

Qualification Guidance Document

SEG Awards Level 5 Diploma in Leading and Managing an Adult Care Service

England - 610/6758/1

About Us

At Skills and Education Group Awards we continually invest in high quality qualifications, assessments and services for our chosen sectors. As a UK leading sector specialist, we continue to support employers and skills providers to enable individuals to achieve the skills and knowledge needed to raise professional standards across our sectors.

Skills and Education Group Awards have an on-line registration system to help customers register learners on its qualifications, units and exams. In addition, it provides features to view exam results, invoices, mark sheets and other information about learners already registered.

The system is accessed via a web browser by connecting to our secure website using a username and password: [Skills and Education Group Awards Secure Login](#)

Sources of Additional Information

The [Skills and Education Group Awards](#) website provides access to a wide variety of information.

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Specification Code

The specification code is D2450-05.

Issue	Date	Details of change
V1.0	January 2026	New Qualification

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This is a live document and as such will be updated when required. It is the responsibility of the approved centre to ensure the most up-to-date version of the Qualification Specification is in use. Any amendments will be published on our website and centres are encouraged to check this site regularly.

Qualification Summary

Qualification Title:									
Qualification Purpose	Confirm Occupational Competence and a mandatory component of the Lead Adult Care Worker Apprenticeship								
Age Range	<table border="1"> <tr> <td>Pre 16</td> <td></td> <td>16-18</td> <td></td> <td>18+</td> <td>✓</td> <td>19+</td> <td>✓</td> </tr> </table>	Pre 16		16-18		18+	✓	19+	✓
Pre 16		16-18		18+	✓	19+	✓		
Regulation	The above qualification is regulated by: <ul style="list-style-type: none"> > Ofqual 								
Assessment	<ul style="list-style-type: none"> > Portfolio of Evidence > Practical demonstration/assignment > Coursework > E-assessment > Internal and external moderation 								
Type of Funding Available	See FaLA (Find a Learning Aim)								
Grading	Pass/Fail To achieve a Pass grade, learners must achieve all the Learning Outcomes and Assessment Criteria in all the units completed and as stated in the rule of combination (RoC)								
Operational Start Date	01/04/2026								
Review Date	01/04/2029								
Operational End Date									
Certification End Date									
Guided Learning (GL)	617 hours								
Total Qualification Time (TQT)	900 hours								
Credit Value	90								
Skills and Education Group Awards Sector	Adult Care								

Regulator Sector	1.3 Health and Social Care
Support from Trade Associations	Skills for Care

Introduction

The content of the SEG Awards Level 5 Diploma in in Leading and Managing an Adult Care Service has been specified by Skills for Care, in consultation with employers, learning providers and those who use services.

The qualification has core shared knowledge and skills that support the vision of employers providing integrated services and the portability of skills and knowledge across the health and adult care workforce.

The content of the qualification is applicable to the following roles:

- > Leader in Adult Care (Occupational/Apprenticeship standard) [Care Workforce Pathway for adult social care](#)-qualification to support Registered Manager role category

The overall qualification is graded Pass or Fail.

Skills and Education Group Awards is regulated to deliver this qualification by Ofqual. The qualification has a unique Qualification Number (QN) which is shown below. Each unit within the qualification will also have a regulatory Unit Reference Number (URN).

The QN code will be displayed on the final certificate for the qualification.

Pre-requisites

The entry requirements for this qualification are that learners **must** be at least **18 years** of age. It is aimed at all those who are already working in Adult Care in England.

It is recommended that you already hold a L3 qualification or above in the area.

Skills and Education Group Awards expects approved centres to recruit with integrity on the basis of a learner's ability to contribute to and successfully complete all the requirements of a unit/s or the full qualification.

Qualification Structure and Rules of Combination

Rules of Combination: SEG Awards Level 5 Diploma in Leading and Managing an Adult Care Service

Learners **must** achieve **90** credits.

This **must** be made up of **76** credits from the **Mandatory** units in Group A and a minimum of **14** credits from the **Optional** units in Group B.

Unit Title	Unit Number	Level	Credit Value	GL
Mandatory Units Group A – Target – 76 credits				
Leading and Managing in Adult Social Care LMAC5A				
Leadership and Management	M/651/8644	5	3	20
Governance and Regulatory Processes	R/651/8645	5	5	32
Decision Making	T/651/8646	5	3	24
Business and Resource Management	Y/651/8647	5	5	32
Leading and Managing Teams LMAC5B				
Team Leadership	A/651/8648	5	3	20
Team Leading and Development	D/651/8649	5	3	20
Supervising Others	J/651/8650	5	3	20
Responsibilities LMAC5C				
Safeguarding	K/651/8651	5	3	25
Mental Capacity	L/651/8652	5	3	25
Partnerships	M/651/8653	5	4	35

Concerns and Complaints	R/651/8654	5	3	22
Improvement and Innovation LMAC5D				
Leading the Vision	T/651/8655	5	3	22
Continuous Improvement	Y/651/8656	5	4	25
Communication LMAC5E				
Effective Communication	A/651/8657	5	4	25
Handling Information	D/651/8658	5	3	22
Values and Behaviours LMAC5F				
Leading Person-Centred Practice	F/651/8659	5	6	40
Health and Well-being	K/651/8660	5	3	22
Equality, Diversity, Inclusion and Human Rights	L/651/8661	5	3	25
Health and Safety LMAC5G				
Health and Safety	M/651/8662	5	4	32
Professional Development LMAC5H				
Continuous Development	R/651/8663	5	4	30
Personal Well-being	T/651/8664	5	4	25

Unit Title	Unit Number	Level	Credit Value	GL
Optional Units Group B – Target – 14 credits				
Manage Quality in Adult Care	J/651/8787	5	5	36
Undertake a Research Project Within Adult Care Services	K/651/8788	5	10	45

Appraise Staff Performance	L/651/8789	5	5	32
Support Individuals with Multiple Conditions and /or Disabilities	T/6518790	5	5	34
Develop and Evaluate Operational Plans for Own Area of Responsibility	Y/651/8791	5	3	25
Facilitate Coaching and Mentoring of Practitioners in Adult Care	A/651/8792	5	6	43
Develop Procedures and Practice to Respond to Concerns and Complaints	D/651/8793	5	6	40
Active Support: Lead Interactive Training	F/651/8794	5	4	30
Lead the Management of Transitions	H/651/8795	5	4	29
Support and Manage Domiciliary Services	J/651/8796	5	6	25
Lead and Manage Infection Prevention and Control within the Work Setting	K/651/8797	5	6	38
Lead and Manage Practice in Dementia Care	L/651/8798	5	6	41
Lead and Manage End of Life Services	M/651/8799	5	7	35
Develop Provision for Family Support	D/651/8800	5	5	33
Support the Use of Assistive Technology	F/651/8801	5	4	31
Promote Good Practice in the Support of Individuals with Autistic Spectrum Conditions	H/651/8802	5	7	53

The Use of Technology and Data in Adult Social Care	J/651/8803	5	3	10
Implementing Technology in Adult Social Care	K/651/8804	5	3	10
Leading Change, Learning & Improvement in Adult Social Care	L/651/8805	5	6	20

Aim

Primarily, the qualification aims to support the development of registered managers of adult social care services. Specifically, those new to their role. The Level 5 Diploma in Leading and Managing an Adult Care Service can be studied as a standalone qualification, but it also meets the mandatory component requirements of the Leader in Adult Care End-point Assessment.

Target Group

Learners will work in adult social care and have responsibility for leading and managing a service. This will include managing and improving care and support for those accessing the service; supporting and developing the workforce; and driving the vision for their service or organisation. Primarily, the qualification aims to support the development of registered managers of adult social care services. Specifically, those new to their role.

Skills and Education Group Awards expects approved centres to recruit with integrity on the basis of a learner's ability to contribute to and successfully complete all the requirements of a unit/s or the full qualification.

This qualification is appropriate for use in the following age ranges:

- > 18+
- > 19+

Assessment

This qualification is assessed through internal assessment, internal and external moderation. Each unit is accompanied by specific assessment criteria that define the requirements for achievement. Specific requirements and restrictions may

apply to individual units within qualifications. Please check unit and qualification details for specific information.

This qualification **must** be assessed in line with Skills for Care and Development Assessment Principles November 2025, V1.1 (see below).

Access the full Shared Assessment Principles [here](#).

Skills for Care and Development Assessment Principles

1 Introduction

1.1. Skills for Care and Development (SfCD) is an alliance of key organisations from England, Northern Ireland, Ireland, Scotland and Wales with varied roles across social work, social care, children and young people, early years and childcare, with remits across workforce development and regulation.

1.2. This document sets out the minimum expected principles and approaches to assessment and internal quality assurance and should be read alongside qualification regulatory arrangements and any specific requirements set out for qualifications. Additional information and guidance regarding assessment can be obtained from Awarding Organisations/Body (AO/B) and from SfCD partner organisations using the links in Appendix A.

1.3. The information in this document is intended to support the quality assurance processes of AO/Bs and approved centres that offer qualifications in the sectors.

1.4. Where Skills for Care and Development qualifications are jointly supported with Skills for Health, Skills for Health assessment principles should also be considered.

1.5. Throughout this document the following terms are used:

- > "Unit" is used for simplicity, but this can mean module or any other similar term
- > "Centre" is also used for simplicity; this means the training / learning provider who is approved to deliver qualifications by the AO/B
- > Individual and others: "individual" refers to the person or people receiving care or support. "Others" may include families, carers, other people in the setting, team members and other professionals

1.6. In all work, we would expect assessors to observe and review learners upholding core values and standards, inclusive practices, professional behaviour, and attitudes required for quality practice and being assessed within the qualification.

1.7. All learners should follow appropriate standards for conduct. All parties involved in any form of assessment **must** know and embrace the values and standards of practice set out in these documents.

1.8. The voices of individuals who use services **must** be at the centre of all assessor and learners' practice. This should be apparent throughout the evidence provided for a learner's practice. Learners should also be provided an opportunity

to provide feedback throughout the assessment and internal quality assurance process.

2 Assessment principles

2.1. Good practice dictates the following:

- > Robust initial assessments are needed to identify and plan for each learner's needs, ensuring their role and responsibilities meet all qualification requirements, including the mandatory and optional units
- > Centres should have in place processes to identify and recognise opportunities for use of Accredited Prior Learning (APL) and/or Recognition of Prior Learning (RPL), and these should meet the requirements of the AO/B
- > Centres should also have in place processes to support reasonable adjustments, and again, these should meet the requirements of the AO/B

2.2. The centre **must** monitor that learners are registered with the AO/B before formal assessment continues. Assessors **must** be able to fully evidence and justify the assessment decisions they have made in line with the principles of validity, authenticity, reliability, currency and sufficiency. Assessment records should be accurate, legible and complete, and meet requirements set out by the AO/B and associated assessment strategy where this is in place.

2.3. Skills-based assessment **must** include direct observation as the principal and most reliable assessment source of evidence, carried out by the assessor in person with the learner in their workplace. Observation **must** be carried out over an appropriate period of time and not be end-loaded. Evidence should be naturally occurring and minimise the impact on individuals who use care or support, their families and carers. Where a centre has valid and genuine reasons for being unable to meet the direct observation requirements, short-term flexible approaches may be permitted. These approaches **must** be standardised, and the centre **must** discuss and agree this with the AO/B. See 2.8 and 5.5.

2.4. Assessment decisions for skills-based learning outcomes **must** be made during the learner's normal work activity by an occupationally qualified, competent and knowledgeable assessor.

2.5. Assessors **must** demonstrate occupational competence and sector knowledge at or above the level they assess, maintaining this through ongoing continual professional development.

- > In examples where assessors are returning to practice, a professional development plan should be in place to ensure current sector competency against the level, the subject matter being assessed, and overall assessment practices

- > If an assessor is occupationally competent but not yet qualified, a qualified assessor **must** make the final assessment decisions. These **must** be validated through countersigning and supported by robust internal quality assurance, sampling plans and activities until qualification requirements are met
- > It is the responsibility of the AO/B to confirm that assessors in centres are suitably qualified and competent to make assessment decisions

2.6. Simulation **must** only be used to assess skills-based learning outcomes when specified in the unit assessment requirements or agreed with the AO/B or agreed with the External Quality Assurer acting on behalf of the AO/B.

2.7. Witness testimony from others, including those who use services, their families and professionals, can be an important contribution to evidence in the assessment process and can enrich and triangulate other evidence obtained. A witness testimony does not replace direct observation and should not be used as the only evidence of skills. A witness testimony and an expert witness testimony are two different types of evidence. Informed consent **must** be gained for those providing witness testimonies.

2.8. Expert witnesses play an important role in assessments. They **must**:

- > Have a working knowledge of the relevant units
- > Be occupationally competent in the relevant units, and
- > Have either a qualification in workplace assessment or a role evaluating staff performance within their area of expertise

2.9. Appropriate processes to identify and recruit, confirm, support, and standardise suitable expert witnesses should be applied by the centre and assured by the AO/B.

2.10. The expert witness is a reliable source of evidence:

- > Where the assessor is not occupationally competent in a specialist area e.g. a healthcare task, an expert witness testimony can be used for direct observation of the unit (not the whole qualification) where they have occupational expertise in the specialist area
- > When used as a method to enrich, supplement, and add triangulation to other assessment methods and outcomes
- > In supporting flexibility where there are valid and genuine factors in not being able to obtain direct observation in the workplace e.g. individual considerations, environment and practice sensitivities. Occasions where this is needed **must** be discussed and agreed with the AO/B. This should not be the sole primary method used in place of all observations
- > Where allowed as per the assessment strategy

2.11. The use of expert witnesses should be determined and agreed by the assessor, in line with internal quality assurance arrangements and AO/B requirements for assessment of units within the qualification and the sector. The assessor remains responsible for supporting the expert witness through the process and making the final assessment decision.

3 Assessment of knowledge-based learning outcomes

3.1. The assessment of knowledge-based learning outcomes:

- > May take place in or outside of a real work environment
- > **Must** be made by an occupationally qualified and knowledgeable assessor, qualified to make assessment decisions
- > **Must** be robust, reliable, valid and current
- > Can be supported by eLearning programmes to support overall summative assessment, by helping learners acquire and review knowledge, but they cannot replace practical assessment in a real work environment
- > May include pre-set automated tests (such as multiple-choice questions) which contribute evidence towards summative decisions. However, they **must** be complemented by direct assessment methods that demonstrate the learner's ability to apply knowledge in real work situations
- > **Must** take into account APL/RPL to avoid duplication of learning

4 Recording and documentation

4.1. All assessment and quality assurance evidence, regardless of format, **must** comply with confidentiality and data protection laws. Information **must** be traceable, auditable, authenticated, and meet assessment principles. In addition, no recordings should compromise anyone's privacy or dignity. As such, clear and robust referencing is necessary to establish a relationship between the evidence and the assessment standard, which validates competence. Referencing should clearly indicate the specific location within the evidence where the relevant skills and knowledge are claimed, either in paper-based or e-portfolios.

5 Use of technology in the assessment process

5.1. Centres should have in place robust policies and procedures regarding Artificial Intelligence (AI) and technology, and these **must** meet requirements as set out by the AO/B.

5.2. Technology, platforms, and e-portfolios can support assessment by enabling planning, reviews, learner reflection, professional discussions, and capturing evidence from expert witnesses. When using technology in these contexts, ensure:

- > Recording, storage, and access comply with confidentiality and data protection legislation
- > Individuals receiving care or support and others are not unintentionally recorded
- > Informed consent **must** be freely given by everyone involved in the assessment and this **must** be documented

5.3. Using technology to observe and verify learner competency (remote observation) is not allowed if it risks anyone's privacy, dignity, or confidentiality.

5.4. Where permitted by sector or qualification guidelines, technology may be used to remotely observe learners' task-based competencies, such as online meetings or remote support to colleagues. Such evidence **must** be clearly marked and distinguished from other types. It should not be used when there is a requirement for direct interaction with individuals using care or support services or others.

5.5. The remote observation approach in 5.4 is supplementary and does not replace direct observation as the primary assessment method. It should be used to support and enhance planned direct assessments throughout the qualification.

5.6. Centre practices in the use of technology are to be monitored and assured by the AO/B, and this should include centre consideration of the following:

- > Use aligns to adherence to any additional guidance set by the AO/B, the qualification, which is being assessed, any specific sector considerations and associated assessment strategies in place
- > The centre understands the ethical considerations in the use of technology in the sectors and has policies and procedures in place to support use
- > Robust approaches to risk assessment are used to ensure risks to individuals and others are eradicated
- > Centre practices and approaches are guided and supported by thorough standardisation
- > Technology and programmes used are standardised, accessible, safe and reliable
- > If the centre allows assessor and internal quality assurer use of personal devices (e.g. phones, tablets, or personal laptops), then procedures should be in place to ensure data and confidentiality aspects. This includes consideration of where and how devices are accessed to view learner evidence
- > Assessment planning and discussion should capture the relevant and safe opportunities to use technology, along with the approach used to explore and mitigate any risks
- > Evidence recording methods and assessment outcome processes do not increase the risk of any data or confidentiality breaches

- > Assessment outcomes and decisions and outcomes generated by use of technology in the process are reliable, sufficient and traceable
- > All protocols are upheld in the 'observation' context e.g. permissions sought and confirming the purpose of the assessment activity
- > Assessment activities where technology is used, **must** be incorporated in internal and external quality assurance sampling planning and activities
- > Learners are not disadvantaged by the use of technology, and they are aware of its use
- > Learning requirements, support, skill development or other developmental needs of the learner are fully supported throughout the qualification process
- > Technology is used well to genuinely enhance the assessment process, experience, outcomes and digital skills of the learner
- > Practices and lessons learned should be shared by all to support review and continuous improvement

6 Internal quality assurance

6.1. Internal quality assurance is key to ensuring the assessment of evidence is of a consistent and appropriate quality. This process should be supported by robust sampling plans and activity that takes place at beginning, middle and end of the qualification journey and accounts for any potential risks in the assessment process. Those carrying out internal quality assurance **must** be occupationally knowledgeable in the unit they are assuring and be qualified to make quality assurance decisions. It is the responsibility of the AO/B to confirm that those involved in internal quality assurance are suitably qualified for this role.

6.2. If the internal quality assurer is knowledgeable but not yet qualified, a qualified internal quality assurer **must** make final decisions. A clear countersigning strategy should support and confirm decisions by unqualified staff until they are fully qualified.

6.3. Those involved in internal quality assurance **must** have the authority and the resources to monitor the work of assessors. They have a responsibility to highlight and propose ways to address any challenges in the assessment 10 process (e.g. to ensure suitable assessors are assigned to reflect the strengths and needs of particular learners).

6.4. Those carrying out external quality assurance **must** be occupationally knowledgeable and understand the policy and practice context of the qualifications in which they are involved. It is the responsibility of the AO/B to confirm that those involved in external quality assurance are suitably qualified for this role.

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

Definitions

Occupationally competent

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

Occupationally knowledgeable

This means that each assessor and internal quality assurer should possess knowledge and understanding relevant to the specific qualifications and / or units they are assessing or internally quality assuring. This occupational knowledge should be maintained annually through clearly demonstrable continuing learning and professional development. It is crucial that internal quality assurers understand the nature and context of the assessors' work and that of their learners.

Qualified to make assessment decisions

This means that each assessor **must** hold a qualification suitable to support the making of appropriate and consistent assessment decisions. AO/B will determine what will qualify those making assessment decisions according to the unit of skills under assessment. A list of general assessor qualifications is included in Appendix B. Please also refer to additional guidance for qualifications in the relevant nation, where available.

Qualified to make quality assurance decisions

AO/B will determine what qualifies those undertaking internal and external quality assurances to make decisions about that quality assurance. A list of general internal qualification assurance qualifications is included in Appendix B. Please also refer to additional guidance for qualifications in the relevant nation, where available.

Witness testimony

Witness testimony is an account of practice that has been witnessed or experienced by someone other than the assessor and the learner.

