1: Communicating in Health and Social Care Organisations*
- *Unit 10: Safeguarding in Health and Social Care*
- *Unit 21: Supporting Significant Life Events.*

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

### Essential requirements

Learners will require access to legislation and policy documents particularly in relation to risk assessments and the administration of medication within health and social care settings.

### Employer engagement and vocational contexts

Learners' experiences from the workplace could be drawn out through class discussion and may be usefully facilitated by exploration of vocational case studies, particularly in relation to organisational processes. Care should always be taken to protect the confidentiality of individuals.

## Unit 10: Safeguarding in Health and Social Care

**Unit code:** L/601/1600

**QCF level:** 4

**Credit value:** 15

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- **Aim**

The aim of this unit is to enable learners to develop an understanding of the factors of abuse, and study the working practices and strategies to reduce and prevent its occurrence.

- **Unit abstract**

The unit enables learners to understand the different types of abuse that can occur within the community. Learners will study the signs of abuse and factors that can contribute towards individuals being vulnerable. This will be followed by identifying legislation and policies that are in place and how professionals work within the guidelines and professional standards to safeguard both practitioners and users of health and social care services.

Learners will consider the multi-agency approach and look at the strategies that are in place for all health and social care professionals to work together to minimise occurrences of abuse in health and social care contexts. Finally learners will consider the effectiveness of these working practices and strategies.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Understand the factors that contribute to the incidence of abuse and harm to self and others
- 2 Understand current legislation, policy and professional involvement regarding abuse in health and social care contexts
- 3 Understand working practice and strategies used to minimise abuse in health and social care contexts.

## 1 Understand the factors that contribute to the incidence of abuse and harm to self and others

*Different types of abuse:* physical, emotional, sexual, neglect, financial

*Different types of self-harm:* self-inflicted wounds, drugs and alcohol

*Signs of abuse and self-harm:* inappropriate bruising, burns, scalding, malnourishment, low self-esteem, emotional withdrawal, neglect, other risk factors

*Individuals vulnerable to abuse:* children, young people, people with learning disabilities, people with mental health issues, elderly people, people with dementia

*Individual factors:* self-esteem, identity, gender, previous abuse, relationships, drug and alcohol abuse, type of family background, mental health issues, psychological basis of abuse

*Contexts and relationships where abuse may occur:* home, community, residential care, institutional care, relationships involving power, caring relationships, within the family, domestic violence

*Social factors:* health, housing, education, poverty, social exclusion and disadvantage, networks of support

*Cultural factors:* ethnicity, discrimination, religion

## 2 Understand current legislation, policy and professional involvement regarding abuse in health and social care contexts

*Legislation and policy initiatives:* national, regional and local policies; professional standards and guidance as appropriate; individual rights; Fraser guidelines

*Range of professionals:* range of professionals from health and social care including social workers, social service staff, National Society for the Prevention of Cruelty to Children (NSPCC), health professionals

## 3 Understand working practice and strategies used to minimise abuse in health and social care contexts

*Working practices:* written and oral communication, use of ICT in sharing information between professionals, anti-oppressive practice, anti-discriminatory practice, thresholds, risk factors, risk predictions, framework of assessment, identifying children in need

*Strategies:* working in partnership with users of health and social care services, between professionals and within organisations, decision-making processes and forums, safeguarding children boards, the 'at risk' register, area child protection committee, organisational policies and training

## Learning outcomes and assessment criteria

| Learning outcomes<br>On successful completion of this unit a learner will:   | Assessment criteria for pass<br>The learner can:   |
|--|--|
| LO1 Understand the factors that contribute to the incidence of abuse and harm to self and others                           | 1.1 explain why particular individuals and groups may be vulnerable to abuse and/or harm to self and others<br>1.2 review risk factors which may lead to incidence of abuse and/or harm to self and others<br>1.3 analyse the impact of social and cultural factors on different types of abuse and/or harm to self and others   |
| LO2 Understand current legislation, policy and professional involvement regarding abuse in health and social care contexts | 2.1 analyse the strengths and weaknesses in current legislation and policy relating to those vulnerable to abuse<br>2.2 explain how key professionals are involved in the protection of individuals and groups vulnerable to abuse   |
| LO3 Understand working practice and strategies used to minimise abuse in health and social care contexts.                  | 3.1 explain existing working practices and strategies designed to minimise abuse in health and social care contexts<br>3.2 evaluate the effectiveness of working practices and strategies used to minimise abuse in health and social care contexts<br>3.3 discuss possible improvements to working practices and strategies to minimise abuse in health and social care contexts. |

## Guidance

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### Links

This unit has links with, for example:

- *Unit 1: Communicating in Health and Social Care Organisations*
- *Unit 2: Principles of Health and Social Care Practice*
- *Unit 9: Empowering Users of Health and Social Care Services*
- *Unit 16: Understanding Specific Needs in Health and Social Care*
- *Unit 19: Contemporary Issues in Health and Social Care.*

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

### Essential requirements

This unit requires formal classroom delivery incorporating theoretical concepts, research findings, evidence from documentation, policy and legislation. Learners will need to work with a wide range of case studies that illustrate abuse scenarios. Consideration will need to be given to the concepts of risk, harm, abuse and intervention strategies.

Due to the sensitive subject matter in this unit, tutors must ensure learners have access to support systems outside of the classroom.

### Employer engagement and vocational contexts

Due to the sensitive nature of this unit, any reference to authentic vocational contexts should be used with respect for the anonymity of individuals involved, and acknowledgement of the need for confidentiality. It is suggested that practitioners from various health and social care settings contribute to formal classroom delivery and that learners work in small groups to explore the often difficult emotive content.

## Unit 11: The Role of Public Health in Health and Social Care

**Unit code:** H/601/1604

**QCF level:** 4

**Credit value:** 15

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- **Aim**

The aim of this unit is to raise learners' awareness of factors influencing public health and the different approaches taken to reduce incidence of disease and illness in communities.

- **Unit abstract**

The unit requires learners to investigate the roles of different agencies working within communities to reduce the incidence of disease and illness. They will investigate infectious and non-infectious diseases that are widespread in their own country and analyse the effectiveness of strategies that are in place to control the incidence of disease. Regional, national and international perspectives and priorities will be considered. This will be followed by investigating the health and social care provision that is available and then analysing factors that influence the wellbeing of individuals within a care setting.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Understand different approaches and strategies used to measure, monitor and control the incidence of disease in communities
- 2 Be able to investigate the implications of illness and disease in communities for the provision of health and social care services
- 3 Understand the factors influencing the health and wellbeing of individuals in health or social care settings.

