Edexcel BTEC Levels 4 and 5 Higher Nationals specification in Health and Social Care

Contents

Unit 1: Communicating in Health and Social Care Organisations

Unit code: T/601/1560

Level: 4

Credit value: 15

- 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

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 **On successful completion of this unit a learner will:**	Assessment criteria for pass **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 1.2 use communication skills in a health and social care context 1.3 review methods of dealing with inappropriate interpersonal communication between individuals in health and social care settings 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 2.2 explain how legislation, charters and codes of practice impact on the communication process in health and social care 2.3 analyse the effectiveness of organisational systems and policies in promoting good practice in communication 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 3.2 analyse the benefits of using ICT in health and social care for users of services, care workers and care organisations 3.3 analyse how legal considerations in the use of ICT impact on health and social care.

Guidance

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

Level: 5

Credit value: 15

● 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

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

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
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 1.2 outline the procedure for protecting clients, patients, and colleagues from harm 1.3 analyse the benefit of following a person-centred approach with users of health and social care services 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 2.2 explain how local policies and procedures can be developed in accordance with national and policy requirements 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 3.2 analyse how social processes impact on users of health and social care services 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 4.2 evaluate own contribution to the development and implementation of health and social care organisational policy 4.3 make recommendations to develop own contributions to meeting good practice requirements.

Guidance

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

Level: 4

Credit value: 15

● 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

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 **On successful completion of this unit a learner will:**	Assessment criteria for pass **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 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 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 2.2 analyse the impact of one aspect of health and safety policy on health and social care practice and its customers 2.3 discuss how dilemmas encountered in relation to implementing systems and policies for health, safety and security may be addressed 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 3.2 analyse the effectiveness of health and safety policies and practices in the workplace in promoting a positive, healthy and safe culture 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
Level:	4
Credit value:	15

- 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

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

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
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 1.2 assess how personal culture and experience influence own role in supporting users of services and others in health and social care settings 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 2.2 produce a holistic development plan with short-medium- and long-term goals 2.3 monitor progress against the plan according to the requirements of a health and social care practitioner, revising the plan as required 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 3.2 evaluate personal effectiveness in promoting and supporting the rights of the individual 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 4.2 explain how the limits of own work role impacts on work with others 4.3 analyse own role in minimising barriers to effective teamwork in health and social care practice 4.4 discuss how to improve personal contributions to the collective effectiveness of a team.

Guidance

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
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

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

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
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 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 2.2 review current legislation and organisational practices and policies for partnership working in health and social care 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 3.2 analyse the potential barriers to partnership working in health and social care services 3.3 devise strategies to improve outcomes for partnership working in health and social care services.

Guidance

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
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

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 **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand how to formulate a research specification	1.1 formulate and record possible research project outline specifications
	1.2 identify the factors that contribute to the process of research project selection
	1.3 undertake a critical review of key references
	1.4 produce a research project specification
	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
	2.2 undertake the proposed research investigation in accordance with the agreed specification and procedures
	2.3 record and collate relevant data where appropriate
LO3 Be able to evaluate the research outcomes	3.1 use appropriate research evaluation techniques
	3.2 interpret and analyse the results in terms of the original research specification
	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

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 7: Social Policy

Unit code:	M/601/1590
Level:	4
Credit value:	15

● Aim

The aim of this unit is to enable learners to investigate the origins of social policies and their impact on health and social care services.

● Unit abstract

This unit covers the many factors that influence social policy, including historical, conceptual, political, regional, national and other agents of social change. Learners will explore their effect on social policy. It will be possible to encompass a variety of health and social care sectors in the delivery of this unit.

Analysis of social policy will enable learners to evaluate sufficiency and deficiency in provision. Tracing developments from 1945 to the present, learners will compare and contrast major competing perspectives and examine key contemporary issues for policy makers, welfare recipients, providers and stakeholders.

● Learning outcomes

On successful completion of this unit a learner will:

1   Understand the significant historical and contemporary landmarks in social welfare provision

2   Understand the origins of social policies

3   Understand the impact of social policies on users of health and social care services

4   Be able to carry out an investigation into recent developments in health and social care policy.

Unit content

1 **Understand the significant historical and contemporary landmarks in social welfare provision**

Social policy: definition of; distinguishing social policy from organisational policy

World War II and its effects on provision and attitudes to welfare: Beveridge and Bevan and the inception of the welfare state; the range of social policy eg income maintenance, employment and benefits, health, housing, social services, education

Post-war: 'consensus' and differences eg the influence of Butler, Gaitskell; ending of consensus; The New Right and Thatcherism; 'New Labour' and social inclusion; devolution; personalised services

2 **Understand the origins of social policies**

Ideology: universalism; individual liberty/laissez-faire; ideological issues, eg poverty, eligibility, means testing and targeting, family and community values

The roles of institutions: Parliament; the European Union; local government; devolved government; government agencies; other relevant roles eg political parties, committees, enquiries

Influences on policy: movements and pressure groups; campaigns; the media; users of services; administrators

3 **Understand the impact of social policies on users of health and social care services**

How impact can be measured: methods eg service user feedback, research, statistics, organisational policy responses, practice experience; difficulties in measuring impact

Broader strategies: behind individual and organisational roles; how policy is implemented; how and why 'problems' are defined in certain ways

The impact of policy on specific groups: positive and negative impacts on eg older people, children, people with disabilities, youth offenders; successful policy implementation (barriers to, characteristics of)

4 **Be able to carry out an investigation into recent developments in health and social care policy**

National models and 'the living laboratory': England; Northern Ireland; Scotland; Wales

Current initiatives: as relevant to learner and home country eg gender, ethnic issues, poverty and social security, health and health services, community care, disability, crime and criminal justice

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand the significant historical and contemporary landmarks in social welfare provision	1.1 outline significant historical and contemporary landmarks in social policy 1.2 explain how the changes in ideological approach since 1945 have impacted on contemporary social policies
LO2 Understand the origins of social policies	2.1 analyse the processes involved in the development of a key Act of Parliament 2.2 evaluate different influences on the development of social policy, including ideologies
LO3 Understand the impact of social policies on users of health and social care services	3.1 analyse how social policy is implemented by organisations and practitioners 3.2 explain how the impact of social policy on users of health and social care services can be measured 3.3 evaluate the impact of a specific policy on users of the relevant health and social care service
LO4 Be able to carry out an investigation into recent developments in health and social care policy.	4.1 evaluate a recent development in health and social care policy 4.2 analyse the differences in formation and adaption of social policy initiatives from other national perspectives.

Guidance

Links

This unit has links with, for example:

- *Unit 8: The Sociological Context of Health and Social Care*

- *Unit 11: The Role of Public Health 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

There are no essential requirements for this unit.

Employer engagement and vocational contexts

The vocational experiences of learners are invaluable in providing case material, particularly with support from employers or placement supervisors.

Observation visits could be useful, for example to the National Assembly for Wales.

Unit 8:	The Sociological Context of Health and Social Care

Unit code:	F/601/1593
Level:	4
Credit value:	15

● Aim

The aim of this unit is to help learners gain understanding of sociological concepts and their application to policy making and care practice in health and social care.

● Unit abstract

This unit enables learners to gain understanding of the nature of contemporary society. Learners will explore how society is structured in terms of age, gender, ethnicity, social class, family and households. Learners will also consider the impact of marriage, partnership formation and relationship breakdown on health and wellbeing.

The focus of the unit will be to consider the impact that social inequalities in society have on policy-making and care practice in health and social care. Learners will examine the factors that contribute to health and wellbeing from sociological perspectives and will explore health inequalities. Learners will develop an understanding of how social factors influence the provision and delivery of health and social care services and their role as a key determinant affecting health and social care outcomes for individuals.