Appendix A: Skills for Care and Development partnership website links

[Skills for Care and Development
Northern Ireland Social Care Council](#)
[Social Care Wales](#)
[Skills for Care](#)
[Scottish Social Services Council](#)

Appendix B: Recognised assessor and internal quality assurance qualifications

This list aims to provide an overview of generally recognised qualifications. Please gain additional guidance from the individual nation and AO/B where needed. Please also check and apply CPD/CPL requirements for qualifications held.

Assessor:

- > D32 Assess Candidate Performance and D33 Assess Candidate Using Differing Sources of Evidence
- > A1 Assess Candidate Performance Using a Range of Methods and A2 Assessing Candidates' performance through observation (plus CPD/CPL in line with current L&D9 or L&D9DI)
- > Level 3 Award in Assessing Competence in the Work Environment (for competence / skills learning outcomes only)
- > Level 3 Award in Assessing Vocationally Related Achievement (for knowledge learning outcomes only)
- > Level 3 Certificate in Assessing Vocational Achievement
- > Qualified Teacher Status
- > Level 3 Award in Assessing competence in the work environment
- > Certificate in Education in Post Compulsory Education (PCE)
- > Social Work Post Qualifying Award in Practice Teaching
- > Certificate in Teaching in the Lifelong Learning Sector (CTLTS)
- > Diploma in Teaching in the Lifelong Learning sector (DTLLS)
- > Mentorship and Assessment in Health and Social Care Settings

- > Mentorship in Clinical/Health Care Practice
- > L&D9DI - Assessing workplace competence using Direct and Indirect methods (Scotland)
- > L&D9D - Assessing workplace competence using Direct methods (Scotland)
- > Tutor/Assessor Award Level 3 Awards and Certificate in Assessing the Quality of Assessment
- > Level 4 Awards and Certificates in Assuring the Quality of Assessment
- > Level 3 Award in Education and Training
- > Level 4 Certificate in Education and Training
- > Level 5 Diploma in Education and Training
- > Level 3 Certificates in Assessing Vocational Achievement
- > Specific to Wales: Relevant learning programmes which support practice learning/practice education on social work, they **must** be regulated and approved by Social Care Wales
- > Specific to Scotland: Teaching Qualification for Further Education plus CPD in line with current L&D9D

Internal Quality Assurance:

- > Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice
- > Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice
- > D34 Unit: Internally verify the assessment process
- > V1 Verifiers Award
- > V1 Conduct internal quality assurance of the assessment process (plus CPD/CPL in line with the current L&D11 standard)
- > L&D11- Internally Monitor and Maintain the Quality of Workplace Assessment (Scotland J8RT 04)

Resources

Skills and Education Group Awards provides the following additional resources for this qualification:

- > Purpose Statement
- > Learner Unit Achievement Checklist
- > Learner Summative Reflection – Template
- > Case Study – Template
- > Expert Witness Statement/Testimony – Template
- > Observation Record – Template
- > Oral/Written Questioning – Template
- > Professional Discussion – Template

Practice Assessment Material

Skills and Education Group Awards confirm that there are no practice assessment material for this qualification.

Teaching Strategies and Learning Activities

Centres should adopt a delivery approach which supports the development of all individuals. The aims and aspirations of all the learners, including those with identified special needs or learning difficulties/disabilities, should be considered and appropriate support mechanisms put in place.

Progression Opportunities

Achievement of this qualification will equip learners to hold the role of Registered Manager and also supports progression to higher education as well as the Level 5 Leader in Adult Care apprenticeship.

Centres should be aware that Reasonable Adjustments, which may be permitted for assessment, may in some instances limit a learner's progression into the sector. Centres **must**, therefore, inform learners of any limits their learning difficulty may impose on future progression.

Language

This specification and associated assessment materials are in English only.

Understanding the Units

The units outlined in this specification establish clear assessment expectations. They serve as a valuable guide for conducting assessments and ensuring quality assurance efficiently. Each unit within this specification follows a consistent structure. It is imperative that all Educators, Assessors, Internal Quality Assurers, and other personnel overseeing the qualification familiarise themselves with these units to ensure a comprehensive understanding of the content.

Mandatory Units Group A

Leadership and Management	
Unit Reference	M/651/8644
Level	5
Credit Value	3
Guided Learning (GL)	20 hours
Unit Summary	This unit explores the understanding needed for the application of leadership and management in adult care, including the implementation of current theories. This unit also develops the learner's knowledge and understanding of legislation and statutory requirements influencing practice.
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.4)
The learner will	The learner can
1. Understand leadership and management including regulatory, policy, legal requirements and management theories and styles	1.1 Evaluate the differences between leadership and management 1.2 Explain key regulatory, policy and legal requirements 1.3 Analyse theories of leadership and management and how they can be used in own role 1.4 Analyse the range of different leadership styles 1.5 Evaluate how coaching and mentoring can be used to complement own leadership style
2. Understand leadership and management in adult care	2.1 Evaluate the impact of internal and external drivers on leadership and management in adult care services

	2.2	Assess the role of leadership and management skills in adult care services
	2.3	Examine how to adapt own leadership and management style for: <ul style="list-style-type: none"> > Different situations > Different teams
	2.4	Investigate the interaction between the values and culture of an adult social care organisation and own leadership behaviours

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Guidance notes:

Internal and external: drivers may include, but are not limited to, internal or external policy or strategy changes, changes to the market, organisational cultural changes or challenges.

Adult care services: refers to learner’s own care setting. Different situations: may include the formality of situations, working under different pressures, own role within a particular situation.

Different teams: including, but not limited to, size of team, location of team, culture of team, experiences of teams and resources required to manage different teams.

Coaching and mentoring: including styles and approaches, but not limited to:

- > Self-awareness
- > Situational leadership
- > Directive approach
- > Non-directive approach
- > Blending approaches

Governance and Regulatory Processes	
Unit Reference	R/651/8645
Level	5
Credit Value	5
Guided Learning (GL)	32 hours
Unit Summary	The unit looks at the structure and governance of organisations in adult care, including the inspection process and the impact this has on own service.
Learning Outcomes (1 to 5)	Assessment Criteria (1.1 to 5.6)
The learner will	The learner can
1. Understand legislation and statutory guidance that underpins adult care provision	1.1 Explain current legislation and statutory guidance that applies to all aspects of service provision 1.2 Describe own role, accountability and responsibility in applying legislation and statutory guidance within service provision 1.3 Describe how duty of candour relates to own role and management of the service 1.4 Evaluate the key roles, remits and responsibilities in registered services: <ul style="list-style-type: none"> > The registered manager > The nominated individual > The 'fit and proper person'
2. Understand internal governance arrangements within own organisation	2.1 Analyse internal governance procedures used within own organisation 2.2 Appraise own role in applying, leading, and evaluating own service's governance procedures and agreed ways of working

<p>3. Understand systems and requirements for the regulation of adult care services</p>	<p>3.1 3.2 3.3</p>	<p>Evaluate specific legislation and regulations underpinning the inspection system in England</p> <p>Describe the range of legislation and statutory guidance that support and relate to the inspection process in England</p> <p>Explain the types of service provision which are subject to registration and inspection</p>
<p>4. Understand the inspection process in adult social care</p>	<p>4.1 4.2 4.3 4.4 4.5 4.6</p>	<p>Describe how services are inspected and the role of the regulator</p> <p>Assess the purpose of the inspection system</p> <p>Evaluate the different types of inspection and key themes of the inspection process</p> <p>Explain how the ratings system is used</p> <p>Describe when and how enforcement action can be used</p> <p>Evaluate the ways in which information is requested and collected about the service and used to inform inspection activities</p>
<p>5. Understand the inspection process in own service</p>	<p>5.1 5.2 5.3 5.4 5.5</p>	<p>Explain how the requirements of the regulations are met within own service</p> <p>Assess who needs to be aware of, and involved in, the inspection process</p> <p>Describe the range and types of evidence which can be used to demonstrate the service is meeting requirements</p> <p>Describe ways to work with others before, during and after the inspection process</p> <p>Evaluate ways to address the outcome and impact of an inspection in own service</p>

	5.6	Assess how outcomes of inspection can be used to drive service improvements
<p>Assessment:</p> <p>This unit must be assessed in accordance with Skills for Care & Development assessment principles guidance.</p> <p>This is a knowledge based unit.</p> <p>Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment.</p> <p>Guidance notes:</p> <p>All aspects: relating to all aspects of responsibilities held within own organisation. If the learner is not currently providing regulated activity, then they should explore the formal role of a registered manager. Enforcement: should include civil and criminal.</p> <p>Types of inspection: the different inspections carried out by the regulator within adult social care services.</p> <p>Key themes: the areas looked at during the inspection process.</p> <p>Others: not limited to the local authority teams, safeguarding teams, health professionals, family, relatives and the local integrated care systems.</p>		

Decision Making	
Unit Reference	T/651/8646
Level	5
Credit Value	3
Guided Learning (GL)	24 hours
Unit Summary	This unit explores the understanding and skills needed to make effective decisions.
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.6)
The learner will	The learner can
1. Understand effective decision making	1.1 Explain the different types of decisions required in own role 1.2 Analyse the role of data, information and intelligence in making evidence-based decisions to improve quality 1.3 Evaluate how own and others' values and priorities influence decision making processes 1.4 Describe how to enable others to contribute to the decision making 1.5 Assess the importance of reviewing and evaluating decisions to improve quality
2. Demonstrate effective decision making in own role	2.1 Identify when decisions need to be made 2.2 Gather data, information and intelligence to inform decision making 2.3 Identify a range of potential solutions 2.4 Evaluate potential solutions and draw conclusions

	2.5	Involvement of individuals and others in the decision-making process and the implementation of the outcome
	2.6	Evaluate the decision and the decision making process used

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcome 2 is skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should **not** be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Guidance notes:

Types of decisions: must relate to own role and may include, but are not limited to strategic, tactical, operational, short term and long term.

Others: in this context, others might include:

- > Carers, loved ones, family, friends of those accessing care and support services colleagues and peers
- > Team members
- > Managers and supervisors
- > Professionals from other services, including delivery partners and senior leaders visitors to the work setting
- > Members of the community
- > Volunteers

Business and Resource Management

Unit Reference	Y/651/8647	
Level	5	
Credit Value	5	
Guided Learning (GL)	32 hours	
Unit Summary	The unit will require research into resource management and how this can be done effectively to comply with legislation, policy, and procedures, including researching integrated approaches in health and social care.	
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.4)	
The learner will	The learner can	
1. Understand principles for effective resource management	1.1	Analyse the impact of national and local strategies and priorities on resource planning and management in relation to: <ul style="list-style-type: none"> > Financial resources > Physical resources > Human resources
	1.2	Evaluate the importance of accurate forecasting for resource requirements
	1.3	Assess the value of using assets and resources outside traditional services and in the community
	1.4	Analyse the place of technology as a resource in service delivery and service management
	1.5	Explain the meaning of sustainability in terms of resource management in adult care

	1.6	Evaluate the roles, responsibilities and accountabilities for resource management within the organisation
	1.7	Describe the importance of business continuity planning and the processes available
2. Understand principles of effective human resource management	2.1	Analyse legislation, policy and practices underpinning safe and fair recruitment
	2.2	Evaluate approaches known to improve recruitment and retention of adult care staff
	2.3	Explain recruitment, selection and induction processes in the organisation and own role in them
	2.4	Describe the importance of ensuring employment practices are free from discrimination and harassment
	2.5	Explain how to identify the numbers and patterns of staffing required to provide a person-centred, outcomes-based service
	2.6	Analyse factors that could influence staffing requirements and patterns
	2.7	Explain how to manage staffing patterns and adjust them to meet changing circumstances
	2.8	Evaluate succession and contingency planning in relation to workforce
	2.9	Analyse the organisation's performance management procedures and own role in these
	2.10	Evaluate the organisation's conduct, discipline and grievance procedures and own role in these

<p>3. Understand market provision in adult social care</p>	<p>3.1 3.2 3.3 3.4</p>	<p>Assess how services are commissioned, procured and funded</p> <p>Evaluate current local and national drivers shaping adult care, funding mechanisms and related services gaps in current market provision</p> <p>Analyse how own service aligns with the wider social care landscape and needs of the local population, now and in the future</p> <p>Explain how own service has evolved and will need to keep changing to meet demand for social care services, now and in the future</p>
<p>4. Understand integrated approaches in health and social care</p>	<p>4.1 4.2 4.3 4.4</p>	<p>Assess what is meant by an integrated health and social care system</p> <p>Evaluate the rationale and legislative context for integrated approaches to service provision</p> <p>Analyse local and national initiatives to better integrate health and social care systems and services</p> <p>Measure the impact of more integrated systems and processes on working practices and relationships</p>
<p>Assessment:</p> <p>This unit must be assessed in accordance with Skills for Care & Development assessment principles guidance.</p> <p>This is a knowledge based unit.</p> <p>Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment.</p>		
<p>Guidance notes:</p> <p>Legislation, regulations and guidance: this may include, but is not limited to:</p>		

- > Equality Act 2010
- > Working Time Regulations 1998
- > Care Quality Commission (CQC) regulations
- > Disclosure and Barring Service (DBS) checks
- > Confirming identify and seeking references
- > Employment Rights Bill

Approaches: these may include, but are not limited to:

- > Recruiting people with the right values and behaviours
- > Understanding the local area to inform business planning
- > Innovative strategies to attract candidates in the local community e.g. referral programmes
- > Offering a supportive induction, quality training, career progression routes, good working conditions, rewards, recognition, flexibility and competitive pay rates

Recruitment: this may include but not limited to:

- > International recruitment – requiring compliance with Home Office rules
- > Organisational policies and procedures
- > Legal requirements e.g. Equality Act 2010, Employment Rights Bill and safeguarding/DBS checks
- > Ethical recruitment standards

Factors: factors could include, but are not limited to:

- > Changing care and support needs of individuals
- > Increases/decreases in demand for support services
- > Holiday/festive periods
- > Sickness
- > Weather conditions

Performance management procedures: the policies and procedures used within the service to plan, monitor, develop and improve employees' performance.

Drivers: may include but are not limited to national policies, local initiatives, prevention, integration and personalised care that can influence planned outcomes, priorities and day to day activities within the service.

Wider social care landscape and local population: essential in addressing the current and future needs of the local population. This involves recognising local and national priorities and may include but is not limited to:

- > Prevention
- > Community based support
- > Reducing health inequalities
- > Promotion of personalised care and support
- > Responding to demographic trends
- > Collaboration

Integrated health and social care system: better outcomes for people through a seamless experience. Systems work together in a coordinated way and build support around the individual.

Rationale: Including:

- > Providing person-centred, compassionate care and support in a way that makes sense to the individual accessing services to reflect their lives, needs and wishes
- > The changing patterns of population needs e.g. ageing population, complex care and health needs, financial pressures, widening health inequalities, stalling improvements in life expectancy
- > Prevention and early intervention
- > Move to more community-based practices that breakdown traditional barriers
- > Digital and technology approaches to enhance and improve practices and person-centred care

Local and national initiatives: these may include, but are not limited to:

- > Integrated Care Systems (ICS)
- > Hospital to communities
- > Prevention focused strategies
- > Analogue to digital
- > Primary Care Networks
- > Enhanced Health in Care Homes Framework
- > Ageing Well programme

Working practices and relationships: may include, but are not limited to:

- > Discharge arrangements
- > Integrated assessment and care planning
- > Multi-disciplinary working arrangements
- > Data governance
- > Neighbourhood health agenda
- > Digital data sharing

Team Leadership	
Unit Reference	A/651/8648
Level	5
Credit Value	3
Guided Learning (GL)	20 hours
Unit Summary	The unit allows learners to demonstrate their skills in providing leadership to the team which encompasses all the roles of building a strong team and ensures that the learner is able to manage and develop the team on an ongoing basis.
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.6)
The learner will	The learner can
1. Be able to provide leadership for a team	1.1 Adapt leadership styles to reflect different stages and cycles in the team's development 1.2 Establish trust and accountability within the team 1.3 Build and maintain team's commitment to the service and its values 1.4 Develop, implement and review strategies to support a positive values-based culture in the team 1.5 Demonstrate values and behaviours which recognise and champion diversity, equality, and inclusion within the team
2. Be able to manage teamwork	2.1 Support the participation of team members in agreeing team objectives 2.2 Encourage creativity and innovation in planning how to meet team objectives and agree a team plan

	2.3	Agree roles and responsibilities, taking account of the team’s strengths and development needs
	2.4	Support the team to work towards team objectives
	2.5	Review team objectives and facilitate opportunity for the team to reflect on their progress
	2.6	Provide feedback and recognise progress on team performance

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcomes 1 and 2 are skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Guidance notes:

Stages and cycles: the different stages of team development, for instance ‘forming, storming, norming and performing’. The different cycles teams encounter in their work in adult social care e.g. new team members and changes to working practices.

Values-based: workplace values are the guiding principles that are most important in the service. They help to define the right and wrong ways of working and help to inform decisions and choices.

Team Learning and Development

Unit Reference	D/651/8649	
Level	5	
Credit Value	3	
Guided Learning (GL)	20 hours	
Unit Summary	In this unit the learner will understand principles of learning and professional development in adult care and lead learning and professional development practices.	
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.4)	
The learner will	The learner can	
1. Understand principles of learning and professional development in adult care	1.1	Analyse the range of required and recommended learning and development in adult care
	1.2	Evaluate the differences between learning requirements and continuous professional development
	1.3	Examine the purpose and benefits of workforce planning and development
	1.4	Assess the importance of literacy, numeracy and digital skills in adult care and how to develop these skills of the workforce
	1.5	Evaluate the benefits of: <ul style="list-style-type: none"> > A robust and supportive induction process > Continually improving own and team's knowledge and practice and ways to achieve this
	1.6	Analyse the factors to consider when identifying, planning, selecting and

	1.7	commissioning activities for learning and professional development Scrutinise the importance of reflective practice in improving own and team’s performance and different models that support this
2. Lead learning and professional development practices	2.1	Evaluate available mechanisms and resources that can support learning and professional development in adult care
	2.2	Promote a learning culture within own team
	2.3	Support team members to plan for, achieve and review, their professional development goals
	2.4	Facilitate the development of others to enable effective delegation

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcome 2 is skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Guidance notes:

Learning requirements: may include but are not limited to induction, statutory, mandatory and service specific specialist learning.

Workforce planning and development: workforce planning is an essential part of ensuring that you have the right people with the right attitudes, skills, values and experience providing the care and support your business offers.

Factors: should include potential barriers and constraints.

Available mechanisms and resources: this will include traditional methods used for learning and development and should include advanced approaches with technology within learning and development e.g. remote learning, platforms, e-learning, electronic portfolios.

Learning culture: leading practice which embraces, provides opportunity, and recognises the benefits of learning and professional development.