## Unit content

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### 1 Understand different approaches and strategies used to measure, monitor and control the incidence of disease in communities

*Roles of different agencies:* local, national, international agencies eg local authorities, health trusts, government, European Union, World Health Organization, voluntary organisations

*Epidemiology:* incidence (geographical distribution, incidence rates, trends); vulnerable groups; causes; spread and controls

*Infectious disease:* one of eg influenza, food/water borne infections, HIV/AIDS, a childhood illness, tuberculosis, MRSA

*Non-infectious disease:* one of eg malignant disease, cardiovascular diseases obesity, asthma

*Statistical data:* graphical, numerical, tabular; probabilities, incidence rates, trends

*Approaches and strategies:* surveillance, screening, immunisation, education, legislation, social welfare, environmental controls

### 2 Be able to investigate the implications of illness and disease in communities for the provision of health and social care services

*Priorities and approaches:* prevention, treatment, palliative care, remedial care

*Relationship:* planning, facilities, expertise, partnership working, funding, individual versus public good

*Lifestyle choices:* diet, exercise, substance use, work culture, relaxation

### 3 Understand the factors influencing health and wellbeing of individuals in health or social care settings

*Priorities:* factors eg safety and security, mobility, diet, hygiene, intellectual, social, emotional needs

*Strategies, systems and policies:* organisation of service provision, quality of provision, choices, complaints policies, partnerships, involvement of friends and family

*Activity to encourage behaviour change:* education, physical exercise, games, consultation exercises (eg focus group), input from specialists

## Learning outcomes and assessment criteria

| Learning outcomes<br><br>On successful completion of this unit a learner will:   | Assessment criteria for pass<br><br>The learner can:  |
|--|---|
| LO1 Understand different approaches and strategies used to measure, monitor and control the incidence of disease in communities        | 1.1 explain the roles of different agencies in identifying levels of health and disease in communities<br>1.2 explain, using statistical data, the epidemiology of one infectious and one non-infectious disease that is widespread in their own country<br>1.3 evaluate the effectiveness of different approaches and strategies to control the incidence of disease in communities  |
| LO2 Be able to investigate the implications of illness and disease in communities for the provision of health and social care services | 2.1 use relevant research to determine current priorities and approaches to the provision of services for people with disease or illness<br>2.2 explain the relationship between the prevalence of disease and requirements of services to support individuals within the health and social care service provision<br>2.3 analyse the impact of current lifestyle choices on future needs for health and social care services   |
| LO3 Understand the factors influencing health and wellbeing of individuals in health or social care settings.                          | 3.1 assess the health and wellbeing priorities for individuals in a particular health or social care setting<br>3.2 evaluate the effectiveness of strategies, systems and policies in a health or social care setting<br>3.3 discuss changes that could be made to improve the health and wellbeing of individuals in a health or social care setting<br>3.4 evaluate an activity that has been implemented to encourage behaviour change for maximising health for individuals in a health or social care setting. |

## Links

This unit has links with, for example:

- *Unit 15: Psychology for Health and Social Care*
- *Unit 16: Understanding Specific Needs in Health and Social Care*
- *Unit 18: Complementary Therapies*
- *Unit 19: Contemporary Issues in Health and Social Care*
- *Unit 23: Employability Skills*
- *Unit 28: Work-based Experience.*

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

## Essential requirements

This unit will require input from health-related professionals with understanding and experience of health promotion, epidemiology and related work.

## Employer engagement and vocational contexts

Input from specialists in public and environmental health would be beneficial. Access to local health plans and records would be useful as well as access to national and international statistics on the incidence of diseases and disorders.

Learners could also have access to work experience which would enhance their experience and access to information required for this unit.

## Unit 15: Psychology for Health and Social Care

**Unit code:** K/601/1619

**QCF level:** 4

**Credit value:** 15

- **Aim**

The aim of this unit is to develop understanding of the psychological factors which influence human behaviour throughout the lifespan and how these apply to health and social care settings.

- **Unit abstract**

This unit will enable learners to understand the psychological factors which influence human behaviour and the effects these factors may have on users of health and social care services. Learners will focus on the basic approaches to understanding human behaviour drawn from psychology. These will include behavioural, cognitive, humanistic and psychodynamic approaches. Learners will also draw on use of concepts from psychology and sociology such as lifespan development, interactionism, deviance theory, anthropology and socialisation.

The focus of the unit will be on the changing roles of individuals throughout the lifespan. The unit has been designed to develop learners understanding of those who use health and social care services through the application of psychological and sociological concepts. This understanding underpinning professional practice enables service providers to enhance and maintain the social functioning (valued roles) of individuals in health and social care settings. This unit also develops knowledge and understanding of the nature of social functioning and how valued roles are determined.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Understand theories of lifespan development
- 2 Understand social and biological determinants of human behaviour displayed in health and social care contexts
- 3 Understand how psychological theories are applied to health and social care practice.

## Unit content

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### 1 Understand theories of lifespan development

*Life stages:* infancy; early childhood; later childhood; adolescence; adulthood; late adulthood; final stages of life and death

*Theories of lifespan development:* stage versus open-ended theories; continuity versus discontinuity; static versus dynamic theories; idiographic versus nomothetic perspectives on personality

*Theories:* behavioural; cognitive; psychodynamic and humanistic

*Theorists:* Freud; Erikson; Maslow; Rogers; Beck; Piaget; other theorists as appropriate eg Buhler, Havighurst, Kohlberg, Gutmann, Lowenthal, Gould, Loevinger, Berne

### 2 Understand social and biological determinants of human behaviour displayed in health and social care contexts

*Social factors:* socialisation; family; education; culture; media; environment; effects of discrimination; social exclusion

*Biological factors:* genetics; traits; blueprints; neuro-degenerative disorders eg Parkinson's, Alzheimer's

*Social roles:* development of social roles; concept of conformity; social context of behaviour; social group membership; relationships (to include symbiotic interactionism); development of self concept eg Mead and Cooley

*Context:* sick-role behaviour; perception and interpretation of symptoms; use/misuse of health and social care services; compliance with treatments; emotional adjustment to illhealth; coping strategies eg user of service, survivor, organisational; institutionalisation

### 3 Understand how psychological theories are applied to health and social care practice

*Psychological stress:* causes of eg work-related, illness, chronic illness, bereavement, loss

*Behaviour disturbance:* attention deficit disorders; autistic spectrum disorders; behaviours associated with addiction

*Mental health disorders:* neurosis; psychosis eg depression, schizophrenia; eating disorders eg anorexia, bulimia

*Behaviour change:* health promotion (including various models and concepts linked to psychological theory); care strategies; coping strategies; avoidance therapy eg cognitive dissonance, denial, projection, perception; compensation for loss of identity; advocacy; policies based on normalisation theory; aggression and abuse policies

*Relationships:* user of service/families and friends; user of service/care worker; between care workers; between users of services

## Learning outcomes and assessment criteria

| <b>Learning outcomes</b><br><br><b>On successful completion of this unit a learner will:</b>                      | <b>Assessment criteria for pass</b><br><br><b>The learner can:</b>  |
|---|---|
| LO1 Understand theories of lifespan development   | 1.1 compare different psychological theories of lifespan development<br><br>1.2 explain how psychological theories and concepts are related to specific life stages   |
| LO2 Understand social and biological determinants of human behaviour displayed in health and social care contexts | 2.1 explain social and biological factors that influence human behaviour<br><br>2.2 analyse the importance of social roles in the context of health and social care settings  |
| LO3 Understand how psychological theories are applied to health and social care practice.                         | 3.1 analyse the application of psychological theories to individuals experiencing elevated levels of stress<br><br>3.2 analyse how psychological theories relate to behaviour disturbance<br><br>3.3 analyse how psychological theory informs understanding of mental health disorders<br><br>3.4 evaluate the application of psychological principles to affecting behaviour change in health and social care settings<br><br>3.5 analyse how psychological theories can enhance understanding of relationships in health and social care. |

## Guidance

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### Links

This unit has links with, for example:

- *Unit 8: The Sociological Context of Health and Social Care*
- *Unit 10: Safeguarding in Health and Social Care*
- *Unit 11: The Role of Public Health in Health and Social Care*
- *Unit 16: Understanding Specific Needs in Health and Social Care*
- *Unit 22: Developing Counselling Skills for Health and Social Care.*

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit may also have links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

### Essential requirements

Although Erikson, Maslow, Freud and Rogers must be addressed, other theorists should be included, depending on the focus of interest of the programme and learners. A detailed understanding of different theories relating to the application of psychological theory is not expected, but learners must have the opportunity to develop a broad understanding of how psychology informs health and social care strategies for individuals.