● Learning outcomes

On successful completion of this unit a learner will:

1   Understand the contemporary nature of society

2   Understand how social inequalities influence the life chances and health status of individuals

3   Understand sociological concepts and theory in relation to contemporary social and health issues.

1   **Understand the contemporary nature of society**

Political and economic constructs: systems of stratification (age, gender, ethnicity, social class, households, partnership formation and relationship breakdown)

Social constructs: family and households; community; education; work; unemployment; leisure

Societal change: demographic (population profiles, national, regional); economic (wealth, technological development)

Cultural values and beliefs: related to diversity; ethnicity; religious belief; distribution of income and wealth

Implications for health and social care sector: services; resources; access

2   **Understand how social inequalities influence the life chances and health status of individuals**

Sources of data: the census; birth and death registrations; population estimates and projections; population locations

Sociological perspectives: conflict and consensus theories; social construct theories

Inequalities in health and social care: biological factors (heredity); individual needs; access issues; health and social care outcomes

Health status: holistic consideration of health and wellbeing status; physical eg immune status; mental health; emotional health; social health eg friendship networks, mobility

Life chances: education opportunity; housing; social networks; employment; affluence; lifestyle choices; risks eg accidents, deviant behaviours; access to support

3   **Understand sociological concepts and theory in relation to contemporary social and health issues**

Sociological definitions of: health; illness; disability

Social issues and problems in contemporary society: population change eg proportion of working age, population mobility, pensions, changing care needs and expectations; work eg stress, changing nature of work, unemployment, distribution of wealth; technological advances eg in therapies, assistive technologies, expectations; lifestyle choices eg leisure, activity, substance misuse; the role of politics, media and public opinion in shaping the health and social care agenda

Social inequalities in contemporary society: life chances; physical environment eg housing, transport, urban versus rural, employment, pollution; choice and access to services eg education, social care, health care; resources eg income, benefits, time; the ability of services to compensate for biological factors influencing health and wellbeing

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand the contemporary nature of society	1.1 explain how political, social and economic constructs can be used to categorise society 1.2 review current trends in societal change, including how these might shape social expectations 1.3 discuss the influence of cultural values and beliefs in society 1.4 evaluate the implications of societal change for the health and social care sector
LO2 Understand how social inequalities influence the life chances and health status of individuals	2.1 use data to explain inequalities which exist in health and social care 2.2 analyse social inequalities from a sociological perspective 2.3 analyse how inequalities which exist in health and social care can impact on an individual's health status and life chances
LO3 Understand sociological concepts and theory in relation to contemporary social and health issues.	3.1 apply sociological concepts and theory to definitions of health and wellbeing 3.2 use data to explain how social and health issues are socially constructed 3.3 explain the possible implications of social and health issues for health and social care service providers 3.4 analyse social and health issues in terms of their impact on the health and wellbeing of individuals in society.

Guidance

Links

This unit has links with, for example:

- *Unit 2: Principles of Health and Social Care Practice*
- *Unit 7: Social Policy*
- *Unit 17: Community Development Work.*

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

There are no specific requirements for this unit, but an appropriate selection of books and journals is strongly recommended. In particular, the following resource is critical reading for sociological study at this level:

Haralambos M and Holborn M – *Sociology: Themes and Perspectives* (Collins, 2008) ISBN 9780007245956

Employer engagement and vocational contexts

Input from specialists, for example community or social workers, would be beneficial to the delivery of this unit.

Unit 9: Empowering Users of Health and Social Care Services

Unit code: D/601/1598

Level: **4**

Credit value: 15

- 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 **On successful completion of this unit a learner will:**	Assessment criteria for pass **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 1.2 analyse factors that may affect the achievement of promoting and maximising the rights of users of health and social care services 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 2.2 analyse how organisational systems and processes are managed to promote participation and independence of users of health and social care services 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 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 4.2 evaluate the effectiveness of policies and procedures within a health and social care setting for administering medication.

Guidance

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.

<table>
<tr><td colspan="2">Unit 10:</td><td>Safeguarding in Health and Social Care</td></tr>
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Unit code:	L/601/1600
Level:	4
Credit value:	15

● 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 **On successful completion of this unit a learner will:**	Assessment criteria for pass **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 1.2 review risk factors which may lead to incidence of abuse and/or harm to self and others 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 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 3.2 evaluate the effectiveness of working practices and strategies used to minimise abuse in health and social care contexts 3.3 discuss possible improvements to working practices and strategies to minimise abuse in health and social care contexts.

Guidance

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
Level:	4
Credit value:	15

● 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

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 **On successful completion of this unit a learner will:**	Assessment criteria for pass **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 1.2 explain, using statistical data, the epidemiology of one infectious and one non-infectious disease that is widespread in their own country 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 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 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 3.2 evaluate the effectiveness of strategies, systems and policies in a health or social care setting 3.3 discuss changes that could be made to improve the health and wellbeing of individuals in a health or social care setting 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 12:   Physiological Principles for Health and Social Care

Unit code:	A/601/1608
Level:	4
Credit value:	15

● Aim

The aim of this unit is to provide a holistic overview of the structure and functioning of the human body as appropriate for those working in health and social care.

● Unit abstract

The focus of this unit is on how the body functions as a whole rather than on detailed anatomy and physiology from a biological perspective. The emphasis is on exploring those aspects of body functioning which impact on care delivered in health and social care settings.

Learners will gain an understanding of the main structures of the body and the appropriate terminology encountered when working with health professionals. Learners need to recognise the names of key structures, their positions in the body and main functions. They will explore the purpose behind gathering routine data from individuals accessing health and social care services as well as routine variations.

● Learning outcomes

On successful completion of this unit a learner will:

1   Know the structure and functioning of the human body

2   Understand the relationship between body functioning and relevant detailed anatomy and physiology

3   Understand how routine data collected in health and social care informs the planning of care for individuals

4   Be able to relate routine variations in body structure and functioning to care received by individuals.

Unit content

1 **Know the structure and functioning of the human body**

Main anatomical features: gross features eg trunk, limbs, head, abdomen, pelvis; skeleton eg names of limb bones, pelvis, regions of vertebral column, bone groups, principles of joints, support, blood cell functions and calcium reservoir of bone; soft tissues eg contractility of muscle, conductivity of nervous tissue, structural function of ligaments and tendons, secretory and absorptive function of epithelial tissues; body organs eg heart, liver, kidney, lungs, position and overall functions, key terminology associated with them eg cardiac, hepatic, renal, pulmonary

Body systems: main structures and functions of eg cardiovascular, respiratory, digestive, excretory, nervous, endocrine, locomotor, integumentory, sensory, reproductive

Functioning: to maintain life (respiration, feeding, excretion); for other activities (sensory perception, movement, coordination, reproduction)

Metabolism: chemical nature of body activity, rate at which energy used; changes in metabolic rate eg during exercise, over lifespan

Growth: production of more cells eg during development, in tumours; increased size of cells eg adipose tissue in obesity; tissue turnover/replacement eg in skin, hair, nails; destruction of tissues eg from wear and tear; depletion of tissues eg from disuse, starvation; as increasing complexity (differentiation and specialisation) eg childhood and adolescent development

Interactions: eg in digestion and transport of nutrients, in propripception (position and balance), pulmonary functioning, excretion, temperature regulation

2 **Understand the relationship between body functioning and relevant detailed anatomy and physiology**

Everyday activities: breathing, eating, excreting, physical activity

Detailed anatomy: selected tissues eg muscle, bone, epithelia; cellular structures as appropriate eg cell membrane, chromosomes

Detailed functioning: physiology eg gaseous exchange in lungs, absorption of nutrients, principle of filtration and selective reabsorption in kidneys, metabolic response to exercise

Regulation of internal activities: regulation of eg body temperature, heart rate, respiration rate, blood sugar, urine output

Coordination: role of endocrine system, role of the autonomic nervous system and links to the central nervous system

Homeostasis: principle of feedback loops to raise or lower relevant parameters

3 **Understand how routine data collected in health and social care informs the planning of care for individuals**

Measures: as relevant eg visual observation, weight/height, temperature, pulse, respiration rate, blood pressure, food intake, fluid intake, fluid output, indicator tests on urine (eg glucose, protein); recording of measures: correct units, tabulated, charts, graphs, interpretation of records

Information: as relevant to measurement taken eg heart rate, peak flow, over/under weight, hydration, diabetic stability, infection

Accuracy: sources of error, reliability, validity; concept of normal range, hypo- and hyper-values

Derived measures: as relevant eg Body Mass Index (BMI), fluid balance, nutritional health (intake against requirement eg energy balance); monitoring (regular recording) variations in measures over time

Care: monitoring course of health/disorder/disease, care planning, care routines, professionals involved, reporting data to professionals, recognising need for emergency responses

Ethical considerations: when taking measures and using data eg individual rights, dignity, privacy

4 **Be able to relate routine variations in body structure and functioning to care received by individuals**

Age: comparison of structural and functional changes between young adulthood, later life and old age; if appropriate, developmental change during childhood and adolescence

Effects/impact:

- *physical*: absence, loss or impaired function of tissues, organs and systems eg incontinence, ataxia; degeneration of structure eg bone in osteoporosis, cartilage in osteoarthritis, pulmonary tissue in emphysema, neural tissue in Parkinson's disease

- *psychological*: effects eg confidence, cognitive abilities, invasion of privacy (eg assistance with toileting, bathing)

- *social*: effects eg isolation due to hearing loss, loss of mobility, autonomy

Common disorders: as relevant eg diabetes, cardiovascular disease, autoimmune related, pulmonary disease, inherited, congenital, degenerative

Infections: as encountered in eg wounds, respiratory tract, urinary tract; signs and symptoms related to physiology; principles of an immunological response and factors that influence it eg age, nutritional status, immunosuppression from cancer therapy or underlying disease states

Routine care: activities of daily living; general consequences for care or treatment eg by drugs, surgery; infection control; rehabilitation; principles of palliative care

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Know the structure and functioning of the human body	1.1 outline the main anatomical features of the human body 1.2 discuss how body systems interact to ensure the body functions and grows
LO2 Understand the relationship between body functioning and relevant detailed anatomy and physiology	2.1 explain normal body responses to everyday activities 2.2 discuss how body responses are explained by cellular and tissue structure and physiology 2.3 explain how the body coordinates its internal activities
LO3 Understand how routine data collected in health and social care informs the planning of care for individuals	3.1 explain the recording and use of routine measures in health and social care 3.2 assess how routine measures provide information about body functioning 3.3 examine how information about body functioning may inform care planning for individuals
LO4 Be able to relate routine variations in body structure and functioning to care received by individuals.	4.1 explain how age may affect body structure and functioning 4.2 assess the impact of common disorders on body structure and functioning 4.3 relate the effects of common disorders and infection to the care routinely given to individuals affected by them.

