# Level 2 Award in Awareness of Dementia and Certificate in Dementia Care (3565)



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# **Qualification handbook for centres**

3565-21/91: 501/1146/2 3565-22/92: 501/1206/5



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# Level 2 Award in Awareness of Dementia and Certificate in Dementia Care (3565)



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Qualification title	Number	QAN
Level 2 Award in Awareness of Dementia	3565-21	501/1146/2
Level 2 Certificate in Dementia Care	3565-22	501/1206/5

Version and date	Change detail	Section
1.3 Jan 2012	Moderate change to unit	Units
1.3 Jul 2012	corrected end date	Introduction to the Qualifications
1.5 April 2013	Assessment criteria 4 in Outcome 2 of unit 006 and Assessment criteria 5 in Outcome 4 of unit 008 amended.	Units
1.6 November 2014	End dates removed	Introduction
2.0 December 2014	Learning Outcomes for units 010,011,012,015 amended	Units
2.1 August 2017	Added GLH and TQT details	Introduction to the Qualification
	Removed QCF	Assessment, Unit 009 and 013, Appendix 2

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# 1 Introduction to the qualifications

This document contains the information that centres need to offer the following qualifications:

Qualification title and level	GLH	тот	City & Guilds qualificat ion number	Qualification accreditation number
Level 2 Award in Awareness of Dementia	72	80	3565-21	501/1146/2
Level 2 Certificate in Dementia Care	131	180	3565-22	501/1206/5

Area	These qualifications			
Who are the qualifications for?	These qualifications are aimed at a diverse range of job roles and occupational areas across all service user groups and ages, working in statutory (including NHS), private and voluntary agencies. This would be suitable for anyone aged 16 or older, who have an interest in operating in a caring role for older people.			
	These roles include (across the level 2 and level 3 qualifications):			
	• Care assistants/support workers/key workers in residential settings			
	<ul> <li>Healthcare assistants/support workers in community and primary care environments or acute health environments</li> </ul>			
	Care assistants/support workers/key workers in domiciliary services			
	Care assistants/support workers/key workers in day services			
	<ul> <li>Support workers in supported living projects</li> </ul>			
	<ul> <li>Community-based care assistants/support workers/key workers, including those working in specialist areas eg dementia, learning disabilities</li> </ul>			
	Family support workers			
	<ul> <li>Personal assistants employed directly by the individual they support or their families</li> </ul>			
	<ul> <li>Senior workers in above services</li> </ul>			
	<ul> <li>First line supervisors working at level 3</li> </ul>			
	<ul> <li>Team leaders working at level 3</li> </ul>			
	<ul> <li>Emerging new types of workers and multidisciplinary health roles crossing traditional service barriers and delivery models</li> </ul>			
	Informal and family carers			
What do the qualifications cover?	A range of opportunities to support workers in developing their knowledge, skills and understanding of people that have dementia.			
Why have the qualifications been developed?	They are designed to help meet the dementia strategies for the UK and so improve health and care services supporting individuals diagnosed with dementia.			

# 1.1 Qualification structure

To achieve the Level 2 Award in Awareness of Dementia, learners must achieve eight credits from the mandatory units. The table below illustrates the unit titles, the guided learning hours (GLH) and the credit value of each unit which will be awarded to candidates successfully completing the required units.

Unit accreditatio n number	SSC unit code	City & Guilds unit number	Unit title	Mandatory / optional for full qualificatio n	Credit value	GL H
J/601/2874	DEM 201	3565-001	Dementia awareness	Mandatory	2	17
H/601/2879	DEM 202	3565-002	The person centred approach to the care and support of individuals with dementia	Mandatory	2	17
T601/9416	DEM 205	3565-003	Understand the factors that can influence communication and interaction with individuals who have dementia	Mandatory	2	18
A/601/2886	DEM 207	3565-004	Understand equality, diversity and inclusion in dementia care	Mandatory	2	20

To achieve the Level 2 Certificate in Dementia Care learners must achieve 14 credits from the mandatory units and 4 credits from the optional units making a total of 18 credits minimum. The table below illustrates the unit titles, the guided learning hours (GLH) and the credit value of each unit which will be awarded to candidates successfully completing the required units.

Unit accreditatio n number	SSC unit code	City & Guilds unit number	Unit title	Mandatory / optional for full qualificatio n	Credit value	GL H
J/601/2874	DEM 201	3565-001	Dementia awareness	Mandatory	2	17
F/601/3683	DEM 204	3565-005	Understand and implement a person centred approach to the care and support of individuals with dementia	Mandatory	3	21

Unit accreditatio	SSC unit	City & Guilds	Unit title	Mandatory	Credit value	GL H
n number	code	unit number		optional for full qualificatio n	value	
Y/601/9277	DEM 209	3565-006	Equality, diversity and inclusion in dementia care practice	Mandatory	3	24
A/601/9434	DEM 210	3565-007	Understand and enable interaction and communication with individuals with dementia	Mandatory	3	19
H/601/9282	DEM 211	3565-008	Approaches to enable rights and choices for individuals with dementia whilst minimising risks	Mandatory	3	25
A/601/9546	HSC 2031	3565-009	Contribute to support of positive risk-taking for individuals	Optional	3	27
R/601/8256	HSC 2022	3565-010	Contribute to the care of a deceased person	Optional	3	24
D/601/9023	HSC 2001	3565-011	Provide support for therapy sessions	Optional	2	14
L/601/9471	HSC 2023	3565-012	Contribute to supporting group care activities	Optional	3	23
L/601/6442	LD 202	3565-013	Support person-centred thinking and planning	Optional	5	34
Y/601/3446	SSOP 2.1	3565-014	Introductory awareness of models of disability	Optional	2	15
H/601/3451	SSOP 2.4	3565-015	Contribute to supporting individuals in the use of assistive technology	Optional	3	19
K/601/9199	DEM 305	3565-102	Understand the administration of medication to individuals with dementia using a person centred approach	Optional	2	15
T/601/9187	DEM 302	3565-108	Understand and meet the nutritional requirements of individuals with dementia	Optional	3	26
A/601/9546	HSC 3047	3565-109	Support the use of medication in social care	Optional	5	40
T/601/9495	HSC 3048	3565-113	Support individuals at the end of life	Optional	7	53
H/601/8049	HSC 3020	3565-116	Facilitate person centred assessment, planning, implementing & review	Optional	6	45

Unit accreditatio n number	SSC unit code	City & Guilds unit number	Unit title	Mandatory / optional for full qualificatio n	Credit value	GL H
F/602/0097	CMH 301	3565-120	Understand mental well- being and mental health promotion	Optional	3	14
M/502/3146	ADV 301	3565-121	Purpose and principles of independent advocacy	Optional	4	25
F/502/3295	ADV 305	3565-422	Independent Mental Capacity advocacy	Optional	12	35

# **Total Qualification Time**

Total Qualification Time (TQT) is the total amount of time, in hours, expected to be spent by a Learner to achieve a qualification. It includes both guided learning hours (which are listed separately) and hours spent in preparation, study and assessment.

Title and level	GLH	тот	
Level 2 Award in Awareness of Dementia	72	80	
Level 2 Certificate in Dementia Care	131	180	

# 1.2 Opportunities for progression

#### L2 Award in Awareness of Dementia

The knowledge gained through the achievement of this qualification can be used to demonstrate competence in the Level 2 Certificate in Dementia Care. The achievement can also be mapped to the Level 2 Diploma in Health and Social Care.

#### L2 Certificate in Dementia Care

This qualification is part of a suite of qualifications in dementia care. The knowledge and skills gained through the achievement of this qualification can also be mapped to the Level 2 Diploma in Health and Social Care.

Completion of either of these qualifications can also enable candidates to progress to employment or to the following City & Guilds qualifications:

- Level 3 Award in Awareness of Dementia or Certificate in Dementia Care
- 3561: Working in Community Mental Health Care
- 3062: Supporting the Mental health and Well-being of Older People.

# 1.3 Qualification support materials

City & Guilds also provides the following publications and resources specifically for this these qualifications:

Description	How to access		
Assignment guide for centres	City & Guilds Walled Garden		
Assignment guide candidates	City & Guilds website		

# 2 Centre requirements

# **Approval**

This section outlines the approval processes for Centres to offer these qualifications and any resources that Centres will need in place to offer the qualifications including qualification-specific requirements for Centre staff.

# Centres already offering City & Guilds qualifications in this subject area

Fast track approval is available for this qualification for centres who already offer any of the following qualifications:

3172 NVO in Health and Social Care

3176 Working in the Health Sector

3179 Certificate in Health and Social Care

4222 Diplomas in Health and Social Care

4229 Certificate in Preparing to Work in Adult Social Care

# 2.1 Resource requirements

#### **Human resources**

To meet the quality assurance criteria for these qualifications, the centre must ensure that the following internal roles are undertaken:

- Quality Assurance Coordinator
- Trainer/Tutor
- Assessor (occupationally competent and occupationally knowledgeable)
- Internal Quality Assurer

Centre staff may undertake more than one role, eg tutor and assessor or an Internal Quality Assurer, but must never internally quality assure their own assessments.

# **Assessor requirements**

The Assessors of competence based units must:

- Be occupationally competent this means that each assessor must be able to carry out the full requirements within the competency units that they are assessing. Occupational competence means that they are also occupationally knowledgeable.
- Maintain their occupational competence through clearly demonstrable continuing learning and professional development.
- Hold D32/33 or A1 or be working towards A1 **or** be working towards one of the following:

The A1 replacements eg the City & Guilds 6317 such as:

- o the Level 3 Award in Assessing Competence in the Work Environment
- o or the Level 3 Certificate in Assessing Vocational Achievement

or

o Another suitable qualification equivalent/alternative in the assessment of work based performance. This must be agreed in advance with the centres External Verifier in Assessing

Assessors of competence based units may also make assessment decisions on knowledge based units and learning outcomes.

Assessors of knowledge based units and knowledge based Learning Outcomes must:

- Be occupationally knowledgeable. This means that each assessor should possess relevant knowledge and understanding to assess units designed to test specific knowledge and understanding or units where knowledge and understanding are components of competency.
- Maintain their occupational knowledge through clearly demonstrable continuing learning and professional development.
- Hold D32/D33 or A1 **or** be working towards one of the following:
  - o the A1 replacement qualifications i.e. the City & Guilds 6317 such as
  - o Level 3 Award in Assessing Vocational Competence OR
  - o Level 3 Award in Assessing Vocationally Related Achievement

#### or

- Level 3 Certificate in Assessing Vocational Achievement or
- o Another suitable qualification in the assessment of knowledge. This must be agreed in advance with the External Verifier

### **Teachers**, trainers and tutors

All teachers/trainers/tutors must:

- comply with the ITT Regulations 2007 (QTLS/ATLS) where they are delivering qualifications in England using public funding . For further information visit **www.cityandguilds.com/qtls**
- be occupationally knowledgeable in the areas for which they are teaching/delivering training
- be occupationally competent in the areas for which they are delivering competence based units
- have experience of providing training and assessment or be in the process of acquiring this experience.

Centre staff may undertake more than one role, eg tutor and assessor or internal verifier, but must never internally verify their own assessments.

# Internal verifiers/Internal quality assurance

Internal quality assurance is key to ensuring that the assessment of evidence for units is of consistent and appropriate quality. Those performing the internal quality assurance role must be occupationally knowledgeable and possess the skills necessary to make quality assurance decisions. Although it is not a requirement to hold a qualification to quality assure this qualification, City & Guilds recommends that it is best practice to hold a V1/IQA qualification or a suitable alternative. Suitable alternatives include:

- D34 or V1
- The V1 replacements eg the City & Guilds 6317 such as the:
- Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice OR
- Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice

If the Internal Verifier does not hold a qualification they must be able to demonstrate evidence of working to their own organisation's QA or IV standards which clearly link to V1 or other equivalent standards for Internal Quality Assurance.