Learners must produce an analytical report based on primary and/or secondary data, together with supporting materials, eg consent documents, questionnaires, interview schedules, transcripts, presentation tools (for example, overhead transparencies or handouts), witness testimony etc. It is expected that the learner will focus their report on one or a number of health and social care settings.

### Employer engagement and vocational contexts

Case studies and class discussions would be of use and learners should be encouraged to draw on their own practice/experience. Guest speakers who are specialists in the field are recommended as is a tutor who has understanding and working knowledge of the use of psychology within health and social care settings.

## Unit 16: Understanding Specific Needs in Health and Social Care

**Unit code:** M/601/1623

**QCF level:** 5

**Credit value:** 15

- **Aim**

The aim of this unit is to enable learners to gain insight into the ways that health and social care services empower users with specific needs to access the services they need easily.

- **Unit abstract**

Because meeting the diverse demands of individuals with specific requirements is integral to the work of our health and social care services, learners considering a career in these fields will need to know the ways that services respond to these demands. Learners will find out how a specific need is defined and how perceptions of individuals with such needs are influenced and can change over time. The care requirements of individuals with specific needs will be investigated, together with the way in which legislation, organisations and services support such needs. Learners will have the opportunity to develop understanding of the impact the approaches and interventions have on individuals (particularly those who display challenging behaviour) and how, in turn, their needs affect the ways that services are provided. Whilst learners will be able to develop an overview of the range of specific needs, they may focus their study on those special needs relevant to their employment, voluntary work or placement.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Understand perceptions of health, disability, illness and behaviour
- 2 Understand how health and social care services and systems support individuals with specific needs
- 3 Understand approaches and intervention strategies that support individuals with specific needs
- 4 Understand strategies for coping with challenging behaviours associated with specific needs.

## Unit content

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### 1 Understand perceptions of health, disability, illness and behaviour

*Concepts:* normality, images, models, definitions, language and terminology

*Perceptions:* labels, stigma, discrimination, oppression, rights

*Attitudes over time:* historical perspectives, social and political developments, medical and technological advances

*Legislation and social policy:* reflects changes in attitude, modifies attitudes and practices, inclusion, policies, community care initiatives; recent and emerging change; relevant acts eg Human Rights Act 1998, Carers (Equal Opportunities) Act 2004, Disability Discrimination Act 2005, The Mental Health Act 2007, The Health and Social Care Act 2008, The Children Act 2004: Every Child Matters; relevant policies eg Putting People First 2007, Our Health, Our Care, Our Say 2006

### 2 Understand how health and social care services and systems support individuals with specific needs

*Care needs:* physical, social, emotional, language, intellectual, sexual, spiritual

*Organisations and systems:* statutory, not-for-profit, voluntary; self-help, formal, informal care

*Services:* health, social care; day, residential; education, recreation, transport; access eg geographical, physical, financial

### 3 Understand approaches and intervention strategies that support individuals with specific needs

*Approaches and interventions:* self-help, direct action, partnerships, evidence-based practice, advocacy, guardianship, autonomy and empowerment, risk management; medical, technological, therapeutic products, lifestyle choices and therapies

*Potential tensions:* rights versus protection of self and others; alleviation of needs versus remedial therapy; risk versus autonomy and independence; choices and preferences; service dilemmas and policies eg cost benefit analyses, priorities

*Emerging developments:* medical and technological advances, changes to legislation and policy, local, national and international perspectives

### 4 Understand strategies for coping with challenging behaviours associated with specific needs

*Challenging behaviours:* learning disabilities, physical disabilities, ill health (physical and mental), physical impairment, acquired brain injury, drugs and alcohol

*Methods of working:* communication, setting clear boundaries/targets, time out, rewards and sanctions, medication

*Organisational implications:* legal framework, professional standards, codes of practice, policies and procedures

## Learning outcomes and assessment criteria

| Learning outcomes<br><br>On successful completion of this unit a learner will:                         | Assessment criteria for pass<br><br>The learner can:   |
|--|--|
| LO1 Understand perceptions of health, disability, illness and behaviour                                | 1.1 analyse concepts of health, disability, illness and behaviour in relation to users of health and social care services<br>1.2 assess how perceptions of specific needs have changed over time<br>1.3 analyse the impact of legislation, social policy, society and culture on the ways that services are made available for individuals with specific needs |
| LO2 Understand how health and social care services and systems support individuals with specific needs | 2.1 analyse the care needs of individuals with specific needs<br>2.2 explain current systems for supporting individuals with specific needs<br>2.3 evaluate the services available in a chosen locality for individuals with specific needs  |
| LO3 Understand approaches and intervention strategies that support individuals with specific needs     | 3.1 explain the approaches and interventions available to support individuals with specific needs<br>3.2 evaluate the effectiveness of intervention strategies for an individual with specific need(s)<br>3.3 discuss the potential impact of emerging developments on support for individuals with specific needs   |
| LO4 Understand strategies for coping with challenging behaviours associated with specific needs.       | 4.1 explain different concepts of challenging behaviour<br>4.2 describe the potential impact of challenging behaviour on health and social care organisations<br>4.3 analyse strategies for working with challenging behaviours associated with specific needs.  |

## Guidance

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### Links

This unit has links with, for example:

- *Unit 1: Communicating in Health and Social Care Organisations*
- *Unit 10: Safeguarding in Health and Social Care*
- *Unit 21: Supporting Significant Life Events.*

Links may be drawn to National Occupational Standards in Mental Health though it is stressed that the unit is not intended to contain all underpinning knowledge.

- MH2: Enable people with mental health needs to access and benefit from services/systems
- MH3: Work with service providers to support people with mental health needs in ways which promote their rights
- MH15: Refer individuals to mental health and/or other services
- MH19: Coordinate, monitor and review service responses to meet individuals' needs and circumstances
- MH24: Implement, monitor and evaluate therapeutic interventions within an overall care programme.

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

### Essential requirements

Learners will need to observe the sorts of provision that are available to people with specific needs to help them understand the impact such provision on the lives of users of services.

### Employer engagement and vocational contexts

Learners could benefit from work experience/placements with people with specific needs. These could be in schools and colleges, in residential homes, hospitals or other suitable contexts.