Guidance

Links

This unit has links with, for example:

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

- *Unit 18: Complementary Therapies*

- *Unit 29: Health Promotion.*

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

Essential requirements

Access to anatomical models of the skeleton, spine, torso and body organs will be needed to demonstrate the nature and proportions of body structures in relation to external features.

Employer engagement and vocational contexts

Guest speakers involved in providing care for individuals who are experiencing physiological disorders or infections would be beneficial to provide a vocational context to the delivery of the unit.

Unit 13:	Managing Human Resources in Health and Social Care

Unit code:	A/601/1611
Level:	4
Credit value:	15

● Aim

The aim of this unit is to enable the learner to understand the processes involved in the recruitment, management and development of people in the health and social care workplace.

● Unit abstract

In this unit learners will investigate the processes involved in the management of individuals in the health and social care workplace. This not only includes the recruitment of the most appropriate personnel but importantly the support of employees in carrying out their work effectively in teams and developing their knowledge and skills so that they can contribute to the delivery of a quality service. Learners will contextualise these elements within the relevant legal and policy frameworks. In addition, learners will explore the influence of management style and organisational factors on the effectiveness of teams.

This unit is particularly appropriate for learners who have experience of leadership and management of work groups, including involvement in the recruitment of staff.

● Learning outcomes

On successful completion of this unit a learner will:

1   Understand processes for recruiting individuals to work in health and social care

2   Understand strategies for building effective teams for working in health and social care

3   Understand systems for monitoring and promoting the development of individuals working in health and social care

4   Understand approaches for managing people working in health and social care.

Unit content

1 **Understand processes for recruiting individuals to work in health and social care**

Factors for planning recruitment: succession planning; change (organisational, policy, use of services, work roles, local circumstances); defining human resource requirements eg full-time, part-time; job description and person specification eg qualifications, experience, personal attributes; advertising; vacancies; career progression opportunities; training and development needs

Legislative and policy frameworks: relevant and current legislation, codes of practice and policies (relating to worker rights, health and safety, diversity, anti-discriminatory practice, care standards, protection of vulnerable people) relevant and current legislation, codes of practice and policies (relating to worker rights, health and safety, diversity, anti-discriminatory practice, care standards, protection of vulnerable people)

Selection of best individuals: shortlisting applicants, models of selection eg interview, audition, psychometric assessment, assessed task; involvement of stakeholders eg members of team, service users, external stakeholders

2 **Understand strategies for building effective teams for working in health and social care**

Theories on behaviour in groups: formation of groups; group dynamics eg theories of Belbin, Tuckman, Woodcock, Gross, McClelland

Types of team: formal, informal; work groups, multi-disciplinary teams, inter-agency, project groups

Influences on effective teamworking: team purpose, empowerment of team, leadership, individual priorities/roles, team morale

3 **Understand systems for monitoring and promoting the development of individuals working in health and social care**

Performance of individuals: monitoring systems eg observation, appraisal, periodic review, achievement of successful outcomes, use of targets, benchmarks, feedback from others

Training and development: identifying individual needs eg monitoring performance, career development planning, changing personal circumstances

Effectiveness of systems: benefits and limitations for individuals, teams, users of health and social care services, organisational requirements

Strategies for promoting continuing development: achieving competence (against occupational standards); training versus education; partnerships; compliance with external requirements eg care standards, professional registration; dedicated allocation of resources; use of external kitemarks eg Investors in People; implementing a staff development training plan (in-house training, using supervision and appraisal, external courses, action-centred learning, lifelong learning, coaching and mentoring, assessing competence)

4 **Understand approaches for managing people working in health and social care**

Theories of leadership: transactional, transformational, emotional intelligence; theories proposed by eg Fiedler, Vroom and Yetton, Mintzberg, Handy, Goleman

Management of working relationships: influence of management style, emotional intelligence, organisational structure; leadership versus management; contingency management (best-fit), role-modelling, effective communication, team building, constructive feedback, shared values; accountability (monitoring and assessing performance, communicating decisions, disciplinary and grievance procedures)

Own development: attributes (confidence, skills competencies, knowledge and understanding); qualifications; career development; ability to work with change

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand processes for recruiting individuals to work in health and social care	1.1 explain the factors to be considered when planning the recruitment of individuals to work in health and social care 1.2 explain how relevant legislative and policy frameworks of the home country influence the selection, recruitment and employment of individuals 1.3 evaluate different approaches that may be used to ensure the selection of the best individuals for work in health and social care
LO2 Understand strategies for building effective teams for working in health and social care	2.1 explain theories of how individuals interact in groups in relation to the types of teams that work in health and social care 2.2 evaluate approaches that may be used to develop effective teamworking in health and social care
LO3 Understand systems for monitoring and promoting the development of individuals working in health and social care	3.1 explain ways in which the performance of individuals working in health and social care can be monitored 3.2 assess how individual training and development needs can be identified 3.3 analyse different strategies for promoting the continuing development of individuals in the health and social care workplace
LO4 Understand approaches for managing people working in health and social care.	4.1 explain theories of leadership that apply to the health and social care workplace 4.2 analyse how working relationships may be managed 4.3 evaluate how own development has been influenced by management approaches encountered in own experience.

Guidance

Links

This unit has links with, for example:

- *Unit 14: Managing Financial Resources in Health and Social Care*
- *Unit 25: Influences on Health and Social Care Organisations*
- *Unit 28: Managing Quality 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

Learners must be provided with current legislative requirements relating to employment. Learners must also have access to texts on management theory relating to team building, management styles and leadership.

Employer engagement and vocational contexts

It will be imperative for learners to use their work experience as a case study for the purpose of assessment, investigating the recruitment practice and policies of the organisation in which they have been working.

It would be beneficial for learners to share their findings with peers through presentations to aid the learning process.

Unit 14: Managing Financial Resources in Health and Social Care

Unit code: R/601/1615

Level: **4**

Credit value: 15

● Aim

The aim of the unit is to enable the health and social care manager to develop understanding of how to control their expenditure against fixed budgets.

● Unit abstract

This unit will equip the health and social care manager with the knowledge and understanding needed to monitor costs, make predictions, evaluate the process of effective control of resource allocation, including shortfalls, and make recommendations for expenditure. Most importantly, it will emphasise the key factors of both efficiency and effectiveness.

Health and social care managers need to understand the role of planning in the management of financial budgets and the importance of monitoring and managing expenditure. This unit is most appropriate for those who hold responsibilities for managing budgets in a health or social care workplace or who have access to financial information and processes within an organisation. The unit is designed to develop knowledge, skills and understanding in the key areas and covers how systems and processes for managing financial resources influence a specific service for individuals.

● Learning outcomes

On successful completion of this unit a learner will:

1   Understand how systems are used to manage financial resources in health and social care

2   Understand the role of planning in the management of health and social care budgets

3   Understand the importance of monitoring budget expenditure in health and social care organisations

4   Understand how systems and processes for managing financial resources influence health and social care services.

Unit content

1 **Understand how systems are used to manage financial resources in health and social care**

Costing and business control systems: costs, income, cost-benefit analysis, expenditure, budget, capital, cost control, cost centre; outsourcing, competitive tendering, forecasting, profit, break even; basic software for monitoring financial information within an organisation

Information: business costs eg people, equipment, finance, buildings, consumable items, administration; income streams; trends and external influences eg changes in policy, competitive factors, legal requirements

Regulatory requirements: legislation and codes of practice, audit, accountability, policies

Systems: sources of income, how budgets are set, administration of budgets, cost centres, accountabilities, audit requirements

2 **Understand the role of planning in the management of health and social care budgets**

Diverse sources of income: public, private, voluntary; local, national

Influences on resource availability: funding priorities, agency objectives and policies, private finance, outsourcing, inter-agency partnerships, government policies, geography, type of service

Types of budget: cost centre, project management, outsourcing contract

Decisions about expenditure: environmental analysis, accountabilities, priorities, short-, medium- and long-term planning; cost-benefit analysis; financial risk, project management

3 **Understand the importance of monitoring budget expenditure in health and social care organisations**