### **Expert witness**

An expert witness must:

- have a working knowledge of the units on which their expertise is based
- be occupationally competent in their area of expertise
- have EITHER any qualification in assessment of workplace performance OR
- a professional work role which involves evaluating the every day practice of staff.

# 2.2 Candidate entry requirements

There are no formal entry requirements for candidates undertaking these qualifications. However, centres must ensure that candidates have the potential and opportunity to gain the qualifications successfully. Additionally, candidates would be expected to work with or care for individuals, in a paid, voluntary or personal capacity.

# Age restrictions

These qualifications are not approved for use by candidates under the age of 16, and City & Guilds cannot accept any registrations for candidates in this age group.

# Other legal considerations

Candidates/Learners working within care services may be legally required to undergo criminal record checks prior to taking up or continuing in employment. Centres and employers will need to liaise closely with one another to ensure that any requirements for the particular area of work are fully met. As the requirements vary between work contexts, checks should be made with the appropriate regulatory body and/or government departments if centres or employers are uncertain of the requirements. These are usually the responsibility of the employer. The appropriate service regulator identifies any 'fit person' criteria, not the Awarding Body.

Centres are advised that fit persons criteria and work function job specification limitations may impact the candidate/learner's ability to generate sufficient and appropriate evidence that meets the learning outcome and assessment criteria in some of the units within this qualification. The completion of a robust initial assessment should aim to highlight any possible issues that will impact on the learner's ability to complete a full qualification.

# 3 Course design and delivery

#### 3.1 Initial assessment and induction

Centres will need to make an initial assessment of each candidate prior to the start of their programme to ensure they are entered for an appropriate type and level of qualification.

The initial assessment should identify:

- any specific training needs the candidate has, and the support and guidance they may require when working towards their qualifications. This is sometimes referred to as diagnostic testing.
- any units the candidate has already completed, or credit they have accumulated which is relevant to the qualifications they are about to begin.

City & Guilds recommends that centres provide an induction programme to ensure the candidate fully understands the requirements of the qualifications they will work towards, their responsibilities as a candidate, and the responsibilities of the centre. It may be helpful to record the information on a learning contract.

If candidates do not have a person with dementia that they can work with – they can use a case study in its place for knowledge units only.

The importance of maintaining confidentiality is paramount. Candidates must ensure that names of individual clients and carers are not disclosed in any part of their work in order to preserve confidentiality.

# 4 Assessment

# 4.1 Summary of assessment methods

Candidates will be provided with City & Guilds 'suggested' assignments for each knowledge based unit selected. Where there are exceptional reasons preventing candidates from completing these assignments, they may submit other evidence in line with the qualification assessment requirements via a portfolio of evidence.

Competence-based units are assessed by portfolios of evidence. Assessment materials for assignments can be found on the City & Guilds website.

The evidence provided by candidates must at all times reflect the policies and procedures of the workplace as informed by current legislation, the relevant service standards and codes of practice for the sector. This qualification is internally assessed and externally verified. Independence of assessment is achieved via robust external and internal verification processes, supported by City & Guilds reporting systems.

Unit No.	Title	Assessment Method
3565- 001	Dementia awareness	Assignment/Portfolio
3565- 002	The person centred approach to the care and support of individuals with dementia	Assignment/Portfolio
3565- 003	Understand the factors that can influence communication and interaction with individuals who have dementia	Assignment/Portfolio
3565- 004	Understand equality, diversity and inclusion in dementia care	Assignment/Portfolio
3565- 005	Understand and implement a person centred approach to the care and support of individuals with dementia	Portfolio of evidence
3565- 006	Equality, diversity and inclusion in dementia care practice	Portfolio of evidence
3565- 007	Understand and enable interaction and communication with individuals with dementia	Portfolio of evidence
3565- 008	Approaches to enable rights and choices for individuals with dementia whilst minimising risks	Portfolio of evidence
3565- 009	Contribute to support of positive risk-taking for individuals	Portfolio of evidence
3565- 010	Contribute to the care of a deceased person	Portfolio of evidence
3565- 011	Provide support for therapy sessions	Portfolio of evidence

Unit No.	Title	Assessment Method
3565- 012	Contribute to supporting group care activities	Portfolio of evidence
3565- 013	Support person-centred thinking and planning	Portfolio of evidence
3565- 014	Introductory awareness of models of disability	Assignment/Portfolio
3565- 015	Contribute to supporting individuals in the use of assistive technology	Portfolio of evidence
3565- 102	Understand the administration of medication to individuals with dementia using a person centred approach	Assignment/Portfolio
3565- 108	Understand and meet the nutritional requirements of individuals with dementia	Portfolio of evidence
3565- 109	Support the use of medication in social care	Portfolio of evidence
3565- 113	Support individuals at the end of life	Portfolio of evidence
3565- 116	Facilitate person centred assessment, planning, implementing & review	Portfolio of evidence
3565- 120	Understand mental well-being and mental health promotion	Assignment/Portfolio
3565- 121	Purpose and principles of independent advocacy	Portfolio of evidence
3565- 422	Independent Mental Capacity advocacy	Portfolio of evidence

# 4.2 Observation requirements

The prime source of evidence for competency based learning outcomes within this qualification is assessor observation. Where assessor observation would be difficult because of intrusion into areas of privacy and/or because activities occur rarely, expert witnesses may provide testimony for the occupationally specific units.

### 4.3 Additional assessment methods or evidence sources

In addition to observation, assessors should identify an appropriate mix of other assessment methods from the list below, to ensure that all the assessment criteria are sufficiently evidenced to allow them to make the consistency of the candidate's practice for each unit.

**Expert witnesses** may observe candidate practice and provide testimony for competence based units which will have parity with assessor observation for all competence based units across the qualification. If an assessor is unable to observe their candidate she/he will identify an expert witness in the workplace, who will provide testimony of the candidates work based performance.

**Work products** can be any relevant products of candidates' own work, or to which they have made a significant contribution, which demonstrate use and application within their practice.

**Professional discussion** should be in the form of a planned and structured review of candidates' practice, based on evidence and with outcomes captured by means of audio/visual or written records. The recorded outcomes are particularly useful as evidence that candidates can evaluate their knowledge and practice across the qualification.

**Candidate/ reflective accounts** describe candidates' actions in particular situations and/or reflect on the reasons for practising in the ways selected. Reflective accounts also provide evidence that candidates' can evaluate their knowledge and practice across the activities embedded in this qualification.

**Questions** asked by assessors and answered by candidates to supplement evidence generated by observations and any other evidence type used. Assessors may be able to infer some knowledge and understanding from observing candidate practice. They may ask questions to confirm understanding and/or cover any outstanding areas. Questions may be asked orally or in writing but, in both cases, a record must be kept of the questions and responses.

**Witness testimonies**. These should be from people who are in a position to provide evidence of candidate competence. Where testimony is sought from individuals who are service users, care should be taken to ensure the purpose of the testimony is understood and no pressure is felt to provide it.

**Projects/Assignments.** Candidates may have already completed a relevant project or assignment which can be mapped to the relevant standards and therefore provide evidence. Evidence from previous training courses and/or learning programmes which they have completed and which demonstrate their professional development may also be used

**Case studies** must be based on real work practice and experiences and will need to be authenticated by an assessor if used as evidence of a competent performance. Theoretical or simulated exercises would only be admissible as evidence of knowledge and understanding. NB Confidential records must not to be included in candidates' portfolios but must be referred to in the assessment records.

# Recognition of prior learning (RPL)

Recognition of Prior Learning (RPL) is a process of using an individual's previous achievements to demonstrate competence. This is not a new process but expands on previously used processes such as the Accreditation of Prior Learning (APL), the recognition of experimental learning and the validation of informal learning by incorporating all types of prior learning and training.

Assessment staff work through Learning Outcomes and Assessment Criteria ensuring that all are covered, using relevant methods for RPL such as: Witness Testimony, Reflective Accounts, Professional Discussion, etc.

In considering the appropriateness of any single piece of evidence the following should be considered:

- Content the degree to which the content of any previous learning meets the requirements of the National Occupational Standards against which it is being presented as evidence.
- Comprehensiveness of Assessment ensure that all the learning derived from the content has been assessed. If only a proportion has been assessed, then the learning for the 'non-tested' areas cannot be assumed.
- Level the degree to which the level of learning offered and tested relates to that required by the qualification
- Learning outcomes and Assessment criteria the degree to which the previous learning covered both. Some learning will only have offered and tested the latter, in which case the Recognition of Prior Learning can only cover the knowledge aspect. Performance will require further assessment. Although unlikely, the reverse (performance tested but not knowledge) could be true in which case knowledge and understanding would need further assessment.
- Model of learning difficulties can arise in mapping learning gained from non-competence based learning programmes into competence based models.
- Relevance of Context the degree to which the context of the learning gained and assessed relates to the current context of the candidates work roles. If the context was different, assessors will need to satisfy themselves of the candidates' ability to transfer the learning gained into the current setting.

# 5 Units

# **Availability of units**

The units for these qualifications follow.

# **Structure of units**

The units in these qualifications are written in a standard format and comprise the following:

- City & Guilds reference number
- title
- level
- credit value
- unit accreditation number
- unit aim
- learning outcomes which are comprised of a number of assessment criteria
- Guided learning hours
- relationship to NOS, other qualifications and frameworks
- endorsement by a sector or other appropriate body
- information on assessment
- additional guidance.

Level: 2 Credit value: 2

**UAN number:** J/601/2874

#### **Unit aim**

The aim of the unit is to enable learners to gain knowledge of what dementia is, the different forms of dementia and how others can have an impact on the individual with dementia.

# **Learning outcomes**

There are **four** learning outcomes to this unit. The learner will be able to:

- 1. Understand what dementia is
- 2. Understand key features of the theoretical models of dementia
- 3. Know the most common types of dementia and their causes
- 4. Understand factors relating to an individual's experience of dementia

# **Guided learning hours**

It is recommended that **17** hours should be allocated for this unit, although patterns of delivery are likely to vary.

# Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by:

an assignment covering practical skills and underpinning knowledge.

# Outcome 1 Understand what dementia is

# **Assessment Criteria**

- 1. explain what is meant by the term 'dementia'
- 2. describe the key functions of the brain that are affected by dementia
- 3. explain why depression, delirium and age related memory impairment may be mistaken for dementia.

Outcome 2 Understand key features of the theoretical models of dementia

# **Assessment Criteria**

- 1. outline the medical model of dementia
- 2. outline the social model of dementia
- 3. explain why dementia should be viewed as a disability.

Outcome 3 Know the most common types of dementia and their causes

### **Assessment Criteria**

- 1. list the most common causes of dementia
- 2. describe the likely signs and symptoms of the most common causes of dementia
- 3. outline the risk factors for the most common causes of dementia
- 4. identify prevalence rates for different types of dementia.

Outcome 4 Understand factors relating to an individual's experience of dementia

### **Assessment Criteria**

- 1. describe how different individuals may experience living with dementia depending on age, type of dementia, and level of ability and disability
- 2. outline the impact that the attitudes and behaviours of **others** may have on an individual with dementia.

# Additional guidance

- Others may include:
  - Care workers
  - o Colleagues
  - o Managers
  - o Social Worker
  - o Occupational Therapist
  - o GP
  - o Speech & Language Therapist
  - o Physiotherapist
  - o Pharmacist
  - o Nurse
  - o Psychologist
  - o Admiral Nurses
  - o Independent Mental Capacity Advocate
  - o Community Psychiatric Nurse
  - o Dementia Care Advisors
  - o Advocate
  - Support groups

Level: 2 Credit value: 2

**UAN number:** H/601/2879

#### **Unit aim**

This unit provides the knowledge and understanding required to enable the individual with dementia to experience well-being. Learners will be able to develop their knowledge of the person centred approach to dementia care and support.