Supervising Others

Unit Reference	J/651/8650	
Level	5	
Credit Value	3	
Guided Learning (GL)	20 hours	
Unit Summary	In this unit the learner will understand the purpose and practice of professional supervision in adult care settings and be able to provide regular professional supervision.	
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.8)	
The learner will	The learner can	
1. Understand the purpose and practice of professional supervision in adult care settings	1.1	Describe how requirements of legislation, codes of practice and agreed ways of working influence and structure professional supervision requirements in adult care
	1.2	Evaluate the function of professional supervision in adult care
	1.3	Assess different supervision activities and processes which can be used in adult care
	1.4	Analyse how effective supervision should be used to support and protect: <ul style="list-style-type: none"> > The supervisee > Individuals, carers and families
	1.5	Analyse how effective supervision can protect: <ul style="list-style-type: none"> > The supervisor and organisation
	1.6	Evaluate why the well-being of the supervisee should be included within

	<p>effective supervision and supportive practices, and ways to enable and promote this</p> <p>1.7 Describe how external and internal factors influence practice and can be used within professional supervision objectives</p> <p>1.8 Explain how supervision can be used alongside appraisal and professional development processes to:</p> <ul style="list-style-type: none"> > Develop, improve and enhance performance of the supervisee > Support aspirations of the supervisee <p>1.9 Evaluate the factors which can result in a power imbalance in professional supervision and how to address them</p> <p>1.10 Scrutinise ways to address challenges arising during professional supervision</p>
<p>2. Provide regular professional supervision</p>	<p>2.1 Establish understanding and agreement with the supervisee on key areas such as:</p> <ul style="list-style-type: none"> > The purpose, frequency and location of supervision activities > Actions which can support preparation for supervision > Sources of data and evidence that can be used to inform supervision > Confidentiality, boundaries, roles and accountability <p>2.2 Use information from a range of sources to build an understanding of the supervisee's performance</p> <p>2.3 Support the supervisee to review their own well-being and the range of strategies and support available to them</p> <p>2.4 Support the supervisee to reflect on and explore methods of addressing different situations in their work</p>

	<p>2.5 Provide constructive feedback to the supervisee that can be used to improve and develop performance</p> <p>2.6 Support the supervisee to identify, plan and achieve their own learning and professional development needs</p> <p>2.7 Agree, review and revise targets to meet the objectives of the work setting and individual objectives of the supervisee</p> <p>2.8 Record and store outcomes of supervision activities in line with agreed ways of working</p>
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Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcome 2 is skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Guidance notes:

Legislation: should include regulations where appropriate.

Function: must include the principles, scope and purpose of professional supervision.

Supervision activities and processes: will include formal and informal ways supervision can be planned and provided in the environment e.g. group, individual, team, observations of competencies, validating knowledge, shadowing activities, induction, learning processes and clinical supervision where required.

Well-being: well-being is a broad concept referring to a person's quality of life considering health, happiness and comfort. It may include aspects of social, emotional, cultural, spiritual, intellectual, economic, physical and mental well-being.

External and internal factors: external factors may include but are not limited to: updated national policy or local procedures, emerging best practice, societal movements and campaigns. Internal factors may include but are not limited to: lessons learnt/learning reviews, concerns or complaints, skills development/training, emerging needs of individuals accessing services.

Professional development processes: may include personal development plans, learning logs, training and supporting the learner including embedding the Care Workforce Pathway.

Strategies: strategies may include those which are personal to the worker. Strategies should include those that enable the worker to maintain their well-being as well as strategies to implement if indicators of deterioration are recognised.

Support offers: the range should include offers available inside and outside the workplace. For example:

- > Internal: supervision, employee assistance scheme, mentor or buddying systems
- > External: self-help tools, apps and websites, local groups and networks

Different situations: may include challenges the supervisee or team face in their work.

Objectives of the work setting: should include the range of skills required to meet people's needs.

Safeguarding	
Unit Reference	K/651/8651
Level	5
Credit Value	3
Guided Learning (GL)	25 hours
Unit Summary	This unit looks at safeguarding within adult care settings. Learners will develop their knowledge, skills and understanding regarding the vital role played by safeguarding in an adult care service.
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.8)
The learner will	The learner can
1. Understand requirements for safeguarding in adult care	1.1 Evaluate current legislative framework and national guidance that underpins adult safeguarding 1.2 Assess local systems, procedures and agencies relating to adult safeguarding and own role within these 1.3 Assess how national and local guidelines, policies and procedures for safeguarding affect: <ul style="list-style-type: none"> > Day to day work with individuals > Own responsibilities towards individuals, their families and carers as well as team members 1.4 Evaluate how investigations into serious failures to uphold individuals' rights to live free from abuse and neglect have impacted on national policy 1.5 Analyse legal provisions in relation to whistleblowing and information sharing

	<p>1.6</p> <p>1.7</p> <p>1.8</p> <p>1.9</p>	<p>Evaluate own role in leading a response to suspected or disclosed abuse or neglect</p> <p>Explain when to engage others in relation to responding to adult safeguarding concerns</p> <p>Assess issues relating to consent to share information and own responsibilities to share information about suspicions or disclosures of abuse or neglect</p> <p>Assess local systems, procedures and agencies relating to children’s safeguarding and own role within these</p>
<p>2. Be able to lead the implementation of practices, policies and procedures to support safeguarding in adult care</p>	<p>2.1</p> <p>2.2</p> <p>2.3</p> <p>2.4</p> <p>2.5</p> <p>2.6</p> <p>2.7</p>	<p>Ensure that all policies, procedures, systems and processes used in the work setting comply with legal requirements and local and national guidance</p> <p>Embed safeguarding principles throughout all practices, policies and procedures</p> <p>Support team members to develop the knowledge and skills they need to safeguard adults at risk</p> <p>Ensure team members understand their role in responding to concerns about the safeguarding of adults</p> <p>Ensure team members understand their role in responding to concerns about the safeguarding of a child or young person</p> <p>Plan and implement the review and revision of person-centred practices, policies and procedures to ensure continuous improvement in safeguarding of adults at risk of abuse or neglect</p> <p>Embed practices that encourage and empower adults at risk, and those who are important to them, to share concerns</p>

	2.8	Follow agreed protocols to participate in inter-agency, joint or integrated working in order to achieve the best outcomes for adults at risk
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Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcome 2 is skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should **not** be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the 28 awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Guidance notes:

Leading a response: this would include, but is not limited to:

- > Safety and well-being of the individual and others where applicable
- > Own actions
- > Own role in implementing, following, and engaging others in policies and procedures
- > Own role in ensuring the individuals, (and others where applicable), is kept informed and involved

Others: in this context, this refers to those people who may need to be involved in a response, for instance:

- > Individuals accessing care and support services
- > Carers, loved ones, family, friends of those accessing care and support services

- > Team members
- > Managers and supervisors
- > Professionals from other services

Review: this might consider:

- > Outcomes from safeguarding reviews and investigations
- > Current guidance arising from serious case reviews and its relevance to own organisation
- > Resolution and recovery of the adult at risk

And might include reviewing:

- > Person-centred practices, policies and procedures
- > When a response is required for external influences which impact internal practices, e.g. a pandemic or current reports published by Care Quality Commission (CQC)
- > Communication and support systems for staff and others within own organisation
- > How own team/service liaises with others and/or external organisations

Mental Capacity	
Unit Reference	L/651/8652
Level	5
Credit Value	3
Guided Learning (GL)	25 hours
Unit Summary	In this unit learners will have to research mental capacity so that they can develop an understanding of the importance of identifying this and how to promote services that protect people who are unable to make decisions for themselves.
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.7)
The learner will	The learner can
1. Understanding mental capacity and consent	1.1 Assess key provisions of legislation, codes of practice and policy regarding mental capacity and how these relate to the service 1.2 Evaluate own role in applying and upholding key principles of mental capacity legislation and code of practice 1.3 Explain the support available when mental capacity needs to be assessed and how to access this support 1.4 Evaluate own role in the assessment of risk in situations where an individual's capacity is a concern 1.5 Assess practices which support individuals' ability to provide valid consent 1.6 Evaluate own and team members' development needs relating to mental capacity and their practice

2. Understand the use and impact of restrictive practices	2.1	Assess what is meant by 'restrictive practices', 'restraint' and 'deprivation of liberty' and how they apply to practices within own work setting
	2.2	Analyse the legal and ethical considerations of restricting an individual's rights and freedoms
	2.3	Evaluate own responsibilities in relation to restrictive practices and deprivations of liberty
	2.4	Assess appropriate and proportionate responses to restrictions on an individual's rights and freedoms
	2.5	Explain the potential impacts of restrictive practices on individuals and others
	2.6	Describe how person-centred, outcomes-based practices can mitigate the use of restrictive practices
	2.7	Assess own and team members' development needs relating to the use of restrictive practices

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Guidance notes:

Legislation, codes of practice and policy: including, but not limited to:

- > Mental Capacity (Amendment) Act 2019
- > Human Rights Act 1998
- > Safeguarding Adults

- > Dignity in Care
- > Care Act 2014
- > Making Safeguarding Personal

Individual: a person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Development needs: including but not limited to: best Interest decisions, decision-maker responsibilities, maximising capacity and their role in assessment.

Restrictive practices: includes any practice or intervention that limits the rights or freedoms of an individual.

Restraint: including, but not limited to, covert medication (sometimes referred to as 'hidden restraint')

Legal and ethical: including but not limited to:

- > Statutory principles of the Mental Capacity Act 2005
- > Duty of Care
- > Individuals' wishes
- > Advanced decisions
- > Decision-making authorities - Lasting Power of Attorney or Court of Protection request
- > Best interest decisions

Own responsibilities: to include how to apply for an authorisation.

Appropriate and proportionate: appropriate - necessary and justified, proportionate - the least restrictive option possible to meet the intended outcome.

Learners may include key principles, but are not limited to:

- > Rights-based approach
- > Proportionality
- > Justification and evidence
- > Review and monitoring
- > Leadership
- > Accountability
- > Person centred care

Impacts: may include, but are not limited to, impacts on safety, dignity, relationships and well-being of individuals. Learners may also wish to consider the impact on team members responsible for implementing restrictions.

Others: in this context, others refers to adult care workers who are required to restrict an individual's rights or freedoms.

Partnerships	
Unit Reference	M/651/8653
Level	5
Credit Value	4
Guided Learning (GL)	35 hours
Unit Summary	Learners will have to research mental capacity so that they can develop an understanding of the importance of identifying this and how to promote services that protect people who are unable to make decisions for themselves. The unit also looks at restrictive practices and learners will have to understand the legal and ethical implications of these.
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.5)
The learner will	The learner can
1. Understand the context of relationships and partnership working	<p>1.1 Evaluate how legislation and regulation influence working relationships with others</p> <p>1.2 Assess how relationships with individuals and carers underpin person centred practice and affect the achievement of positive outcomes for individuals and their families</p> <p>1.3 Analyse how networking and working collaboratively with other agencies and community groups brings benefits both for those using the service and for the sustainability and reach of the organisation</p> <p>1.4 Evaluate how integrated working with other agencies delivers better outcomes for individuals and the place of systems leadership in this</p> <p>1.5 Analyse the methods, protocols and limitations of using different communication</p>

		<p>methods to forge relationships and partnerships with other professionals and agencies</p> <p>1.6 Explain the features of effective, collaborative partnership working across agencies and ways to overcome barriers</p> <p>1.7 Analyse own role and responsibilities in establishing positive relationships within and beyond the organisation</p>
2. Be able to lead effective relationships with individuals, carers and families	<p>2.1</p> <p>2.2</p>	<p>Model open, respectful and supportive relationships with individuals, carers and their families</p> <p>Embed co-production within day to day practices of team</p>
3. Be able to manage working relationships with colleagues in own setting to achieve positive outcomes for individuals	<p>3.1</p> <p>3.2</p> <p>3.3</p> <p>3.4</p> <p>3.5</p>	<p>Develop systems and procedures to facilitate effective working relationships with colleagues in the organisation</p> <p>Develop and agree common objectives when working with colleagues</p> <p>Implement systems and practices that allow colleagues to make appropriate contributions using their specific expertise</p> <p>Deal constructively with conflicts or dilemmas that arise</p> <p>Evaluate own working relationships with colleagues</p>
4. Be able to work in partnerships with professionals and other agencies	<p>4.1</p> <p>4.2</p>	<p>Negotiate with professionals in other agencies to agree objectives, roles and responsibilities, procedures and ways of working for a specific task or area of work</p> <p>Use agreed ways of working to carry out own role and support others to carry out their responsibilities</p>

	4.3	Deal constructively with any challenges in ways that promote change, any poor practice or failure to work in agreed ways
	4.4	Implement and use communication and recording systems that comply with current legislation for information sharing between agencies
	4.5	Evaluate the effectiveness of partnership work and the processes that underpin it and seek agreement for improvements

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcomes 2, 3 and 4 are skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should **not** be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording and storage protocols.

Guidance notes:

Legislation: Learners should consider how different legislation relates to and influences working with others. This may include but is not limited to:

- > Care Act 2014
- > Mental Capacity (Amendment) Act 2019
- > Health and Social Care Act 2012
- > General Data Protection Regulations

- > Data Security and Protection
- > Subject Access Requests
- > Data Control
- > Sharing information
- > Safeguarding

Regulation: regulations underpinning the adult social care inspection system in England.

Others: in this context, others may include agencies and other organisations.

Individuals: people accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Carers: are people who provide unpaid support to a partner, family member, friend or neighbour who could not manage without this help. This is distinct from a care worker, who is paid to care for people.

Positive outcomes: an 'outcome' that refers to individuals' aims or objectives – the things individuals want to achieve or need to happen. For example, continuing to live at home or being able to go out and about.

Working collaboratively/collaborative: working together and focusing on building respectful and positive outcomes with other agencies, professionals and community groups to improve the quality and consistency of care, whilst remaining focused on own desired outcomes, needs and agenda.

Systems leadership: seeks to affect change for good across interconnecting systems e.g. health and social care, through leadership and collaboration that extends the usual limits of resources and responsibility.

Different communication methods: learners **must** consider a range of communication methods including digital communications.

Features: features should include, but are not limited to:

- > Building transparency and sharing information openly and honestly (in line with regulations)
- > A diversity of skills and perspectives
- > Creating psychological safety within partnerships and teams which includes a willingness to cooperate and an ability to openly disagree
- > An ability to understand and prioritise the needs of other partners, without compromising on your own desired outcomes

Co-production: an equal relationship between individuals accessing a service and the people responsible for the service. They work together to decide the best way to design and deliver services and implement those decisions together.

Co-production recognises that people who use social care services (and their families) have knowledge and experiences that can be used to help make services better, not only for themselves but for other people who access social care.

Communication and recording systems: learners **must** consider legislation relating to communication and recording systems that complies with current information sharing between agencies and should include but is not limited to:

- > General Data Protection Regulation (GDPR)
- > Data Protection Act 2018
- > Formal sharing agreements
- > Caldicott principles

Comments and Complaints

Unit Reference	R/651/8654	
Level	5	
Credit Value	3	
Guided Learning (GL)	22 hours	
Unit Summary	In this unit learners will also have to understand how to manage concerns and complaints and use these to improve the service provided.	
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.4)	
The learner will	The learner can	
1. Understand the management of comments and complaints	1.1	Analyse the relationship between the management of comments and complaints, risk management and safeguarding
	1.2	Explain regulatory requirements, codes of practice and guidance for managing comments and complaints
	1.3	Assess why those using services and others may be reluctant to raise comments or make complaints
	1.4	Evaluate attitudes and approaches that ensure comments and complaints can prompt continuous improvement of the service
2. Be able to lead practice in listening and responding to comments and complaints	2.1	Support team members to understand systems and procedures that ensure individuals' comments and complaints are listened and responded to
	2.2	Ensure accessible information and support is in place to enable, empower and encourage individuals and others to raise and follow up on comments and complaints

	2.3	Implement open and transparent systems and procedures that compassionately address and respond to comments and complaints within agreed time frames
	2.4	Learn from comments and complaints to drive improvements to the service

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcome 2 is skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording and storage protocols.

Guidance notes:

No guidance notes included.

Leading the Vision	
Unit Reference	T/651/8655
Level	5
Credit Value	3
Guided Learning (GL)	22 hours
Unit Summary	This unit looks at the importance of organisations having a vision, and how learners can develop this and support their team and stakeholders to promote and deliver this.
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.4)
The learner will	The learner can
1. Understand how to develop a vision for the service	1.1 Assess own role in developing a vision for the service 1.2 Evaluate how the vision, and future of the service, may be affected by a range of factors 1.3 Analyse how to ensure the vision and future direction of the service remains compatible with internal aspirations of the service and the external adult care system
2. Be able to lead commitment and implementation of the vision and future direction of the service	2.1 Build support for the vision and future direction of the service and ensure it is shared and owned by those who will be implementing and communicating it 2.2 Support stakeholders within and beyond the organisation to be aware of the vision and the impact it will have on them 2.3 Create a plan to implement the vision and future direction of the service 2.4 Review and monitor stages of the plan, adapting approaches where needed

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcome 2 is skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should **not** be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Guidance notes:

Adult care system: the local and national systems which support and also integrate the provision of adult social care.

Continuous Improvement

Unit Reference	Y/651/8656	
Level	5	
Credit Value	4	
Guided Learning (GL)	25 hours	
Unit Summary	<p>In this unit learners will have to demonstrate their skills in leading their team to continually improve their practices and achieve positive outcomes which are based on person-centred approaches. Learners, as managers, will have to understand the change process and how to manage change effectively.</p>	
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.4)	
The learner will	The learner can	
1. Understand continuous quality improvement in adult social care	1.1	Explain how to use continuous quality improvement tools, techniques and approaches to meet regulatory and best practice guidance requirements
	1.2	Evaluate the potential signs or indicators of poor practices
	1.3	Assess how quality assurance practices inform quality improvement activities
	1.4	Analyse how governance, audit processes and compliance activity can support person-centred, outcome-based practices
2. Be able to lead continuous improvement in practice	2.1	Monitor and evaluate progress towards the achievement of positive outcomes and the implementation of person-centred practice
	2.2	Create opportunities for individuals and others to provide feedback on their experiences of the service

	2.3	Listen, respond to, and use the views of individuals and others
	2.4	Use evidence-based research to identify best practice in outcomes based and person-centred practice
	2.5	Use digital approaches and technology to improve and enhance outcomes in person centred practice
	2.6	Identify and act on lessons learned from incidents and events
	2.7	Review the extent to which systems, processes and practice facilitate positive outcomes for individuals
	2.8	Plan for and lead the implementation of improvements to systems, processes and practice
3. Be able to lead a culture that supports innovation and change to improve outcomes for individuals	3.1	Evaluate the achievement of person-centred outcomes to identify where improvements could be made
	3.2	Work with others to identify opportunities for service improvement through transformation and innovation
	3.3	Recognise and utilise the expertise of others when driving innovation, improvement and change
4. Understand how to implement effective change	4.1	Evaluate the processes and models of best practice in 'change management'
	4.2	Assess the tools available and skills needed to inspire change, development and innovation across the service
	4.3	Analyse the range of external drivers for change and how these impact on the service

	4.4	Explain success factors and barriers to implementing effective change
<p>Assessment:</p> <p>This unit must be assessed in accordance with Skills for Care & Development assessment principles guidance.</p> <p>This is a knowledge and skill-based unit.</p> <p>Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment.</p> <p>Learning Outcomes 2 and 3 are skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.</p> <p>It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording and storage protocols.</p>		
<p>Guidance notes:</p> <p>Individuals: people accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.</p> <p>Others: in this context, others might include:</p> <ul style="list-style-type: none"> > Carers, loved ones, family, friends of those accessing care and support services colleagues and peers > Team members > Managers and supervisors > Professionals from other services > Visitors to the work setting > Members of the community > Volunteers 		

Digital approaches and technology: these technologies help ensure care is tailored, responsive and promotes choice, control and well-being for the individuals.

Examples of digital technologies could include but are not limited to:

- > Digital care plans
- > Video calling for family involvement
- > Medication management apps
- > Voice activated technology
- > Outcome tracking tools
- > Accessible communication tools
- > Technology to support independence.

Processes: governance, audit processes and compliance activity. Success factors: how outcomes are measured because of change.