Information for monitoring expenditure: cash flow, controlling costs, spreadsheet data, training needs

Financial shortfalls: priorities, virement, reserve funds, alternative external income sources; implications for individuals within the service

Suspected fraud: analysing financial information for reliability, validity and sufficiency; reporting, evidence of fraud

4 **Understand how systems and processes for managing financial resources influence health and social care services**

Financial decisions: responsibility for decision making, information available, sources of income, priorities etc

Relationship between service delivery, costs and expenditure: cost-benefit, pricing policies, purchasing arrangements

Impact on individuals: quality of service, access to service

Recommendations: options available, supporting evidence, information to be presented for discussion by financial decision makers

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand how systems are used to manage financial resources in health and social care	1.1 explain the principles of costing and business control systems 1.2 identify information needed to manage financial resources 1.3 explain the regulatory requirements for managing financial resources 1.4 evaluate systems for managing financial resources in a health or care organisation
LO2 Understand the role of planning in the management of health and social care budgets	2.1 discuss the diverse sources of income that may be encountered in health and social care 2.2 analyse the factors that may influence the availability of financial resources in health and social care organisations 2.3 review different types of budget expenditure in health and social care organisations 2.4 evaluate how decisions about expenditure are made within a health or social care organisation
LO3 Understand the importance of monitoring budget expenditure in health and social care organisations	3.1 explain how financial shortfalls can be managed 3.2 explain the actions to be taken in the event of suspected fraud 3.3 evaluate budget monitoring arrangements in a health or social care organisation
LO4 Understand how systems and processes for managing financial resources influence health and social care services.	4.1 identify information required to make financial decisions relating to a health and social care service 4.2 analyse the relationship between a health and social care service delivered, costs and expenditure 4.3 evaluate how financial considerations impact upon an individual using the health and social care service 4.4 suggest ways to improve the health and social care service through changes to financial systems and processes.

Guidance

Links

This unit has links with, for example:

- *Unit 13: Managing Human Resources in Health and Social Care*
- *Unit 27: Managing Quality 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

It will be necessary for tutors to advise learners about the scale of service to be investigated for learning outcome 4. The service will encompass several cost centres but, for a large organisation, must focus on an appropriate local dimension sufficient to enable learners to meet the requirements of the unit.

Employer engagement and vocational contexts

Learners will benefit from discussion of different systems and practices within their experience in health and social care. It will be necessary to draw on information from health and social care organisations in order to meet the assessment criteria.

Unit 15: Psychology for Health and Social Care

Unit code:	K/601/1619
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

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

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand theories of lifespan development	1.1 compare different psychological theories of lifespan development 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 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 3.2 analyse how psychological theories relate to behaviour disturbance 3.3 analyse how psychological theory informs understanding of mental health disorders 3.4 evaluate the application of psychological principles to affecting behaviour change in health and social care settings 3.5 analyse how psychological theories can enhance understanding of relationships in health and social care.

Guidance

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
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

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 **On successful completion of this unit a learner will:**	Assessment criteria for pass **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 1.2 assess how perceptions of specific needs have changed over time 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 2.2 explain current systems for supporting individuals with specific needs 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 3.2 evaluate the effectiveness of intervention strategies for an individual with specific need(s) 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 4.2 describe the potential impact of challenging behaviour on health and social care organisations 4.3 analyse strategies for working with challenging behaviours associated with specific needs.

Guidance

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:

www.arc.org.uk	Arthritis Research Campaign
www.direct.gov.uk	UK government website
www.equalityhumanrights.com	Equality and Human Rights Commission
www.learningdisabilities.org.uk	Foundation for People with Learning Disabilities
www.mencap.org.uk	Mencap

Unit 17:   Community Development Work

Unit code: L/601/1631

Level: 4

Credit value: 15

- ● Aim

The aim of this unit is to enable learners to understand the complex nature of community development work and the role a community development worker has in facilitating community initiatives.

- ● Unit abstract

Successful community development work requires skilful facilitation and those involved need a wide range of knowledge and skills in order to empower communities to engage in development work. They also need to understand how to encourage communities to identify their needs and initiate action.

In this unit learners will examine the complex nature of communities and community development work. First, they will examine diversity within communities and the strengths and potential problems that can arise in different communities. Second, they will consider the knowledge and skills that community development workers require in order to successfully engage with communities. They will explore the processes involved in both initiating and sustaining community development work and the skills required for project management. Finally, they will look at possible outcomes of development work within communities, potential barriers and strategies for improvement. Learners will investigate a range of community development work within a variety of diverse communities. Strategies for empowering communities will be analysed along with relevant legislation and agreed ways of working.

- ● Learning outcomes

On successful completion of this unit a learner will:

1   Understand the complex nature of communities and community development

2   Understand the role and responsibilities of the community development worker in facilitating community initiatives

3   Understand the impact of community development work on communities.

Unit content

1 **Understand the complex nature of communities and community development**

Communities: different communities eg children and young people, women, elderly, people with disabilities, people from ethnic minorities, travellers, prisoners, hospital patients, care residents, unemployed, homeless, rurally isolated, council estate tenants

Community development: projects and initiatives related to eg health, education, leisure, culture, crime prevention, care services, health and safety, fundraising, regeneration

Diversity: religion; culture; sexual orientation; gender; age; disability; socio-economic status; demographics; environment; housing; lifestyle

Strengths and support systems: individual, group and organisational; nuclear and extended family groups; self-help groups and networks; neighbourhood support; voluntary organisations; community forums; tenants associations

Potential problems: discrimination; marginalisation; social exclusion; alternative values and beliefs; crime; vandalism; safety; lack of communal facilities for eg sport, leisure, social networking

2 **Understand the role and responsibilities of the community development worker in facilitating community initiatives**

Knowledge and skills: communication; collaboration; negotiation; networking; partnership working; development of resources; funding strategies; accountability and control of financial resources; publicity, marketing and media networks; use of ICT; identifying problems; developing creative solutions; teamwork; political awareness; knowledge of local community support systems; knowledge of relevant legislation and agreed ways of working

Empowering communities: identification and agreement of community needs; inclusion; participation; partnership working; interaction with individuals, groups and agencies eg government, voluntary, charitable, community forums, tenants associations; development of learning opportunities for individuals and groups; conflict resolution; collective action

Initiating and sustaining community development work: defining project work, establishing aims and objectives for projects; information gathering and research eg survey, questionnaire, observation, interview, data collection, sampling, analysis; strategic planning; development and maintenance of resources: fundraising strategies and methods; planning community action; target setting; project planning and management; monitoring systems; quality assurance

3 **Understand the impact of community development work on communities**

Long- and short-term impact: positive impacts eg changing attitudes and perceptions, continuing motivation, improved relationships, empowerment, improved facilities and life chances; negative impacts eg marginalisation, dependency, imbalance of power relationships, sustainability problems

Potential barriers: lack of funding; apathy; lack of physical resources; breakdown in communication; different priorities; opposing factions; demotivation

Reflect on improvements: management and monitoring of community projects; gathering and assessing feedback; measuring outcomes; democratic accountability; training needs; development of resources; planning for improvements; sustainability; accessing community networks; stakeholder analysis; acknowledging and celebrating achievement; marketing and publicity; reflective practice

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand the complex nature of communities and community development	1.1 analyse definitions of community and community development in order to understand their complex nature 1.2 explain the nature of diversity in communities 1.3 analyse strengths, support systems and potential problems in communities
LO2 Understand the role and responsibilities of the community development worker in facilitating community initiatives	2.1 analyse the knowledge and skills necessary to facilitate community initiatives 2.2 analyse the role of the community development worker in empowering communities to identify their own needs 2.3 review processes involved in initiating and sustaining community development work
LO3 Understand the impact of community development work on communities.	3.1 analyse the potential short-term and long-term impact of development within communities 3.2 analyse the potential barriers to successful community development activity 3.3 evaluate strategies to improve the impact of development work in communities.

Guidance

Links

This unit has links with, for example:

- *Unit 5: Working in Partnership in Health and Social Care*

- *Unit 6: Research Project*

- *Unit 8: The Sociological Context of Health and Social Care*

- *Unit 19: Contemporary Issues in Health and Social Care*

- *Unit 24: Understanding the Learning Process.*

Links occur with the following units from the National Occupational Standards in Community Development:

- S6: Get to know a community

- S9: Support inclusive and collective working through community development practice

- S17: Promote and develop opportunities of learning from community development practice.

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 specialist texts and journals of the community and voluntary sector.

It is essential that learners have the opportunity to have a placement in or a visit to a community-based agency.

Employer engagement and vocational contexts

It would be helpful to use community development websites, such as:

www.cdx.org.uk	Community Development Exchange
www.comm-dev.org	Community Development Society
www.fcdl.org.uk	Federation for Community Development Learning

Unit 18:   Complementary Therapies

Unit code:	H/601/1635
Level:	5
Credit value:	15

● Aim

The aim of this unit is to develop learners' understanding of the role of complementary therapies in health and social care and their effectiveness in maintaining health and wellbeing.