# **Learning outcomes**

There are **three** learning outcomes to this unit. The learner will be able to:

- 1. Understand approaches that enable individuals with dementia to experience well-being
- 2. Understand the role of carers in the care and support of individuals with dementia
- 3. Understand the roles of others in the support of individuals with dementia

# **Guided learning hours**

It is recommended that **17** hours should be allocated for this unit, although patterns of delivery are likely to vary.

# Details of the relationship between the unit and relevant national standards

This unit is linked to HSC21, HSC23, HSC24, HSC31, HSC33, HSC35, HSC41, HSC43, and HSC45T.

# Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by:

• an assignment covering practical skills and underpinning knowledge.

Outcome 1 Understand approaches that enable individuals

with dementia to experience well-being

# **Assessment Criteria**

- 1. describe what is meant by a person centred approach
- 2. outline the benefits of working with an individual with dementia in a person centred manner.

Outcome 2 Understand the role of carers in the care and support of individuals with dementia

# **Assessment Criteria**

- 1. describe the role that **carers** can have in the care and support of Individuals with dementia
- 2. explain the value of developing a professional working relationship with **carers**.

Outcome 3 Understand the roles of others in the support of individuals with dementia

# **Assessment Criteria**

- 1. describe the roles of **others** in the care and support of individuals with dementia
- 2. explain when it may be necessary to refer to **others** when supporting individuals with dementia
- 3. explain how to access the additional support of **others** when supporting individuals with dementia.

# Additional guidance

# Carers may include:

- o Family
- o Partner
- o Friends
- Neighbours

### • **Others** may include:

- o Care worker
- o Colleagues
- o Managers
- o Social Worker
- Occupational Therapist
- o GP
- o Speech & Language Therapist
- o Physiotherapist
- o Pharmacist
- o Nurse
- o Psychologist
- o Admiral Nurses
- o Independent Mental Capacity Advocate
- o Community Psychiatric Nurse
- o Dementia Care Advisors
- o Advocate
- Support groups

# Well being may include:

- o Sense of Hope
- Sense of Agency
- o Confidence
- o Self esteem
- o Physical health

# • Evidenced in well being indicators:

- o Can communicate wants, needs and choices
- o Makes contact with other people
- o Shows warmth and affection
- o Showing pleasure or enjoyment
- o Alertness, responsiveness
- o Uses remaining abilities
- Expresses self creatively
- o Is co-operative or helpful
- o Responding appropriately to people

- o Expresses appropriate emotions
- o Relaxed posture or body language
- o Sense of humour
- Sense of purpose
- o Signs of self-respect

# Unit 003 Understand the factors that can influence communication and interaction with individuals who have dementia

Level: 2 Credit value: 2

**UAN number:** T/601/9416

#### **Unit aim**

This unit provides the underpinning knowledge required to develop awareness of differing communication needs and abilities of individuals with dementia in order to enhance positive interaction. This unit does not assess competence.

# **Learning outcomes**

There are **three** learning outcomes to this unit. The learner will be able to:

- 1. Understand the factors that can influence communication and **interaction** with individuals who have dementia
- 2. Understand how a **person centred approach** may be used to encourage positive communication with individuals with dementia
- 3. Understand the factors which can affect interactions with individuals with dementia

#### **Guided learning hours**

It is recommended that **18** hours should be allocated for this unit, although patterns of delivery are likely to vary.

# Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to the HSC 21, 31, 41, 24, 35, 45.

# Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Care and Development.

#### Assessment

This unit will be assessed by

• an assignment covering practical skills and underpinning knowledge.

Unit 003 Understand the factors that can influence

communication and interaction with

individuals who have dementia

Outcome 1 Understand the factors that can influence

communication and interaction with individuals

who have dementia

#### **Assessment Criteria**

- 1. explain how dementia may influence an **individual's** ability to communicate and interact
- 2. identify other factors that may influence an individual's ability to communicate and interact
- 3. outline how memory impairment may affect the ability of an individual with dementia to use verbal language.

Unit 003 Understand the factors that can influence

communication and interaction with

individuals who have dementia

Outcome 2 Understand how a person centred approach may

be used to encourage positive communication with

individuals with dementia

# **Assessment Criteria**

- 1. explain how to identify the communication strengths and abilities of an individual with dementia
- 2. describe how to adapt the style of communication to meet the needs, strengths and abilities of an individual with dementia
- 3. describe how information about an individual's preferred methods of communication can be used to reinforce their identity and uniqueness.

Unit 003 Understand the factors that can influence

communication and interaction with

individuals who have dementia

Outcome 3 Understand the factors which can affect

interactions with individuals with dementia

#### **Assessment Criteria**

- 1. explain how understanding an individual's biography/history can facilitate positive interactions
- 2. list different techniques that can be used to facilitate positive interactions with an individual with dementia
- 3. explain how involving others may enhance interaction with an individual with dementia.

# Unit 003 Understand the factors that can influence communication and interaction with individuals who have dementia

# Additional guidance

- Interaction:
  - o The application of social skills and the awareness of the needs of others
- An **individual** is someone requiring care or support
- **Person centred approach:** This is a way of working which aims to put the person at the centre of the care situation taking into account their individuality, wishes and preferences
- Others may be:
  - Care worker
  - o Colleagues
  - o Managers
  - Social worker
  - Occupational Therapist
  - o GP
  - o Speech and Language Therapist
  - o Physiotherapist
  - o Pharmacist
  - o Nurse
  - o Specialist nurse
  - o Psychologist
  - o Psychiatrist
  - o Independent Mental Capacity Advocate
  - o Independent Mental Health Advocate
  - o Advocate
  - o Dementia care advisor
  - Support groups

## Unit 004 Understand equality, diversity and inclusion in dementia care

Level: 2 Credit value: 2

**UAN number:** A/601/2886

#### **Unit aim**

This unit is aimed at those who provide care or support to individuals with dementia in a wide range of settings. The unit introduces the concepts of equality, diversity and inclusion that are fundamental to person centred care practice.

#### **Learning outcomes**

There are **three** learning outcomes to this unit. The learner will be able to:

- 1. Understand and appreciate the importance of diversity of individuals with dementia
- 2. Understand the importance of person centred approaches in the care and support of individuals with dementia
- 3. Understand ways of working with a range of individuals who have dementia to ensure diverse needs are met

#### **Guided learning hours**

It is recommended that **20** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Details of the relationship between the unit and relevant national standards

This unit is linked to HSC21, HSC24, HSC31, HSC35, HSC41, and HSC45.

#### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by:

• an assignment covering practical skills and underpinning knowledge.

## Unit 004 Understand equality, diversity and inclusion in dementia care

Outcome 1 Understand and appreciate the importance of

diversity of individuals with dementia

#### **Assessment Criteria**

- 1. explain the importance of recognising that individuals with dementia have unique needs and preferences
- 2. describe ways of helping **carers** and **others** to understand that an individual with dementia has unique needs and preferences
- 3. explain how values, beliefs and misunderstandings about dementia can affect attitudes towards individuals.

### Unit 004 Understand equality, diversity and inclusion in

dementia care

Outcome 2 Understand the importance of person centred

approaches in the care and support of individuals

with dementia

#### **Assessment Criteria**

- 1. describe how an individual may feel valued, included and able to engage in daily life
- 2. describe how individuals with dementia may feel excluded
- 3. explain the importance of including the individual in all aspects of their care.

## Unit 004 Understand equality, diversity and inclusion in dementia care

Outcome 3 Understand ways of working with a range of

individuals who have dementia to ensure diverse

needs are met

#### **Assessment Criteria**

- 1. describe how the experience of an older individual with dementia may be different from the experience of a younger individual with dementia
- 2. describe what steps might be taken to gain knowledge and understanding of the needs and preferences of individuals with dementia from different ethnic origins
- 3. describe what knowledge and understanding would be required to work in a **person centred way** with an individual with a learning disability and dementia.

## Unit 004 Understand equality, diversity and inclusion in dementia care

#### Additional guidance

- An individual is someone requiring care or support
- Carers and Others may be:
  - o Care worker
  - o Colleagues
  - o Managers
  - o Social worker
  - Occupational Therapist
  - o GP
  - o Speech and Language Therapist
  - o Physiotherapist
  - o Pharmacist
  - o Nurse
  - o Specialist nurse
  - o Psychologist
  - o Psychiatrist
  - o Independent Mental Capacity Advocate
  - o Independent Mental Health Advocate
  - Advocate
  - o Dementia care advisor
  - Support groups

#### Person centred way,

This is a way of working which aims to put the person at the centre of the care situation taking into account their individuality, wishes and preferences.

# **Certificate in Dementia Care 3565-022**

# Unit 005 Understand and implement a person centred approach to the care and support of individuals with dementia

Level: 2 Credit value: 3

**UAN number:** F/601/3683

#### **Unit aim**

This unit is aimed at those who provide care and support to people who have dementia in a wide range of settings. It requires the demonstration of knowledge and skills in planning and delivering support to meet an individual's identified and agreed abilities and needs, in order to reflect the person centred approach.

#### **Learning outcomes**

There are **three** learning outcomes to this unit. The learner will be able to:

- 1. Understand the importance of a person centred approach to dementia care and support
- 2. Be able to involve the individual with dementia in planning and implementing their care and support using a person centred approach
- 3. Be able to involve carers and others in the care and support of individuals with dementia

#### **Guided learning hours**

It is recommended that **21** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by:

• a portfolio of evidence.

Unit 005 Understand and implement a person centred

approach to the care and support of

individuals with dementia

Outcome 1 Understand the importance of a person centred

approach to dementia care and support

#### **Assessment Criteria**

- 1. describe what is meant by a person centred approach
- 2. describe how a person centred approach enables individuals with dementia to be involved in their own care and support.

Unit 005 Understand and implement a person centred

approach to the care and support of

individuals with dementia

Outcome 2 Be able to involve the individual with dementia in

planning and implementing their care and support

using a person centred approach

#### **Assessment Criteria**

- 1. explain how information about personality and life history can be used to support an individual to live well with dementia
- 2. communicate with an individual with dementia using a range of methods that meet individual's abilities and needs
- 3. involve an individual with dementia in identifying and managing risks for their care and support plan
- 4. involve an individual with dementia in opportunities that meet their agreed abilities, needs and preferences.

Unit 005 Understand and implement a person centred

approach to the care and support of

individuals with dementia

Outcome 3 Be able to involve carers and others in the care and

support of individuals with dementia

#### **Assessment Criteria**

- 1. explain how to increase a carer's understanding of dementia and a person centred approach
- 2. demonstrate how to involve **carers** and **others** in the support of an individual with dementia.

# Unit 005 Understand and implement a person centred approach to the care and support of individuals with dementia

Additional guidance

- Carer may include:
  - o Partner
  - o Family
  - Friends
  - o Neighbours
- Others may include:
  - o Care worker
  - o Colleagues
  - o Managers
  - Social Worker
  - Occupational Therapist
  - o GP
  - o Speech & Language Therapist
  - o Physiotherapist
  - o Pharmacist
  - o Nurse
  - o Psychologist
  - o Admiral Nurses
  - o IMCA
  - o CPN
  - o Dementia Care Advisors
  - o Advocate
  - Support groups

## Unit 006 Equality, diversity and inclusion in dementia care practice

Level: 2 Credit value: 3

**UAN number:** Y/601/9277

#### **Unit aim**

This unit provides knowledge, understanding and skills for those who provide care or support to individuals with dementia in a wide range of settings. The unit introduces the concepts of equality, diversity and inclusion that are fundamental to person centred care practice.

#### Learning outcomes

There are **three** learning outcomes to this unit. The learner will be able to:

- 1. Understand the importance of equality, diversity and inclusion when working with individuals with dementia
- 2. Be able to apply a person centred approach in the care and support of individuals with dementia
- 3. Be able to work with a range of individuals who have dementia to ensure diverse needs are met

#### **Guided learning hours**

It is recommended that **24** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to the HSC 21, 31, 41, 24, 35, 45.

#### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by a portfolio of evidence. Learning outcomes 2 and 3 must be assessed in the workplace environment.

