

#### **Unit 5: Principles of Safe Practice in Health and Social Care**

#### **Delivery guidance**

#### Approaching the unit

This unit gives learners the understanding to implement a duty of care through safe working practices, safeguarding procedures and appropriate responses to emergency situations in a range of health and social care settings.

While progressing through the unit learners will be given the opportunity to develop knowledge and understanding of the key principles relating to safeguarding vulnerable individuals, promoting health and safety, and responding to different situations and emergency incidents in a range of health and social care settings. Learners will become aware of the professional responsibilities required to maintain safe practice.

They will explore the legal duty of care and the importance of regulations, policies and procedures in protecting individuals from harm, upholding their rights and promoting their welfare. Learners will examine the types of harm and neglect that service users can experience and learn how to recognise and respond to concerns about harm and neglect in health and social care settings.

This unit will support learners in carrying out practical procedures to maintain health and safety and respond to accidents and emergencies in health and social care settings, such as infection control procedures and fire and evacuation drills. Learners should be aware of local and national codes of practice or legislation relevant to their country or local setting, where applicable, for this unit.

This unit provides essential knowledge and understanding. It forms a good basis for aspects of higher education study in health and social work courses and nursing qualifications. It will also prepare learners for work in health and social care in a variety of roles.

#### Approaching the unit

This unit relates to *Unit 4: Principles of Effective Care* by extending the theory into how policies and procedures are implemented in a variety of health and social care settings. This can be achieved through group discussion, tutor presentations, the use of case studies (available on Pearson's website), role play, documentaries, guest speakers, visits to health and social care settings and visiting trainers.



#### Delivering the learning aims

**Learning aim A** examines how duty of care contributes to safe practice in health and social care settings. A good place to begin is to find out what the learners already know, which can be done through individual and/or small group work using pre-prepared activity cards with the following discussion points:

- What is the legal obligation to protect wellbeing and prevent harm?
- Why is there a legal obligation?
- What could happen if there is no legal obligation?
- Who is responsible for implementing the policy?
- How is the policy implemented?
- Who monitors the policy?
- How is safe practice ensured?
- How are individual rights promoted while balanced with risks?
- How are individuals experiencing harm or neglect protected?
- How are health, safety and wellbeing protected?

This will be consolidated with a discussion and developed through future sessions and used in the final teaching session to consolidate learning before summative assessment. Documentaries showing a variety of both good and unsafe care facilities are a useful way to highlight safe practice and bring the reality into the classroom.

A range of guest speakers is also an option for bringing reality into the classroom. Former learners now in local employment settings could be invited to speak to the current cohort.

**Learning aim B** covers types and signs of harm and neglect and how to respond, which can be distressing or unsettling for some learners. Therefore, it is good practice to prepare learners before starting the topic and if necessary, to direct learners to support services. A guest speaker is valuable in this topic or alternatively a virtual platform link to a professional working in the care sector.

Documentaries can provide an excellent insight into unacceptable care provision. There are several available covering a variety of care settings, with a commentary of the neglect and harm being inflicted and the policies and procedures that should be in place.

A consolidation session is essential to ensure all policies, procedures and legislation are understood before introducing summative assessment that combines both learning aims A and B.



**Learning aims C and D** cover topics that can be combined as they relate to each other, e.g. food preparation and food hygiene, first aid and responding to accidents, storage and handling of hazardous substances with health and safety at work, data protection and reporting and record keeping.

First aid can be delivered by an outside agency, which then gives learners a qualification for future employment. Online training sessions delivered by agencies can also lead to a qualification.

Fire drills within the centre and/or a visit from a fire officer are good ways to put theory into practice.

A visit to a care setting, or a guest speaker or link to a virtual performance of a professional working in the care sector would enable learners to understand how policies, procedures and legislation are implemented in the sector.

Learners will need sessions and support to collate the portfolio which constitutes the summative assessment.