● Unit abstract

The aim of this unit is to provide an understanding of the delivery and usage of a range of complementary therapies and in particular to compare this to conventional medicine. Learners will consider the principles behind complementary therapies commonly used in health and social care and will assess the advantages and disadvantages associated with their use.

Learners will analyse the evidence for their benefits to health and wellbeing as well as identify contraindications and health and safety issues in relation to their use. They will also evaluate the effectiveness of regulations in place for different therapies and their practitioners.

● Learning outcomes

On successful completion of this unit a learner will:

1   Understand the principles behind complementary therapies and their current usage

2   Understand the role of complementary therapies in relation to orthodox treatments

3   Be able to analyse evidence for the efficacy of complementary therapies in sustaining health and wellbeing

4   Be able to carry out an evaluation of the systems for regulating the use of complementary therapies.

Unit content

1 **Understand the principles behind complementary therapies and their current usage**

Therapies: pharmaceutically mediated eg herbalism, homeopathy; physically mediated eg osteopathy, chiropractic yoga, Alexander Technique; psychologically mediated eg counselling, psychotherapy, hypnotherapy

Treatments: signs and symptoms; processes; frequency; dosage; equipment; materials; agents

Advantages and disadvantages: benefits claimed eg enhancing health, wellbeing; contraindications, intrinsic harm

Access: physical access, financial, referral systems, cultural factors, private sector, public sector

2 **Understand the role of complementary therapies in relation to orthodox treatments**

Musculo-skeletal: bones, joints, muscles, mobility, pain

Metabolic: digestive and eliminatory processes, dermatological, endocrine functions, immune function, reproductive function

Cardio-respiratory: pulmonary functioning, cardiovascular functioning

Psychological effects: mental health eg stress, depression; learning difficulties eg Attention-Deficit Hyperactivity Disorder (ADHD), autism

Attitudes: preferred therapies, barriers to use, value

Contraindications: comparison between orthodox treatment and complementary therapy treatments

3 **Be able to analyse evidence for the efficacy of complementary therapies in sustaining health and wellbeing**

Sources of information: therapy practitioners, health professionals, commercial sources, science, systematic research

Claims: benefits eg cure, amelioration, prevention of signs and symptoms, enhancement of wellbeing

4 **Be able to carry out an evaluation of the systems for regulating the use of complementary therapies**

Regulation systems: legislation, code of practice, code of ethics, self regulation, complementary therapy practitioner representative umbrella organisations

Effectiveness: minimising risk, benefits, professionalism, developing public understanding, working with orthodox therapies, emerging trends

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand the principles behind complementary therapies and their current usage	1.1 explain treatment processes for widely available complementary therapies 1.2 assess the advantages and disadvantages of the complementary therapies 1.3 analyse factors influencing access to complementary therapies, both locally and nationwide
LO2 Understand the role of complementary therapies in relation to orthodox treatments	2.1 analyse the role of complementary therapies in relation to orthodox treatments in the care of musculo-skeletal, metabolic and cardio-respiratory needs 2.2 evaluate attitudes towards complementary therapies 2.3 assess the psychological effects of complementary therapies 2.4 compare the contra-indications between orthodox and complementary therapies
LO3 Be able to analyse evidence for the efficacy of complementary therapies in sustaining health and wellbeing	3.1 carry out an analysis of the reliability and validity of information sources on complementary therapies 3.2 evaluate evidence which claims the benefits of complementary therapies 3.3 make recommendations based on the evidence gathered for the use of complementary therapies within a specific group of users of health and social care services
LO4 Be able to carry out an evaluation of the systems for regulating the use of complementary therapies.	4.1 evaluate the effectiveness of current regulation systems for the use of complementary therapies 4.2 make recommendations, supported by evidence, for improving regulatory systems for the use of complementary therapies.

Guidance

Links

This unit has links with, for example:

- *Unit 9: Empowering Users of Health and Social Care Services*

- *Unit 12: Physiological Principles for Health and Social Care*

- *Unit 16: Understanding Specific Needs 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.

There may also be links to relevant occupational standards for the practice of complementary therapies.

Essential requirements

It is essential that learners have a good understanding of human physiology and a short overview of this would be useful basis in delivering this unit. Learners also require a basic understanding of treatment and care processes in orthodox medicine.

Learners will need to access a research facility with relevant academic and professional literature which provides information on health care professionals and complementary therapies.

Employer engagement and vocational contexts

This unit would benefit from input from health or care professionals with experience in the use of complementary therapy in health care. Contributions from experienced complementary therapy practitioners would be a further advantage for the learner.

Unit 19:	Contemporary Issues in Health and Social Care

Unit code:	A/601/1639
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

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; marketeers, 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

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
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 1.2 analyse different techniques for disseminating information relating to health and social care 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 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 3.2 monitor how different perspectives gleaned from reliable sources on a specific health and social care issue have changed over time 3.3 assess the relevance of the findings to health and social care practice locally 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 4.2 evaluate the validity of public attitudes and behaviours in relation to a specific issue 4.3 justify possible consequences of contemporary thinking for health and social care provision and services.

Guidance

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 20: Supporting Independent Living

Unit code:	A/601/1642
Level:	**5**
Credit value:	15

- Aim

The aim of this unit is to develop learners understanding of how technology can support independent living and the implications of developments in assistive and communication technology.

- Unit abstract

Technology is used by most people to help them with their everyday lives. Mobile phones and email aid communication; the internet is a source of information; remote control devices open our car as we press a button. This same technology can help individuals to access health and social care services and live independently. As more people access Independent Living Funds and become employers of their own personal assistants, the balance is shifting from dependency towards independence. This unit fits into this important agenda.

The unit allows the learner to investigate the uses of current technology which can help individuals lead a more independent life. Health and social care workers and their employers need to understand the technologies currently available and how independence can be supported using such technology. They also need to be aware of barriers to using technology, and the implications when such technology is introduced.

There is also an opportunity for learners to examine the implications of development in technology and its impact on health and social care services and their users.

- Learning outcomes

On successful completion of this unit a learner will:

1 Understand the use of technology to support independent living

2 Understand the implications of developments in technologies for use in health and social care

3 Be able to suggest technologies to support independent living for users of health and social care services.

Unit content

1 **Understand the use of technology to support independent living**

   Technological devices and systems: eg those for security, health and safety, mobility aids, aids for activities of daily living, visual, audio aids, administration of medication

   Communications technologies: hardware and software; information and data collection systems, web and email delivery systems; electronic forums, counselling and monitoring services; telephone and video conferencing services; electronic distribution of data via CD ROM or DVD; innovative use of standard technologies eg mobile phones, speed dial, voice activation, diary appointment systems and others as they evolve; electronic booking and recording networks

   Barriers: cost, technological access difficulties, training; maintenance systems, implications of technical breakdown

   Benefits: for users eg autonomy and independence, reducing risk, access to information, precision or accuracy

2 **Understand the implications of developments in technologies for use in health and social care**

   Health and safety: associated with operation of the technology systems, consequences of technical breakdown

   Ethics: considerations eg autonomy, changes in level of privacy, changes to interactions

   Impact: on services, organisations and workers eg remote diagnostic and operative processes, interactions with others, relationships, confidentiality, cost benefit analysis, training

   Roles of workers: workload, work scheduling, data exchange, staff development needs

3 **Be able to suggest technologies to support independent living for users of health and social care services**

   Identification of needs: physical, intellectual, social, emotional, health

   Independent living: networking in support groups, medication, access to information, automation of activities

   Use of technologies: to support independent living eg individuals in residential care, supported living, individuals employing personal assistants

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand the use of technology to support independent living	1.1 explain how technology can be used to support users of health and social care services in living independently
	1.2 analyse barriers to the use of technology to support users of health and social care services in living independently
	1.3 explain the benefits of these technologies to health and social care organisations and their users
LO2 Understand the implications of developments in technologies for use in health and social care	2.1 explain health and safety considerations in the use of technologies in health and social care
	2.2 discuss ethical considerations in the use of technologies in health and social care
	2.3 explain the impact of recent and emerging technological developments on health and social care services, organisations and care workers
LO3 Be able to recommend technologies to support independent living for users of health and social care services.	3.1 identify the specific needs of an individual requiring support to live independently
	3.2 make recommendations for how technologies might support the independent living arrangements
	3.3 evaluate the usefulness of technology for users of health and social care services.

Guidance

Links

This unit links with most of the other units in the programme, as there are implications for almost all health and social care environments in the development of technology. There are particular opportunities for cross-referencing and integrating work between the following units:

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

- *Unit 9: Empowering Users of Health and Social Care Services*

- *Unit 16: Understanding Specific Needs 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

Learners will require access to communication and assistive technologies so they can investigate how they are used to support independent living. Some communication technologies may already be used to support learners in the educational institution where this qualification is delivered. It would also be useful for learners to meet with technical specialists in order to explore issues associated with the use and development of assistive and communication technologies.