Effective Communication

Unit Reference	A/651/8657	
Level	5	
Credit Value	4	
Guided Learning (GL)	25 hours	
Unit Summary	<p>In this unit learners will know how to use communication skills to achieve positive interactions and how to manage and resolve conflict. The learner will also develop communication practices that promote positive outcomes.</p>	
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.3)	
The learner will	The learner can	
1. Know how to use communication skills to achieve positive interactions	1.1	Evaluate different communication skills, methods and models and the circumstances they may be most appropriately used in
	1.2	Explain how to achieve maximum impact, by using a range of appropriate communication skills and methods
	1.3	Analyse how communication skills underpin: <ul style="list-style-type: none"> > Achievement of positive outcomes for individuals and others > The leadership and management of teams > Sustainable relationships and partnerships
2. Know how to manage and resolve conflict	2.1	Assess the models of conflict management and conflict resolution
	2.2	Evaluate factors that can cause friction and conflict within the workplace

	2.3	Analyse skills that underpin conflict management and conflict resolution techniques
3. Be able to communicate effectively with others	3.1	Demonstrate a range of effective communication styles, methods and skills
	3.2	Apply communication skills appropriately in relation to message and audience for maximum impact
	3.3	Adapt communication style in response to the emotional context and communication style of others
	3.4	Identify and overcome barriers to communication with a range of people
4. Develop communication practices that promote positive outcomes	4.1	Monitor and evaluate the effectiveness of both internal and external communication systems and practices used in the workplace
	4.2	Monitor and evaluate the effectiveness of communication practices to support positive outcomes for individuals
	4.3	Propose improvements to communication systems and practices and lead their implementation

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcomes 3 and 4 are skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should **not** be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Guidance notes:

Communication skills, methods and models: **must** include a range of skills methods and models including digital. In context this may include but is not limited to:

- > Skills – Active listening, open questioning and empathy
- > Methods – verbal, non-verbal, written, digital
- > Models – Tuckman’s stages of group development, transactional analysis, the Shannon-Weaver model

Individual: a person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Others: in this context, others may include:

- > Individuals accessing care and support services
- > Carers, loved ones, family, friends of those accessing care and support services
- > Team members
- > Colleagues and peers
- > Managers and supervisors
- > Professionals from other services
- > Visitors to the work setting
- > Members of the community
- > Volunteers

Relationships and partnerships: may include those involved in care service provisions e.g. networks, communities and other professionals and organisations.

Communication systems: Learners **must** include manual and electronic systems.

Handling Information

Unit Reference	D/651/8658	
Level	5	
Credit Value	3	
Guided Learning (GL)	22 hours	
Unit Summary	In this unit learners will also have to research information management systems to ensure they remain effective and comply with legal and ethical requirements.	
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.3)	
The learner will	The learner can	
1. Understand effective information management	1.1	Analyse own role and responsibilities in effective information management and in supporting others to effectively handle information
	1.2	Explain how to respond to a data breach, including reporting procedures
	1.3	Assess how to initiate service's business continuity plan and relevance to data and cyber security
2. Be able to implement systems for effective information management	2.1	Lead the implementation of policies and systems for effective information management to meet legal and ethical requirements
	2.2	Lead practice to address legal and/or ethical conflicts that arise between maintaining confidentiality and sharing information
	2.3	Identify the team's training needs in relation to handling information and implement a plan to address these needs

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcome 2 is skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should **not** be planned and used as the primary approach. Safe and reliable approaches to use remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Guidance notes:

Supporting others: in this context: supporting others to understand, apply and maintain high standards when handling data, particularly sensitive and confidential information. May include but is not limited to:

- > Modelling best practice
- > Supporting and developing others
- > Meeting requirements of the Data Security and Protection Toolkit (DSPT)
- > Digital leadership
- > Preventative approaches

Effective information management: effective information management will include consideration of:

- > Privacy notices
- > Transparency information
- > Data and cyber security
- > How devices are secured
- > Confidentiality, availability and integrity of records/information including digital records
- > Reducing the risk of data breaches

Legal and ethical:

- > General Data Protection Regulations
- > Data security and protection
- > Ethical and secure use of monitoring of Artificial Intelligence (AI)
- > Subject access requests
- > Care Quality Commission (CQC) regulations
- > Data control
- > Sharing information
- > Safeguarding

Leading Person-Centred Practice

Unit Reference	F/651/8659	
Level	5	
Credit Value	6	
Guided Learning (GL)	40 hours	
Unit Summary	<p>This unit looks at person-centred, outcome-based practices and learners will be required to research and understand the importance of these and how they can implement them within their workplace to ensure that the people who use the service are treated appropriately. Learners will have to look at promoting health and well-being whilst recognising that individual people have the right to take risks in everyday life and to form meaningful relationships.</p>	
Learning Outcomes (1 to 7)	Assessment Criteria (1.1 to 7.3)	
The learner will	The learner can	
1. Understand person-centred, outcomes-based practice	1.1	Analyse the features, principles, drivers, and values of: <ul style="list-style-type: none"> > Strength-based approaches > Co-production > Person-centred practice > Active participation > Outcomes-based practice
	1.2	Evaluate the relationship between strengths-based approaches, co-production and person-centred practice on outcomes-based practices, and the individuals' health and well-being, independence, choice and control
2. Understand the value of person-centred practice in partnership working to enabling individuals to	2.1	Assess the role of partnerships, collaboration and co-production with individuals and others in enabling

<p>achieve their desired outcomes</p>	<p>2.2 2.3</p>	<p>individuals to achieve their desired outcomes</p> <p>Evaluate own service's role in enabling individuals to build and maintain relationships and connections to their community</p> <p>Assess how integrated service provision that crosses traditional boundaries achieves better outcomes for individuals</p>
<p>3. Be able to lead practice to facilitate positive outcomes for individuals through person-centred practice</p>	<p>3.1 3.2 3.3 3.4 3.5</p>	<p>Develop and implement a plan, to ensure team members have the training and development they need, to support individuals in person-centred ways, to achieve individuals' desired outcomes</p> <p>Support and develop team members to work in partnership with individuals and others and to recognise and respond to individuals' changing strengths, needs and preferences</p> <p>Support and develop others to apply person-centred approaches in complex situations, to ensure positive outcomes for individuals and those important to them</p> <p>Facilitate the development and review of individuals' care and support, ensuring individuals and others are actively involved and that plans and activities reflect individuals' preferences, wishes, strengths and needs</p> <p>Manage resources in ways that:</p> <ul style="list-style-type: none"> > Support individuals to make choices about their health and well-being, and to achieve positive outcomes > Provide reasonable adjustments to enable individuals to access care and support

	3.6	<p>Implement systems and processes for recording:</p> <ul style="list-style-type: none"> > Identification, progress towards and achievement of individuals desired outcomes > The implementation of person-centred practice
4. Understand the role of relationships in promoting health and well-being	4.1	Explain the importance of proactive approaches in supporting individuals to build and maintain relationships
	4.2	Assess how open, proactive cultures that support individuals' rights to have the relationships they choose can reduce or minimise risks
	4.3	Analyse the range and types of support an individual may need to maintain and build relationships, and when external services may be required
5. Be able to lead practice in recognising individuals' relationships	5.1	Develop approaches which recognise individuals' sexuality and relationship needs
	5.2	Promote an open, proactive culture where individuals and others feel confident to discuss sexuality, relationships and protection
	5.3	Ensure individuals and others have access to support, information and advice about relationships and sexuality
6. Understand positive risk-taking in the context of supporting individuals	6.1	Explain how positive risk-taking can contribute to the achievement of positive outcomes for individuals
	6.2	Assess the impact of a risk-averse culture on person centred practice and the well-being of individuals

	6.3	Evaluate the considerations which need to be applied in the management of positive risk-taking
	6.4	Analyse how supporting others to balance risks and rights promotes person-centred practices
7. Be able to lead the implementation of practices, policies and procedures to manage risk and positive risk-taking	7.1	Lead a culture which recognises the benefits of positive risk taking in person-centred practice and the well-being of individuals
	7.2	Facilitate a person-centred approach in the management of risks
	7.3	Evaluate own and others' practice in leading a balanced approach to risk taking

Assessment:

This unit **must** be assessed in accordance with the Skills for Care Assessment Principles.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcomes 3, 5 and 7 are skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should **not** be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Guidance notes:

Strengths-based approaches: also referred to as 'asset-based approaches'. This approach focuses on individuals' strengths, resources and what they are able to do themselves to keep well and maintain independence.

Person-centred practice: an approach that sees the individual accessing social care services as an equal partner in their care and support and who is at the centre of all decisions relevant to them.

Active participation: a way of working that recognises an individual's right to participate in the activities and relationships of everyday life as independently as possible; the individual is regarded as an active partner in their own care or support, rather than a passive recipient.

Outcome-based practice: an 'outcome' refers to individuals' aims or objectives – the things individuals want to achieve or need to happen. Outcomes-based practice focuses on supporting individuals to achieve the outcomes most important to them and offers innovative approaches to enable this.

Partnerships: working with the individual, networks, communities and other professionals and organisations.

Collaboration: working with other partners, understanding and prioritising their needs and establishing mutually beneficial and respectful relationships, whilst remaining focused on own desired outcomes, needs and agenda.

Co-production: an equal relationship between individuals accessing a service and the people responsible for the service. They work together to decide the best way to design and deliver services and implement those decisions together. Co-production recognises that people who use social care services, (and their families), have knowledge and experiences that can be used to help make services better, not only for themselves but for other people who access social care.

Individuals: the person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Others: in this context, this refers to everyone a worker is likely to come in to contact with, including:

- > Carers, loved ones, family, friends of those accessing care and support services colleagues and peers
- > Team members
- > Managers and supervisors
- > Professionals from other services

- > Visitors to the work setting
- > Members of the community
- > Volunteers

Relationships: learners should consider the range of relationships important to individuals they are supporting. Consideration should go beyond immediate family and next of kin, and may include partners/spouses, extended family, friends, pets, neighbours, people in the community and other professionals. Learners should consider intimacy, sexuality and sexual relationships.

Community: may include but is not limited to how the individual is supported to engage with and access their local community, i.e. social and recreational activities, transport, leisure services, spiritual and cultural services and support, hobbies, education, housing provision and voluntary activities. For some individuals, their community will be very close to home, for others it will be much wider.

Integrated service provision: joined up, coordinated care and support that is planned and organised around the individual's needs, preferences and aspirations. It focuses on early intervention and preventative care. Bringing together health, social care, housing, education and other community services.

Considerations: including, but not limited to mental capacity, safeguarding, individuals' rights, duty of care.

Health and Well-being	
Unit Reference	K/651/8660
Level	5
Credit Value	3
Guided Learning (GL)	22 hours
Unit Summary	In this unit learners will lead a culture that promotes individuals' well-being and independence in all aspects of day-to-day practice. Learners will also need to understand the importance of well-being and their own role in promoting this for others.
Learning Outcomes (1 to 3)	Assessment Criteria (1.1 to 3.3)
The learner will	The learner can
1. Be able to lead a culture that promotes individuals' well-being and independence in all aspects of day-to-day practice	1.1 Facilitate a culture: <ul style="list-style-type: none"> > Where individuals' histories, preferences, wishes, needs and strengths are prioritised, recognised, respected and responded to > Which enables individuals to lead full and meaningful lives connected to those important to them and to their communities > Which enables individuals and those important to them to influence and co-design how care and support services are provided
2. Understand the importance of promoting prevention and the individual's health and well-being	2.1 Assess the range of factors that may influence an individual's health and well-being 2.2 Evaluate own role, and role of others, in supporting prevention, monitoring, assessing and promoting individuals' well-being

	2.3	Analyse own role in providing sufficient training, support and supervision to enable others to monitor the individual's health and well-being
	2.4	Explain how to ensure lines of accountability and responsibility are understood for delegated healthcare tasks
3. Be able to lead practice in promoting prevention and protecting individual health and well-being	3.1	<p>Support others to:</p> <ul style="list-style-type: none"> > Meet identified health and well-being needs > Monitor, and assess changes to, individuals' health and well-being using appropriate tools > Understand the concept of living and ageing well > Access preventative healthcare advice, care and screening > Understand the importance of early identification of deterioration in individuals' health and well-being > Record and respond to assessments and observations of individuals' health and well-being <p>3.2 Implement protocols for involving others in response to changes in individuals' health and well-being</p> <p>3.3 Work in partnership with individuals, healthcare professionals and others to agree roles and responsibilities in achieving individuals' healthcare and well-being outcomes</p>
<p>Assessment:</p> <p>This unit must be assessed in accordance with the Skills for Care Assessment Principles.</p> <p>This is a knowledge and skill-based unit.</p>		

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcomes 1 and 3 are skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should **not** be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols

Guidance notes:

Individuals: the person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Those important to them: may include but is not limited to those the individual chooses to be involved in their life, e.g. families, carers and advocates.

Communities: may include but is not limited to how the individual is supported to engage with and access their local community, i.e. social and recreational activities, transport, leisure services, spiritual and cultural services and support, hobbies, education, housing provision and voluntary activities. For some individuals, their community will be very close to home, for others it will be much wider.

Others: in this context, others could refer to:

- > Individuals accessing care and support services
- > Carers, loved ones, family, friends of those accessing care and support services team members
- > Colleagues and peers
- > Advocates
- > Managers and supervisors
- > Professionals from other services
- > Visitors to the work setting
- > Members of the community
- > Volunteers

Monitoring: may include but not limited to:

- > Staff training to recognise the early signs of change
- > Oversee appropriate monitoring tools
- > Up to date assessments
- > Referrals to health care professionals
- > Maintain a culture of person-centred care
- > Proactive support
- > Access to social prescribing

Assessing: involves using structured tools to evaluate an individual's current health and risks. Assessment **must** also include the individual's own views and preferences, involving families or advocates where appropriate.

Promoting: involves being a key role in shaping a culture where well-being is actively supported – through appropriate activities, healthy routines, emotional support, good nutrition and safe environments.

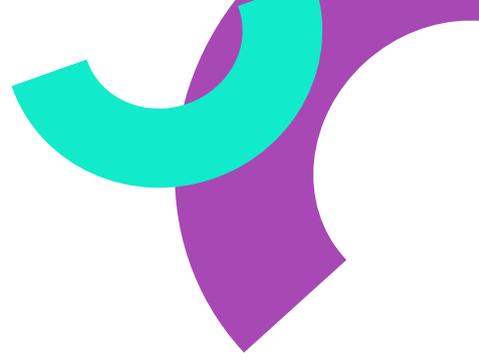
Factors: factors affecting health and well-being will be different for different people and the local population, health and care needs should also be considered. Learners should show consideration for environmental, physical, social and psychological factors.

Prevention: in this context it involves leading a proactive, preventative approach to health and care.

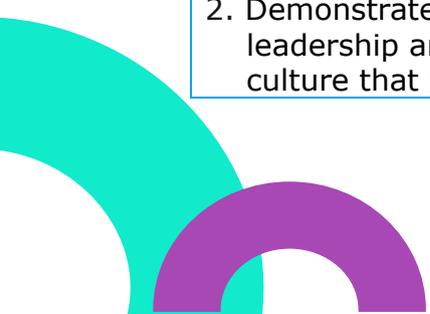
Appropriate tools: this involves using a range of tools that support evidence based, decision making and early intervention. This could include but is not limited to:

- > Water low score
- > Malnutrition Universal Screening Tool (MUST)
- > Mood and well-being charts
- > Behaviour monitoring tools
- > AI-Driven monitoring systems
- > Lifestyle monitoring technologies
- > Early indicator monitoring tools
- > SBARD (Situation, Background, Assessment, Recommendation, Decision)
- > RESTORE2
- > Digital Social Care Records (DSCRs)
- > Quality and outcomes frameworks
- > Multidisciplinary meeting notes and communication logs

Partnership: could include but is not limited to national and local support and initiatives e.g. integrated care systems and neighbourhood health agendas and services.



Equality, Diversity, Inclusion and Human Rights	
Unit Reference	L/651/8661
Level	5
Credit Value	3
Guided Learning (GL)	25 hours
Unit Summary	In this unit learners will have to ensure that they fully understand equality, diversity, inclusion and human rights and that they are able to promote a culture within their organisation which promotes and celebrates these.
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.5)
The learner will	The learner can
1. Understand equality, diversity, inclusion, and human rights	1.1 Evaluate the legislation underpinning equality, diversity, inclusion and human rights 1.2 Analyse the societal, and historical influences underpinning equality, diversity, inclusion and human rights 1.3 Analyse the impact of legal, societal and historical influencers on own role in promoting a culture that values equality, diversity, inclusion and human rights 1.4 Explain the impact of discriminatory or closed cultures on individuals and others 1.5 Evaluate how own and others' values, beliefs and experience can impact practices and behaviours relating to equality, diversity, inclusion and human rights
2. Demonstrate inclusive leadership and lead a culture that promotes,	2.1 Evaluate own and others' ability to positively respond to peoples' differences



values and celebrates equality, diversity, inclusion, and human rights,		to meet a wide range of individual needs to achieve better outcomes
	2.2	Evaluate how the service supports equity and promotes, values and celebrates equality, diversity, inclusion and human rights
	2.3	Implement changes to practices, policy or procedures to improve how the service promotes, values, and celebrates equality, diversity, inclusion and human rights
	2.4	Monitor and review changes and improvements being made to lead to better outcomes for individuals and others
	2.5	Challenge, and support others to challenge, discrimination, harassment and exclusion in ways that are likely to achieve change and promote positive outcomes

Assessment:

This unit **must** be assessed in accordance with the Skills for Care Assessment Principles.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcome 2 is skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should **not** be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Guidance notes:

Closed cultures: a closed culture is a poor culture in a health or care service that increases the risk of harm. This includes abuse and human rights breaches. The development of closed cultures can be deliberate or unintentional – either way it can cause unacceptable harm to a person and their loved ones. Learners should consider how such cultures may overlook the full range of communication, cognitive, or sensory needs associated with neurodiversity and how such cultures may not always reflect the full diversity of communication, cognitive, or sensory profiles.

Individuals: people accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Others: in this context, others may include:

- > Individuals accessing care and support services
- > Carers, loved ones, family, friends of those accessing care and support services team members
- > Colleagues and peers
- > Managers and supervisors
- > Professionals from other services
- > Visitors to the work setting
- > Members of the community volunteers

Culture: when considering the culture, learners should consider how they lead this for individuals accessing services and for the workforce.

Promotes: can include but is not limited to: how the workforce facilitates, advocates and challenges.

Individual needs: in this context, individual needs may include, but not inclusive of:

- > Physical
- > Emotional
- > Cognitive
- > Cultural

Health and Safety	
Unit Reference	M/651/8662
Level	5
Credit Value	4
Guided Learning (GL)	32 hours
Unit Summary	This unit helps learners to understand the legislation and frameworks regarding health and safety which are required to manage a care establishment. It looks at risk management and the importance of allowing service-users to take risks in their everyday life.
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.3)
The learner will	The learner can
1. Understand health and safety requirements in adult social care	1.1 Evaluate the legislative framework for health and safety in adult care settings 1.2 Analyse key sources of information and guidance for health and safety in the workplace
2. Be able to lead the implementation of health and safety requirements in adult social care	2.1 Demonstrate your interpretation of legislation and guidance and apply to organisational health and safety policies and working practices 2.2 Support others to comply with relevant organisational health and safety practices, policies, procedures to help keep them safe 2.3 Monitor compliance with safe working, practices and provide appropriate intervention where procedures are not adhered to

	2.4	Evaluate working practices and make improvements to health and safety practices, policies and procedures
	2.5	Complete records and reports on health and safety and issues according to legislative and organisational requirements
3. Understand effective risk management	3.1	Assess the range of risk management requirements in adult care
	3.2	Evaluate own responsibilities to identify, assess and manage risk
	3.3	Analyse the range of mechanisms and tools available to inform and carry out risk management activities
4. Be able to lead the implementation of policies, procedures and practices to effectively manage risk	4.1	Contribute to the development of policies, procedures and practices to identify, assess and manage risk
	4.2	Work with others to identify, assess and manage risks and issues
	4.3	Support team members to understand risk management and adhere to guidance which promotes safe practices

Assessment:

This unit **must** be assessed in accordance with the Skills for Care Assessment Principles.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Learning Outcomes 2 and 4 are skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should **not** be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Guidance notes:

Legislative framework: this should include the range of health and safety legislation and specific regulations applicable to the environment and care service being provided.

Key sources of information and guidance: should include the role of government agencies and advisory bodies e.g. Health and Safety Executive, UK Health Security Agency, may also include other internal and external support mechanisms.