Websites that support the development of this unit include those of relevant organisations and relevant government departments. The following may be useful but the list is not exhaustive:

|  |  |
|--|--|
| <a href="http://www.arc.org.uk">www.arc.org.uk</a>                                   | Arthritis Research Campaign                      |
| <a href="http://www.direct.gov.uk">www.direct.gov.uk</a>                             | UK government website                            |
| <a href="http://www.equalityhumanrights.com">www.equalityhumanrights.com</a>         | Equality and Human Rights Commission             |
| <a href="http://www.learningdisabilities.org.uk">www.learningdisabilities.org.uk</a> | Foundation for People with Learning Disabilities |
| <a href="http://www.mencap.org.uk">www.mencap.org.uk</a>                             | Mencap   |

## Unit 19: Contemporary Issues in Health and Social Care

**Unit code:** A/601/1639

**QCF level:** 5

**Credit value:** 15

- **Aim**

The aim of this unit is to enable learners to research how contemporary issues of concern develop and how public perspectives subsequently influence the development of health and social care services.

- **Unit abstract**

This unit will develop learners' understanding of factors that can influence the public debate on matters relating to health and social care. Learners will analyse the methods used to bring information to the public arena for debate, and the validity and reliability of that information. Class debate and discussion may be used to analyse the factors that affect the development of public opinion. Learners will explore how a range of health and social care issues are presented in the media and then monitor the development of a particular issue over time. Learners will develop a portfolio of media coverage on the specific issue of interest, and analyse the interrelationships between public opinion of the issue and the development of related social policy.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Understand how information relating to health and social care gives rise to issues of concern to the public
- 2 Understand how issues of public concern related to health and social care are presented in the media
- 3 Be able to carry out research into different perspectives on a specific issue relating to health and social care
- 4 Understand the likely influence contemporary perspectives on health and social care issues will have on the development of services.

## Unit content

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### 1 Understand how information relating to health and social care gives rise to issues of concern to the public

*Health and social care information:* recurrent themes eg finance, resourcing, political context, collaborative care, standards, disability, child abuse enquiries

*Dissemination of information:* through the media; through informative leaflets; use of visual images; developing a portfolio of media coverage

*Perspectives in the presentation of information:* moral panic; discursive perspectives on the media

*Influences on attitudes and behaviour:* format of presentation; style of presentation; content

*People:* individuals; groups; communities; professionals; pressure groups; lobbyists; marketers, policy formers; others as appropriate

*Developments in health and social care:* legislation; codes of practice; services; professionalism

### 2 Understand how issues of public concern related to health and social care are presented in the media

*The role of the media:* responding to and shaping public opinion eg stereotyping, moral panics, political bias

*Sources of information:* as relevant eg newspapers (local and national), magazines, websites, television channels (both commercial and public)

*Reliability of sources of information:* the question of ownership; political and religious agendas; pressure groups; government sources; conflicting views of current issues eg how the ideological or political perspectives of different media sources impact on the way news is presented or 'spun'

*The impact of the internet:* on news media, politics and professional practice eg news as a commodity, the dominance of a small number of primary news sources, lack of critical scrutiny, 'dumbing down' of news

### 3 Be able to carry out research into different perspectives on a specific issue relating to health and social care

*Specialist sources of current information:* as relevant eg websites, news media and journals

*Electronic sources for current information:* e-journals; government websites; media websites; user group and pressure group websites

*Key issues:* outline issues eg public and private service providers, professionalism and bureaucracy, users of services and consumers, regulation and the market

*Influence of cultural context:* awareness of eg religious and moral beliefs, cultural perspectives on individual and communal rights, academic freedom

*Presentation and emphasis of media and policy makers:* 'spin' and marketing of issues

**4 Understand the likely influence contemporary perspectives on health and social care issues will have on the development of services**

*Interrogate information collected:* critically evaluate eg what is the evidence, validity, reliability, key arguments; summarise; draw conclusions

*Impact on services:* possible outcomes eg privatisation, reduction of resources, changing threshold criteria, discrimination

*Different interpretations of information:* subjectivity eg selective use of data, selective use of professional and academic opinion, political and ideological bias in interpretation; genuine disagreement over the correct interpretation of information

## Learning outcomes and assessment criteria

| <b>Learning outcomes</b><br><br><b>On successful completion of this unit a learner will:</b>  | <b>Assessment criteria for pass</b><br><br><b>The learner can:</b>   |
|---|--|
| LO1 Understand how information relating to health and social care gives rise to issues of concern to the public                     | 1.1 explain how information relating to health and social care reaches the public domain<br><br>1.2 analyse different techniques for disseminating information relating to health and social care<br><br>1.3 evaluate how the different ways in which information relating to health and social care is presented can influence the attitudes, thoughts and behaviour of people  |
| LO2 Understand how issues of public concern related to health and social care are presented in the media                            | 2.1 explain ways in which the media may be used to influence the attitudes and behaviour of people in relation to health and social care issues<br><br>2.2 evaluate how the public can assess the reliability and validity of media information about health and social care   |
| LO3 Be able to carry out research into different perspectives on a specific issue relating to health and social care                | 3.1 carry out research into different perspectives on a specific issue relating to health and social care<br><br>3.2 monitor how different perspectives gleaned from reliable sources on a specific health and social care issue have changed over time<br><br>3.3 assess the relevance of the findings to health and social care practice locally<br><br>3.4 analyse the factors that have influenced the development of different perspectives over a period of time |
| LO4 Understand the likely influence contemporary perspectives on health and social care issues have on the development of services. | 4.1 analyse the extent to which local attitudes reflect those found at a national level<br><br>4.2 evaluate the validity of public attitudes and behaviours in relation to a specific issue<br><br>4.3 justify possible consequences of contemporary thinking for health and social care provision and services.   |

## Guidance

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### Links

This unit provides an opportunity for learners to access contemporary issues and developments in a wide range of health and social care areas, so links may be established with other units on this programme as relevant. Learners may find it beneficial to have completed *Unit 7: Social Policy*. However, current issues can be focused on practice as well as policy.

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

### Essential requirements

Tutors must ensure that there are resources available, such as online journals and print media, to support learners in researching contemporary issues.

### Employer engagement and vocational contexts

Any links that can be made with journalists involved in reporting on health and social care issues may prove beneficial to the delivery of the unit and may provide opportunities for learners to engage in debates about the impact of the media.

## Unit 23: Employability Skills

**Unit code:** A/601/0992

**QCF level:** 5

**Credit value:** 15

- **Aim**

This unit provides learners with the opportunity to acquire honed employability skills required for effective employment.

- **Unit abstract**

All learners, regardless of their level of education or experience, require honed employability skills in order to successfully enter the health and social care sector. This unit gives learners an opportunity to assess and develop an understanding of their own responsibilities and performance in or when entering the workplace.

It covers the skills required for general employment such as interpersonal and transferable skills, and the dynamics of working with others in teams or groups including leadership and communication skills. It also deals with the everyday working requirement of problem solving which includes the identification or specification of the 'problem', strategies for its solution and then evaluation of the results of the solution through reflective practices

Please note that this unit may not be taken alongside *Unit 28: Work-based Experience*.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Be able to determine own responsibilities and performance
- 2 Be able to develop interpersonal and transferable skills
- 3 Understand the dynamics of working with others
- 4 Be able to develop strategies for problem solving.