Employer engagement and vocational contexts

A guest speaker from the department that provides student support may be able to demonstrate voice-activated computer programs or Braille keyboards. Demonstrations from visiting specialists are strongly recommended for the unit to be effective.

Visits to specialist workplaces and resources may be useful for learners to see the technology being applied.

Scope, the national organisation for people with cerebral palsy, has an excellent website (www.scope.org.uk) and may, for a donation, be able to provide local information or possibly guest speakers

Unit 21: Supporting Significant Life Events

Unit code: D/601/1648

Level: **5**

Credit value: 15

● Aim

The aim of this unit is to enable learners to investigate the support available for those experiencing significant life events and the effectiveness of service responses in supporting such individuals.

● Unit abstract

In this unit learners will investigate how individuals may be supported through expected and unexpected transitions associated with the human life cycle and with adjustment to change such as entering, moving within, or leaving a health and social care service. The responsibilities of ensuring that a service is responsive to the needs of individuals experiencing trauma and loss will be discussed.

Learners will look at ways in which health and social care services may contribute to the maintenance of dignity and self-image for those experiencing trauma and loss. Learners will also explore how staff working with individuals experiencing significant life events may also be supported.

This unit is recommended for those learners who have had experience of managing health and social care services.

● Learning outcomes

On successful completion of this unit a learner will:

1   Understand how significant life events impact on individuals and their social networks

2   Understand the support available for individuals experiencing significant life events

3   Be able to analyse responses made by health and social care services to support individuals experiencing significant life events.

Unit content

1 **Understand how significant life events impact on individuals and their social networks**

   Life events: events and transitions associated with life stages (childhood, adolescence, adulthood, middle age, old age, dying); physical, social, psychological changes relating to eg lifestyle, relationships, health, illness, disability, economic circumstances, cultural difference

   Impact: psychological eg depression, emotional stress; physical eg reduced mobility, loss of function; social eg behavioural, detachment

   Groups: life partnerships, family, friends, communities; care workers, colleagues; users of health and social care services

2 **Understand the support available for individuals experiencing significant life events**

   Support received from: family, friends, groups, communities; other users of health and social care services, care workers

   Support: based on policies and procedures eg confidentiality, bereavement, accessing specialist services

   External sources of support: specialists within the health and social care sector and the framework within which they work; support therapies eg counselling, aromatherapy; cultural, faith communities; agencies eg the Deaf Society, the Royal National Institute of Blind People (RNIB), the Dementia Association; information and advice eg financial, legal

3 **Be able to analyse responses made by health and social care services to support individuals experiencing significant life events**

   Organisational responses: applying policies and procedures; critical incident responses; routines; support for those in social networks; respect for rituals; adaptations to service eg equipment; personal care

   Personal experiences: in the workplace, other experience (at the discretion of individual learners) sufficient to recognise place of learner self-awareness in relation to supporting others

   Recommendations: for improvement to support eg for policies, procedures, organisational culture, management style, accommodation and facilities

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand how significant life events impact on individuals and their social networks	1.1 explain the impact of significant life events on individuals 1.2 analyse possible group responses to significant life events that occur to one of its members 1.3 analyse the impact for others in health and social care when an individual experiences significant life events
LO2 Understand the support available for individuals experiencing significant life events	2.1 evaluate the effectiveness of organisational policies and procedures in supporting individuals and their social networks affected by significant life events 2.2 explain how others in social networks may provide support to individuals experiencing significant life events 2.3 evaluate the suitability of external sources of support for those affected by significant life events
LO3 Be able to analyse responses made by health and social care services to support individuals experiencing significant life events.	3.1 analyse possible organisational responses to the need to support individuals experiencing a significant life event 3.2 reflect on own personal contributions to the support of individuals experiencing significant life events 3.3 make recommendations for improving the support available in a health and social care organisation for individuals and their social networks when affected by significant life events.

Guidance

Links

This unit has links with, for example:

- *Unit 9: Empowering Users of Health and Social Care Services*
- *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 also has links with the National Occupational Standards in Leadership and Management for Care Services. See *Annexe C* for mapping.

Essential requirements

A tutor with experience of managing health and social care services will be required to support the learning for this unit.

Employer engagement and vocational contexts

Care employers and care professionals from social services and from health care would be useful speakers.

Guest speakers from support groups such as Cancer Support or Cruse would be of benefit.

Unit 22: Developing Counselling Skills for Health and Social Care

Unit code: K/601/1653

Level: 4

Credit value: **15**

- Aim

The aim of this unit is to enable learners to investigate the role of counselling in health and social care, and to use and evaluate their own counselling skills.

- Unit abstract

The focus of this unit is on the identification, practice and development of counselling skills. On completion of the unit, learners will have had the opportunity to develop inter-related skills required to initiate, maintain and conclude a counselling interaction. Learners will also explore appropriate theoretical perspectives that underpin counselling and how the core models of counselling may be applied in health and social care situations.

Learners will acquire an understanding of ethical considerations in counselling and the ethical codes that govern counselling practice. Learning should take place through the use of role play, with peer and tutor observation and feedback supporting learners to develop the self-awareness and skills needed for counselling interactions. This unit will enable learners to develop appropriate counselling skills to support their work role in health and social care.

- Learning outcomes

On successful completion of this unit a learner will:

1   Understand how theoretical perspectives apply to counselling work in health and social care

2   Understand how boundaries and ethical codes are applied in counselling work in health and social care

3   Understand the role of counselling interactions in health and social care services

4   Be able to demonstrate appropriate skills in a simulated counselling interaction.

Unit content

1 **Understand how theoretical perspectives apply to counselling work in health and social care**

Theoretical perspectives: psychodynamic, humanistic, cognitive-behavioural

Contribution of major theorists: theories of Freud, Klein; theories of Rogers, Perls, personality theory; theories of Ellis, Beck, 4-stage problem-solving

2 **Understand how boundaries and ethical codes are applied in counselling work in health and social care**

Counselling relationship: boundaries eg political, social, organisational; context of work; policies and procedures; professional counselling contract

Ethical guidelines: British Association for Counselling and Psychotherapy (BACP) Code of Ethics; other emerging guidelines as appropriate; other professional codes eg Nursing and Midwifery Council

Legal factors: legislation relating to data protection, anti-discriminatory practice, protection of vulnerable people; professional liability, indemnity

Role of supervision: nature of counselling supervision, different models of supervision, importance for ethical practice

3 **Understand the role of counselling interactions in health and social care services**

Individuals: users of health and social care services; health and social care workers

Scope: access eg availability, internal or external to service organisation, referral, funding

Potential benefits: to individuals, groups, communities; those who work in the organisation; benefits eg behaviour change, enhanced health and wellbeing, alleviation of symptoms

Factors influencing the use of counselling interactions: influencing factors eg access, confidential environment, resource availability, organisational culture, professional boundaries

4 **Be able to demonstrate appropriate skills in a simulated counselling interaction**

Initiate and establish: satisfactory demonstration of skills relating to: setting boundaries, confidentiality, opportunity to disclose, clarification of counsellor role, recognising feelings, reviewing techniques, managing self in interaction, use of Stage 1 skills

Maintain and develop: satisfactory demonstration of skills relating to: managing silence, timing of responses, managing personal feelings and agendas, use of challenging skills, use of 'here and now', facilitating of client self-understanding, setting goals with client, use of an integrated and structured approach, use of Stage 1 and 2 skills

Conclude: demonstrate Stage 1, 2 and 3 skills; satisfactory demonstration of skills relating to: exploration of strategies for client to achieve goals, enabling client choice, information offered acceptable and free from bias, managing ending

Evaluate development of own skills: outcomes for client of the interaction; skills used and their effectiveness; management of self eg own feelings, strengths and weaknesses, learning from personal journal, responses to feedback from others, application to workplace role, personal insights, self-awareness gained

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand how theoretical perspectives apply to counselling work in health and social care	1.1 compare the contribution of major theorists to the different perspectives used in counselling 1.2 evaluate the use of different theoretical perspectives in counselling interactions in health and social care
LO2 Understand how boundaries and ethical codes are applied to counselling work in health and social care	2.1 explain how current ethical guidelines for counsellors and supervisor practitioners influence counselling interactions in health and social care 2.2 analyse the legal factors that should be considered in counselling interactions in health and social care 2.3 evaluate the role of supervision in counselling
LO3 Understand the role of counselling interactions in health and social care services	3.1 explain the scope of counselling support available for individuals using health and social care services 3.2 analyse the factors that influence the use of counselling interactions in health and social care services 3.3 explain potential benefits of counselling interactions for individuals within health and social care services
LO4 Be able to demonstrate appropriate skills in a simulated counselling interaction.	4.1 initiate and establish a counselling relationship using counselling skills 4.2 maintain and develop the relationship using counselling skills 4.3 conclude the interaction using counselling skills 4.4 evaluate development of own counselling skills.