Legislation and guidance: this may include local guidance, changing and updated guidance and specific information available to support legislation and regulations e.g. The Code of Practice for the Control and Prevention of infections and related guidance.

Others: in this context, others might include, but are not limited to:

- > Carers, loved ones, family, friends of those accessing care and support services
- > Team members
- > Professionals from other services
- > Visitors to the work setting
- > Volunteers

Continuous Development											
Unit Reference	R/651/8663										
Level	5										
Credit Value	4										
Guided Learning (GL)	30 hours										
Unit Summary	This unit explores professional development and how learners can demonstrate that they are encouraging continuous development within their organisation for all staff including themselves. Learners will be expected to research self-awareness and use this knowledge to manage their own workload effectively, taking into account the resources available to ensure their own well-being.										
Learning Outcomes (1 to 3)	Assessment Criteria (1.1 to 3.5)										
The learner will	The learner can										
1. Demonstrate commitment to own development	<table border="1"> <tbody> <tr> <td>1.1</td> <td>Evaluate own knowledge and performance using standards and benchmarks</td> </tr> <tr> <td>1.2</td> <td>Identify and prioritise own professional development needs and aspirations and implement plans to meet these</td> </tr> <tr> <td>1.3</td> <td>Create and engage with opportunities for others to provide feedback on own performance across all aspects of role</td> </tr> <tr> <td>1.4</td> <td>Identify a range of opportunities to support own professional development that reflects own learning style and needs</td> </tr> <tr> <td>1.5</td> <td>Evaluate how own practice has been improved through: <ul style="list-style-type: none"> > The implementation of the professional development plan > Reflection on feedback from others </td> </tr> </tbody> </table>	1.1	Evaluate own knowledge and performance using standards and benchmarks	1.2	Identify and prioritise own professional development needs and aspirations and implement plans to meet these	1.3	Create and engage with opportunities for others to provide feedback on own performance across all aspects of role	1.4	Identify a range of opportunities to support own professional development that reflects own learning style and needs	1.5	Evaluate how own practice has been improved through: <ul style="list-style-type: none"> > The implementation of the professional development plan > Reflection on feedback from others
1.1	Evaluate own knowledge and performance using standards and benchmarks										
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1.3	Create and engage with opportunities for others to provide feedback on own performance across all aspects of role										
1.4	Identify a range of opportunities to support own professional development that reflects own learning style and needs										
1.5	Evaluate how own practice has been improved through: <ul style="list-style-type: none"> > The implementation of the professional development plan > Reflection on feedback from others 										

		> Learning from achievements and adverse events
2. Demonstrate commitment to self-awareness	2.1	Use feedback and reflective practice to increase own self-awareness
	2.2	Analyse how own values, belief systems and experiences impact own practices
	2.3	Analyse how own emotions affect behaviour and the impact this has on others
3. Be able to manage own workload effectively	3.1	Use strategies and tools to plan and identify priorities for work and revise plans when priorities change
	3.2	Use digital technology to enhance own and others' efficiency
	3.3	Facilitate the development of others to enable effective delegation
	3.4	Evaluate impact on own well-being when planning and responding to organisation priorities
	3.5	Plan strategies and support mechanisms to access when workload is difficult to manage

Assessment:

This unit **must** be assessed in accordance with the Skills for Care Assessment Principles.

This is a skill-based unit.

Learning Outcomes 1, 2 and 3 are primarily skill based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in actual person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should **not** be planned and used as the primary approach. Safe and reliable approaches to use

of remote technologies in the assessment process **must** be agreed with the awarding organisation prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Guidance notes:

Standards: may include codes of practice, regulations, minimum standards, national occupational standards.

Benchmarks: may include but not limited to:

- > Regulatory standards
- > Organisation benchmarks
- > Sector and specialist specific frameworks
- > Own development plan

Others: in this context, others might include:

- > Carers, loved ones, family, friends of those accessing care and support services colleagues and peers
- > Team members
- > Managers and supervisors
- > Professionals from other services
- > Volunteers

Range of opportunities: may include:

- > Formal or informal support
- > Supervision, appraisal, mentoring, peer support
- > Opportunities within and outside the organisation
- > Different types of learning and ways to achieve
- > Self-led and directed learning opportunities

Adverse events: an incident or disruption with associated risks which could lead to unexpected, unintended and preventable harm to others.

Personal Well-being	
Unit Reference	T/651/8664
Level	5
Credit Value	4
Guided Learning (GL)	25 hours
Unit Summary	In this unit learners will understand own well-being and the importance of making improvements. Learners will also learn how to manage their own stress and anxiety.
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.6)
The learner will	The learner can
1. Understand own well-being	1.1 Evaluate what is meant by 'personal well-being', 'self-care' and 'resilience' 1.2 Assess factors that positively and negatively influence own well-being 1.3 Assess indicators of own well-being and well-being deterioration
2. Understand the importance of maintaining and improving own well-being	2.1 Assess how own well-being impacts role and behaviour 2.2 Evaluate how own well-being impacts others
3. Know how to prevent, maintain and improve own well-being	3.1 Evaluate prevention and monitoring strategies which can be used to support positive outcomes in own well-being 3.2 Assess a range of well-being support offers available and how to access them 3.3 Explain how to access professional help if needed

4. Know how to manage own stress and anxiety	4.1	Explain what is meant by 'stress' and 'anxiety'
	4.2	Assess indicators of stress and anxiety in oneself
	4.3	Evaluate factors that can trigger stress and anxiety in oneself
	4.4	Analyse how stress and anxiety may affect own reactions and behaviours towards others
	4.5	Scrutinise strategies for managing own stress and anxiety
	4.6	Explain how to access a range of support offers

Assessment:

This unit **must** be assessed in accordance with the Skills for Care Assessment Principles.

This is a knowledge based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Guidance notes:

Own well-being: in this context, well-being refers to that of the learner. Well-being is a broad concept referring to a person's quality of life considering health, happiness and comfort. It may include aspects of social, emotional, cultural, spiritual, intellectual, economic, physical and mental well-being.

Factors: these should be specific to the learner. The learner should show consideration of environmental, physical, social and psychological factors inside and outside the workplace.

Indicators: these should be specific to the learner.

Others: may include team members, other colleagues, individuals accessing care and support services, families, carers and other professionals. Learners may also wish to consider their personal relationships.

Strategies: learners should develop personal strategies that support their own well-being and help prevent issues before they arise. In addition, learners should have strategies for recognising early indicators of deterioration. A proactive preventative approach is key to sustaining well-being in demanding job roles.

Stress: is a natural response to pressure or challenging situations and can have positive as well as negative effects on a person. In this context, we refer to the negative impacts of stress.

Support offers: the range should include offers available inside and outside the learners' workplace. Learners should consider offers they use as well as those they currently choose not to. For example:

- > **Internal:** supervision, employee assistance scheme, mentor or buddying systems
- > **External:** self-help tools, apps and websites, local groups and networks

Optional Units Group B

Manage Quality in Adult Care	
Unit Reference	J/651/8787
Level	5
Credit Value	5
Guided Learning (GL)	36 hours
Unit Summary	This unit enables the learner to understand the context of quality assurance in adult care service provision, and how to implement quality standards and evaluate the quality processes used in their work setting.
Learning Outcomes (1 to 3)	Assessment Criteria (1.1 to 3.4)
The learner will	The learner can
1. Understand the context of quality assurance in adult care service provision	1.1 Analyse how legislative and regulatory frameworks inform quality standards that apply to the work setting 1.2 Analyse how quality standards influence positive outcomes for individuals 1.3 Evaluate four methods that can be used to measure the achievement of quality standards
2. Be able to implement quality standards in adult care	2.1 Work with team members and others to: <ul style="list-style-type: none"> > Agree quality standards for the service > Select indicators to measure agreed standards > Identify controls to support the achievement of agreed standards 2.2 Develop systems and processes to measure achievement of quality standards

	2.3	Support team members to carry out their roles in implementing quality controls
	2.4	Explain how quality assurance standards relate to performance management
3. Be able to lead the evaluation of quality processes in adult care	3.1	Support team members to carry out their roles in monitoring quality indicators
	3.2	Use selected indicators to evaluate the achievement of quality standards
	3.3	Work with others to identify: <ul style="list-style-type: none"> > Areas of best practice > Areas for improvement
	3.4	Work with others to develop an action plan to improve quality of service

Assessment:

This unit **must** be assessed in accordance with the Skills for Care Assessment Principles.

This is a knowledge and skills-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

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

Guidance notes:

Assessment Criterion 2.1, 3.3 and 3.4: **Others** may include:

- > Individuals
- > Advocates
- > Family members
- > Others important to the individual's well-being

Assessment Criterion 1.2: **Individual**: a person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Undertake a Research Project within Adult Care Services

Unit Reference	K/651/8788	
Level	5	
Credit Value	10	
Guided Learning (GL)	45 hours	
Unit Summary	This unit will enable the learner to understand the principles of research and put the knowledge gained into practice by undertaking a research project relevant to the service in which the learner works.	
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.5)	
The learner will	The learner can	
1. Be able to justify a topic for research within adult care services	1.1	Identify the area for the research project
	1.2	Develop the aims and objectives of the research project
	1.3	Include all ethical considerations that apply to the area of the research project
	1.4	Complete a literature review of chosen area of research
2. Understand how the components of research are used	2.1	Critically compare different types of research
	2.2	Evaluate a range of methods that can be used to collect data
	2.3	Identify four tools that can be used to analyse data
	2.4	Explain the importance of validity and reliability of data used within research

<p>3. Be able to conduct a research project within adult care services</p>	<p>3.1 3.2 3.3 3.4 3.5 3.6</p>	<p>Identify sources of support whilst conducting a research project</p> <p>Formulate a detailed plan for a research project</p> <p>Select research methods for the project</p> <p>Develop research questions to be used within project</p> <p>Conduct the research using identified research methods</p> <p>Record and collate data</p>
<p>4. Be able to analyse research findings</p>	<p>4.1 4.2 4.3 4.4 4.5</p>	<p>Use data analysis methods to analyse the data</p> <p>Draw conclusions from findings</p> <p>Reflect how own research findings substantiate initial literature review</p> <p>Make recommendations related to area of research</p> <p>Identify potential uses for the research findings within practice</p>
<p>Assessment:</p> <p>This unit must be assessed in accordance with Skills for Care & Development assessment principles guidance.</p> <p>This is a knowledge and skills-based unit.</p> <p>Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment.</p>		
<p>Guidance notes:</p> <p>Administering Assessment Criteria 1.2: Aims and objectives – the reasons, understanding and methods for conducting the research project.</p>		

Assessment Criterion 1.3: **Ethical considerations** – confidentiality, sensitivity of data, duty of care, seeking agreements with participants.

Appraise Staff Performance

Unit Reference	L/651/8789	
Level	5	
Credit Value	5	
Guided Learning (GL)	32 hours	
Unit Summary	<p>This unit enables the learner to understand policies, theories and models which underpin appraisal of performance. The learner will also be able to prepare for appraisals, support appraisees to participate in appraisal meetings and evaluate own practice during the appraisal process.</p>	
Learning Outcomes (1 to 5)	Assessment Criteria (1.1 to 5.2)	
The learner will	The learner can	
1. Understand policies, theories and models which underpin appraisal of performance	1.1	Explain policies and agreed ways of working for appraisals in the work setting
	1.2	Analyse models of appraisal to explore their applicability in the work setting
	1.3	Evaluate how appraisals are used to inform: <ul style="list-style-type: none"> > Achievement of objectives > Overall performance > Future objectives
	1.4	Explain how appraisals are used to develop practice
	1.5	Differentiate between appraisals and disciplinary processes
	1.6	Explain how theories of power are interlinked with the relationship between appraiser and appraisee

<p>2. Be able to support others to understand the purpose of appraisal</p>	<p>2.1</p>	<p>Support others to develop an understanding of the purpose of appraisals to include:</p> <ul style="list-style-type: none"> > Mutual responsibilities > The achievement of objectives > Reflection on overall performance > Professional development > How outcomes of the appraisal will be used > Supporting aspirations > Future objectives
<p>3. Be able to facilitate preparation for appraisals</p>	<p>3.1 3.2 3.3 3.4</p>	<p>Confirm with appraisee the objectives against which performance will be appraised</p> <p>Identify with the appraisee the actions they need to take to prepare for their appraisal</p> <p>Evaluate evidence gathered from a range of sources towards achievement of objectives</p> <p>Prepare paperwork for appraisal in line with work setting requirements</p>
<p>4. Be able to support appraisee to participate in appraisal meetings</p>	<p>4.1 4.2 4.3 4.4</p>	<p>Explain how power can be managed within the appraisal process to facilitate the participation of the appraisee</p> <p>Demonstrate how to prepare the environment for the appraisal meeting</p> <p>Support the appraisee to engage in an evaluation of their performance over the past year to include:</p> <ul style="list-style-type: none"> > Areas of practice which have met or exceeded standards > Areas for development <p>Provide feedback to appraisee on their performance over the past year to include:</p> <ul style="list-style-type: none"> > Areas of practice which have met or exceeded standards

		> Areas for development
	4.5	Identify with appraisee work objectives for forthcoming year
	4.6	Identify with appraisee professional development plan for forthcoming year
	4.7	Record the appraisal in line with work setting requirements
5. Be able to evaluate own practice during the appraisal process	5.1	Evaluate with appraisee their experience of how the appraisal was conducted
	5.2	Reflect on own practice in managing the appraisal process

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skills-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

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

Guidance Notes:

Assessment Criterion 1.1: **Policies and agreed ways of working** – this will include organisational and national policies. These may be attached to standards or frameworks.

Assessment Criterion 2.1: **Others** will include those staff for whom you have responsibility.

Assessment Criterion 2.1: **Mutual responsibilities** – the underpinning principle of appraisal is that both parties engage in a conversation rather than it being a “top-down” process. Therefore there is an element of joint responsibility, and both parties should familiarise themselves with the competences against which the appraisal is measuring performance and identify evidence of compliance or non-compliance. There should be no surprises in the appraisal as non-compliance issues should already have been raised and discussed.

Assessment Criterion 3.3: **Range of sources** may include:

- > Feedback from individuals, carers and families
- > Feedback from other colleagues or other professionals
- > Own observations
- > Work products

Support Individuals with Multiple Conditions and/or Disabilities

Unit Reference	T/651/8790	
Level	5	
Credit Value	5	
Guided Learning (GL)	34 hours	
Unit Summary	This unit will enable the learner to understand the implications of multiple conditions and/or disabilities for the individual and know how to support the individual.	
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.3)	
The learner will	The learner can	
1. Understand the implications of multiple conditions and/or disabilities for the individual	1.1	Explain the correlation between conditions and: <ul style="list-style-type: none"> > Disability > Gender > Age > Ethnicity > Socio-economic status
	1.2	Explain how multiple conditions and/or disabilities can impact on the individual
	1.3	Make recommendations for modifications to service delivery that can result in improved outcomes for individuals with multiple conditions and/or disabilities
2. Be able to support an individual with multiple conditions and/or disabilities	2.1	Work collaboratively with the individual and/or others to support the individual
	2.2	Provide advice and expertise to support the assessment and/or referral of an individual with multiple conditions and/or disabilities

	2.3	Use referral processes to secure services for the individual
3. Be able to develop others to support the individual with multiple conditions and/or disabilities	3.1	Advise and inform others about the implications of multiple conditions and/or disabilities
	3.2	Devise strategies to improve the practice of others: <ul style="list-style-type: none"> > At an individual level > At an organisational level
4. Be able to review service provision in respect of individuals with multiple conditions and/or disabilities	4.1	Reflect on own role in relation to providing a service for individuals with multiple conditions and/or disabilities
	4.2	Evaluate, with others, the extent to which provision meets the needs of individuals with multiple conditions and/or disabilities
	4.3	Implement actions agreed as a result of evaluation within own role

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skills-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

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

Guidance notes:

Assessment Criterion 1.1, 1.3, 2.2, 3.1, 4.1 and 4.2: **Multiple conditions and/or disabilities** could include a combination of factors relating to:

- > Sensory loss
- > Physical health
- > Mental health

- > Physical disability
- > Learning difficulty/disability
- > Emotional health

Assessment Criterion 2.1, 3.1, 3.2 and 4.2: **Others** could include:

- > Other professionals
- > Carers/family members
- > Advocates
- > Colleagues

Develop and Evaluate Operational Plans for Own Area of Responsibility

Unit Reference	Y/651/8791	
Level	5	
Credit Value	6	
Guided Learning (GL)	25 hours	
Unit Summary	This unit enables the learner to implement, monitor and evaluate operational plans in own area of responsibility.	
Learning Outcomes (1 to 3)	Assessment Criteria (1.1 to 3.2)	
The learner will	The learner can	
1. Be able to align objectives of own area of responsibility with those of own organisation	1.1	Identify operational objectives within own area of responsibility
	1.2	Analyse objectives of own area of responsibility in relation to those of own organisation
2. Be able to implement operational plans in own area of responsibility	2.1	Assess risks associated with operational plans and include contingency arrangements
	2.2	Identify support from relevant stakeholders
	2.3	Implement operational plan within own area of responsibility
3. Be able to monitor and evaluate operational plans in own area of responsibility	3.1	Monitor progress and procedures within the operational plan
	3.2	Evaluate operational plans and implement any necessary actions

Assessment:

This unit **must** be assessed in accordance with the Skills for Care Assessment Principles.

Any skills-based element within the unit **must** be assessed in the workplace or using workplace-based evidence.

Simulation is **not permitted** for this unit.

Guidance notes:

No guidance notes.