## Unit content

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### 1 Be able to determine own responsibilities and performance

*Own responsibilities:* personal responsibility; direct and indirect relationships and adaptability, decision-making processes and skills; ability to learn and develop within the work role; employment legislation, ethics, employment rights and responsibilities

*Performance objectives:* reviewing current capabilities, setting, monitoring and evaluating performance objectives

*Individual appraisal systems:* uses of performance appraisals eg 360 degree evaluation, salary levels and bonus payments, promotion strengths and weaknesses, training needs; communication; appraisal criteria eg production data, personnel data, judgemental data; rating methods eg ranking, paired comparison, checklist, management by objectives

*Motivation and performance:* application and appraisal of motivational theories and techniques, rewards and incentives, manager's role, self-motivational factors

### 2 Be able to develop interpersonal and transferable skills

*Effective communication:* verbal and non-verbal; awareness and use of body language, openness and responsiveness; formal and informal feedback to and from colleagues; ICT as an effective communication medium; team meetings

*Interpersonal skills:* personal effectiveness; working with others; use of initiative; negotiating skills; assertiveness skills; social skills

*Time management:* prioritising workload; setting work objectives; making and keeping appointments; working steadily rather than erratically; time for learning; reliable estimate of task time

*Problem solving:* problem analysis; researching changes in the workplace; generating solutions; choosing a solution

### 3 Understand the dynamics of working with others

*Working with others:* nature and dynamics of team and group work; informal and formal settings; purpose of teams and groups eg long-term corporate objectives/strategy; problem solving and short-term development projects; flexibility/adaptability; team player; negotiating responsibilities and work arrangements; conflict resolution

*Teams and team building:* selecting team members eg specialist roles, skill and style/approach mixes; identification of team/work group roles; stages in team development eg team building, identity, loyalty, commitment to shared beliefs, team health evaluation; action planning; monitoring and feedback; exchanging constructive feedback; coaching skills; ethics; effective leadership skills eg setting direction, setting standards, motivating, innovative, responsive, effective communicator, reliable, consistent

#### 4 **Be able to develop strategies for problem solving**

*Specification of the problem:* definition of the problem; analysis and clarification

*Identification of possible outcomes:* identification and assessment of various alternative outcomes

*Tools and methods:* problem-solving methods and tools; tracking progress and results

*Plan and implement:* sources of information; solution methodologies; selection and implementation of the best corrective action eg timescale, stages, resources, critical path analysis

*Evaluation:* evaluation of whether the problem was solved or not; measurement of solution against specification and desired outcomes; sustainability

## Learning outcomes and assessment criteria

| <b>Learning outcomes</b><br><br><b>On successful completion of this unit a learner will:</b> | <b>Assessment criteria for pass</b><br><br><b>The learner can:</b>  |
|--|---|
| LO1 Be able to determine own responsibilities and performance                                | 1.1 develop a set of own responsibilities and performance objectives<br>1.2 evaluate own effectiveness against defined objectives<br>1.3 make recommendations for improvement<br>1.4 review how motivational techniques can be used to improve quality of performance |
| LO2 Be able to develop interpersonal and transferable skills                                 | 2.1 develop solutions to work-based problems<br>2.2 communicate in a variety of styles and appropriate manner at various levels<br>2.3 identify effective time-management strategies  |
| LO3 Understand the dynamics of working with others   | 3.1 explain the roles people play in a team and how they can work together to achieve shared goals<br>3.2 analyse team dynamics<br>3.3 suggest alternative ways to complete tasks and achieve team goals  |
| LO4 Be able to develop strategies for problem solving  | 4.1 evaluate tools and methods for developing solutions to problems<br>4.2 develop an appropriate strategy for resolving a particular problem<br>4.3 evaluate the potential impact on the business of implementing the strategy                                       |

## Links

This unit has links with, for example:

- *Unit 4: Personal and Professional Development in Health and Social Care*
- *Unit 6: Research Project*
- *Unit 28: Work-based Experience.*

It also links with the following Asset Skills cross-sectoral Employability Matrix:

B2.4: Plan and manage time, money and other resources to achieve goals

B3.3: Find and suggest new ways to achieve goals and get the job done and achieve goals

B4.5: Plan for and achieve your learning goals

C1.1: Understand the roles people play in a group and how you can best work with them

C1.7: Lead or support and motivate a team to achieve high standards

C2.6: Find new and creative ways to solve a problem.

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

## Essential requirements

Access to a range of work-related exemplars (for example appraisal and development systems, team health checks, job descriptions, action plans, communication strategies) will be needed to deliver this unit.

Learners can generate assessment evidence through a range of possible activities including individual work placements, project management, research reports, development of case studies, the process of working with others (for example employee–supervisor roles, teamwork, group work) and everyday communication within the workplace.

## Employer engagement and vocational contexts

Case studies based on relevant sectors, workshops, career talks and work-based mentors would be useful in the teaching and learning aspect of the unit.

## Unit 26: Facilitating Change in Health and Social Care

**Unit code:** D/601/1665

**QCF level:** 5

**Credit value:** 15

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- **Aim**

This aim of this unit is for learners to gain understanding of the factors of change in health and social care services, and the practice of evaluating and facilitating change.

- **Unit abstract**

Health and social care services are continually subjected to many types of change: political, legal, organisational, demographic, cultural and technological. New ideas about the best ways to provide care for individuals such as partnership and collaborative working, constraints on public spending, and advances in technology all impact on organisations, staff and those who use services. Poorly managed change never works well, as it creates stress and resistance, so learning how to manage change effectively and help others in this continual process is crucial to effective service delivery. This unit introduces learners to the range of factors that can influence change; the effects of change on organisations, staff and users of services and the key principles of successful change management. Learners are also encouraged to evaluate the benefits of continuing change in health and care services.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Understand the factors that drive change in health and social care services
- 2 Be able to evaluate recent changes in health and social care services
- 3 Understand the principles of change management.

## Unit content

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### 1 Understand the factors that drive change in health and social care services

*Political and legal:* factors eg modernisation agenda; current legislation eg Health Act 1999, NHS and Community Care Act 1990, Health and Social Care Act 2001; changes of government; funding issues

*Demographic and cultural:* factors eg ageing population, minority ethnic community needs, lifestyle factors, public awareness (perceptions) and news media, human factors

*Technological:* factors eg electronic record keeping; electronic communication; assistive technology

### 2 Be able to evaluate recent changes in health and social care services

*Impact of recent changes on organisations and staff:* how services are organised; effect on front-line staff; effect on service delivery

*Impact of recent changes on users of services:* direct users; families of those who use services

*Benefits of recent changes:* for the government; for workers in services; for those who use services

### 3 Understand the principles of change management

*Key principles of change management:* Kotter's eight steps to successful change; Leavitt's model of change; people's reactions to change; dealing with people's fears and anxieties; understanding people's needs; reducing resistance to change; leading change; creating ownership

*How change is planned:* methods eg consultation; communication; top-down or bottom-up; management style; use of informal social systems; reconditioning; managing anxiety; staff development needs

*How change is monitored:* measuring and monitoring eg evaluative research surveys; customer/staff satisfaction; measures of efficiency (cost-benefit, referral rates, case completion, waiting and response times)

## Learning outcomes and assessment criteria

| Learning outcomes<br>On successful completion of this unit a learner will:      | Assessment criteria for pass<br>The learner can:   |
|---|--|
| LO1 Understand the factors that drive change in health and social care services | 1.1 explain the key factors that drive change in health and social care services<br>1.2 assess the challenges that key factors of change brings to health and social care services   |
| LO2 Be able to evaluate recent changes in health and social care services       | 2.1 devise a strategy and criteria for measuring recent changes in health and social care<br>2.2 measure the impact of recent changes on health and social care services against set criteria<br>2.3 evaluate the overall impact of recent changes in health and social care<br>2.4 propose appropriate service responses to recent changes in health and social care services |
| LO3 Understand the principles of change management.                             | 3.1 explain the key principles of change management<br>3.2 explain how changes in health and social care are planned<br>3.3 assess how to monitor recent changes in health and social care services.   |

## Guidance

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### Links

This unit has links with, for example:

- *Unit 8: The Sociological Context of Health and Social Care*
- *Unit 13: Managing Human Resources in Health and Social Care*
- *Unit 28: Work-based Experience.*

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

### Essential requirements

Tutors will need to be able to guide learners through a variety of data sources as well as provide support for rapid appraisal strategies for facilitating change in health and social care.