Guidance

Links

This unit has links with, for example:

- *Unit 1: Communicating in Health and Social Care Organisations*

- *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 18: Complementary Therapies.*

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 need opportunities to develop their counselling skills through role plays throughout the delivery of the unit.

An introduction to the work of different theorists and how it relates to counselling interactions will be required with opportunities for learners to discuss the use of counselling skills within health and social care work.

Learners must be prepared to develop self-awareness through the feedback on the practical role play in class from tutors and peers. Learners are not expected to engage in counselling interactions with clients to achieve this unit.

It is essential that role play is conducted with appropriate respect for confidentiality. Access to counselling services will be necessary to support individual learners if required.

Employer engagement and vocational contexts

An experienced counselling practitioner with teaching experience is recommended for the delivery and assessment of this unit. A guest speaker from a counselling service would also be a useful human resource.

Unit 23: Employability Skills

Unit code:	A/601/0992
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

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

| Learning outcomes

On successful completion of this unit a learner will: | Assessment criteria for pass

The learner can: |
| --- | --- |
| LO1 Be able to determine own responsibilities and performance | 1.1 develop a set of own responsibilities and performance objectives

1.2 evaluate own effectiveness against defined objectives

1.3 make recommendations for improvement

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

2.2 communicate in a variety of styles and appropriate manner at various levels

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

3.2 analyse team dynamics

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

4.2 develop an appropriate strategy for resolving a particular problem

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 24: Understanding the Learning Process

Unit code:	F/601/1657
Level:	5
Credit value:	15

● Aim

The aim of this unit is to enable learners to develop understanding of different theories and styles of learning and to apply this to learning strategies within the health and social care workplace.

● Unit abstract

The unit investigates the learning process. Learners will explore current theories of learning and relate these to the development of practical skills and the acquisition of knowledge and understanding. The unit provides an understanding of the different ways in which individuals learn and can be supported in the health and social care workplace to develop practice. Learners will draw on their own experience to suggest ways of supporting learning. Learners will investigate individual learning needs and consider how practice in the health and social care workplace can provide support for care workers. They will explore ways of planning learning opportunities and the factors that contribute to successful delivery or learning in the workplace.

This unit is particularly appropriate for those with responsibilities for supporting the learning of others in the workplace, but would be equally useful for practitioners to use as part of their own personal and professional development.

● Learning outcomes

On successful completion of this unit a learner will:

1 Understand different theories of learning

2 Understand the impact of learning styles on learning by individuals

3 Be able to suggest strategies for delivering and assessing learning in a health and social care workplace

4 Understand how to support the individual learning needs of health and social care workers.

Unit content

1 **Understand different theories of learning**

Domains of learning: Bloom's Taxonomy of learning domains (cognitive, psychomotor, affective)

Theories of learning: behaviourist, gestalt, cognitive, humanistic

Different ways in which learning can occur: learning cycle (Kolb), learning circles (Race); learning through doing, learning through experience; planning, teaching, observing, mentoring, tutoring, demonstration, feedback

2 **Understand the impact of learning styles on learning by individuals**

Learning style: visual, aural, tactile, kinaesthetic; activist, reflector, pragmatist, theorist

Influences: motivation, environment, culture, communication, past experience

Own learning: motivation, responsibilities, experiential, learning from others, learning by doing

3 **Be able to suggest strategies for delivering and assessing learning in a health and social care workplace**

Factors to be considered: benefits eg for the user of services, team, organisation, individual; quality systems; learning outcomes required; resources available; scheduling; occupational standards; learning styles

Teaching strategies: work-based, through experience; learning in groups, individual learning, classroom-based teaching, mentoring, tutoring, shadowing, demonstration, coaching, online, question and answer, independent learning; one-to-one, groups

Strategies for delivering learning: planning, induction, resources and materials, guidance, personal support, monitoring and review, feedback, Individual Learning Plans, formative assessment, summative assessment

Techniques for assessing learning: testing eg question and answer; observation eg direct, expert witness records; evidence-based eg projects, presentations, artefacts produced; against National Occupational Standards

4 **Understand how to support the individual learning needs of health and social care workers**

Learning needs: literacy, numeracy, IT, second language, sensory impairment, dyslexia, dyspraxia, attention deficit, time-management

Diagnostic tools: for literacy, numeracy; oral, paper-based, online

Support for individual learning needs: teaching strategies, technical aids, learning materials, planning learning, teaching, assessing, providing feedback, supporting quality assurance

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand different theories of learning	1.1 explain how different domains of learning apply to learning in health and social care 1.2 explain different ways in which learning can occur in health and social care workplaces 1.3 analyse how theories of learning relate to the development of understanding and skills in health and social care
LO2 Understand the impact of learning styles on learning by individuals	2.1 explain different factors that can influence the effectiveness of learning 2.2 explain concepts of learning style 2.3 assess own preferred learning style 2.4 analyse influences on own learning in relation to learning theory
LO3 Be able to suggest strategies for delivering and assessing learning in a health and social care workplace	3.1 describe factors to be considered when planning a workplace learning programme 3.2 present relevant teaching strategies to support the learning of others for a health and social care workplace 3.3 suggest a strategy for delivering and assessing learning in a health and social care workplace
LO4 Understand how to support the individual learning needs of health and social care workers.	4.1 explain barriers to learning that maybe encountered by individuals in the health and social care workplace 4.2 describe methods of identifying individual learning needs 4.3 evaluate different approaches that could be adopted to support the individual learning needs of health and social care workers.

Guidance

Links

This unit has links with, for example:

- *Unit 4: Personal and Professional Development in Health and Social Care*
- *Unit 13: Managing Human Resources in Health and Social Care*
- *Unit 23: Employability Skills.*

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

Essential requirements

It is essential that this unit is delivered by a tutor who can introduce learners to learning and assessment processes, as are required for completion of the unit.

Employer engagement and vocational contexts

Relevant information on lifelong and work-based learning can be found at the following:

www.ento.org.uk	Work-based learning National Training Organisation
www.lluk.org	Lifelong Learning UK
www.niace.org.uk	National Institute of Adult Continuing Education

<table>
<tr><td>Unit 25:</td><td>Influences on Health and Social Care Organisations</td></tr>
</table>

Unit code: L/601/1662

Level: 4

Credit value: 15

● Aim

This unit aims to develop understanding of how the external environment, organisational structure and function impact on health and social care service delivery and the role that leadership plays in service provision.

● Unit abstract

This unit covers the theoretical concepts used to explain how organisations function and investigates the role of leadership within organisations. Current thinking in management theory will be discussed with particular reference to health and social care organisations. Learners will be encouraged to apply theoretical concepts to organisations with which they are familiar and to analyse the leadership roles within these organisations. The relationship between individual and organisational effectiveness and their impact on health and social care services will also be discussed from the perspective of care workers and those who use services.

Learners will be encouraged to explore the influences that the external environment has on service delivery and organisational effectiveness, using a range of business theories and analysing how these theories apply to health and care services.

● Learning outcomes

On successful completion of this unit a learner will:

1   Understand the relationship between the external environment and health and social care organisations

2   Understand the impact of organisational structure and culture on health and social care service delivery

3   Understand the role of leadership in health and social care organisations.

Unit content

1   **Understand the relationship between the external environment and health and social care organisations**

External environmental factors: public and media concerns; legal framework; political issues; resource and funding issues; demography; commercial pressures; external stakeholders eg Care Quality Commission, Department of Health, Supporting People, local government

Potential impact: on people eg users of services, workers, others; roles and responsibilities; accountabilities; functions and services; organisational restructuring

Responding to external stakeholder needs: approaches eg inspection, keeping records and statistics, conformance, accountability

2   **Understand the impact of organisational structure and culture on health and social care service delivery**

Types of organisations: public, private, not-for-profit; formal/informal; function differences eg service-based, product-based, multi-functional

Individual behaviour theory: personality, motivation theories eg Maslow, Herzberg, McClelland, Vroom; job design; stress; conflict

Group behaviour theory: group formation; socialisation; roles; ambiguity; compliance; conformity; group think; team building eg Belbin, Janis, Asch, Milgram

Organisational structures: functional; geographical; matrix; centralisation versus decentralisation; tall versus flat

Organisational culture: power cultures; role cultures; task cultures; person cultures; cultural norms; how cultures develop

3   **Understand the role of leadership in health and social care organisations**

Concept of leadership: vision; values; management style (participative, consultative); personal authority and self-confidence; transformational leadership; authority and power

Organisational effectiveness: best use of scarce resources; achievement of organisational objectives; successfully meeting needs of those who use services; meeting the needs of staff

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand the relationship between the external environment and health and social care organisations	1.1 analyse the impact of external environmental factors on health and social care organisations 1.2 evaluate the ways in which organisations respond to the impact of external factors, including those of external stakeholders
LO2 Understand the impact of organisational structure and culture on health and social care service delivery	2.1 compare and contrast different types of organisational structures in health and social care 2.2 analyse the concept of organisational culture in health and social care services 2.3 analyse theories relating to the behaviour of individuals and groups in health and social care organisations 2.4 explain how the organisational structure and culture of a health and care organisation impacts on service delivery
LO3 Understand the role of leadership in health and social care organisations.	3.1 discuss concepts of leadership as related to health and social care organisations 3.2 analyse how leadership can influence the effectiveness of health and social care organisations 3.3 evaluate the specific leadership contributions in a health or social care organisation.