## Unit 006 Equality, diversity and inclusion in dementia care practice

Outcome 1 Understand the importance of equality, diversity

and inclusion when working with individuals with

dementia

#### **Assessment Criteria**

- 1. explain what is meant by:
  - diversity
  - equality
  - inclusion
- 2. explain why an individual with dementia has unique needs and preferences
- 3. describe how an individual with dementia may feel excluded
- 4. describe why it is important to include an individual with dementia in all aspects of care practice
- 5. explain how values, beliefs and misunderstandings about dementia can affect attitudes towards an individual.

# Unit 006 Equality, diversity and inclusion in dementia care practice Outcome 2 Be able to apply a person centred approach in the

care and support of individuals with dementia

#### **Assessment Criteria**

- 1. demonstrate how an individual with dementia has been valued, included and able to engage in daily life
- 2. show how an individual's life history and culture has been taken into consideration to meet their needs
- 3. demonstrate how the stage of dementia of an individual has been taken into account when meeting their needs and preferences
- 4. demonstrate ways of helping carers and others to understand that an individual with dementia has unique needs and preferences.

## Unit 006 Equality, diversity and inclusion in dementia care practice

Outcome 3 Be able to work with a range of individuals who

have dementia to ensure diverse needs are met

#### **Assessment Criteria**

- 1. demonstrate how to work in ways that ensure that the needs and preferences of individuals with dementia from a diverse range of backgrounds are met
- 2. describe how the experience of an older individual with dementia may be different from the experience of a younger individual with dementia
- 3. describe how to use a person centred approach with an individual with a learning disability and dementia.

## Unit 006 Equality, diversity and inclusion in dementia care practice

#### Additional guidance

- An **individual** is someone requiring care or support
- **Person centred approach**: This is a way of working which aims to put the person at the centre of the care situation taking into account their individuality, wishes and preferences
- Carers and others may be:
  - o Care worker
  - o Family
  - o Advocate
  - Colleagues
  - o Managers
  - o Social worker
  - Occupational Therapist
  - o GP
  - o Speech and Language Therapist
  - o Physiotherapist
  - o Pharmacist
  - o Nurse
  - Specialist nurse
  - Psychologist
  - o Psychiatrist
  - o Independent Mental Capacity Advocate
  - o Independent Mental Health Advocate
  - o Advocate
  - o Dementia care advisor
  - Support groups

# Unit 007 Understand and enable interaction and communication with individuals with dementia

Level: 2 Credit value: 3

UAN number: A/601/9434

#### **Unit aim**

This unit provides the knowledge, understanding and skills required to develop and implement positive interaction and communication with individuals with dementia

#### **Learning outcomes**

There are **two** learning outcomes to this unit. The learner will be able to:

- 1. Be able to communicate with individuals with dementia
- 2. Be able to apply interaction and communication approaches with individuals in dementia

#### **Guided learning hours**

It is recommended that **19** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to the HSC 21, 31, 41, 24, 35, 45.

#### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by a portfolio of evidence.

Unit 007 Understand and enable interaction and communication with individuals with

dementia

Outcome 1 Be able to communicate with individuals with

dementia

#### **Assessment Criteria**

- 1. describe how memory impairment can affect the ability of an individual with dementia to use verbal language
- 2. gather information from **others** about an individual's preferred methods of communicating to enhance interaction
- 3. use information about the communication abilities and needs of an individual with dementia to enhance interaction
- 4. use a **person centred approach** to enable an individual to use their communication abilities
- 5. demonstrate how interaction is adapted in order to meet the communication needs of an individual with dementia.

Unit 007 Understand and enable interaction and

communication with individuals with

dementia

Outcome 2 Be able to apply interaction and communication

approaches with individuals in dementia

#### **Assessment Criteria**

- 1. list different techniques that can be used to facilitate positive interactions with an individual with dementia
- 2. use an individual's biography/history to facilitate positive interactions
- 3. demonstrate how the identity and uniqueness of an individual has been reinforced by using their preferred methods of interacting and communicating.

# Unit 007 Understand and enable interaction and communication with individuals with dementia

Additional guidance

- An **individual** is someone requiring care or support
- Others may be,
  - o Care worker
  - o Colleagues
  - o Managers
  - o Social worker
  - o Occupational Therapist
  - o GF
  - o Speech and Language Therapist
  - o Physiotherapist
  - o Pharmacist
  - o Nurse
  - Specialist nurse
  - o Psychologist
  - o Psychiatrist
  - o Independent Mental Capacity Advocate
  - o Independent Mental Health Advocate
  - o Advocate
  - o Dementia care advisor
  - Support groups
- **Person centred approach:** This is a way of working which aims to put the person at the centre of the care situation taking into account their individuality, wishes and preferences.

# Unit 008 Approaches to enable rights and choices for individuals with dementia whilst minimising risks

Level: 2 Credit value: 3

**UAN number:** H/601/9282

#### **Unit aim**

This unit provides knowledge, understanding and skills required to promote individuals' rights and choices whilst minimising risk.

#### **Learning outcomes**

There are **four** learning outcomes to this unit. The learner will be able to:

- 1. Understand key legislation and agreed ways of working that ensure the fulfilment of rights and choices of individuals with dementia while minimising risk of harm
- 2. Understand how to maintain the right to privacy, dignity and respect when supporting individuals with dementia
- 3. Support individuals with dementia to achieve their potential
- 4. Be able to work with carers who are caring for individuals with dementia

#### **Guided learning hours**

It is recommended that **25** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to the HSC 21, 31, 41, 24, 35, 45.

#### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Care and Development.

#### Assessment

• This unit will be assessed by a portfolio of evidence. Learning outcomes 3 and 4 must be assessed in the workplace environment.

### Unit 008 Approaches to enable rights and choices for

individuals with dementia whilst minimising

risks

Outcome 1 Understand key legislation and agreed ways of

working that ensure the fulfilment of rights and

choices of individuals with dementia while

minimising risk of harm

#### **Assessment Criteria**

- 1. outline key legislation that relates to the fulfilment of rights and choices and the minimising of risk of harm for an individual with dementia
- 2. describe how agreed ways of working relate to the rights of an **individual** with dementia
- 3. explain why it is important not to assume that an individual with dementia cannot make their own decisions
- 4. explain how the **best interests** of an individual with dementia must be included when planning and delivering care and support
- 5. explain what is meant by providing care and support to an individual with dementia in the least restrictive way.

Unit 008 Approaches to enable rights and choices for

individuals with dementia whilst minimising

risks

Outcome 2 Understand how to maintain the right to privacy,

dignity and respect when supporting individuals

with dementia

#### **Assessment Criteria**

- 1. describe how to maintain privacy when providing personal support for intimate care to an individual with dementia
- 2. give examples of how to show respect for the **physical space** of an individual with dementia
- 3. give examples of how to show respect for the **social or emotional space** of an individual with dementia
- 4. describe how to use an awareness of the life history and culture of an individual with dementia to maintain their dignity
- 5. outline the benefits of knowing about the past and present interests and life skills of an individual with dementia.

Unit 008 Approaches to enable rights and choices for individuals with dementia whilst minimising

risks

Outcome 3 Support individuals with dementia to achieve their

potential

#### **Assessment Criteria**

- 1. demonstrate how the physical environment may enable an individual with dementia to achieve their potential
- 2. demonstrate how the social environment may enable an individual with dementia to achieve their potential
- 3. support an individual with dementia to use their abilities during personal care
- 4. explain how the attitudes of **others** may enable an individual with dementia to achieve their potential.

Unit 008 Approaches to enable rights and choices for

individuals with dementia whilst minimising

risks

Outcome 4 Be able to work with carers who are caring for

individuals with dementia

#### **Assessment Criteria**

- 1. identify some of the anxieties common to carers of an individual with dementia
- 2. outline the legal rights of the carer in relation to an individual with dementia
- 3. involve carers in planning support that enables the rights and choices and protects an individual with dementia from harm
- 4. describe how the need of carers and **others** to protect an individual with dementia from harm may prevent the individual from exercising their rights and choices
- 5. demonstrate how a carer can be supported to enable an individual with dementia to achieve their potential.

# Unit 008 Approaches to enable rights and choices for individuals with dementia whilst minimising risks

Additional guidance

#### Key legislation:

- o Human Rights Act 1998
- o Mental Capacity Act 2005
- o Mental Capacity and Deprivation of Liberty Safeguards 2005
- o Adults with Incapacity (Scotland) Act 2000
- o Mental Health Act 2007
- o The Disability Discrimination Act 1995
- o Safeguarding Vulnerable Groups Act 2006
- o Carers (Equal Opportunities) Act 2004
- **Agreed ways of working**: Include policies and procedures where these exist; they may be less formally documented with micro-employers
- An individual is someone requiring care or support
- **Best interests**: This is an essential aspect of the Mental Capacity Act (2005). To support the financial health, emotional and social well-being of an individual and to take into consideration their past and present wishes and feelings, advance directives, beliefs and values.
- Physical space may include:
  - o Bedroom
  - o Handbag
  - o Personal belongings
- Social or emotional space may include:
  - o Personal boundaries
  - o Subjective feelings
- Carers and others may be:
  - o Care worker
  - Colleagues
  - o Managers
  - Social worker
  - o Occupational Therapist
  - o GP
  - o Speech and Language Therapist
  - o Physiotherapist
  - o Pharmacist
  - o Nurse
  - Specialist nurse
  - Psychologist

- o Psychiatrist
- o Independent Mental Capacity Advocate
- o Independent Mental Health Advocate
- o Advocate
- o Dementia care advisor
- o Support groups

## Optional units

## Unit 009 Contribute to support of positive risk-taking for individuals

Level: 2 Credit value: 3

**UAN number:** A/601/9546

#### **Unit aim**

This unit is aimed at those working in a wide range of settings. It provides the learner with the knowledge and skills required to contribute to supporting positive risk-taking to benefit individuals.

#### **Learning outcomes**

There are **six** learning outcomes to this unit. The learner will be able to:

- 1. Know the importance of risk-taking in everyday life
- 2. Understand the importance of positive, person-centred risk assessment
- 3. Know how legislation and policies are relevant to positive risk taking
- 4. Support individuals to make informed choices about taking risks
- 5. Contribute to the support of individuals to manage identified risks
- 6. Understand duty of care in relation to supporting positive risk-taking

#### **Guided learning hours**

It is recommended that **27** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Details of the relationship between the unit and relevant national standards

This unit is linked to HSC 240.

#### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by a portfolio of evidence.

## Unit 009 Contribute to support of positive risk-taking for individuals

Outcome 1 Know the importance of risk-taking in everyday life

#### **Assessment Criteria**

- 1. identify aspects of everyday life in which risk plays a part
- 2. outline the consequences for **individuals** of being prevented or discouraged from taking risks
- 3. explain how supporting individuals to take risks can enable them to have choice over their lives to:
  - gain in self-confidence
  - develop skills
  - take an active part in their community.

### Unit 009 Contribute to support of positive risk-taking

for individuals

Outcome 2 Understand the importance of positive, person-

centred risk assessment

#### **Assessment Criteria**

- 1. explain how a person-centred approach to risk assessment can support positive outcomes
- 2. identify the features of a **person-centred** approach to risk assessment.

## Unit 009 Contribute to support of positive risk-taking for individuals

Outcome 3 Know how legislation and policies are relevant to positive risk taking

#### **Assessment Criteria**

The learner can:

1. identify how legislative frameworks and **policies** can be used to safeguard individuals from risks whilst promoting their rights.

## Unit 009 Contribute to support of positive risk-taking for individuals

Outcome 4 Support individuals to make informed choices about taking risks

#### **Assessment Criteria**

- 1. explain the connection between an individual's right to take risks and their responsibilities towards themselves and **others**
- 2. support the individual to access and understand information about risks associated with a choice they plan to make
- 3. support the individual to explore the potential positive and negative consequences of the options
- 4. support the individual to make an informed decision about their preferred option and the associated risks
- 5. explain why it is important to record and report all incidents, discussions and decisions concerning risk taking.