Learners will need access to service design and delivery documents as well as demographic and social profiles of local communities.

### Employer engagement and vocational contexts

Learners should have the opportunity to base their studies on the health and social care setting in which they work or have access.

## Unit 27: Managing Quality in Health and Social Care

**Unit code:** K/601/1670

**QCF level:** 5

**Credit value:** 15

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- **Aim**

The aim of this unit is to help learners develop an understanding of different perspectives on health and social care service quality and how it is evaluated in order to empower and involve users of services.

- **Unit abstract**

Quality is an essential component of health and social care services and a concept with many different interpretations and perspectives. It is important to both users of health and social care services and external stakeholders. In this unit learners will gain knowledge of these differing perspectives and consider ways in which health and care service quality may be improved. Improvement of service quality requires both the empowerment and involvement of users of services, as well as addressing the requirements of external regulatory bodies. Learners will explore the requirements of external regulators and contrast them with the expectations of those who use services. Learners will also gain knowledge of some of the methods that can be used to assess different quality perspectives, and develop the ability to evaluate these methods against service objectives.

Health and social care is a high contact service industry, and learners will be introduced to some of the concepts of managing service quality with an aim of achieving continuous improvement and exceeding minimum standards.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Understand differing perspectives of quality in relation to health and social care services
- 2 Understand strategies for achieving quality in health and social care services
- 3 Be able to evaluate systems, policies and procedures in health and social care services
- 4 Understand methodologies for evaluating health and social care service quality.

## Unit content

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### 1 Understand differing perspectives of quality in relation to health and social care services

*Quality perspectives:* perspectives of external bodies eg conformance; perspectives of staff; perspectives of those who use services eg Servqual – Zeithaml, Parasuraman and Berry; technical quality; functional quality; quality assurance; quality control; quality audit; quality management

*Stakeholders:* external agencies eg Care Quality Commission; Supporting People; National Institute for Clinical Excellence; Health Service Commissioners; local authorities; users of services eg direct users of services, families, carers; professionals; managers; support workers

### 2 Understand strategies for achieving quality in health and social care services

*Standards:* minimum standards; best practice; benchmarks; performance indicators; charters; codes of practice; legislation eg local, national, European

*Implementing quality:* planning, policies and procedures; target setting; audit; monitoring; review; resources (financial, equipment, personnel, accommodation); communication; information; adapting to change

*Barriers:* external (inter-agency interactions, legislation, social policy); internal (risks, resources, organisational structures, interactions between people)

### 3 Be able to evaluate systems, policies and procedures in health and social care services

*Evaluating quality:* different quality methods and systems eg Total Quality Management, Continuous Quality Improvement; concepts; preventing problems; management leadership, control of processes, involvement of people; quality circles

*Health and care organisation:* services eg an NHS trust, a local authority social care service, a private health or social care service, a not-for-profit health and care service

*Improving quality:* methods eg customer service, empowering users of services, functional quality, putting people first, valuing front-line staff, internally generated standards that exceed minimum requirements

### 4 Understand methodologies for evaluating health and social care service quality

*Methods for assessing service quality:* methods eg questionnaires, focus groups, structured and semi-structured interviews, panels, complaints procedures, road shows

*Perspectives:* external eg requirements of inspection agencies (minimum standards); internal eg organisational standards; continuous improvement

*Involving users of services:* mechanisms eg consultation, panels, empowerment, user managed services

## Learning outcomes and assessment criteria

| Learning outcomes<br>On successful completion of this unit a learner will:                      | Assessment criteria for pass<br>The learner can:  |
|---|---|
| LO1 Understand differing perspectives of quality in relation to health and social care services | 1.1 explain perspectives that stakeholders in health and social care have regarding quality<br>1.2 analyse the role of external agencies in setting standards<br>1.3 assess the impact of poor service quality on health and social care stakeholders   |
| LO2 Understand strategies for achieving quality in health and social care services              | 2.1 explain the standards that exist in health and social care for measuring quality<br>2.2 evaluate different approaches to implementing quality systems<br>2.3 analyse potential barriers to delivery of quality health and social care services  |
| LO3 Be able to evaluate systems, policies and procedures in health and social care services     | 3.1 evaluate the effectiveness of systems, policies and procedures used in a health and social care setting in achieving quality in the service(s) offered<br>3.2 analyse other factors that influence the achievement of quality in the health and social care service<br>3.3 suggest ways in which the health and social care service could improve its quality |
| LO4 Understand methodologies for evaluating health and social care service quality.             | 4.1 evaluate methods for evaluating health and social care service quality with regard to external and internal perspectives<br>4.2 discuss the impact that involving users of services in the evaluation process has on service quality.   |

## Guidance

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### Links

This unit has links with, for example:

- *Unit 1: Communicating in Health and Social Care Organisations*
- *Unit 2: Principles of Health and Social Care Practice*
- *Unit 3: Health and Safety in the Health and Social Care Workplace.*

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

### Essential requirements

Learners will need access to information about local standards and targets for health and social care services.

It is strongly recommended that learners have the use of an authentic health or social care setting for the assessment of learning outcome 3. However, if this is not appropriate for the learner's role and responsibilities or if there are concerns about access to a particular setting, a simulated scenario with appropriate supporting documents (policies etc) may be used. Learners must consult with their tutor about the aspect of service chosen to ensure that there will be sufficient evidence to meet the assessment criteria fully.

### Employer engagement and vocational contexts

Engagement with health and social care employers would be beneficial for both learners who are employees and those on work placement in settings, especially if the setting can be used as a case study for assessment purposes. The broad assessment requirements of the unit should be shared with the employer.

## Unit 29: Health Promotion

**Unit code:** J/601/1675

**QCF level:** 5

**Credit value:** 15

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- **Aim**

This unit aims to provide learners with an understanding of the influences on health in a modern society and also the factors which influence national and regional strategies to promote health.

- **Unit abstract**

Practitioners who work in health and social care require an understanding of the influences on the health of the individuals with whom they work. This unit will provide learners with the knowledge and understanding of pertinent issues and also factors which prevent some individuals from accessing health support. Learners will investigate a range of influences on health and also reasons for the varied success of health promotion campaigns and strategies. Reference is made to the role of national and regional strategies and professionals. Theories of health behaviour are examined and linked with government strategies to improve the health of individuals in society. Potential conflicts between local industry and health promotion are considered, for example anti-smoking campaigns and parents employed within the tobacco industry.

Learners are invited to plan a health promotion campaign for a specific group in society, which could be conducted within their own workplace in order to provide a context for the unit.