Facilitate Coaching and Mentoring of Practitioners in Adult Care

Unit Reference	A/651/8792	
Level	5	
Credit Value	6	
Guided Learning (GL)	43 hours	
Unit Summary	This unit enables the learner to understand the benefits of coaching and mentoring staff. It also provides the learner with the skills to identify coaching needs and implement and monitor coaching and mentoring activities.	
Learning Outcomes (1 to 5)	Assessment Criteria (1.1 to 5.3)	
The learner will	The learner can	
1. Understand the benefits of coaching and mentoring practitioners in adult care	1.1	Analyse the differences between coaching and mentoring
	1.2	Explain circumstances when coaching would be an appropriate method of supporting learning at work
	1.3	Explain circumstances when mentoring would be an appropriate method of supporting learning at work
	1.4	Explain how coaching and mentoring complement other methods of supporting learning
	1.5	Analyse how coaching and mentoring at work can promote the business objectives of the work setting
	1.6	Evaluate the management implications of supporting coaching and mentoring in the work setting

	1.7	Explain how coaching and mentoring in the work setting can contribute to a learning culture
	1.8	Explain the importance of meeting the learning and development needs of coaches and mentors
2. Be able to promote coaching and mentoring of practitioners in adult care	2.1	Promote the benefits of coaching and mentoring in the work setting
	2.2	Support practitioners to identify learning needs where it would be appropriate to use coaching
	2.3	Support practitioners to identify learning needs where it would be appropriate to use mentoring
	2.4	Explain the different types of information, advice and guidance that can support learning in the work setting
	2.5	Demonstrate a solution-focused approach to promoting coaching and mentoring in the work setting
3. Be able to identify the coaching and mentoring needs of practitioners in adult care	3.1	Use different information sources to determine the coaching and mentoring needs of practitioners in the work setting
	3.2	Plan coaching and mentoring activities
4. Be able to implement coaching and mentoring activities in adult care	4.1	Support the implementation of coaching and mentoring activities
	4.2	Select the most appropriate person to act as coach or mentor
	4.3	Explain the support needs of those who are working with peers as coaches or mentors
	4.4	Provide coaching in a work setting according to the agreed plan

	4.5	Provide mentoring in a work setting according to the agreed plan
5. Be able to review the outcomes of coaching and mentoring in adult care	5.1	Review how the use of coaching and mentoring in the work setting has supported business objectives
	5.2	Evaluate the impact of coaching and mentoring on practice
	5.3	Develop plans to support the future development of coaching and mentoring in the work setting
<p>Assessment:</p> <p>This unit must be assessed in accordance with the Skills for Care Assessment Principles.</p> <p>Any skills-based element within the unit must be assessed in the workplace or using workplace-based evidence.</p> <p>Learning Outcomes 2, 3, 4 and 5 must be assessed in the work setting.</p>		
<p>Guidance notes:</p> <p>Learning Outcomes 1-5: Coaching and mentoring: including styles and approaches, but not limited to:</p> <ul style="list-style-type: none"> > Self-awareness > Situational leadership > Directive approach > Non-directive approach > Blending approaches <p>Assessment Criteria 3.1: Different information sources may include:</p> <ul style="list-style-type: none"> > Strategic/business plans > New legislation/regulation > Supervision agreements/professional development plans > Availability and expertise of coaches and mentors in the work setting > Service users who have different needs 		

Develop Procedures and Practice to Respond to Concerns and Complaints

Unit Reference	D/651/8793	
Level	5	
Credit Value	6	
Guided Learning (GL)	40 hours	
Unit Summary	This unit provides the learner with underpinning knowledge in relation to the legal requirements for dealing with complaints and the skills required to be able to develop, implement and review procedures for dealing with complaints.	
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.5)	
The learner will	The learner can	
1. Understand the regulatory requirements, codes of practice and relevant guidance for managing concerns and complaints	1.1	Outline the regulatory requirements, codes of practice and relevant guidance for managing concerns and complaints in own area of work
	1.2	Analyse how regulatory requirements, codes of practice and relevant guidance for managing concerns and complaints affect service provision within own area of work
	1.3	Explain the relationship between the management of comments and complaints, risk management and safeguarding
2. Be able to develop procedures to address concerns and complaints	2.1	Explain why individuals might be reluctant to raise concerns and make complaints
	2.2	Outline steps that can be taken to encourage individuals to raise concerns or complaints
	2.3	Explain the attitudes and approaches that ensure comments and complaints can prompt continuous improvement of the service

	2.4	Work with others in the development of procedures to address concerns and complaints
	2.5	Ensure information on how to raise concerns and make complaints is available in accessible formats
	2.6	Review the procedures that have been developed against regulatory requirements, codes of practice and relevant guidance
3. Be able to lead the implementation of procedures and practice for addressing concerns and complaints	3.1	Promote a person centred approach to addressing concerns and complaints
	3.2	Ensure that others are informed about the procedure for raising concerns or making complaints
	3.3	Use supervision to support workers to recognise and address concerns and complaints
	3.4	Implement open and transparent systems and procedures that compassionately address and respond to comments and complaints within agreed time frames
4. Be able to review the procedures and practices for addressing concerns and complaints	4.1	Monitor the use of systems for addressing concerns and complaints
	4.2	Evaluate the effectiveness of systems for addressing concerns and complaints
	4.3	Involve others in the review of procedures and practices for addressing concerns and complaints
	4.4	Show how own management practice has provided a culture where the organisation can learn from concerns and complaints
	4.5	Demonstrate how recommendations from concern and complaint investigations have been used to improve the quality of service

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

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

Guidance notes:

Assessment Criteria 2.3, 3.2 and 4.3: **Others** may include:

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

Active Support: Lead Interactive Training

Unit Reference	F/651/8794	
Level	5	
Credit Value	4	
Guided Learning (GL)	30 hours	
Unit Summary	This unit will enable the learner to understand the theoretical background to person-centred interactive training. It will also enable the learner to plan and lead person-centred interactive training sessions to enhance whole team performance.	
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.4)	
The learner will	The learner can	
1. Understand the theoretical background to person-centred interactive training	1.1	Explain what is meant by person-centred interactive training
	1.2	Describe the key factors that make training effective in improving others performance and the service outcomes
	1.3	Explain how the three-stage training model can be used in interactive training
	1.4	Summarise the theory of positive interaction
	1.5	Explain the process of person-centred interactive training
2. Be able to plan person-centred interactive training sessions to enhance whole team performance	2.1	Involve key others in developing the training plan, to ensure the needs of individuals are met
	2.2	Develop a timetable of scheduled in situ training sessions for others working directly with individuals

	2.3	Explain to others the preparation required prior to person-centred interactive training
3. Be able to lead person-centred interactive training sessions in situ	3.1	Clarify aims and process of person-centred interactive training sessions with others to be trained
	3.2	Assess the performance of others through direct observation using a structured format
	3.3	Demonstrate required skills and process during direct observation of others
4. Be able to provide support to improve the performance of others	4.1	Give constructive feedback to others on their performance, using a structured format
	4.2	Demonstrate required skills and values when giving feedback to others
	4.3	Act as a role-model to demonstrate desired performance to others
	4.4	Assess when others have achieved a satisfactory level of performance
<p>Assessment:</p> <p>This unit must be assessed in accordance with Skills for Care & Development assessment principles guidance.</p> <p>This is a knowledge and skills-based unit.</p> <p>Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment.</p> <p>Learning Outcomes 2, 3 and 4 must be assessed in a real work environment.</p>		
<p>Guidance notes:</p> <p>No guidance notes.</p>		

Lead the Management of Transitions

Unit Reference	H/651/8795	
Level	5	
Credit Value	4	
Guided Learning (GL)	29 hours	
Unit Summary	This unit enables the learner to understand the impact of change and transitions on the well-being of individuals and lead and manage provision that support individuals experiencing transitions and significant life events.	
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.6)	
The learner will	The learner can	
1. Understand the impact of change and transitions on the well-being of individuals	1.1	Explain ways in which transitions and significant life events affect individuals' well being
	1.2	Analyse how theories on change inform approaches to the management of transitions
	1.3	Explain the concept of resilience in relation to transitions and significant life events
	1.4	Analyse the factors that affect individuals' ability to manage transitions and changes
2. Be able to lead and manage provision that supports workers to manage transitions and significant life events	2.1	Explain how solution focused practice is used to support the management of transitions
	2.2	Promote a culture that supports and encourages individuals to explore challenges
	2.3	Support workers to encourage individuals to identify their own strengths and abilities

	2.4	Support workers to engage with individuals and others to identify outcomes and targets that build on their strengths and abilities
	2.5	Ensure workers support individuals to implement plans to meet identified outcomes and targets
	2.6	Enable workers to identify any additional support they may require to support individuals through transition and change

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Learning Outcomes 2 **must** be assessed in a real work environment.

Guidance Notes:

Assessment Criteria 1.4: **Factors** may include:

- > Positive/negative identity and self-esteem
- > Stable/unstable relationships and networks
- > Secure/insecure attachments
- > Experience of discrimination/social exclusion
- > Experience of abuse or harm

Assessment Criterion 2.4: **Others** may include:

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

Assessment Criterion 2.6: **Additional** support may include:

- > Training
- > Emotional support
- > Support to manage tensions and dilemmas

Support and Manage Domiciliary Services

Unit Reference	J/651/8796	
Level	5	
Credit Value	6	
Guided Learning (GL)	25 hours	
Unit Summary	This unit enables the learner to know how to organise and respond to specific care packages within agreed timescales and financial restrictions, ensuring the provision of quality services as required by legislative and regulatory bodies.	
Learning Outcomes (1 to 5)	Assessment Criteria (1.1 to 5.2)	
The learner will	The learner can	
1. Understand factors that influence the management of domiciliary services	1.1	Evaluate influences on the management of domiciliary services
	1.2	Explain the impact of person-centred practice on the management of domiciliary services
	1.3	Analyse ethical dilemmas and conflicts experienced by managers and practitioners of domiciliary services
2. Be able to manage domiciliary services	2.1	Select and provide appropriate practitioners to support individuals' needs
	2.2	Support practitioners to carry out their duties and responsibilities
	2.3	Support clear communication and information sharing with individuals and others
3. Be able to implement systems for working safely in domiciliary services	3.1	Implement agreed ways of working that support the safety and protection of individuals and others

	3.2	Support practitioners to anticipate, manage and report risks
	3.3	Manage systems for risk and incident reporting, action and follow-up
4. Be able to supervise and support practitioners in order to promote individuals' needs and preferences in domiciliary services	4.1	Manage systems to monitor and evaluate the effectiveness of practitioners in promoting individual needs and preferences
	4.2	Explain the importance of supporting practitioners to challenge systems and ways of working that do not comply with organisational policies and procedures
	4.3	Support practitioners to develop innovative and creative approaches to their work
	4.4	Support practitioners to balance the needs and preferences of individuals with potential risks
5. Be able to respond to day-to-day changes and emergencies in domiciliary services	5.1	Explain the challenges associated with addressing day-to-day changes and emergencies in domiciliary services
	5.2	Manage day-to-day changes and emergencies in domiciliary services
<p>Assessment:</p> <p>This unit must be assessed in accordance with the Skills for Care Assessment Principles.</p> <p>This is a knowledge and skill-based unit.</p> <p>Learning Outcomes 2, 3, 4 and 5 must be assessed in the work setting.</p> <p>Simulation is not permitted for this unit.</p>		
<p>Guidance notes:</p> <p>Assessment Criteria 1.1: Influences include:</p>		

- > The current legislative framework
- > Evidence-based research
- > Organisational protocols

Assessment Criteria 2.3 and 3.1: **Others** may include:

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

Assessment Criteria 3.1: **Agreed ways** of working will include:

- > Policies and procedures, where these exist

Lead and Manage Infection Prevention and Control within the Work Setting

Unit Reference	K/651/8797	
Level	5	
Credit Value	6	
Guided Learning (GL)	38 hours	
Unit Summary	This unit enables the learner to understand the infection prevention and control policies; procedures and practices applied in their work setting. The learner will also be able to lead the implementation of policies and procedures for infection prevention and control, risk management and review.	
Learning Outcomes (1 to 6)	Assessment Criteria (1.1 to 6.4)	
The learner will	The learner can	
1. Understand current infection prevention and control policies, procedures and practices	1.1	Summarise national and local policies for infection prevention and control
	1.2	Evaluate how policies, procedures and practices in own work setting meet infection prevention and control regulatory requirements
	1.3	Explain role and responsibilities in relation to infection prevention and control
2. Be able to lead the implementation of policies and procedures for infection prevention and control	2.1	Analyse the differences between applying infection prevention policies and procedures in an individual's own home to that of an adult care setting
	2.2	Explain how to ensure a proportionate approach to the implementation of policies and procedures in a range of settings
	2.3	Communicate policies and procedures for infection prevention and control to others within the work setting

	<p>2.4 Allocate roles and responsibilities to meet infection prevention and control procedures within own work setting</p> <p>2.5 Manage compliance with procedures for infection prevention and control</p> <p>2.6 Explain actions to take when infection prevention and control procedures and practices are not being complied with</p>
<p>3. Be able to manage the exchange of information about infections</p>	<p>3.1 Explain why it is important to share information about suspected or diagnosed infections with others</p> <p>3.2 Provide information on suspected or diagnosed infections to others</p> <p>3.3 Manage processes for the exchange of information about suspected or diagnosed infection between others</p> <p>3.4 Manage systems for keeping records of suspected or diagnosed infections</p>
<p>4. Be able to lead the practice of infection prevention and control</p>	<p>4.1 Explain why infection prevention and control practice should be included in:</p> <ul style="list-style-type: none"> > Job descriptions > Performance management <p>4.2 Support staff to recognise their role in minimising the risk of spreading infection through:</p> <ul style="list-style-type: none"> > Supervision > Appraisal <p>4.3 Provide access to resources for staff to minimise the risks of infection</p> <p>4.4 Monitor infection prevention and control practice</p> <p>4.5 Provide feedback to staff on their practice of infection prevention and control</p>

	4.6	Manage the learning and development needs for staff about infection prevention and control: <ul style="list-style-type: none"> > During induction > Continuing professional development
5. Be able to manage risk management in infection prevention and control	5.1	Manage the implementation of risk assessment processes to minimise infection
	5.2	Manage the implementation of controls identified from risk assessment processes in partnership with the individual and others
	5.3	Manage risk management records
	5.4	Manage the reporting of risks and hazards that are outside your area of responsibility
6. Be able to review the effectiveness of policies, procedures and practices for infection prevention and control	6.1	Assess trends of reported patterns of infections in own work setting
	6.2	Identify factors that contribute to spread and/or reduction of infection in own work setting
	6.3	Evaluate the implementation of infection prevention and control procedures in own work setting
	6.4	Make recommendations for changes to infection prevention and control policies, procedures and practices in own work setting

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Guidance Notes:

Assessment Criteria 2.1 and 5.2: The **individual** is the person requiring care or support.

Assessment Criteria 2.2: **Proportionate approach** encourages the learner to consider how infection prevention and control practices may be applied in proportion to the setting and the staffing within that setting. The Department of Health 'Code of Practice for health and social care on the prevention and control of infections and related guidance' (England only) contains a useful appendix which gives examples of how a proportionate approach would apply.

Assessment Criteria 2.2: **Range of settings** may include:

- > Individual's own home
- > Community environments
- > Residential care homes
- > Nursing home
- > Hospitals

Assessment Criteria 2.3, 3.1, 3.2, 3.3 and 5.2: **Others** may include:

- > People who use services
- > Care or support staff
- > Colleague
- > Manager
- > Non-direct care or support staff
- > Carers
- > Families
- > Visitors
- > Contractors
- > Volunteers
- > Other professional

Assessment Criteria 4.2: **Appraisal** may include:

- > Key performance indicators
- > NHS Knowledge and Skills Framework (KSF)
- > Performance management

- > Assessment Criteria 4.3: **Resources** may include: Equipment

Lead and Manage Practice in Dementia Care

Unit Reference	L/651/8798	
Level	5	
Credit Value	6	
Guided Learning (GL)	41 hours	
Unit Summary	<p>This unit will enable the learner to understand current policy and practice guidance for dementia care. The learner will also be able to lead practice that promotes the well-being of individuals living with dementia and that supports staff to deliver person centred dementia care.</p>	
Learning Outcomes (1 to 6)	Assessment Criteria (1.1 to 6.2)	
The learner will	The learner can	
1. Understand current policy and practice guidance for dementia care	1.1	Analyse how current policy and practice guidance underpin service provision in dementia care
	1.2	Explain why a person centred approach is the benchmark for practice in dementia care
2. Be able to support others to develop an understanding of current research of the impact of dementia on individuals and their families	2.1	Support others to develop an understanding of the causes of dementia syndrome
	2.2	Support others to develop an understanding of the impact of early onset dementia on individuals and their families
	2.3	Support others to develop an understanding of the impact on the individuals living with dementia and their families of: <ul style="list-style-type: none"> > Diagnosis > treatment of dementia

<p>3. Be able to lead practice that promotes the well-being of individuals living with dementia</p>	<p>3.1 3.2 3.3 3.4 3.5 3.6 3.7 3.8</p>	<p>Manage a service that demonstrates a person centred approach</p> <p>Lead practice that supports staff to explore the stories and histories of individuals</p> <p>Lead practice that supports staff to evaluate how physical and social environments impact on the well-being of individuals living with dementia</p> <p>Lead practice that supports staff to influence changes to the physical environment that meet the needs of individuals living with dementia</p> <p>Lead practice that supports staff to influence changes to the social environment that meet the needs of individuals living with dementia</p> <p>Lead practice that supports staff to interact with individuals living with dementia</p> <p>Manage the ongoing assessment of the needs of individuals living with dementia using a range of methods</p> <p>Support staff to contribute to care plans that reflect a person centred approach</p>
<p>4. Be able to lead practice that supports staff to establish and maintain relationships with carers of individuals living with dementia</p>	<p>4.1 4.2 4.3 4.4</p>	<p>Lead practice that supports staff to evaluate the impact on carers of supporting an individual living with dementia</p> <p>Lead practice that supports staff to work in partnership with carers</p> <p>Lead practice that supports staff to involve carers in assessment and care planning</p> <p>Explain how to support staff to resolve conflicts with carers</p>

5. Be able to support staff to deliver dementia care	5.1	Evaluate the potential impact on staff when supporting an individual living with dementia
	5.2	Implement strategies to support staff who are delivering dementia care
	5.3	Provide learning and development opportunities to staff to enhance their knowledge, understanding and skills for dementia care
6. Be able to develop own practice in leading the delivery of dementia care	6.1	Reflect on own practice in leading and managing the delivery of dementia care
	6.2	Develop plan to improve own practice in leading and managing dementia care

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skills-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Any skills-based element within the unit **must** be assessed in the workplace or using workplace-based evidence.

Guidance notes:

Assessment Criteria 2.2, 2.3, 3.2, 3.3, 3.4, 3.5, 3.6, 3.7 3.8, 4.1 and 5.5: **The individual** is the person requiring care or support.

Assessment Criteria 3.4 and 3.5: **Influence** may include:

- > Raising awareness in families
- > Suggested changes to care environment
- > Team meetings
- > Partnership working

Assessment Criteria 3.7: **Range of methods** should include:

- > Family
- > Friends
- > Other unpaid carers

Assessment Criterion 5.2: **Strategies** may include:

- > Supervision
- > Counselling
- > Peer mentoring
- > Team meetings
- > Care reviews
- > Learning and development opportunities

Lead and Manage End of Life Services

Unit Reference	M/651/8799	
Level	5	
Credit Value	7	
Guided Learning (GL)	35 hours	
Unit Summary	This unit will enable the learner to understand current theory and practice relating to end of life care. The learner will also be able to apply current legislation and policy, and to lead, manage and improve the quality of the end of life care service.	
Learning Outcomes (1 to 6)	Assessment Criteria (1.1 to 6.3)	
The learner will	The learner can	
1. Be able to apply current legislation and policy in end of life care in order to develop end of life services	1.1	Summarise current legislation relating to the provision of best practice end of life care services
	1.2	Apply local and national policy guidance for end of life care to the setting in which you work
	1.3	Analyse legal and ethical issues relating to decision making at end of life
	1.4	Explain how issues of mental capacity could affect end of life care
2. Understand current theory and practice underpinning end of life care	2.1	Describe the theoretical models of grief, loss and bereavement
	2.2	Explain how grief and loss manifest in the emotions of individuals who are dying and others
	2.3	Analyse how a range of tools for end of life care can support the individual and others

	2.4	Explain the pathway used by your local health authority
	2.5	Critically reflect on how the outcomes of national research can affect your workplace practices
3. Be able to lead and manage effective end of life care services	3.1	Explain the qualities of an effective leader in end of life care
	3.2	Manage own feelings and emotions in relation to end of life care, using a range of resources as appropriate
	3.3	Use effective communication to support individuals at end of life and others
	3.4	Use effective mediation and negotiation skills on behalf of the individual who is dying
	3.5	Ensure there are sufficient and appropriate resources to support the delivery of end of life care services
	3.6	Describe the possible role(s) of advocates in end of life care
	3.7	Manage palliative care emergencies according to the wishes and preferences of the individual
	3.8	Use a range of tools for end of life care to measure standards through audit and after death analysis
4. Be able to establish and maintain key relationships to lead and manage end of life care	4.1	Identify key relationships essential to effective end of life care
	4.2	Analyse the features of effective partnership working within your work setting
	4.3	Implement shared decision making strategies in working with individuals at end of life and others

	4.4	Analyse how partnership working delivers positive outcomes for individuals and others
	4.5	Initiate and contribute to multi-disciplinary assessments
	4.6	Explain how to overcome barriers to partnership working
	4.7	Access specialist multi-disciplinary advice to manage complex situations
5. Be able to support staff and others in the delivery of excellence in the end of life care service	5.1	Describe how a shared vision for excellent end of life care services can be supported
	5.2	Implement strategies to empower staff involved in the delivery of end of life care to ensure positive outcomes for individuals and others
	5.3	Support others to use a range of resources as appropriate to manage own feelings when working in end of life care
	5.4	Support staff and others to comply with legislation, policies and procedures
	5.5	Support staff and others to recognise when mental capacity has reduced to the extent that others will determine care and treatment for the person at the end of life
	5.6	Access appropriate learning and development opportunities to equip staff and others for whom you are responsible
	5.7	Explain the importance of formal and informal supervision practice to support the staff and volunteers in end of life care
	5.8	Provide feedback to staff on their practices in relation to end of life care

6. Be able to continuously improve the quality of the end of life care service	6.1	Analyse how reflective practice approaches can improve the quality of end of life care services
	6.2	Critically reflect on methods for measuring the end of life care service against national indicators of quality
	6.3	Use outcomes of reflective practice to improve aspects of the end of life care service

Assessment:

This unit **must** be assessed in accordance with Skills for Care & Development assessment principles guidance.