#### **Assessment model**

Learning aim	Key content areas	Recommended assessment approach
<b>A</b> Examine how a duty of care contributes to safe practice in health and social care settings	A1 Duty of care A2 Complaints procedures	A report evaluating duty of care and safeguarding procedures in a health and social care setting. To present as a seminar to group.
<b>B</b> Understand how to recognise and respond to concerns about harm and neglect in health and social care settings	B1 Types and signs of harm and neglect B2 Factors that could contribute to individuals being vulnerable to harm and neglect B3 Responding to suspected harm and neglect	
	<b>B4</b> Reducing the likelihood of harm and neglect	
C Investigate the influence of health and safety regulations and policies in health and social care settings	c1 Health and safety regulations and policies in health and social care c2 Influence of regulations and policies on health and social care practice	A resource file evaluating safe practice principles, procedures and responsibilities in
<b>D</b> Explore procedures and responsibilities to maintain health and safety and respond to accidents and emergencies in health and social care settings	<ul><li>D1 Procedures to maintain health and safety</li><li>D2 Procedures for responding to accidents and emergencies</li></ul>	a health and social care setting.



<b>D3</b> Health and safety
responsibilities

#### **Assessment guidance**

This unit is internally assessed. There is a maximum of two summative assignments for this unit. Tutors should refer to the assessment guidance in the specification for specific detail, particularly in relation to the requirements for Pass, Merit and Distinction grades.

It is suggested that **learning aims A and B** are assessed together as one piece of work through a written report. Within the report, learners must include the duty of care, complaints procedures, types and signs of harm, procedures to minimise harm, and legislation that is currently in place.

To support learners in their report writing and presentation they should be encouraged to use headings, sub-headings and annotations such as pictures and diagrams to support explanations.

It is suggested that **learning aims C and D** are assessed together as one piece of work through the collation of a portfolio of evidence.

This portfolio must include health and safety regulations and policies currently in place in health and social care, together with the influence of these regulations and policies on health and social care practice. The portfolio must also include procedures to maintain health and safety, procedures for responding to accidents and emergencies, and health and safety responsibilities of everyone within the settings, e.g. employees, visitors and clients. These will be an excellent resource as the learner moves on to employment or higher study.



#### **Getting started**

This gives learners a starting place for one way of delivering the unit, based around the recommended assessment approach in the specification.

#### Introduction

Introduce this unit with an initial session which gives an overview of the whole unit. A quiz or a small group task can identify current knowledge and areas for development.

# Learning aim A: Examine how a duty of care contributes to safe practice in health and social care settings

- For A1, learners need to know that duty of care is a fundamental element of all health and social care provision. This needs to be explained fully and the importance of the topic enforced.
- A visit to the classroom by a local centre manager or a virtual performance link to a professional working in a care setting can help to bring the workplace into the curriculum. Alternatively a televised documentary can be useful for discussion.
- For A2, complaints procedures can be delivered using a method similar to that used in A1, with the addition of individual learner research into essential legal requirements.

# Learning aim B: Understand how to recognise and respond to concerns about harm and neglect in health and social care settings

- Learning aim B is a difficult topic for many learners as it can bring forward individual experiences. Therefore, it is good practice to introduce the topic before any teaching to enable any learners to request individual support and for the support to be organised.
- Most of this unit can be tutor led, which will enable the tutor to observe learners and support closely any of those showing emotional needs.
- For B1, B2, B3 and B4, a visit to the classroom by a local centre manager or a virtual performance link to a setting can help to bring the workplace into the curriculum. Alternatively a documentary can be useful for discussion.
- For B1, tutors must ensure all signs of harm and neglect are included, e.g.
  neglect and acts of omission, including unkempt appearance, unexplained
  weight loss, signs of malnutrition, ulcers and bed sores, and physical
  injuries including unexplained injuries or bruising and burn marks.