Guidance

Links

This unit has links with, for example:

- *Unit 1: Communicating in Health and Social Care Organisations*
- *Unit 4: Personal and Professional Development in Health and Social Care*
- *Unit 5: Working in Partnership in Health and Social Care*
- *Unit 13: Managing Human Resources in Health and Social Care*
- *Unit 23: Employability Skills*
- *Unit 26: Facilitating Change in Health and Social Care*
- *Unit 27: Managing Quality 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

Use of real or fictitious case studies will be essential to ensure that the theoretical learning is applied to understanding how organisations operate, develop and change.

Employer engagement and vocational contexts

Some contact with employers will be required in order for learners to achieve the assessment criteria. It would also be useful for centres to use factual organisational case studies to enhance the vocational nature of the unit.

Unit 26: Facilitating Change in Health and Social Care

Unit code:	D/601/1665
Level:	5
Credit value:	15

- 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

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 **On successful completion of this unit a learner will:**	Assessment criteria for pass **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 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 2.2 measure the impact of recent changes on health and social care services against set criteria 2.3 evaluate the overall impact of recent changes in health and social care 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 3.2 explain how changes in health and social care are planned 3.3 assess how to monitor recent changes in health and social care services.

Guidance

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
Level:	5
Credit value:	15

● 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

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 **On successful completion of this unit a learner will:**	Assessment criteria for pass **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 1.2 analyse the role of external agencies in setting standards 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 2.2 evaluate different approaches to implementing quality systems 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 3.2 analyse other factors that influence the achievement of quality in the health and social care service 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 4.2 discuss the impact that involving users of services in the evaluation process has on service quality.

Guidance

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 28:   Work-based Experience

Unit code:	D/601/0998
Level:	5
Credit value:	15

● Aim

This unit aims to enable learners to experience the scope and depth of learning which may take place in a work-based context by planning, monitoring and evaluating the work experience.

● Unit abstract

A significant amount of learning can be achieved through carrying out practical activities in a workplace. Learning may be enhanced by taking a more formal approach to work-based activities – by planning and carrying out the activities and reflecting on the benefits of the activities for the business and learner.

Learners will have the opportunity, supported by their supervisors, to negotiate and perform activities which will allow them to meet the assessment criteria for this unit. They will recognise the scope of their achievement by recording evidence from carrying out the activities. They will also gain maximum benefit by reflecting on and evaluating the work they undertake.

This unit is designed to allow flexibility of study for part-time and full-time learners. Please note that this unit cannot be taken alongside *Unit 23: Employability Skills*.

● Learning outcomes

On successful completion of this unit a learner will:

1   Be able to negotiate industry experience

2   Understand the specific requirements of the placement

3   Be able to undertake work experience as identified

4   Be able to monitor and evaluate own performance and learning.

Unit content

1 **Be able to negotiate industry experience**

Suitable organisation and location: types of establishments for placement eg existing work environment, different department within current employer's business

Negotiation: constructing a curriculum vitae; methods of contacting organisations; methods of undertaking negotiations

Nature of duties: type of undertaking eg routine duties and tasks, project work, case-study investigation, development of new procedures/protocol, research based study applied to theoretical learning

Supervisors: roles and responsibilities of academic and industrial mentors

Expectations of learning: aims eg proficiency in new tasks and procedures, time-management and problem-solving skills, reflection, discussion of progress with others, teamwork

Business constraints: consideration of possible limitations, eg need to be fully trained, adherence to quality systems, health and safety considerations, supervision time, workload, customer satisfaction, limited staffing, cost of materials

2 **Understand the specific requirements of the placement**

Tasks: details of activities eg specific hourly, daily, weekly routine and non-routine tasks; breakdown of a project into stages; new procedures/protocol

Prioritise: reasons for rationalisation of the order of tasks; methods of prioritising work

Plan for the work experience: methods used to develop detailed plan with schedule of tasks, proposed dates for reviews, expected input from supervisors, multicultural awareness; experiential learning benefits and limitations

Benefits to organisation and learner: advantages to business eg meeting performance indicators, allowing more routine tasks to be carried out, allowing procedures/techniques to be developed, increasing responsiveness, identifying cost saving measures; advantages to learner eg understanding how a business operates, understanding importance of teamwork, learning new techniques, development of problem-solving and time-management skills

3 **Be able to undertake work experience as identified**

Carry out the planned activities: realisation eg carrying out tasks and project work according to relevant legislation, training and codes of practice; developing new procedures or protocol; evaluating roles in the light of changing context of changing social, economic and political factors

Record activities in the appropriate manner: systematic and appropriate recording of relevant activities, eg logbook, diary, portfolio, spreadsheets, databases; compliance with confidentiality and data protection policies; list of resources

Revise the initial plan as required: methods used to review activities at the appropriate time to see if they meet requirements, make alterations as needed

4 **Be able to monitor and evaluate own performance and learning**

Evaluation of the quality of the work undertaken: meeting industry standards and evaluating own performance against original proposal; comments/testimony from supervisors

Account of learning during the work experience: reflective writing; details of experience gained eg new procedures, interpersonal skills, time management, problem solving, teamwork; details of evidence eg portfolio of evidence, case study, scientific report, management report

Recommendations on how the learning experience could have been enhanced: alternative ideas eg different location, different brief, different time period, more/less support, better time management, better preparation

Learning outcomes and assessment criteria

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Be able to negotiate industry experience	1.1 research and evaluate suitable organisations that could provide industry experience 1.2 negotiate with work and academic supervisors a proposal for the work experience 1.3 recognise the business constraints on the work experience offered
LO2 Understand the specific requirements of the placement	2.1 agree and prioritise the tasks and responsibilities involved in the work experience 2.2 produce a plan for the work experience 2.3 analyse the benefits of the proposed activities to the business and the learner
LO3 Be able to undertake work experience as identified	3.1 fulfil specified requirements of placement conforming to all related codes of practice 3.2 produce systematic records of work undertaken 3.3 revise the initial plan as required 3.4 make suggestions for improvement and review these with appropriate supervisor
LO4 Be able to monitor and evaluate own performance and learning.	4.1 monitor progress against original proposal 4.2 evaluate the quality of own performance 4.3 analyse the learning which has taken place during the work experience using suitable reflections 4.4 make recommendations on how the experience could have been enhanced.

Guidance

Links

This unit has possible links with all units in the programme, especially:

- *Unit 4: Personal and Professional Development in Health and Social Care*
- *Unit 23: Employability Skills.*

This unit has links to the National Occupational Standards (NOS) in Management and Leadership.

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

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

Essential requirements

Given the work-based nature of this unit, the majority of resources will be those available to the learner in the health and social care workplace. The work will normally be planned to be achievable within the resource constraints of the employer. Therefore, knowledge of organisational structures and daily routines and expectations is essential. Learners should also have access to a wide range of research facilities including careers library and/or careers services.

Learners should remain in touch with tutors during the work-experience – email is often the best way but some colleges may have access to a virtual learning environment where learners can share information and experiences with each other and the tutor.

Employer engagement and vocational contexts

The nature of the work-based experience can be tailored to suit the career aspirations of the learner or their current work experience, and will differ depending on the locality of health and social care services. The following websites could provide relevant information for engaging with employers:

www.ccwales.org.uk	Care Council for Wales
www.niscc.info	Northern Ireland Social Care Council
www.scie.org.uk	Social Care Institute for Excellence
www.skillsforcare.org.uk	Skills for Care
www.societyguardian.co.uk	Society pages of *The Guardian*

Unit 29:   Health Promotion

Unit code: J/601/1675

Level: 5

Credit value: 15

- 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

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

Learning outcomes **On successful completion of this unit a learner will:**	Assessment criteria for pass **The learner can:**
LO1 Understand the socio-economic influences on health	1.1 explain the effects of socio-economic influences on health 1.2 assess the relevance of government sources in reporting on inequalities in health 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 2.2 explain the role of professionals in meeting government targets for health promotion 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 3.2 discuss the possible effects of potential conflicts with local industry on health promotion 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 4.2 explain how the health promotion campaign supports health promotion strategies.

Guidance

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.