

Unit 3: Positive Care Environments

Introduction

The main aim of this support material is to provide centres with guidance and support on how to deliver the unit content accurately and relevantly whilst at the same time meeting the candidate assessment and evidence requirements.

Objectives of the Unit

The main objective of the unit is to build candidate knowledge and understanding of what constitutes quality care and to encourage candidates to apply this knowledge and understanding through primary and secondary sources to their chosen organisation/service user group.

The Unit content consists of four key areas:

- 3.1: Values and Individual Rights
- 3.2: Barriers to Access
- 3.3: Creating a Positive Environment
- 3.4: How Society Promotes Service User Rights

Assessment Requirements

- Written report - suggested word length approx 800 -1200 words
- Focus of the report must be on either a health or social care setting or user group
- The evidence for this unit can be collected as a group but the report must be written individually

Choice of Setting or User Group

The choice of setting, organisation or user group is important as candidates need to have access to it/them in order to meet the requirements of higher mark bands as set out in the assessment criteria.

Although work experience/placement is not a mandatory requirement of the qualification it is nevertheless good practice and allows candidates to link theory to practice. Where centres cannot access placement experience then links should be developed either by visits or guest speakers with the placement or service user group so that candidates gain the required evidence to meet the assessment criteria

For large groups of candidates within a centre, i.e. more than 15, it would be advisable to reduce candidate choice of setting or user group as this will make it manageable to both teach and give formative feedback during the delivery of the unit. It will also be advantageous when delivering material on legislation and methods of redress.

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Relevant Settings Could Include:

- **Hospital:** it will be advisable to choose a particular service such as maternity services, children's ward, physiotherapy, occupational therapy, outpatients. Consequently such service users can be classified as either generically health or individuals with specific needs or in the case of maternity and children services this can be linked into early years. Hospices may also be covered under this heading.
- **Day care:** This provides centres with the widest choice of service users and organisations. They may include state run services such as Day Surgeries and Clinics such as mother and baby clinics or well women clinics, voluntary organisations such Age Concern, Salvation Army etc, Private organisation such as crèches, play groups, pre-school groups, after schools clubs etc. Day care provision can also take in services for those with specific needs such as addiction problems.
- **Residential:** will cover all service user groups - children, adults with specific needs, older people.
- **Nursing:** will cover all service user groups - children, adults with specific needs, older people.

Assessment Evidence

Assessment evidence (a) focuses on the rights of the service user when accessing a specific service such as a day centre, clinic or a service provided within an organisation. Candidates working within Mark Band 1 will produce generically written material which is heavily reliant on text material or class handouts. Candidates working with Mark Band 2 and 3 will show a greater depth of knowledge that reflects a move away from secondary sources preferring instead to using primary sources.

Assessment evidence (b) focuses on the barriers service users may encounter and the effects this may have on the service user. The most effective way this can be achieved is through direct involvement with the service user or organisation i.e. observation, interview or questionnaire. The effects of the barriers refer to the effects they have on the service-user eg discrimination, social exclusion, marginalisation, social, physical, emotional effects.

Please note that no where in the assessment criteria does it state that candidates have to outline how the organisation may overcome such barriers.

Candidates working in Mark Band 1 will provide a brief list or 1-2 barriers and describe them and their effects. Candidates working in Mark Band 2 will identify and explain the effects of 2-3 barriers. The work at this level will be purely explanatory with little or no discussion. Candidates working in Mark Band 3 will focus on at least 3 barriers and will provide a comprehensive explanation and discussion of their effects. However, please note that no where in the assessment criteria does it specify the number of

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examples that should be given. The number of barriers can be used as 'best practice' advice only.

Assessment evidence (c) focuses on organisational practice and policy and how this promotes a positive care environment. The evidence for these criteria relies heavily on access to the organisation. It should be stressed that all evidence collected from the organisation such as policies should be anonymised and confidentiality promoted. The factors which influence the creation of a positive care environment include:

- Culture
- Structure
- Policies
- Practices
- Implementation of legislation
- Resources deployed

Again evidence can best be obtained through primary research - observation, interview or questionnaire.