- Psychological factors, including unexplained changes in behaviour, anxiety, depression, signs of being withdrawn, fearful, anxious, loss of self-esteem, anger or frustration.
- Financial problems could be explored including the inability to pay for household expenditure or missing personal possessions.
- For B2, there are several documentaries that can show factors that could contribute to individuals being vulnerable to harm and neglect. Such documentaries give an excellent opportunity for discussion and learning.
- Vulnerable groups of people would need to be recognised and investigated for reasons as to why and how they can be harmed, including babies, children and older people, and those with physical disabilities such as chronic medical conditions.
- Another group of people that need to be recognised as being vulnerable to harm are those with a sensory impairment, for example individuals with a speech, sight or hearing impairment.
- People suffering with dementia or Alzheimer's disease and those with special educational needs would be recognised as being vulnerable, as well as those that are emotionally vulnerable, including people suffering with depression, anxiety and phobias.
- Another group to identify are socially vulnerable people, which includes those living in isolation or showing institutionalised behaviour.
- Centre issues, including staffing problems that may lead to institutional harm and neglect, e.g. lack of staff training, lack of leadership or low staff levels, could also be introduced.
- B3/B4 extend B1 and B2 to investigate the legislation and procedures in place to respond to suspected harm and neglect and the methods to reduce the likelihood of harm and neglect.
- This section is legislation-led and can be quite distressing and worrying for learners. Although all content should be covered to enable learners to gain the necessary knowledge of procedures, it may help vulnerable learners to cover content in small groups to give them the opportunity to discuss their feelings, experiences and worries.

# Learning aim C: Investigate the influence of health and safety regulations and policies in health and social care settings

• Learning aim C identifies the health and safety regulations and policies in health and social care.



- For C1, health and safety at work regulations include the policies and procedures relating to manual handling operations, food hygiene procedures, procedures for the control of substances hazardous to health, reporting of injuries, diseases and dangerous occurrences regulations, data protection regulations, standards of care regulations and equality regulations. These can be introduced through training agencies or using a virtual link to a professional working in the care sector.
- C2 investigates how health and social care settings apply safety regulations and the influence of regulations and policies on health and social care practice. A guest speaker from a local setting can provide the required knowledge, or the use of a virtual performance to link to a professional working in the care sector.

# Learning aim D: Explore procedures and responsibilities to maintain health and safety and respond to accidents and emergencies in health and social care settings

- Learning aim D explains the policies and procedures which are essential to minimise risk of harm in settings. Presentations, guest speakers, training sessions for first aid and centre fire drills can be incorporated in the delivery.
- For D1, procedures that must be included to maintain health and safety are infection control and prevention, e.g. standard infection control precautions, safe moving and handling of equipment and individuals, food preparation and storage.
- The storage and administration of medication, and the storage and disposal of hazardous substances, can be combined with D2, which includes procedures for responding to accidents and emergencies, responding to accidents and illness, basic first aid, fire safety, evacuation and security procedures, and reporting and record keeping.
- For D3, D1 and D2 are extended to identify how responsibilities are distributed within a health and social care setting and which regulation or policy is applied to different roles.
- Health and safety responsibilities of employers include health and safety management, risk assessment, providing relevant equipment and information and training.
- The responsibilities of individual employees include taking reasonable care of their own and others' health and safety, following guidance from health and safety training and identifying potential hazards in the setting.



 The responsibilities of others in the setting, e.g. visitors, would involve health and safety guidance and emergency procedures. Learners would also need to be aware of the requirement to abide by relevant regulations, policies and procedures that are in place within a setting.

# Details of links to other BTEC units and qualifications, and to other relevant units/qualifications

This unit links to:

• Unit 4: Principles of Effective Care

Unit 1: Human Lifespan Development

#### **Resources**

#### **Textbook**

Northway R and Jenkins R – *Safeguarding Adults in Nursing Practice* (Sage Publications, 2017) ISBN 9781473954830