This is a knowledge and skill-based unit.

Knowledge evidence may be generated outside of the work environment, but the final assessment and decision **must** show application of knowledge within the real work environment.

Any skills-based element within the unit **must** be assessed in the workplace or using workplace-based evidence.

Guidance Notes:

Assessment Criteria 1.1: **End of life care services** may include those services provided at diagnosis, during treatment or palliative care, including the dying phase or following death.

Assessment Criteria 2.2, 2.3, 3.3, 3.4, 3.7, 4.3, 4.4 and 5.2: The **individual** is the person receiving care or support in the work setting.

Assessment Criteria 2.2, 2.3, 3.3, 4.3, 4.4, 5.2, 5.3, 5.4, 5.5 and 5.6: **Others** may include:

- > Care or support staff
- > Colleagues
- > Managers
- > Non-direct care or support staff
- > Carers
- > Families
- > Visitors
- > Volunteers
- > Health professionals

- > Other organisations
- > Social workers
- > Occupational therapists
- > GPs
- > Speech and language therapists
- > Physiotherapists
- > Pharmacists
- > Nurses
- > Macmillan Nurses
- > Independent mental capacity advocates
- > Clinical nurse specialists

Assessment Criteria 2.3 and 3.8: **Tools for end of life care** may include:

- > Gold Standards Framework or equivalent
- > Preferred priorities of care
- > Advance care plan approaches
- > Welsh integrated care pathway

Assessment Criteria 3.2 and 5.3: **A range of resources** may include:

- > De-briefing
- > Mentoring
- > Supervision
- > Counselling services

Develop Provision for Family Support

Unit Reference	D/651/8800	
Level	5	
Credit Value	5	
Guided Learning (GL)	33 hours	
Unit Summary	<p>This unit enables the learner to understand the policies and legislative frameworks that govern the provision of family support. It also enables the learner to develop and implement provision for family support, and support others to establish positive relationships with families.</p>	
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.3)	
The learner will	The learner can	
1. Understand the policies and legislative frameworks that govern the provision of family support in UK home nation	1.1	Outline the current policies and legislative frameworks that govern the provision for family support
	1.2	Analyse the impact of policies and legislative frameworks on the range of provision for family support
2. Be able to develop provision for family support	2.1	Develop the aims and purpose of the provision to meet identified needs
	2.2	Plan how the aims and purpose of the provision will be achieved
	2.3	Provide detailed, factual and accessible information to others about the provision
3. Be able to implement provision for family support	3.1	Work with families and others to identify the specific provision required to meet their needs
	3.2	Support workers to identify a range of interventions, tools and resources available to meet the needs of families

	3.3	Monitor workers' practice in the provision of family support
	3.4	Provide constructive feedback to workers on practice in provision of family support
	3.5	Work with families and others to evaluate how their needs have been met by provision
	3.6	Ensure that information that will be shared with others is clarified with families
4. Be able to support others to establish positive relationships with families	4.1	Explain the principles of establishing positive relationships with families
	4.2	Support workers to use a solution focused approach to address difficulties in establishing relationships with families
	4.3	Support workers to share best practice in relation to establishing positive relationships with families
<p>Assessment:</p> <p>This unit must be assessed in accordance with Skills for Care & Development assessment principles guidance.</p> <p>This is a knowledge and skill-based unit.</p> <p>Learning Outcomes 2, 3 and 4 must be assessed in a real work environment.</p> <p>Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment.</p>		
<p>Guidance Notes:</p> <p>No guidance notes.</p>		

Support the Use of Assistive Technology

Unit Reference	F/651/8801	
Level	5	
Credit Value	4	
Guided Learning (GL)	31 hours	
Unit Summary	This unit will enable the learner to understand the contribution that assistive technology can make to the lives of individuals. The learner will also be able to facilitate and review the use of assistive technology.	
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.2)	
The learner will	The learner can	
1. Understand the contribution that assistive technology can make to the lives of individuals	1.1	Investigate and report on the range and availability of assistive technology
	1.2	Research how the use of assistive technology can result in positive outcomes for individuals
2. Be able to facilitate the use of assistive technology	2.1	Research assistive technology solutions that meet identified needs
	2.2	Explain how a range of assistive technology solutions can be adapted according to need and context
	2.3	Assess the risks associated with the range of assistive technology solutions
	2.4	Describe a range of assessment and referral processes which are used to secure assistive technology
	2.5	Support the individual to secure the provision of appropriate assistive technology

	2.6	Support the individual to use assistive technology
3. Be able to support others to facilitate the use of assistive technology	3.1	Provide information to others about assistive technology
	3.2	Provide guidance to others to facilitate the use of assistive technology
4. Be able to review the provision of assistive technology	4.1	Review the assessment and referral processes used to secure assistive technology
	4.2	Review the outcomes of assistive technology support to individuals against identified needs

Assessment:

This unit **must** be assessed in accordance with the Skills for Care Assessment Principles.

This is a knowledge and skill-based unit.

Any skills-based element within the unit **must** be assessed in the workplace or using workplace-based evidence.

Simulation is **not permitted** for this unit.

Guidance notes:

Assistive technology (AT) is defined as 'any product or service designed to enable independence for disabled and older people' (Source: Kings Fund consultation, 2001). For example, this could include a range of human/animal/low or high tech devices to support the individual's daily living such as:

- > Human aids
- > Assistance dogs
- > Electrical/electronic devices
- > Low vision aids
- > Environmental aids

Assessment Criteria 3.1 and 3.2: **Others** could include:

- > Other professionals

- > Carers / family members
- > Advocates
- > Colleagues

Promote Good Practice in the Support of Individuals with Autism

Unit Reference	H/651/8802	
Level	5	
Credit Value	7	
Guided Learning (GL)	53 hours	
Unit Summary	<p>This unit enables the learner to understand theories about autism, and the implications of the legal and policy framework underpinning the support of autistic people. The learner will also be able to promote good practice and positive communications in the support of autistic people.</p>	
Learning Outcomes (1 to 5)	Assessment Criteria (1.1 to 5.4)	
The learner will	The learner can	
1. Understand how the different and evolving theories about autism reflect the complexity of autistic spectrum conditions	1.1	Analyse the defining features of autistic spectrum conditions and the impact on practice
	1.2	Evaluate the shift from the categorical view to the spectrum view of autism, with reference to different conditions on the autistic spectrum
	1.3	Identify the implications for practice of controversies concerning the search for cures and interventions for autistic spectrum conditions
	1.4	Review historical and current perspectives on the causes of autism
	1.5	Explain the importance of a person centred approach, focussing on the individual not the diagnosis

	1.6	Analyse how the stereotyped views and prejudice of others impact on the lives of autistic people
2. Understand the implications of the legal and policy framework underpinning the support of autistic people	2.1	Identify the legislation and national and local policies and guidance relevant to the support of autistic people
	2.2	Explain the applicability of legislation, policies and guidance to people, services or situations
	2.3	Explain the impact of legislation, policies and guidance on the provision of services
	2.4	Explain the influence of autism advocacy groups in highlighting shortcomings in legislation/policy/guidance and in pressing for change
3. Be able to promote good practice in the support of autistic people	3.1	Enable workers to apply different approaches, interventions and strategies according to the individual's needs and wishes identified in their person centred support plan
	3.2	Develop practice guidance to maximise consistency and stability in the environment
	3.3	Ensure use of structured activities to optimise individuals' learning
	3.4	Demonstrate ways of supporting others to minimise the vulnerability of autistic people
	3.5	Implement strategies which support others to apply, monitor and review positive behaviour support with individuals
	3.6	Support others to work in partnership with parents and/or other informal carers or support networks

	3.7	Evaluate working practices and strategies in order to maintain good practice and recommend changes
4. Be able to promote to others positive communication strategies for autistic people	4.1	Analyse the implications for practice of the link between behaviour and communication
	4.2	Develop strategies to support others to understand the link between behaviour and communication
	4.3	Liaise with family/carers and relevant professionals involved with individuals to maximise the effectiveness of communication
	4.4	Support others to implement alternative and augmented communication systems which enable individuals to communicate effectively with those around them
5. Be able to implement strategies to support autistic people to manage their sensory world	5.1	Explain the types of sensory and perceptual difficulties that many autistic people experience
	5.2	Develop, with appropriate professional support, a sensory management strategy
	5.3	Implement a sensory management strategy to meet the needs of individuals who have problems with sensory processing
	5.4	Create environments which prevent sensory overload or increase sensory stimulation, depending on the needs of the individual
<p>Assessment:</p> <p>This unit must be assessed in accordance with the Skills for Care Assessment Principles.</p> <p>Learning Outcomes 3, 4 and 5 must be assessed in a real work environment. Simulation is not permitted for this unit.</p>		

Guidance notes:

Whilst autistic spectrum is still used, the preferred term for individuals is now autistic people as opposed to individuals with autistic spectrum conditions.

The terminology chosen to describe the Autistic Spectrum in this unit is Autistic Spectrum Condition (ASC), one of several different usages in this field. In diagnosis and other clinical and research settings, the more usual term is Autism Spectrum Disorders (ASDs). Other usages, such as 'autism' as an umbrella term for the spectrum, are also frequently used informally and by organisations such as the National Autistic Society. ASC has been chosen here since it forms a more neutral and less medical phrase than ASDs in this context.

Assessment Criteria 1.5, 1.6, 2.1, 3.1, 3.4, 3.5, 3.6, 4.3, 4.4, 5.1, 5.3 and 5.4: **An individual** is someone requiring care or support.

Assessment Criteria 3.1: **Different approaches** should include multi-agency approaches.

Assessment Criteria 3.5: **Vulnerability** covers areas such as: being exploited or abused; violating the law without realising s/he is doing something harmful; being the victim of cyber-bullying.

Assessment Criteria 3.6, 4.1 and 4.2: **Behaviour** includes non-verbal communication and behaviour that can present challenges.

Assessment Criteria 4.3: **Relevant Professionals** can include:

- > Speech and language professionals
- > Psychologists
- > Specialist nurses

The Use of Technology and Data in Adult Social Care

Unit Reference	J/651/8803	
Level	5	
Credit Value	3	
Guided Learning (GL)	10 hours	
Unit Summary	<p>The aim of this unit is to provide learners with the skills and knowledge to be able to develop a comprehensive understanding of the use of technology and data in adult social care, including the legislative and policy frameworks, the benefits and risks associated with technology, the importance of data governance, and the processes that ensure ethical, safe, and innovative care delivery. This unit aims to equip learners with the knowledge and skills to critically evaluate technology and data practices, support personalised and empowered care, and address the challenges of privacy, consent, and data security.</p>	
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.2)	
The learner will	The learner can	
1. Understand the national context around the use of technology and data in the delivery of care	1.1	Outline the current legislation and policy relating to the use of technology and data in adult social care
	1.2	Analyse how key drivers, enablers and priorities affect the use of technology and data within adult social care organisations
2. Understand how technology and the use of data benefits people and the quality of care they receive	2.1	Identify what technology is important and beneficial to the delivery of care
	2.2	Outline the value and importance of the types of data that are stored, processed and shared within your organisation

	2.3	Assess how using technology and data can innovate, transform and personalise the delivery of care
	2.4	Analyse how using technology and data can support people's wider health, well-being and independence
3. Understand the role of data protection, safeguarding and ethical practice when using technology in the delivery of care	3.1	Explain the rules and processes that exist around people's rights to privacy, and their rights to consent, in the use and sharing of personal and sensitive data involved in the delivery of their care
	3.2	Explain how the use of technology can support the autonomy, empowerment and choices of people accessing care
	3.3	Analyse potential risks presented by the use of technology and sharing of data in the delivery of care
	3.4	Propose ways to identify, manage and address potential risks
4. Understand the legal requirements and governance of data within your organisation	4.1	Explain the importance of processes in place to meet legal responsibilities and data governance requirements
	4.2	Describe the actions and procedures required in the event of a data breach, and the different roles involved
<p>Assessment:</p> <p>This unit must be assessed in accordance with the Skills for Care Assessment Principles.</p> <p>Any skills-based element within the unit must be assessed in the workplace or using workplace-based evidence.</p> <p>Simulation is not permitted for this unit.</p>		
<p>Guidance notes:</p> <p>Assessment criteria 1.1 and 1.2:</p>		

Legislation and Policy: Learners should show an understanding of the national and strategic picture behind the use of technology and data within adult social care. This can include the wider strategic initiatives for the digitisation of care, the integration of health and social care and wider sharing of digital information through the development of Integrated Care Systems and improving cybersecurity across the health and care sectors. Cited policy/legislative examples could include:

- > People at the Heart of Care (2021)
- > A Plan for Digital Health and Social Care (2022)
- > Data Saves Lives (2022)
- > Health and Care Act (2022)
- > Transforming for a Digital Future (2022)
- > Digital Skills Framework (2023)
- > Care Quality Commission (CQC) Guidance (Information, Records & Technology) (2023)
- > Cybersecurity Strategy for Health and Social Care to 2030 (2023)
- > Digital mental health technology: qualification and classification (2025)

Key drivers: enablers and priorities could include:

- > Improvements in the quality of care services and care outcomes
- > Digitisation in adult social care
- > Local authorities and their wider digitisation strategy
- > Integrated care systems and improved data sharing and interoperability
- > Developing a highly skilled workforce that can implement new technologies and address emerging challenges (e.g., AI)
- > Cybersecurity

Assessment criteria 2.1:

Technology: Learners can reference technology that can benefit people's quality of life, the quality of their care, and the provision of their care.

Examples of technology that can benefit people's quality of life can include:

- > Wearable and acoustic technologies
- > Devices that can remind or notify people of events and information ▪ smart home technologies
- > Communication technologies
- > GPS tracking
- > Equipment to aid mobility
- > Assistive technologies (to support people with accessibility requirements in accessing information and services)
- > Access to the internet and web browser software

- > Smartphone applications

Examples of technology that can benefit people's quality of care can include:

- > Technologies worn by staff
- > Telecare
- > Diagnostic tools
- > Digital care records
- > Electronic care plans

Examples of technology that can benefit people's provision of care can include:

- > Rota and care management systems
- > Databases
- > Business software
- > AI and robotics

Assessment criteria 2.2:

Types of Data: Learners could differentiate the data items held to support the delivery of care. Examples can include:

- > Demographic and personal details
- > Contact details
- > Medical history
- > Medications
- > Allergies
- > Capacity
- > Power of attorney
- > Care plans and assessments

The learner can also raise how data can provide useful insights and intelligence for improving care delivery.

Assessment criteria 2.3:

Using Technology and Data: Learners should be able to assess how different technology and the use of data benefits people and the delivery of their care, within a care setting or in their own home.

This could include improved responsiveness and effectiveness in the delivery of care due to improved and faster access to electronic information. It could also include improved care outcomes due to better access to technologies that can

provide greater empowerment, autonomy and opportunities to people accessing care.

Assessment criteria 3.1:

Rules and Processes: This answer can include reference to the rules and processes around individuals right to privacy, and their rights to consent or opt-out around the sharing of personal or sensitive data held about them. It can include reference to a privacy notice, and how people are informed of their rights over the use and sharing of their data.

There could also be clarification of the role of a Caldicott Guardian within their organisation. A Caldicott Guardian is a senior role within an adult social care organisation and responsible for the safeguarding and confidentiality of the personal information of people accessing care, and that the data is used ethically, legally and appropriately.

Assessment criteria 3.2:

Autonomy, Empowerment and Choices: Learners could provide insights and illustrations into how technology can support people to make independent decisions and choices. It could include examples in how technology can help an individual to personalise their care, and to give them opportunities to engage with their communities, build their careers, and pursue interests and social activities.

Assessment criteria 3.3:

Potential Risks: This answer can explore areas where technology can have a detrimental and harmful impact on individuals either working or accessing care within a care setting or in a person's own home.

Examples could include exposure to online content or interactions which could cause psychological harm, such as cyberbullying or inappropriate material.

There could also be the risks of exploitation, fraud and identity theft.

Technology may also be detrimental for people with particular conditions who may benefit more from differently accessible solutions. People may exercise their choice and control over their preference and use of technology, and may not wish to be forced to use particular systems or devices. There are also risks with the use of language software and the AI generation of content from data where it may not be appropriate, reliable or quality-checked if used to improve the quality or provision of a person's care.

Assessment criteria 3.4:

Identify, Manage and Address These Risks: These issues could be managed either through finding alternative technology solutions, or non-technological solutions. Learners may wish to provide case examples or illustrations. There can be reference to risk management processes to identify, manage and mitigate/resolve risks.

Assessment criteria 4.1:

Legal Responsibilities and Data Governance Requirements: This can include reference to Care Quality Commission (CQC) regulations and key lines of enquiry, and reporting requirements in how social care data is managed by the organisation. There should be an understanding about what legal responsibilities there are under the Data Protection Act and the General Data Protection Regulation (GDPR) in how data is processed, shared, archived and deleted. There could also be reference to the Data Security & Protection Toolkit (DSPT).

Assessment criteria 4.2:

Data Breach: There is an expectation that learners will already know the definition of a data breach within their organisation, but can describe their responsibilities to report the incident and notify the Data Security & Protection Lead in their organisation. If the breach is serious and risks people’s individual rights and freedoms, it should be reported to the Information Commissioners Office (ICO). There should be a plan of action for addressing the breach and mitigating/preventing any future risk. There should be an understanding of how a breach impacts different stakeholders, including people accessing care and support, their families and staff.

Please see below for definitions and details on some of the common terms used within this unit.

Term	Definition / Description
Digital	In the context of adult social care learning & development, the term 'digital' is defined as the adoption and use of technology to support the secure and effective delivery of services across the care sector and training providers. In broader terms, digital can include technology and computer systems and encompasses a variety of subjects including use of the internet, technology enabled care, social media, digital care applications, consumer or mainstream technology, cybersecurity, learning online, machine learning and artificial intelligence.

Care setting	A care setting is a location where care is being provided. Care settings can include nursing or residential homes, supported accommodation, day centres or peoples' own homes.
Care technology	Care technologies (such as tools, devices or software) can be used by an individual, their carer or care provider to support quality of life and the provision of high quality, safe and personalised care. They include specialist solutions to support delivery of care, technologies for providers to facilitate care, and consumer devices, smart home technologies or telecare that can help an individual live more independently. Care technologies are primarily digital and do not include medical devices, single use products or home adaptations like grab rails.
Digital leadership	Digital leadership is where people take the lead in their organisation to drive the adoption and use of technology, alongside the development of their workforce's digital skills to better deliver care services, as well as wider business and management activities. Within social care, this is sometimes those who have a designated role as a leader, in other cases this can be someone who leads in this area without a formal role as a leader.
Digital leaders	Digital leaders in adult social care are creative, innovative people with strong networking and collaboration skills, who can persuade, mobilise and lead social care staff and others.
Digital champions	Digital champions are individuals within an organisation who promote, engage and support individuals with the use of technology. They champion new ways of working with technology, sharing enthusiasm, knowledge and good practice. They support people accessing services in the learning and use of technology and support the upskilling of staff with peer-to-peer support.
Digital maturity	'Digital maturity' is a measure of how capable and sophisticated an organisation is in their adoption and use of technology. It can include different dimensions including the culture of the organisation to support innovation, digital leadership, workforce skills to support digital working, and the capability to use digital technology. A digitally mature adult social care provider may be paper free and use technology to manage their day-to-day services and delivery of care. They may have a detailed website with access to a wide range of information and media. They may have strict processes

	in place over how they protect the data held on their computers. The provider's services may also benefit from systems which can help them learn how to best tailor services to meet the needs of people receiving care and support.
Digital confidence	Digital confidence can be defined as the confidence people feel in being able to use technology within their organisation, or supporting others (such as people accessing care or colleagues) in its use. If people have greater knowledge, experience and assurances in using technology, they can have a greater level of digital confidence, and this in turn may lead to improved capabilities and outcomes involving the use of technology within the organisation (such as in the delivery of care).
Data protection	Data protection is defined as the legal control over access to and use of data stored in computers. In practice it represents a range of business processes and activities carried out by organisations to control and protect this stored data. Within the domain of adult social care, this is particularly important given the sensitive, confidential, and critical nature of information that is held on people receiving care and support.
Cybersecurity	Cybersecurity is defined as protection against criminal or unauthorised use of electronic data held by an organisation and encompasses the security measures and processes that are involved in doing this.