### Unit 009 Contribute to support of positive risk-taking

for individuals

Outcome 5 Contribute to the support of individuals to manage

identified risks

#### **Assessment Criteria**

- 1. use an individual's support plan to record identified risks
- 2. support the individual to test out the risk they wish to take, in line with **agreed ways of working**
- 3. explain the importance of working within the limits of own role and responsibilities
- 4. contribute to the review of risks in an individual's support plan.

### Unit 009 Contribute to support of positive risk-taking

for individuals

Outcome 6 Understand duty of care in relation to supporting

positive risk-taking

#### **Assessment Criteria**

- 1. outline how the principle of duty of care can be maintained while supporting individuals to take risks
- 2. describe what action to take if an individual decides to take an unplanned risk that places him/herself or others in immediate or imminent danger.

## Unit 009 Contribute to support of positive risk-taking for individuals

#### Additional guidance

- This unit must be assessed in accordance with Skills for Care and Development's Assessment Principles. Learning outcomes 4 and 5 must be assessed in a real work environment.
- An individual is someone requiring care or support
- **Person-centred** reflects what is important to individuals and helps them to live the life they choose
- **Policies** may include:
  - National policy
  - Local policy
- **Others** may include
  - The individual
  - o Colleagues
  - o Families or carers
  - o Friends
  - o Other professionals
  - o Members of the public
  - Advocates
- Agreed ways of working will include policies and procedures where these exist.

Level: 2 Credit value: 3

**UAN number:** R/601/8256

#### **Unit aim**

This unit is aimed at those working in a wide range of settings. It provides the learner with the knowledge and skills required to contribute to the care, preparation and transfer of the deceased individual and provide immediate support to those affected by the death.

#### Learning outcomes

There are **five** learning outcomes to this unit. The learner will be able to:

- 1. Know the factors that affect how individuals are cared for after death
- 2. Be able to contribute to supporting those who are close to deceased individuals
- 3. Be able to contribute to preparing deceased individuals prior to transfer
- 4. Be able to contribute to transferring deceased individuals
- 5. Be able to manage own feelings in relation to the death of individuals

#### **Guided learning hours**

It is recommended that **24** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Details of the relationship between the unit and relevant national standards

This unit is linked to HSC 239

#### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by a portfolio of evidence. Learning outcomes 2, 3, 4 and 5 must be assessed in a real work environment in ways that do not intrude on the privacy of those involved.

Outcome 1

Know the factors that affect how individuals are cared for after death

#### **Assessment Criteria**

- 1. outline legal requirements and **agreed ways of working** that underpin the care of deceased individuals
- 2. describe how beliefs and religious and cultural factors affect how deceased individuals are cared for
- 3. identify the physical changes that take place after death and how this may affect laying out and moving individuals
- 4. identify diseases and conditions that necessitate specialist treatment or precautions when caring for and transferring deceased individuals
- 5. describe the precautions needed when undertaking the care and transfer of deceased individuals with specific high risk diseases and conditions.

Outcome 2 Be able to contribute to supporting those who are close to deceased individuals

#### **Assessment Criteria**

- 1. describe the likely immediate impact of an individual's death on **others** who are close to the deceased individual
- 2. support others immediately following the death of the individual in ways that:
  - reduce their distress
  - respect the deceased individual.

Outcome 3

Be able to contribute to preparing deceased individuals prior to transfer

#### **Assessment Criteria**

- 1. follow agreed ways of working to ensure that the deceased person is correctly identified
- 2. carry out agreed role in preparing the deceased individual in a manner that respects their dignity, beliefs and culture
- 3. use protective clothing to minimise the risk of infection during preparation of the deceased individual
- 4. contribute to recording any property and valuables that are to remain with the deceased individual.

Outcome 4 Be able to contribute to transferring deceased individuals

#### **Assessment Criteria**

- 1. carry out agreed role in contacting appropriate organisations
- 2. carry out agreed role in transferring the deceased individual in line with agreed ways of working and any wishes expressed by the individual
- 3. record details of the care and transfer of the deceased person in line with agreed ways of working.

Outcome 5 Be able to manage own feelings in relation to the death of individuals

#### **Assessment Criteria**

- 1. identify ways to manage own feelings in relation to an individual's death
- 2. utilise support systems to deal with own feelings in relation to an individual's death.

## Additional guidance

- Agreed ways of working will include policies and procedures where these exist.
- Others may include:
  - o Family
  - o Friends
  - o Own colleagues
  - o Others who were involved in the life of the individual
- Appropriate organisations may include:
  - o Mortuary
  - o Funeral directors
  - o Places of worship

Level: 2 Credit value: 2

**UAN number:** D/601/9023

#### **Unit aim**

This unit is aimed at those working in a wide range of settings. The unit provides the learner with the knowledge and skills needed to support individuals participating in therapy sessions. It covers preparation, support, observation, recording and review of therapy sessions.

#### Learning outcomes

There are **five** learning outcomes to this unit. The learner will be able to:

- 1. Understand the benefits of therapy sessions
- 2. Be able to prepare for therapy sessions
- 3. Be able to provide support in therapy sessions
- 4. Be able to observe and record therapy sessions
- 5. Be able to contribute to the review of therapy sessions

#### **Guided learning hours**

It is recommended that **14** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Details of the relationship between the unit and relevant national standards

This unit is linked to HSC212.

#### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by a portfolio of evidence.

Outcome 1 Understand the benefits of therapy sessions

#### **Assessment Criteria**

- 1. identify different types of **therapy sessions** in which an **individual** may participate
- 2. describe how therapy sessions can benefit an individual.

Outcome 2 Be able to Be able to prepare for therapy sessions

#### **Assessment Criteria**

- 1. establish own responsibilities in preparing for a therapy session
- 2. identify with the individual their preferences and requirements for the therapy session
- 3. follow instructions to prepare the environment, materials, equipment and self for the session.

Outcome 3 Be able to Be able to provide support in therapy sessions

#### **Assessment Criteria**

- 1. provide support during a therapy session that takes account of:
  - the therapist's directions
  - the individual's preferences and requirements
- 2. promote **active participation** during the session
- 3. describe ways to overcome fears or concerns an individual may have about a therapy session.

Outcome 4 Be able to Be able to observe and record therapy sessions

#### **Assessment Criteria**

- 1. agree what observations need to be carried out during therapy sessions
- 2. agree how observations will be recorded
- 3. carry out agreed observations
- 4. record agreed observations as required.

Outcome 5 Be able to Be able to contribute to the review of therapy sessions

#### **Assessment Criteria**

- 1. contribute to a review of therapy sessions to identify issues and progress
- 2. contribute to agreeing changes to therapy sessions with the individual and **others**.

## Additional guidance

- Therapy sessions may include:
  - o occupational therapy
  - o physiotherapy
  - o hydrotherapy
  - o aromatherapy
- An individual is someone requiring care or support
- Others may include:
  - o therapist
  - o line manager
  - o family
  - o friends
  - o advocates
  - o others who are important to the individual's well-being
- **Active participation** is 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.

Level: 2 Credit value: 3

**UAN number:** L/601/9471

#### **Unit aim**

This unit is aimed at those working in a wide range of settings. It provides the learner with the knowledge and skills required to support individuals to participate in and enjoy group care activities.

#### **Learning outcomes**

There are **four** learning outcomes to this unit. The learner will be able to:

- 1. Understand the place of group care activities in the care and support of individuals
- 2. Be able to contribute to the development of a supportive group culture
- 3. Be able to contribute to the implementation of group care activities
- 4. Be able to contribute to the evaluation of group care activities

#### **Guided learning hours**

It is recommended that **23** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Details of the relationship between the unit and relevant national standards

This unit is linked to HSC228.

#### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by a portfolio of evidence.

Outcome 1

Understand the place of group care activities in the care and support of individuals

#### **Assessment Criteria**

- 1. explain how participating in group care activities can benefit an **individual's** identity, selfesteem and well-being
- 2. identify examples of when a group care activity may be the best way to meet an individual's care or support needs
- 3. explain why dilemmas may arise when providing support for individuals through group care activities.

Outcome 2 Be able to Be able to contribute to the development of a supportive group culture

#### **Assessment Criteria**

- 1. support group members to understand the benefits of group activities
- 2. encourage interaction between new and existing group members that promotes enjoyment, co-operation, inclusion and **well-being**
- 3. describe ways to support group members to resolve any conflicts that may arise amongst themselves.

Outcome 3

Be able to Be able to contribute to the implementation of group care activities

#### **Assessment Criteria**

- 1. work with individuals and **others** to agree approaches, content and methods for group care activities
- 2. carry out agreed role to support individuals and the group during activities
- 3. address any adverse effects and maximise benefits for individuals during activities
- 4. maintain records about group care activities in line with agreed ways of working.

Outcome 4 Be able to Be able to contribute to the evaluation of group care activities

#### **Assessment Criteria**

- 1. contribute to agreeing with individuals and others the processes, roles and criteria for assessing group care activities
- 2. carry out agreed role in contributing to the evaluation of the processes, effects and outcomes of group activities
- 3. describe ways to ensure that individuals and others are actively involved in the evaluation
- 4. contribute to agreeing changes to activities or processes to improve outcomes for individuals.

## Additional guidance

- Group care activities may include:
  - o Recreational or leisure activities
  - Visits outside the usual setting
  - Social activities
- **Individuals** are those requiring care or support
- **Well-being** includes the following aspects:
  - o Physical
  - o Emotional
  - o Social
  - o Spiritual
- Others may include:
  - o Carers and family members
  - o Line manager
  - o Therapists or other specialists who may recommend group care activities
  - o The local community
- Agreed ways of working will include policies and procedures where these exist.

Level: 2 Credit value: 5

**UAN number:** L/601/6442

#### **Unit aim**

This unit is aimed at those who work in a range of health and social care settings. Person-centred thinking and planning reflects what is important to individuals and supports them to live the life they choose. This unit provides knowledge about the principles and processes of person-centred thinking, planning and reviews. It also requires demonstration of the skills and attitudes required to support person-centred thinking.

#### **Learning outcomes**

There are **five** learning outcomes to this unit. The learner will be able to:

- 1. Understand the principles and practice of person-centred thinking, planning and reviews
- 2. Understand the context within which person-centred thinking and planning takes place
- 3. Understand own role in person-centred planning, thinking and reviews
- 4. Be able to apply person-centred thinking in relation to own life
- 5. Be able to implement person-centred thinking and person-centred reviews

#### **Guided learning hours**

It is recommended that **34** hours should be allocated for this unit, although patterns of delivery are likely to vary.

## Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to HSC 25.

#### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Care and Development.

#### Assessment

This unit will be assessed in line with the Skills for Care and Development Assessment Principles Learning Outcome 5 must be assessed in a real work situation.

Outcome 1

Understand the principles and practice of personcentred thinking, planning and reviews

#### **Assessment Criteria**

- 1. identify the beliefs and values on which person-centred thinking and planning is based
- 2. define person-centred thinking, person-centred planning and person-centred reviews
- 3. describe the difference that person-centred thinking can make to **individuals** and their families
- 4. describe examples of **person-centred thinking tools**
- 5. explain what a 'one page profile' is
- 6. describe the person-centred review process.

Outcome 2 Understand the context within which personcentred thinking and planning takes place

#### **Assessment Criteria**

- 1. outline current legislation, policy and guidance underpinning person-centred thinking and planning
- 2. describe the relationship between person-centred planning and personalised services
- 3. identify ways that person-centred thinking can be used:
  - with individuals
  - in teams.

Outcome 3 Understand own role in person-centred planning, thinking and reviews

#### **Assessment Criteria**

- 1. describe own role in person-centred thinking, planning and reviews when supporting individuals
- 2. identify challenges that may be faced in implementing person-centred thinking, planning and reviews in own work
- 3. describe how these challenges might be overcome.