- **Learning outcomes**

**On successful completion of this unit a learner will:**

- 1 Understand the socio-economic influences on health
- 2 Understand models of health promotion
- 3 Understand factors which influence health promotion
- 4 Be able to plan a health promotion campaign.

## Unit content

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### 1 Understand the socio-economic influences on health

*Influences:* social eg disposable income, unemployment, lifestyle choices, environment, access to healthcare facilities, access to information, citizenship status, discrimination

*Sources of information:* reports and enquiries eg Black Report DHSS 1980, Acheson Report 'Independent Inquiry in 'Inequalities in Health' 1998, Health and Lifestyle Surveys (HALS), Health Survey for England (HSFE), census data

### 2 Understand models of health promotion

*Definitions:* models eg medical, social; behavioural change, health educational, differences between health promotion and health education

*Government strategies:* campaigns eg anti-smoking campaigns, Healthy Eating, Dare campaign; vaccination programmes, safety in the home, sun protection, Sure Start, Every Child Matters, government health promotion targets

*National and regional health promotion:* structures eg National Institute for Clinical Excellence (NICE), role of Primary Care Trusts, partnerships between local authorities and strategic health authorities; role of voluntary groups eg Epilepsy Action and Asthma UK

*Role of professionals:* health visitors and others eg school nurses; school dental checks liaison with parents and carers

*Routines within the settings:* personal hygiene; healthy eating; resting; exercise

### 3 Understand factors which influence health promotion

*Factors:* health beliefs, cultural and religious practices; previous experience of health promotion; education and understanding; potential conflicts with industry eg tobacco, alcohol; access to information; relevance of information to target group

*Theories of health behaviour:* behaviours eg Health Belief Model (Becker 1974), Theory of Reasoned Action (Ajzen and Fishbein, 1980), Health Action Model (Tones, 1990), Stages of Change Model (Prochaska and DiClemente, 1984)

#### 4 Be able to plan a health promotion campaign

*Purpose:* aim eg improve the health of children, increase concentration, encourage healthy living in families, extend life expectancy

*Strategies:* assessing health needs, incorporation into routines, involving parents and carers; cultural eg awareness of religious and cultural practices, festivals and special days; timing, levels of understanding; involvement of other professionals eg community paediatric nurse, dietician, links with national campaigns

*Legislation and guidelines:* relevant sections from eg Health and Safety at Work Act, Keeping Children and Families Safe Act 2003, Disability Discrimination Act 2005

*Evaluation:* framework for evaluation (efficiency, effectiveness, economy); measured outcomes, Specific, Measurable, Accessible, Relevant, Timely (SMART) targets, goals and objectives

## Learning outcomes and assessment criteria

| <b>Learning outcomes</b><br><br><b>On successful completion of this unit a learner will:</b> | <b>Assessment criteria for pass</b><br><br><b>The learner can:</b>  |
|--|---|
| LO1 Understand the socio-economic influences on health                                       | 1.1 explain the effects of socio-economic influences on health<br>1.2 assess the relevance of government sources in reporting on inequalities in health<br>1.3 discuss reasons for barriers to accessing healthcare   |
| LO2 Understand models of health promotion  | 2.1 analyse the links between government strategies and models of health promotion<br>2.2 explain the role of professionals in meeting government targets for health promotion<br>2.3 discuss the role of routines in promoting healthy living                        |
| LO3 Understand factors which influence health promotion                                      | 3.1 explain how health beliefs relate to theories of health behaviour<br>3.2 discuss the possible effects of potential conflicts with local industry on health promotion<br>3.3 explain the importance of providing relevant health-related information to the public |
| LO4 Be able to plan a health promotion campaign.   | 4.1 plan a health promotion campaign to meet specific objectives<br>4.2 explain how the health promotion campaign supports health promotion strategies.   |

## Guidance

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### Links

This unit has links with, for example:

- *Unit 10: Safeguarding in Health and Social Care*
- *Unit 11: The Role of Public Health in Health and Social Care*
- *Unit 12: Physiological Principles for Health and Social Care*
- *Unit 15: Psychology for Health and Social Care.*

This unit also has links with the National Occupational Standards in Health and Social Care. See *Annexe B* for mapping.

This unit also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

### Essential requirements

Access to government reports and papers will be essential, as will relevant texts on health psychology to provide information on health behaviour.

An examination of relevant legislation is essential, particularly with regard to the delivery of learning outcome 4, the health promotion plan.

### Employer engagement and vocational contexts

Input from visiting health professionals such as health visitors and community nurses would enhance learning. Input from members of minority ethnic groups on religious and cultural requirements would also be of benefit, as would speakers from faith and non-faith groups.

## Calculation of the qualification grade

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### Pass qualification grade

Learners who achieve the minimum eligible credit value specified by the rule of combination will achieve the qualification at a pass grade (see section *Rules of combination for the BTEC Level 4 and 5 Higher National qualifications*). The Rules of combination have been summarised below:

#### BTEC HND Diplomas

To achieve the qualification a learner must:

- achieve at least 240 credits at or above the level of the qualification
- achieve a minimum of 125 credits at Level 5 or above.

The best valid combination of units is used to calculate the overall grade, e.g. if a learner has completed more than the minimum number of optional units at the appropriate level the best performance from these will be used.

All learners will receive a Notification of Performance showing all unit grades whether or not they were included in the calculation for the overall grade.

### Qualification grades above pass grade

#### BTEC HND Diplomas

The grade achieved in units from an appropriate HNC may contribute to an HND grade.

If a learner moves from HNC to HND, credits at Level 5 or above from both the HNC and HND can contribute to the best 75 credits of the overall HND grade. Note that for HND learners, level 4 units do not count towards the qualification grade.

Calculation of the BTEC HND qualification grade is based on the learner's best performance in units at or above the level of the qualification – i.e. **only units at level 5** can be counted towards the value of 75 credits:

- The best 75 credits must come from a maximum of 240 credits as a valid rule of combination
- The units from which the 75 best credits are selected come from the whole qualification including the mandatory core credit, but must be level 5 units or above.

This means that credit from some mandatory core units is likely to form part of the best 75 credits in most programmes (the mandatory core credit units will automatically be included in the calculation once the maximum amount of credit for optional specialist units for the rule of combination is used up.)

It is the responsibility of a centre to ensure that a correct unit combination is adhered to.

## Qualification grades

Learners will be awarded a pass, merit or distinction qualification grade using the points gained through the 75 best credits based on unit achievement.

### Unit credit points for specified unit grades at Level 5 only

| Unit points per credit |       |             |
|------------------------|-------|-------------|
| Pass                   | Merit | Distinction |
| 0                      | 1     | 2           |

### BTEC Level 5 HND overall qualification grades

| Points range | Grade       |   |
|--------------|-------------|---|
| 0–74         | Pass        | P |
| 75–149       | Merit       | M |
| 150          | Distinction | D |

*Annexe* gives examples of how qualification grades are calculated.

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# Annexe

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## Calculation of the qualification grade

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### Pass qualification grade

Learners who achieve the minimum eligible credit value specified by the rule of combination will achieve the qualification at pass grade (see section *Rules of combination for BTEC Levels 4 and 5 Higher National qualifications*).

### Qualification grades above pass grade

Learners will be awarded a merit or distinction qualification grade by the aggregation of points gained through the successful achievement of individual units. **The graded section of both qualifications is based on the learner's best performance in units at the level or above of the qualification to the value of 75 credits.**

The number of points available is dependent on the unit grade achieved and the credit size of the unit (as shown in the table below).