Implementing Technology in Adult Social Care

Unit Reference	K/651/8804	
Level	5	
Credit Value	3	
Guided Learning (GL)	10 hours	
Unit Summary	<p>The aim of this unit is to provide learners with the skills and knowledge to be able to plan, implement, and sustain digital technology in adult care settings by identifying success factors, engaging stakeholders, and leveraging relationships with external organisations to drive innovation and ensure effective integration of technology.</p>	
Learning Outcomes (1 to 2)	Assessment Criteria (1.1 to 2.1)	
The learner will	The learner can	
1. Know how to plan, assess and select new technology for use within an adult care setting	1.1	Identify the key benchmarks, outcomes and success factors that needs to be measured when introducing new technology within an adult care setting
	1.2	Distinguish the factors you need to consider when planning to embed digital technology within an adult care setting
	1.3	Identify the key stakeholders and decision-makers involved in the planning and selection of technology
	1.4	Describe how you would consult and engage with your stakeholders to inform implementation
	1.5	Explain the processes for how you would assess and select technology to meet your organisation's informational and service requirements

2. Understand how external relationships influence the delivery and ongoing use of technology	2.1	Assess how good relationships with external organisations could support innovation, planning, introduction and ongoing use of technology within an adult care setting
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Assessment:

This unit **must** be assessed in accordance with the Skills for Care Assessment Principles.

Any skills-based element within the unit **must** be assessed in the workplace or using workplace-based evidence.

Simulation is **not permitted** for this unit.

Guidance notes:

Assessment criteria 1.1:

Key Benchmarks, Outcomes and Success: Successful outcomes with the use of technology could be measured quantifiably such as through increased volume of data and user traffic, but also qualitatively through discussions and testimonials with staff and people accessing care over how technology has improved their experiences and quality of life.

Examples of success factors can include:

- > A demonstrable increase in the volume and use of digital information involved in the delivery of a person’s care
- > People accessing care being able to contact family and friends more frequently or take up new social or work opportunities because of increased use of the internet and communications technologies
- > Improved access and uptake in the use of technology by people who may have accessibility requirements in their ability to use technology (e.g., devices and software)

Assessment criteria 1.2:

Factors: These organisational factors could include infrastructural constraints, for example:

- > Electrical lines
- > Phone lines
- > Internet connectivity

- > Existing technology and its compatibility
- > Existing commercial arrangements (such as what licenses or service agreements are in place for existing technology)
- > Data requirements for service delivery
- > Internal and external data reporting, and sharing with other organisations
- > Data protection requirements

Assessment criteria 1.3:

Stakeholders: Stakeholders can include people accessing services, staff, technology suppliers, local authorities and commissioners, health practitioners (including GPs, ICS teams), regulatory bodies, carers and family members of people accessing care.

Assessment criteria 1.4:

Consult and Engage with your Stakeholders: This answer can illustrate how a digital leader would capture the stakeholder needs to establish the specifications of technology to be selected and/or inform implementation. This could include stakeholder mapping, strengths/weaknesses/opportunities/threats (SWOT), cost/benefit analysis, options appraisals, understanding accessibility requirements, and other needs gathering exercises (e.g., surveys, polls, risk assessments and consultation/focus groups).

Assessment criteria 1.5:

Assess and Select Technology: This answer can include reference to tendering and procurement processes for the review and selection of technology products and services. It can include analysis and appraisal of options against requirements and technical specifications, and how decisions are informed, fair and transparent.

There needs to be consideration of how solutions are sustainable, and potential exit strategies if there are dependencies on particular areas or types of technology.

There should be emphasis on proper understanding of terms and conditions within a contract, including additional charges and arrangements concerning the access of data, and exit clauses (such as to avoid vendor 'lock-in').

Assessment criteria 2.1:

Good Relationships with External Organisations: This can include detail on how to manage different stakeholders, and the development of networks or communities of practice to support innovation and planning around new

technology, and to influence or negotiate an organisation’s technology strategy. It could reference integrated care systems.

There needs to be emphasis that relationships with suppliers involve mutual understanding of business and services being provided, and the current level of digital maturity* within the care setting.

Please see below for definitions and details on some of the common terms used within this unit.

Digital	In the context of adult social care learning & development, the term ‘digital’ is defined as the adoption and use of technology to support the secure and effective delivery of services across the care sector and training providers. In broader terms, digital can include technology and computer systems and encompasses a variety of subjects including use of the internet, technology enabled care, social media, digital care applications, consumer or mainstream technology, cybersecurity, learning online, machine learning and artificial intelligence.
Adult Care setting	An adult care setting is a location where care is being provided. Adult care settings can include nursing or residential homes, supported accommodation, day centres or peoples’ own homes.
Care technology	Care technologies (such as tools, devices or software) can be used by an individual, their carer or care provider to support quality of life and the provision of high quality, safe and personalised care. They include specialist solutions to support delivery of care, technologies for providers to facilitate care, and consumer devices, smart home technologies or telecare that can help an individual live more independently. Care technologies are primarily digital and do not include medical devices, single use products or home adaptations like grab rails.
Digital leadership	Digital leadership is where people take the lead in their organisation to drive the adoption and use of technology, alongside the development of their workforce’s digital skills to better deliver care services, as well as wider business and management activities. Within social care, this is sometimes those who have a designated role as a leader, in other cases this can be someone who leads in this area without a formal role as a leader.

Digital leaders	Digital leaders in adult social care are creative, innovative people with strong networking and collaboration skills, who can persuade, mobilise and lead social care staff and others.
Digital champions	Digital champions are individuals within an organisation who promote, engage and support individuals with the use of technology. They champion new ways of working with technology, sharing enthusiasm, knowledge and good practice. They support people accessing services in the learning and use of technology and support the upskilling of staff with peer-to-peer support.
Digital maturity	'Digital maturity' is a measure of how capable and sophisticated an organisation is in their adoption and use of technology. It can include different dimensions including the culture of the organisation to support innovation, digital leadership, workforce skills to support digital working, and the capability to use digital technology. A digitally mature adult social care provider may be paper free and use technology to manage their day-to-day services and delivery of care. They may have a detailed website with access to a wide range of information and media. They may have strict processes in place over how they protect the data held on their computers. The provider's services may also benefit from systems which can help them learn how to best tailor services to meet the needs of people receiving care and support.
Digital confidence	Digital confidence can be defined as the confidence people feel in being able to use technology within their organisation, or supporting others (such as people accessing care or colleagues) in its use. If people have greater knowledge, experience and assurances in using technology, they can have a greater level of digital confidence, and this in turn may lead to improved capabilities and outcomes involving the use of technology within the organisation (such as in the delivery of care).
Data protection	Data protection is defined as the legal control over access to and use of data stored in computers. In practice it represents a range of business processes and activities carried out by organisations to control and protect this stored data. Within the domain of adult social care, this is particularly important given the sensitive, confidential, and critical nature of information that is held on people receiving care and support.

Cybersecurity	Cybersecurity is defined as protection against criminal or unauthorised use of electronic data held by an organisation and encompasses the security measures and processes that are involved in doing this.
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Leading Change, Learning & Improvement in Adult Social Care

Unit Reference	L/651/8805	
Level	5	
Credit Value	6	
Guided Learning (GL)	20 hours	
Unit Summary	<p>The aim of this unit is to provide learners with the skills and knowledge to be able to understand the challenges to using new and existing technology within an adult care setting and how to overcome them. The learner will also understand how to lead a positive digital learning environment and provide opportunities for staff to build their digital skills, confidence and well-being.</p>	
Learning Outcomes (1 to 4)	Assessment Criteria (1.1 to 4.2)	
The learner will	The learner can	
1. Understand the challenges to using new and existing technology within an adult care setting and how to overcome them	1.1	Identify what challenges exist for staff and people accessing services in learning and using new technology
	1.2	Assess how the organisation can overcome these challenges and the role of a leader in providing assurance, direction and support
2. Understand how to lead a positive digital learning environment	2.1	Analyse how digital skills requirements and gaps are addressed within staff processes and embedded within staff learning and development
	2.2	Explain what resources can ensure staff are supported to reflect upon and self-assess their digital skills
	2.3	Assess the value of peer-to-peer support, the sharing of good practice

	2.4	Analyse the role of a digital champion in embedding the use of technology, co-producing solutions and new innovations
	2.5	Explain how the organisation facilitates continuous digital learning and development for the workforce and people accessing services
3. Understand how to work with and learn from stakeholders about the ways in which technology can support staff learning	3.1	Explain how you could work with stakeholders to learn, develop and promote digital learning opportunities for your staff
4. Be able to understand how to drive continuous improvement in the use of technology in the delivery of care	4.1	Explain how your organisation could monitor and evaluate outcomes and feedback from the use of technology
	4.2	Analyse how the outcomes of monitoring and evaluation can enable continuous innovation and improvement

Assessment:

This unit **must** be assessed in accordance with the Skills for Care Assessment Principles.

Any skills-based element within the unit **must** be assessed in the workplace or using workplace-based evidence.

Simulation is **not permitted** for this unit.

Guidance notes:

Assessment criteria 1.1:

Challenges: Challenges to the uptake of technology within a care setting or within a person’s home could include:

- > Cost (affordability of the purchase and maintenance of the technology)
- > Time (the limited capacity of staff to be able to learn and develop skills with technology against ongoing responsibilities and work pressures)
- > Infrastructural (can the technology be implemented within the setting if there are structural limitations e.g., electrical lines, phone lines etc.)

- > Linguistic (people may have challenges with technology due to language barriers)
- > Confidence in using technology
- > Existing knowledge, skills & capabilities
- > Accessibility (people may have learning or sensory impairments that make it difficult for them to access or benefit from the use of technology)
- > Technological (existing technology may not be compatible with new technology, and an organisation may be limited and constrained to a particular group of compatible technologies or 'product stack')

Assessment criteria 1.2:

Assess: This could include an action plan and risk assessment, with an explanation on how the learner is drawing on information to overcome identified challenges.

Assessment criteria 2.1:

Digital Skills Requirements and Gaps: This could include reference to the digital skills framework, the use of a training needs analysis, use of a learning management system, and detail about the organisational processes involved in the appraisal, induction and ongoing training of staff in line with learning requirements.

Assessment criteria 2.2:

Resources: Learners may wish to reference their own organisation's resources or outline potential ways that this personal reflection can be achieved through appraisals, supervisions, workshops or other staff events.

Assessment criteria 2.3:

Digital Champion: This answer could include reference to digital champions in providing detail on peer-to-peer support and good practice with technology.

Assessment criteria 2.4:

Continuous Digital Learning and Development: The learner may wish to reference policies, procedures, tools and resources, enabling the continuous learning and development of staff.

Assessment criteria 3.1:

Work with Stakeholders: This can include detail of stakeholder management practice and reference to developing, attending, and contributing to external

networks or communities of practice to support wider learning opportunities for staff.

This can inform staff learning around using, or relating to technology in the delivery of care. Examples of stakeholders can include (this list is not exhaustive):

- > Internal staff
- > People accessing care and support
- > Family members and carers of people accessing care and support
- > Other care organisations
- > Integrated care systems
- > Local authorities

Assessment criteria 4.1:

Monitor and Evaluate Outcomes: This answer can include reference to an iterative cycle of development, where technology is implemented, reviewed and then further developed in line with feedback and changing outcomes and requirements.

Work with Stakeholders: Learners can explain how different stakeholders are feeding back into the technology that is being used.

Monitor and Evaluate Outcomes: There should be detail in how data being collected is being used to improve performance, and an appraisal of the current benefits of technology for person-centred care (against performance metrics and indicators) to determine if further changes and improvements are needed.

Please see below for definitions and details on some of the common terms used within this unit.

<p>Digital</p>	<p>In the context of adult social care learning & development, the term 'digital' is defined as the adoption and use of technology to support the secure and effective delivery of services across the care sector and training providers. In broader terms, digital can include technology and computer systems and encompasses a variety of subjects including use of the internet, technology enabled care, social media, digital care applications, consumer or mainstream technology, cybersecurity, learning online, machine learning and artificial intelligence.</p>
<p>Adult Care setting</p>	<p>An adult care setting is a location where care is being provided. Adult care settings can include nursing or</p>

	residential homes, supported accommodation, day centres or peoples' own homes.
Care technology	Care technologies (such as tools, devices or software) can be used by an individual, their carer or care provider to support quality of life and the provision of high quality, safe and personalised care. They include specialist solutions to support delivery of care, technologies for providers to facilitate care, and consumer devices, smart home technologies or telecare that can help an individual live more independently. Care technologies are primarily digital and do not include medical devices, single use products or home adaptations like grab rails.
Digital leadership	Digital leadership is where people take the lead in their organisation to drive the adoption and use of technology, alongside the development of their workforce's digital skills to better deliver care services, as well as wider business and management activities. Within social care, this is sometimes those who have a designated role as a leader, in other cases this can be someone who leads in this area without a formal role as a leader.
Digital leaders	Digital leaders in adult social care are creative, innovative people with strong networking and collaboration skills, who can persuade, mobilise and lead social care staff and others.
Digital champions	Digital champions are individuals within an organisation who promote, engage and support individuals with the use of technology. They champion new ways of working with technology, sharing enthusiasm, knowledge and good practice. They support people accessing services in the learning and use of technology and support the upskilling of staff with peer-to-peer support.
Digital maturity	'Digital maturity' is a measure of how capable and sophisticated an organisation is in their adoption and use of technology. It can include different dimensions including the culture of the organisation to support innovation, digital leadership, workforce skills to support digital working, and the capability to use digital technology. A digitally mature adult social care provider may be paper free and use technology to manage their day-to-day services and delivery of care. They may have a detailed website with access to a wide range of information and media. They may have strict processes in place over how they protect the data held on their computers. The provider's services may also benefit

	from systems which can help them learn how to best tailor services to meet the needs of people receiving care and support.
Digital confidence	Digital confidence can be defined as the confidence people feel in being able to use technology within their organisation, or supporting others (such as people accessing care or colleagues) in its use. If people have greater knowledge, experience and assurances in using technology, they can have a greater level of digital confidence, and this in turn may lead to improved capabilities and outcomes involving the use of technology within the organisation (such as in the delivery of care).
Data protection	Data protection is defined as the legal control over access to and use of data stored in computers. In practice it represents a range of business processes and activities carried out by organisations to control and protect this stored data. Within the domain of adult social care, this is particularly important given the sensitive, confidential, and critical nature of information that is held on people receiving care and support.
Cybersecurity	Cybersecurity is defined as protection against criminal or unauthorised use of electronic data held by an organisation and encompasses the security measures and processes that are involved in doing this.

Recognition of Prior Learning (RPL), Exemptions, Credit Transfers and Equivalencies

Skills and Education Group Awards policy enables learners to avoid duplication of learning and assessment in a number of ways:

- > **Recognition of Prior Learning (RPL)** – a method of assessment that considers whether a learner can demonstrate that they can meet the assessment requirements for a unit through knowledge, understanding or skills they already possess and do not need to develop through a course of learning.
- > **Exemption** - Exemption applies to any certificated achievement which is deemed to be of equivalent value to a unit within Skills and Education Group Awards qualification, but which does not necessarily share the exact learning outcomes and assessment criteria. It is the assessor's responsibility, in conjunction with the Internal Moderator, to map this previous achievement against the assessment requirements of the Skills and Education Group Awards qualification to be achieved in order to determine its equivalence.
 - > Any queries about the relevance of any certificated evidence should be referred in the first instance to your centre's internal moderator and then to Skills and Education Group Awards.
 - > It is important to note that there may be restrictions upon a learner's ability to claim exemption or credit transfer which will be dependent upon the currency of the unit/qualification and a learner's existing levels of skill or knowledge.
 - > Where past certification only provides evidence that could be considered for exemption of part of a unit, learners **must** be able to offer additional evidence of previous or recent learning to supplement their evidence of achievement.
- > **Credit Transfer** – Skills and Education Group Awards may attach credit to a qualification, a unit or a component. Credit transfer is the process of using certificated credits achieved in one qualification and transferring that achievement as a valid contribution to the award of another qualification. Units/Components transferred **must** share the same learning outcomes and assessment criteria along with the same unit number. Assessors **must** ensure that they review and verify the evidence through sight of:
 - > Original certificates OR
 - > Copies of certificates that have been signed and dated by the internal moderator confirming the photocopy is a real copy and make these available for scrutiny by the External Moderator.
- > **Equivalencies** – opportunities to count credits from the unit(s) from other qualifications or from unit(s) submitted by other recognised organisations towards the place of mandatory or optional unit(s) specified in the rule of combination. The unit **must** have the same credit value or greater than the unit(s) in question and be at the same level or higher.

Skills and Education Group Awards encourages its centres to recognise the previous achievements of learners through Recognition of Prior Learning (RPL), Exemption, Credit Transfer and Equivalencies. Prior achievements may have resulted from past or present employment, previous study or voluntary activities. Centres should provide advice and guidance to the learner on what is appropriate evidence and present that evidence to the external moderator in the usual way.

Further guidance can be found in 'Delivering and Assessing Skills and Education Group Awards Qualifications' which can be downloaded from skillsandeducationgroupawards.co.uk/for-centres

Certification

Learners will be certificated for all units and qualifications that are achieved and claimed.

Skills and Education Group Awards' policies and procedures are available on the website.

Exemptions

This qualification contains no exemptions. For further details see Recognition of Prior Learning (RPL), Exemptions, Credit Transfers and Equivalencies.

Glossary of Terms

GL (Guided Learning)

GL is where the learner participates in education or training under the immediate guidance or supervision of a tutor (or other appropriate provider of education or training). It may be helpful to think – ‘Would I need to plan for a member of staff to be present to give guidance or supervision?’

GL is calculated at qualification level and not unit/component level.

Examples of Guided Learning include:

- > Face-to-face meeting with a tutor
- > Telephone conversation with a tutor
- > Instant messaging with a tutor
- > Taking part in a live webinar
- > Classroom-based instruction
- > Supervised work
- > Taking part in a supervised or invigilated formative assessment
- > The learner is being observed as part of a formative assessment.

TQT (Total Qualification Time)

The number of notional hours which represents an estimate of the total amount of time that could reasonably be expected to be required, in order for a learner to achieve and demonstrate the achievement of the level of attainment necessary for the award of a qualification.’ The size of a qualification is determined by the TQT.

TQT is made up of the Guided Learning (GL) plus all other time taken in preparation, study or any other form of participation in education or training but not under the direct supervision of a lecturer, supervisor or tutor.

TQT is calculated at qualification level and not unit/component level.

Examples of unsupervised activities that could contribute to TQT include:

- > Researching a topic and writing a report
- > Watching an instructional online video at home/e-learning
- > Watching a recorded webinar
- > Compiling a portfolio in preparation for assessment
- > Completing an unsupervised practical activity or work
- > Rehearsing a presentation away from the classroom
- > Practising skills unsupervised
- > Requesting guidance via email – will not guarantee an immediate response.