Outcome 4 Be able to apply person-centred thinking in relation to own life

#### **Assessment Criteria**

- 1. demonstrate how to use a person-centred thinking tool in relation to own life to identify what is working and not working
- 2. describe own relationship circle
- 3. describe how helpful using a person-centred thinking tool was to identify actions in relation to own life
- 4. describe how to prepare for own person-centred review.

Outcome 5

Be able to implement person-centred thinking and person-centred reviews

#### **Assessment Criteria**

- 1. use person-centred thinking to know and act on what is important to the individual
- 2. establish with the individual how they want to be supported
- 3. use person-centred thinking to know and respond to how the individual communicates
- 4. be responsive to how an individual makes decisions to support them to have maximum choice and control in their life
- 5. support the individual in their relationships and in being part of their community using person-centred thinking
- 6. ensure that the individual is central to the person-centred review process
- 7. explain how to ensure that actions from a review happen.

## Additional guidance

- An **individual** is someone requiring care or support
- **Person-centred thinking tools** may include:
  - o Important to/for (recorded as a one page profile)
  - Working/Not working
  - o The doughnut
  - Matching staff
  - o Relationship circle
  - Communication charts
  - o 4 plus 1 questions
  - o Citizenship tool
  - o Decision making agreement
  - o Presence to contribution
  - o Dreaming

#### • Community connecting related tools:

- o Who am I? My gifts and capacities
- Hopes and Fears
- Mapping our network
- Passion audit
- Capacity mapping
- o Who am ?I My places

#### • **Teams** may include

A person-centred team uses person-centred thinking within the team context to clarify the purpose of the team, what is important to the team and what support team members need. Teams can work through seven questions to explore becoming a person-centred team. Each question uses a range of person-centred thinking tools to answer it. Information about purpose, what is important to the team, action and reflection is recorded and updated in a person-centred team plan

### Unit 014 Introductory awareness of models of disability

Level: 2 Credit value: 2

UAN number: Y/601/3446

#### **Unit aim**

The purpose of this unit is to provide the learner with introductory knowledge about the medical and social models of disability.

#### Learning outcomes

There are **two** learning outcomes to this unit. The learner will be able to:

- 1. Know the difference between the medical and social models of disability
- 2. Understand how the adoption of models of disability impact on the well-being and quality of life of individuals

#### **Guided learning hours**

It is recommended that **15** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Details of the relationship between the unit and relevant national standards

This unit is linked to the Sensory Services 1, 2, 3, 10, 11.

#### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care and Development.

#### Assessment

This unit will be assessed by

• an assignment covering practical skills and underpinning knowledge.

## Unit 014 Introductory awareness of models of disability

Outcome 1 Know the difference between the medical and

social models of disability

#### **Assessment Criteria**

- 1. describe the medical model of disability
- 2. describe the social model of disability
- 3. outline how each of the models has developed and evolved over time
- 4. give examples of where each model of disability may be used in service delivery.

## Unit 014 Introductory awareness of models of disability

Outcome 2 Understand how the adoption of models of

disability impact on the well-being and quality of life

of individuals

#### **Assessment Criteria**

- 1. identify how the principles of each model are reflected in service delivery
- 2. explain how each of the models of disability impacts on the
  - inclusion
  - rights
  - autonomy
  - needs of individuals
- 3. explain how own practice promotes the principle of inclusion.

Unit 014	Introductory awareness of models of
	disability

Additional guidance

There is no additional guidance for this unit.

## Unit 015 Contribute to supporting individuals in the use of assistive technology

Level: 2 Credit value: 3

UAN number: H/601/3451

#### **Unit aim**

The purpose of this unit is to provide the learner with the knowledge and skills to contribute to supporting the use of assistive technology.

#### **Learning outcomes**

There are **two** learning outcomes to this unit. The learner will be able to:

- 1. Understand the range and purpose of assistive technology available to support individuals
- 2. Be able to contribute to the use of selected assistive technology

#### **Guided learning hours**

It is recommended that **19** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Details of the relationship between the unit and relevant national standards

This unit is linked to the Sensory Services 4, 5, 6, 7, 9, 11

#### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care and Development

#### **Assessment**

This unit will be assessed by a portfolio of evidence. Learning Outcome 2 must be assessed in real work environment.

## Unit 015 Contribute to supporting individuals in the use

of assistive technology

Outcome 1 Understand the range and purpose of assistive

technology available to support individuals

#### **Assessment Criteria**

- 1. define the term assistive technology
- 2. list a sample of assistive technology aids
- 3. explain the functions of the sample of assistive technology aids selected
- 4. describe how the sample of assistive technology aids selected can be utilised to promote participation, access and inclusion.

## Unit 015 Contribute to supporting individuals in the use of assistive technology

Outcome 2 Be able to Be able to contribute to the use of selected assistive technology

#### **Assessment Criteria**

- 1. support an individual to access information about assistive technology
- 2. support an individual to use assistive technology following instructions and / or agreed ways of working
- 3. provide feedback on the effectiveness of assistive technology.

## Unit 015 Contribute to supporting individuals in the use of assistive technology

Additional guidance

There is no additional guidance for this unit.

# Unit 102 Understand the administration of medication to individuals with dementia using a person centred approach

Level: 3 Credit value: 2

**UAN number:** K/601/9199

#### **Unit aim**

This unit is about knowledge and understanding of individuals who may have specific needs for receiving medication because of their experience of dementia. Learners will develop their knowledge of these medication requirements. This unit does not confirm competence.

#### **Learning outcomes**

There are **two** learning outcomes to this unit. The learner will be able to:

- 1. Understand the common medications available to, and appropriate for, individuals with dementia
- 2. Understand how to provide **person centred** care to individuals with dementia through the appropriate and effective use of medication

#### **Guided learning hours**

It is recommended that **15** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

• an assignment covering practical skills and underpinning knowledge.

Unit 102 Understand the administration of medication

to individuals with dementia using a person

centred approach

Outcome 1 Understand the common medications available to,

and appropriate for, individuals with dementia

#### **Assessment Criteria**

- 1. outline the most common medications used to treat symptoms of dementia
- 2. describe how commonly used medications affect individuals with dementia
- 3. explain the risks and benefits of anti-psychotic medication for individuals with dementia
- 4. explain the importance of recording and reporting side effects/adverse reactions to medication
- 5. describe how 'as required' (PRN) medication can be used to support individuals with dementia who may be in pain.

## Unit 102 Understand the administration of medication to individuals with dementia using a person

centred approach

Outcome 2 Understand how to provide person centred care to

individuals with dementia through the appropriate

and effective use of medication

#### **Assessment Criteria**

- 1. describe person-centred ways of **administering** medicines whilst adhering to administration instructions
- 2. explain the importance of advocating for an individual with dementia who may be prescribed medication.

# Unit 102 Understand the administration of medication to individuals with dementia using a person centred approach

Additional guidance

- Administering may include:
  - Fitting with the routines of the individual
  - Meeting the preferences of the individual (tablets/solutions)
  - o Enabling techniques
  - Self-administration

Level: 3 Credit value: 3

**UAN number:** T/601/9187

#### **Unit aim**

This unit is about understanding that individuals may have specific nutritional needs because of their experience of dementia. Learners will develop their knowledge and skills in meeting these nutritional requirements and be able to provide evidence of their competence to enable individuals with dementia to eat and drink well.

#### Learning outcomes

There are **three** learning outcomes to this unit. The learner will be able to:

- 1. Understand the nutritional needs that are unique to individuals with dementia
- 2. Understand the effect that that mealtime environments can have on an individual with dementia
- 3. Be able to support an individual with dementia to enjoy good nutrition

#### **Guided learning hours**

It is recommended that **26** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to HSC 213, HSC 214, HSC 21, 31, 41, 24, 35, and 45.

#### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by a portfolio of evidence. Learning Outcome 3 needs to be assessed
in the workplace environment an assignment covering practical skills and underpinning
knowledge.

Outcome 1 Understand the nutritional needs that are unique to individuals with dementia

#### **Assessment Criteria**

- 1. describe how cognitive, functional and emotional changes associated with dementia can affect eating, drinking and nutrition
- 2. explain how poor nutrition can contribute to an individual's experience of dementia.
- 3. outline how other health and emotional conditions may affect the nutritional needs of an **individual** with dementia
- 4. explain the importance of recognising and meeting an individual's personal and cultural preferences for food and drink
- 5. explain why it is important to include a variety of food and drink in the diet of an individual with dementia.

Outcome 2 Understand the effect that that mealtime environments can have on an individual with

dementia

#### **Assessment Criteria**

- 1. describe how mealtime cultures and environments can be a barrier to meeting the nutritional needs of an individual with dementia
- 2. describe how mealtime environments and food presentation can be designed to help an individual to eat and drink
- 3. describe how a **person centred approach** can support an individual, with dementia at different levels of ability, to eat and drink.

Outcome 3 Be able to support an individual with dementia to enjoy good nutrition

#### **Assessment Criteria**

- 1. demonstrate how the knowledge of life history of an individual with dementia has been used to provide a diet that meets his/her preferences
- 2. demonstrate how **meal times** for an individual with dementia are planned to support his/her ability to eat and drink
- 3. demonstrate how the specific eating and drinking abilities and needs of an individual with dementia have been addressed
- 4. demonstrate how a person centred approach to meeting nutritional requirements has improved the **well-being** of an individual with dementia.

### Additional guidance

- An individual is someone requiring care or support
- **Person-centred approach**: This is a way of working which aims to put the person at the centre of the care situation taking into account their individuality, wishes and preferences
- Meal times may include:
  - Meal planning
  - Food shopping
  - Food preparation
  - o Pre- and post-meal activities
  - Dining
  - o Snacking
- Well-being may include:
  - Appropriate weight gain/loss
  - o Improved sleep patterns
  - o Reduced confusion
  - o Improved physical health
  - o Improved emotional state
  - o Reduced infections
  - o Reduced constipation

Level: 3 Credit value: 5

**UAN number:** F/601/4056

#### **Unit aim**

This unit assesses support for use of medication in social care settings. It covers broad types, classifications and forms of medication, as well as safe handling and storage. It addresses practical support for use of medication that reflects social care principles and values, and includes the need for accurate recording and reporting.

#### **Learning outcomes**

There are **eight** learning outcomes to this unit. The learner will be able to:

- 1. Understand the legislative framework for the use of medication in social care settings
- 2. Know about common types of medication and their use
- 3. Understand roles and responsibilities in the use of medication in social care settings
- 4. Understand techniques for administering medication
- 5. Be able to receive, store and dispose of medication supplies safely
- 6. Know how to promote the rights of the individual when managing medication
- 7. Be able to support use of medication
- 8. Be able to record and report on use of medication

#### **Guided learning hours**

It is recommended that **40** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Details of the relationship between the unit and relevant national standards

This unit is linked to HSC375, HSC221 and HSC236.

#### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by a portfolio of evidence. Learning outcomes 5, 7 and 8 must be assessed in the workplace.

Outcome 1 Understand the legislative framework for the use of

medication in social care settings

#### **Assessment Criteria**

- 1. identify legislation that governs the use of medication in social care settings
- 2. outline the legal classification system for medication
- 3. explain how and why policies and procedures or **agreed ways of working** must reflect and incorporate legislative requirements.

Outcome 2 Know about common types of medication and their

use

#### **Assessment Criteria**

- 1. identify common types of medication
- 2. list conditions for which each type of medication may be prescribe
- 3. describe changes to an individual's physical or mental well-being that may indicate an adverse reaction to a medication.

# Unit 109 Support use of medication in social care settings Outcome 3 Understand roles and responsibilities in the use of

medication in social care settings

#### **Assessment Criteria**

- 1. describe the roles and responsibilities of those involved in prescribing, dispensing and supporting use of medication
- 2. explain where responsibilities lie in relation to use of 'over the counter' remedies and supplements.