### Points available per credit at specified unit grades

| Points per credit |       |             |
|-------------------|-------|-------------|
| Pass              | Merit | Distinction |
| 0                 | 1     | 2           |

So a 15 credit unit awarded a merit grade will gain 15 points.

### Qualification grades

#### BTEC Level 5 HND

| Points range | Grade       |   |
|--------------|-------------|---|
| 0-74         | Pass        | P |
| 75-149       | Merit       | M |
| 150          | Distinction | D |

### Examples for the HND Diploma:

The tables below give examples of how the overall grade is determined.

**Only points from units at or above the level of the qualification can be counted towards the grade.**

**Examples used are for illustrative purposes only. Other unit combinations are possible.**

#### Example 1: Achievement of an HND Diploma with a pass grade

|         |                                   | Level                     | Credit     | Grade | Grade points | Points per unit (weighting × credit points) |
|---------|-----------------------------------|---------------------------|------------|-------|--------------|---|
| Unit 1  | Mandatory core unit               | 4                         | 15         | P     | X            | (15)  |
| Unit 2  | Mandatory core unit               | 4                         | 15         | M     | X            |   |
| Unit 3  | Mandatory core unit               | 4                         | 15         | M     | X            | 30  |
| Unit 4  | Mandatory core unit               | 4                         | 15         | M     | X            |   |
| Unit 5  | Mandatory core unit               | 4                         | 15         | M     | X            |   |
| Unit 6  | Mandatory core unit               | 5                         | 15         | P     | 0            |   |
| Unit 7  | Mandatory core unit               | 5                         | 15         | M     | 1            | 15  |
| Unit 8  | Mandatory core unit               | 5                         | 20         | P     | 0            |   |
| Unit 20 | Specialist unit                   | 5                         | 15         | M     | 1            | 15  |
| Unit 21 | Specialist unit                   | 5                         | 15         | P     | 0            |   |
| Unit 23 | Specialist unit                   | 5                         | 15         | P     | 0            |   |
| Unit 25 | Specialist unit                   | 4                         | 15         | P     | X            |   |
| Unit 26 | Specialist unit                   | 5                         | 15         | M     | 1            | 15  |
| Unit 29 | Specialist unit                   | 4                         | 15         | M     | X            |   |
| Unit 33 | Specialist unit                   | 4                         | 15         | M     | X            |   |
| Unit 35 | Specialist unit                   | 5                         | 15         | M     | 1            | 15  |
|         | <b>Qualification grade totals</b> | <b>Min 125 at level 5</b> | <b>245</b> |       |              | <b>60</b>                                   |

Count the points from level 5 units for the best 75 credits  
 X these units are **below** the level of the HND Diploma so not counted for grading

The learner has sufficient points for a pass grade.

## Example 2

### Achievement of an HND Diploma with a Merit grade

|         |                                   | Level                     | Credit     | Grade | Grade points | Points per unit (weighting × credit points) |
|---------|-----------------------------------|---------------------------|------------|-------|--------------|---|
| Unit 1  | Mandatory core unit               | 4                         | 15         | P     | X            |   |
| Unit 2  | Mandatory core unit               | 4                         | 15         | M     | X            |   |
| Unit 3  | Mandatory core unit               | 4                         | 15         | M     | X            |   |
| Unit 4  | Mandatory core unit               | 4                         | 15         | M     | X            |   |
| Unit 5  | Mandatory core unit               | 4                         | 15         | M     | X            |   |
| Unit 6  | Mandatory core unit               | 5                         | 15         | M     | 1            | 15  |
| Unit 7  | Mandatory core unit               | 5                         | 15         | D     | 2            | 30  |
| Unit 8  | Mandatory core unit               | 5                         | 20         | D     | 2            | 40  |
| Unit 20 | Specialist unit                   | 5                         | 15         | M     | 1            | 15  |
| Unit 21 | Specialist unit                   | 5                         | 15         | M     | 1            | (15)  |
| Unit 23 | Specialist unit                   | 5                         | 15         | P     | 0            |   |
| Unit 25 | Specialist unit                   | 4                         | 15         | P     | X            |   |
| Unit 26 | Specialist unit                   | 5                         | 15         | M     | 1            | (15)  |
| Unit 29 | Specialist unit                   | 4                         | 15         | M     | X            |   |
| Unit 33 | Specialist unit                   | 4                         | 15         | M     | X            |   |
| Unit 35 | Specialist unit                   | 5                         | 15         | M     | 1            | (15)  |
| Unit 36 | Specialist unit                   | 5                         | 10         | D     | 2            | 20  |
|         | <b>Qualification grade totals</b> | <b>Min 125 at level 5</b> | <b>260</b> |       |              | <b>105</b>                                  |

The learner can be considered for a merit:

only count the points from **the best 75** credits from a valid combination of 240 credits

X these units are **below** the level of the qualification so **cannot** be counted for grading

The best 75 credits include both mandatory core and optional units

() these units are not counted in the overall score

The learner has sufficient points for a merit grade.

### Example 3

#### Achievement of an HND Diploma with a distinction grade

|         |                                   | Level                     | Credit     | Grade | Grade points | Points per unit (weighting × credit points) |
|---------|-----------------------------------|---------------------------|------------|-------|--------------|---|
| Unit 1  | Mandatory core unit               | 4                         | 15         | P     | X            |   |
| Unit 2  | Mandatory core unit               | 4                         | 15         | M     | X            |   |
| Unit 3  | Mandatory core unit               | 4                         | 15         | D     | X            |   |
| Unit 4  | Mandatory core unit               | 4                         | 15         | D     | X            |   |
| Unit 5  | Mandatory core unit               | 4                         | 15         | M     | X            |   |
| Unit 6  | Mandatory core unit               | 5                         | 15         | D     | 2            | 30  |
| Unit 7  | Mandatory core unit               | 5                         | 15         | D     | 2            | 30  |
| Unit 8  | Mandatory core unit               | 5                         | 20         | D     | 2            | 30  |
| Unit 20 | Specialist unit                   | 5                         | 15         | D     | 2            | 30  |
| Unit 21 | Specialist unit                   | 5                         | 15         | D     | 2            | 30  |
| Unit 23 | Specialist unit                   | 5                         | 15         | P     | 0            |   |
| Unit 25 | Specialist unit                   | 4                         | 15         | P     | X            |   |
| Unit 26 | Specialist unit                   | 5                         | 15         | M     | 1            | (15)  |
| Unit 29 | Specialist unit                   | 4                         | 15         | M     | X            |   |
| Unit 33 | Specialist unit                   | 4                         | 15         | M     | X            |   |
| Unit 35 | Specialist unit                   | 5                         | 15         | M     | 1            | (15)  |
| Unit 36 | Specialist unit                   | 4                         | 15         | P     | X            |   |
|         | <b>Qualification grade totals</b> | <b>Min 125 at level 5</b> | <b>245</b> |       |              | <b>150</b>                                  |

The learner can be considered for a distinction: only count the points from level 5 units for the best 75 credits from a valid combination of **240** credits  
 () these units are not counted in the overall score  
 X not counted as **below the** level of the qualification.

The learner has sufficient points for a distinction grade.