Ways in which positive care is promoted include:

- Policies - as outlined in the unit specification. It is not sufficient to appendix policies without explaining or discussing their function and purpose
- Practices - quality audits, team meetings, care plans, staff development activities, listening to service users
- Legislation - Care should be taken on this as a descriptive account of what the legislation is about will not suffice it must be more in depth in terms of what the duties of the organisation are under the legislation.

In Mark Band 1 evidence produced by candidates will be brief and limited whereby they will have identified only two factors and two ways in which the organisation have promoted a positive care environment. In Mark Band 2 candidates will explain 2 factors and 2 ways in which organisations have promoted positive care environments. In Mark Band 3 candidates will explain at least 3 factors and 3 ways in which organisations can promote positive care environments.

Assessment evidence (d) focuses on how society can promote the rights of service users. Ideally candidates should be given a 'taster' of the legislation relevant to the service user group or organisation. This is why I advised care in choosing the organisations or service user groups particularly with large groups of students. By choosing one or two groups the delivery of this aspect of the unit content is manageable. Whilst the centre assessor can provide a explanation of the function of the legislation it may be advisable to get a guest speaker ie social worker, nurse or other suitably qualified expert or someone from the organisation to explain what the requirements of legislation are with regard to duties and powers contained within it and the subsequent methods of redress. Candidates working to Mark Band 1 may

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consider organisational redress only, e.g. the internal Complaints Procedure. Candidates working to Mark Band 2 and 3 should consider redress on a wider plain, looking at not only organisational methods of redress but also redress linked to legislation, eg Tribunals, Disability Rights Commission, Arbitration Service (ACAS). Mark Band 2 requires at least two methods of redress and Mark Band 3, at least 3.

Again, in Mark Band 1 candidate evidence will be descriptive and limited in content. Candidates working in Mark Band 2 will give a greater depth of explanation and will link relevant methods of redress to the legislation i.e. Mental Health Act/NI Order to mental health tribunal. Finally those candidates in Mark Band 3 will provide a comprehensive analysis and evaluation of the legislation relevant to their service user group.

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Exemplar Questionnaire / Interview Schedule

1. What setting are you currently work in: **(please circle)**

- Day Care
 - Residential
 - Nursing
 - Hospital
 - Other - please state
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2. Which service user group do you work with: **(please circle)**

- People with illnesses
- Older people
- children
- People with specific needs - please state

3. State the range of services your organisation currently provides to service-users.

4. Are you aware of any instances whereby a service-user may not be able to gain access to the services you provide? **(please circle)**

YES

NO

5. a) If 'Yes' were the reasons due to any of the following? **(please circle)**

- Geography
- Organisational resources
- Language barriers
- Physical barriers
- Psychological barriers
- Financial barriers

b) Are you able to expand on this more fully?

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6. Which of the following methods do you use to promote service-users rights (please circle)

- Care plans
- Advocates / interpreters
- Mission statements
- Equal opportunity policies
- Admission statements
- Complaints policies
- Whistle blowing policies
- Key worker / named nurse

7. Are there any of the above policies that you do not currently provide? (please circle)

YES NO

8. If 'Yes' can you give a reason why you do not currently provided them?

9. Can you identify other ways in which your organisation can promote service-users rights?

10. Can you explain why you think it is important for organisations to promote service user rights?

11. Which of the following legislation applies to your organisation? (please circle)

- Sex Discrimination Act
- Race Relations Act / NI Order
- Disability Discrimination Act
- Mental Health Act / NI Order
- Children Act / NI Order
- NHS & CC Act / People First

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12. Can you briefly explain your responsibilities under each piece of legislation circled above?

13. What, in your opinion, is the purpose of complaints and redress systems?

11. Can you briefly explain how you would advise a service-user to complain when they are unsure of the procedure?

12. Approximately, how many complaints does the organisation receive annually?