Outcome 4 Understand techniques for administering

medication

#### **Assessment Criteria**

- 1. describe the routes by which medication can be administered
- 2. describe different forms in which medication may be presented
- 3. describe materials and equipment that can assist in administering medication.

settings

Outcome 5 Be able to Be able to receive, store and dispose of

medication supplies safely

#### **Assessment Criteria**

- 8. demonstrate how to receive supplies of medication in line with agreed ways of working
- 9. demonstrate how to store medication safely
- 10. demonstrate how to dispose of un-used or unwanted medication safely.

Outcome 6 Know how to promote the rights of the individual

when managing medication

#### **Assessment Criteria**

- 1. explain the importance of the following principles in the use of medication
  - consent
  - self-medication or active participation
  - dignity and privacy
  - confidentiality
- 2. explain how risk assessment can be used to promote an individual's independence in managing medication
- 3. describe how ethical issues that may arise over the use of medication can be addressed.

Outcome 7 Be able to Be able to support use of medication

#### **Assessment Criteria**

- 1. demonstrate how to access information about an individual's medication
- 2. demonstrate how to support an individual to use medication in ways that promote hygiene, safety, dignity and active participation
- 3. demonstrate strategies to ensure that medication is used or administered **correctly**
- 4. demonstrate how to address any **practical difficulties** that may arise when medication is used
- 5. demonstrate how and when to access further information or support about the use of medication.

settings

Outcome 8 Be able to Be able to record and report on use of

medication

#### **Assessment Criteria**

- 1. demonstrate how to record use of medication and any changes in an individual associated with it
- 2. demonstrate how to report on use of medication and problems associated with medication, in line with agreed ways of working.

Additional guidance

- Agreed ways of working will include policies and procedures where these exist
- An **individual** is someone requiring care or support
- **Active participation** is 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
- Using medication **correctly** must ensure that the individual receives:
  - The correct medication
  - In the correct dose
  - By the correct route
  - o At the correct time
  - With agreed support
  - With respect for dignity and privacy
- Practical difficulties may include:
  - Lost medication
  - Missed medication
  - Spilt medication
  - o An individual's decision not to take medication
  - o Difficulty in taking medication in its prescribed form
  - o Wrong medication used
  - Vomiting after taking medication
  - o Adverse reaction
  - o Discrepancies in records or directions for use

Level: 3 Credit value: 7

**UAN number:** T/601/9495

#### **Unit aim**

This unit is aimed at those working in a wide range of settings. It provides the learner with the knowledge and skills required to support end of life care.

#### **Learning outcomes**

There are **ten** learning outcomes to this unit. The learner will be able to:

- 1. Understand the requirements of legislation and agreed ways of working to protect the rights of individuals at the end of life
- 2. Understand factors affecting end of life care
- 3. Understand advance care planning in relation to end of life care
- 4. Be able to provide support to individuals and key people during end of life care
- 5. Understand how to address sensitive issues in relation to end of life care
- 6. Understand the role of organisations and support services available to individuals and key people in relation to end of life care
- 7. Be able to access support for the individual or key people from the wider team
- 8. Be able to support individuals through the process of dying
- 9. Be able to take action following the death of individuals
- 10. Be able to manage own feelings in relation to the dying or death of individuals

#### **Guided learning hours**

It is recommended that **53** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Details of the relationship between the unit and relevant national standards

This unit is linked to HSC385.

#### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by a portfolio of evidence.

Outcome 1

Understand the requirements of legislation and agreed ways of working to protect the rights of individuals at the end of life

#### **Assessment Criteria**

- 1. outline legal requirements and **agreed ways of working** designed to protect the rights of individuals in end of life care
- 2. explain how **legislation** designed to protect the rights of individuals in end of life care applies to own job role.

Outcome 2 Understand factors affecting end of life care

#### **Assessment Criteria**

- 1. outline key points of theories about the emotional and psychological processes that **individuals** and **key people** may experience with the approach of death
- 2. explain how the beliefs, religion and culture of individuals and key people influence end of life care
- 3. explain why key people may have a distinctive role in an individual's end of life care
- 4. explain why support for an individual's health and well-being may not always relate to their terminal condition.

Outcome 3 Understand advance care planning in relation to end of life care

#### **Assessment Criteria**

- 1. describe the benefits to an individual of having as much control as possible over their end of life care
- 2. explain the purpose of **advance care planning** in relation to end of life care
- 3. describe own role in supporting and recording decisions about advance care planning
- 4. outline ethical and legal issues that may arise in relation to advance care planning.

Outcome 4 Be able to Be able to provide support to individuals and key people during end of life care

#### **Assessment Criteria**

- 1. support the individual and key people to explore their thoughts and feelings about death and dying
- 2. provide support for the individual and key people that respects their beliefs, religion and culture
- 3. demonstrate ways to help the individual feel respected and valued throughout the end of life period
- 4. provide information to the individual and/or key people about the individual's illness and the support available
- 5. give examples of how an individual's well-being can be enhanced by:
  - environmental factors
  - non-medical interventions
  - use of equipment and aids
  - alternative therapies
- 6. contribute to partnership working with key people to support the individual's well-being.

Outcome 5 Understand how to address sensitive issues in relation to end of life care

#### **Assessment Criteria**

- 1. explain the importance of recording significant conversations during end of life care
- 2. explain factors that influence who should give significant news to an individual or key people
- describe conflicts and legal or ethical issues that may arise in relation to death, dying or end
  of life care
- 4. analyse ways to address such conflicts.

Outcome 6

Understand the role of organisations and support services available to individuals and key people in relation to end of life care

#### **Assessment Criteria**

- 1. describe the role of **support organisations and specialist services** that may contribute to end of life care
- 2. analyse the role and value of an advocate in relation to end of life care
- 3. explain how to establish when an advocate may be beneficial
- 4. explain why support for spiritual needs may be especially important at the end of life
- 5. describe a range of sources of support to address spiritual needs.

Outcome 7 Be able to Be able to access support for the individual or key people from the wider team

#### **Assessment Criteria**

- 1. identify when support would best be offered by other members of the team
- 2. liaise with other members of the team to provide identified support for the individual or key people.

Outcome 8 Be able to Be able to support individuals through the process of dying

#### **Assessment Criteria**

- 1. carry out own role in an individual's care
- 2. contribute to addressing any distress experienced by the individual promptly and in agreed ways
- 3. adapt support to reflect the individual's changing needs or responses
- 4. assess when an individual and key people need to be alone.

Outcome 9 Be able Be able to take action following the death of individuals

#### **Assessment Criteria**

- 1. explain why it is important to know about an individual's wishes for their after-death care
- 2. carry out **actions** immediately following a death that respect the individual's wishes and follow agreed ways of working
- 3. describe ways to support key people immediately following an individual's death.

Outcome 10 Be able to Be able to manage own feelings in relation to the dying or death of individuals

#### **Assessment Criteria**

- 1. identify ways to manage own feelings in relation to an individual's dying or death
- 2. utilise support systems to deal with own feelings in relation to an individual's dying or death.

### Additional guidance

- **Legislation and agreed ways of working** will include policies and procedures where these apply, and may relate to:
  - o equality, diversity and discrimination
  - o data protection, recording, reporting, confidentiality and sharing information
  - o the making of wills and living wills
  - o dealing with personal property of deceased people
  - o removal of medical equipment from deceased people
  - o visitors
  - o safeguarding of vulnerable adults
- Systems for advance care planning may include:
  - o Gold Standard Framework
  - o Preferred Priorities for Care
- An **individual** is the person requiring end of life care
- Key people may include:
  - o Family members
  - o Friends
  - o Others who are important to the well-being of the individual
- Support organisations and specialist services may include:
  - o nursing and care homes
  - o specialist palliative care services
  - o domiciliary, respite and day services
  - o funeral directors
- Other members of the team may include:
  - o line manager
  - o religious representatives
  - o specialist nurse
  - o occupational or other therapist
  - o social worker
  - key people
- Actions may include:
  - o Attending to the body of the deceased
  - o Reporting the death through agreed channels
  - o Informing key people
- Agreed ways of working will include policies and procedures where these exist.

Level: 3 Credit value: 6

**UAN number:** H/601/8049

#### **Unit aim**

This unit is aimed at those working in a wide range of settings. It provides the learner with the knowledge and skills required to facilitate person-centred assessment, planning, implementation and review.

#### Learning outcomes

There are **six** learning outcomes to this unit. The learner will be able to:

- 1. Understand the principles of person centred assessment and care planning
- 2. Be able to facilitate person centred assessment
- 3. Be able to contribute to the planning of care or support
- 4. Be able to support the implementation of care plans
- 5. Be able to monitor care plans
- 6. Be able to facilitate a review of care plans and their implementation

#### **Guided learning hours**

It is recommended that **45** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Details of the relationship between the unit and relevant national standards

This unit is linked to the HSC 328 and HSC 329.

#### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care & Development.

#### **Assessment**

This unit will be assessed by a portfolio of evidence. Learning outcomes 2, 3, 4, 5 and 6 must be assessed in a real work environment.

Outcome 1 Understand the principles of person centred assessment and care planning

#### **Assessment Criteria**

- 1. explain the importance of a holistic approach to assessment and planning of care or support
- 2. describe ways of supporting the **individual** to lead the assessment and planning process
- 3. describe ways the assessment and planning process or documentation can be adapted to maximise an individual's ownership and control of it.

Outcome 2 Be able to Be able to facilitate person centred assessment

#### **Assessment Criteria**

- 1. establish with the individual a partnership approach to the assessment process
- 2. establish with the individual how the process should be carried out and who else should be involved in the process
- 3. agree with the individual and **others** the intended outcomes of the assessment process and **care plan**
- 4. ensure that assessment takes account of the individual's strengths and aspirations as well as needs
- 5. work with the individual and others to identify support requirements and preferences.

Outcome 3 Be able to Be able to contribute to the planning of care or support

#### **Assessment Criteria**

- 1. take account of **factors** that may influence the type and level of care or support to be provided
- 2. work with the individual and others to explore **options and resources** for delivery of the plan
- 3. contribute to agreement on how component parts of a plan will be delivered and by whom
- 4. record the plan in a suitable format.

Outcome 4 Be able to Be able to support the implementation of care plans

#### **Assessment Criteria**

- 1. carry out assigned aspects of a care plan
- 2. support others to carry out aspects of a care plan for which they are responsible
- 3. adjust the plan in response to changing needs or circumstances.

Outcome 5 Be able to Be able to monitor care plans

#### **Assessment Criteria**

- 1. agree methods for monitoring the way a care plan is delivered
- 2. collate monitoring information from agreed sources
- 3. record changes that affect the delivery of the care plan.

## Unit 116 Facilitate person centred assessment, planning, implementation and review

Outcome 6 Be able to Be able to facilitate a review of care plans and their implementation

#### **Assessment Criteria**

- 1. seek agreement with the individual and others about:
  - who should be involved in the review process
  - criteria to judge effectiveness of the care plan
- 2. seek feedback from the individual and others about how the plan is working
- 3. use feedback and monitoring/other information to evaluate whether the plan has achieved its objectives
- 4. work with the individual and others to agree any **revisions** to the plan
- 5. document the review process and revisions as required.

## Unit 116 Facilitate person centred assessment, planning, implementation and review

### Additional guidance

- The **individual** is the person requiring care or support. An advocate may act on behalf of an individual.
- A **care plan** may also be known by other names, such as a support plan, individual plan or care delivery plan. It is the document where day to day requirements and preferences for care and support are detailed.
- Others may include:
  - o Carers
  - o Friends and relatives
  - Professionals
  - o Others who are important to the individual's well-being
- Factors may include:
  - o Feasibility of aspirations
  - o Beliefs, values and preferences of the individual
  - o Risks associated with achieving outcomes
  - o Availability of services and other support options
- Options and resources should consider:
  - o Informal support
  - o Formal support
  - o Care or support services
  - Community facilities
  - o Financial resources
  - o Individual's personal networks
- **Revisions** may include:
  - o Closing the plan if all objectives have been met
  - o Reducing the level of support to reflect increased independence
  - o Increasing the level of support to address unmet needs
  - o Changing the type of support
  - o Changing the method of delivering support

## Unit 120 Understand mental well-being and mental health promotion

Level: 3 Credit value: 3

**UAN number:** F/602/0097

#### **Unit aim**

This unit aims to provide the learner with an understanding of the key concepts of mental well-being, mental health and mental health promotion. It focuses on the range of factors that can influence mental well-being and how to effectively promote mental well-being and mental health with individuals and groups in a variety of contexts, not just specialist mental health services.

#### **Learning outcomes**

There are **two** learning outcomes to this unit. The learner will be able to:

- 1. Understand the different views on the nature of mental well-being and mental health and the factors that may influence both across the life span
- 2. Know how to implement an effective strategy for promoting mental well-being and mental health with individuals and groups

#### **Guided learning hours**

It is recommended that **14** hours should be allocated for this unit, although patterns of delivery are likely to vary.

#### Details of the relationship between the unit and relevant national standards

This unit is linked to MH25.

#### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Health.

#### Assessment

This unit will be assessed by

• an assignment covering practical skills and underpinning knowledge.

## Unit 120 Understand mental well-being and mental health promotion

Outcome 1

Understand the different views on the nature of mental well-being and mental health and the factors that may influence both across the life span

#### **Assessment Criteria**

The learner can:

- 1. Evaluate two different views on the nature of mental well-being and mental health
- 2. Explain the range of factors that may influence mental well-being and mental health problems across the life span, including:
  - a biological factors
  - b social factors
  - c psychological factors.
- 3. Explain how the following types of risk factors and protective factors influence levels of resilience in individuals and groups in relation to mental well-being and mental health
  - a. risk factors including inequalities, poor quality social relationships
  - b. protective factors including socially valued roles, social support and contact.

Learning outcome 1, assessment criteria 1 requires learners to 'explain the range of factors that may influence mental well-being and mental health problems across the life span'. The qualification is aimed at those working with people aged 18 to 65 years but learners are expected to demonstrate their understanding of how factors arising from individuals' early lives may influence their well-being as adults and the potential impact of levels of well-being in adulthood their well-being in later life. This is in order to promote a holistic and whole person approach to understanding well-being and mental health. Learners are not expected to have a detailed understanding of mental health issues for children and young people or older people.

## Unit 120 Understand mental well-being and mental health promotion

Outcome 2

Know how to implement an effective strategy for promoting mental well-being and mental health with individuals and groups

#### **Assessment Criteria**

- 1. explain the steps that an individual may take to promote their mental well-being and mental health
- 2. explain how to support an individual in promoting their mental well-being and mental health.
- 3. evaluate a strategy for supporting an individual in promoting their mental well-being and mental health
- 4. describe key aspects of a local, national or international strategy to promote mental well-being and mental health within a group or community
- 5. evaluate a local, national or international strategy to promote mental well-being and mental health within a group or community.

Level: 3 Credit value: 4

UAN number: M/502/3146

#### **Unit aim**

This unit aims to provide learners with an understanding of what Independent Advocacy is and how to use the values and principles which underpin good practice. The unit focuses on the different models of advocacy, their history and why they exist.

#### Learning outcomes

There are **six** learning outcomes to this unit. The learner will be able to:

- 1. Understand Independent Advocacy
- 2. Explain principles and values underpinning Independent Advocacy
- 3. Describe the development of advocacy
- 4. Be able to explain different types of advocacy support and their purpose
- 5. Understand the roles and responsibilities of an Independent Advocate
- 6. Understand advocacy standards.

#### **Guided learning hours**

It is recommended that **25** hours should be allocated for this unit. This may be on a full or part time basis.

#### Details of the relationship between the unit and relevant national standards

This unit is linked to the following NOS -HSC 23, HSC 31, H136, HSC 45, HSC 335, HSC 366, HSC 367, HSC 368, HSC 3111, HSC 3199, PE 1.

#### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Care and Development.

#### **Assessment**

This unit will be assessed by a portfolio of evidence.

Outcome 1 Understand Independent Advocacy

#### **Assessment Criteria**

- 1. **define** independent advocacy
- 2. explain the **limits** to advocacy and boundaries to the service
- 3. identify the different steps within the advocacy process
- 4. distinguish when independent advocacy can and cannot help
- 5. identify a range of services independent advocates commonly signpost to
- 6. explain the difference between advocacy provided by independent advocates and other people.

Outcome 2 Explain principles and values underpinning

Independent Advocacy

#### **Assessment Criteria**

- 1. explain the **key principles** underpinning independent advocacy
- 2. explain why the key principles are important.

Outcome 3 Describe the development of advocacy

#### **Assessment Criteria**

- 1. explain the **purpose** of independent advocacy
- 2. identify **key milestones** in the history of advocacy
- 3. explain the **wider policy** context of advocacy.

Outcome 4 Be able to explain different types of advocacy

support and their purpose

#### **Assessment Criteria**

- 1. compare a range of advocacy models
- 2. explain the purpose of different advocacy models
- 3. identify the commonalities and differences in a range of advocacy models.

Outcome 5 Understand the roles and responsibilities of an

Independent Advocate

#### **Assessment Criteria**

- 1. explain **roles and responsibilities** within independent advocacy
- 2. describe the **limits and boundaries** of an independent advocate
- 3. describe the **skills**, **attitudes and personal attributes** of a good advocate
- 4. identify **when** and **who** to seek advice from when faced with dilemmas.

Outcome 6 Understand advocacy standards.

#### **Assessment Criteria**

- 1. describe a range of **standards** which apply to Independent Advocacy
- 2. explain how standards can impact on the advocacy role and service.

### Additional guidance

- **Define** includes definitions of different models of advocacy eg:
  - peer advocacy
  - o citizen advocacy
  - o issue based advocacy
  - legal advocacy
- **Limits**: examples differentiate between independent advocacy and advocacy provided by other services and identify boundaries to the service
- **Can and cannot help**: identify when to provide support and when to signpost to other services
- Range of services: Including social services, counselling, citizen advice bureau, housing associations
- **Key principles** includes:
  - Confidentiality
  - o Independence
  - o empowerment and being client led
- **Purpose**: includes
- addressing inequality
- supporting people to speak up
- securing individual rights
- Key milestones includes: the development of advocacy in the UK within the context of development in Europe and America
- **Wider policy**: Inclusion of advocacy within a range of policy initiatives such as Valuing People, Every Child Matters and the personalisation agenda
- Range of advocacy models: eg: citizen, issue based, non instructed, self and peer advocacy
- Roles and responsibilities includes:
  - o providing emotional support
  - o information
  - o representation
  - o offering a confidential relationship
- Limits and boundaries: eg: not giving advice

#### Skills, attitudes and personal attributes:

- o listening, representation
- o being approachable
- o non judgemental
- o reliable
- having a commitment to promoting diversity
- **When**: Identify instances when advice needs to be sought, eg on information sharing or break of confidentiality
- **Who**: line manager, supervisors, peer network
- **Standards** includes:
  - o local, regional and national
  - National Standards for the Provision of Children's Advocacy
  - o Action 4 Advocacy's code of Practice
  - o local standards where developed

Level: 4
Credit value: 12

QAN number: F/502/3295

#### **Unit aim**

The unit aims to support candidates to develop the practical skills and knowledge required to provide IMCA support within the Mental Capacity Act 2005.

#### **Learning outcomes**

There are **nine** learning outcomes to this unit. The learner will be able to:

- 1. Understand and use the Mental Capacity Act
- 2. Provide Independent Mental Capacity Advocacy
- 3. Work with the decision maker
- 4. Challenge decisions made by the decision maker
- 5. Work with people who lack capacity
- 6. Work with accommodation and care review referrals
- 7. Work with serious medical treatment referrals
- 8. Work with adult protection referrals
- 9. Construct an IMCA written report that meets statutory requirements.

#### **Guided learning hours**

It is recommended that **35** hours should be allocated for this unit, although patterns of delivery are likely to vary.

## Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to these NOS AHP 17, GEN 12, H16, H136, HSC 328, HSC 368, HSC 3199, HSC 41, HSC 45, HSC 418, HSC 423, HSC 431, HSC 434, HSC 437, and MH\_1.

#### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Care and Development and Skills for Health.

#### Assessment

This unit will be assessed by an assignment covering practical skills and underpinning knowledge portfolio of evidence.

## Outcome 1 Understand and use the Mental Capacity Act

#### **Assessment Criteria**

- 1. explain **key principles** of the Mental Capacity Act 2005
- 2. analyse powers within the Mental Capacity Act 2005
- 3. use research skills to identify a range of **provisions** within the Mental Capacity Act 2005
- 4. explain who may be affected by the Mental Capacity Act 2005 and why
- 5. use the Code of Practice.

## Outcome 2 Provide Independent Mental Capacity Advocacy

#### **Assessment Criteria**

- 1. use the Mental Capacity Act 2005 to identify when there is a duty and a power to instruct an IMCA
- 2. analyse the role and responsibilities of an IMCA
- 3. summarise rights afforded to an IMCA within the Mental Capacity Act 2005
- 4. prioritise a range of case work
- 5. assess a range of potential challenges which IMCAs can face in practice
- 6. resolve practice dilemmas
- 7. evaluate the differences between IMCA and general advocacy
- 8. assess and resolve conflicts of interest
- 9. summarise the role of commissioners
- 10. commit to using supervision
- 11. signpost qualifying people to other services.

### Outcome 3 Work with the decision maker

#### **Assessment Criteria**

- 1. identify the decision maker
- 2. identify good practice in partnership working between the decision maker and the IMCA
- 3. use referral processes which identify legal requirements for accepting a new client
- 4. evaluate the correctness of the assessment of capacity
- 5. identify the requirements for accepting referral when family are involved
- 6. identify which IMCA service is responsible to represent an individual in different geographical areas
- 7. respond to decision makers who do not practice partnership working
- 8. present to decision makers on what an IMCA can contribute.

Outcome 4 Challenge decisions made by the decision maker

#### **Assessment Criteria**

- 1. map out the decision making process within each area an IMCA may be involved
- 2. raise concerns during the decision making process
- 3. highlight concerns after the decision is made.

## Outcome 5 Work with people who lack capacity

#### **Assessment Criteria**

- 1. use a **range of methods** to communicate with people who lack capacity
- use non-instructed Advocacy to identify the wishes and preferences of people receiving IMCA support
- 3. use strategies to work with people with dementia or learning disabilities
- 4. ascertain the wishes and preferences of people who lack capacity.

Outcome 6 Work with accommodation and care review referrals

#### **Assessment Criteria**

- 1. research **information** and establish options
- 2. evaluate the differences and similarities in a range of **types of accommodation**
- 3. identify a range of possible care packages to enable people to stay at home
- 4. assess the suitability of types of accommodation to individuals
- 5. assess the impact the decision will have on the individual
- 6. use a range of information sources to suggest alternative courses of action
- 7. explain the function of a range of **regulatory bodies**.

### Outcome 7 Work with serious medical treatment referrals

#### **Assessment Criteria**

- 1. summarise the criteria for serious medical treatment
- 2. research and gather information
- 3. assess the impact the **decision** will have on the individual
- 4. use a range of information sources to suggest alternative courses of action
- 5. obtain a second medical opinion where appropriate
- 6. explain the importance of seeking a second medical opinion
- 7. identify risks, benefits and ethical issues connected to medical treatments
- 8. explain the process of referral in medical systems to access treatment.

## Outcome 8 Work with adult protection referrals

#### **Assessment Criteria**

- 1. identify the different stages at which the IMCA may be instructed within adult protection procedures
- 2. identify a range of situations where the IMCA may represent the individual during adult protection meetings
- 3. analyse and use local and national adult protection procedures
- 4. use the **guidelines** for IMCA in adult protection proceedings referrals
- 5. research and gather information
- 6. attend meetings where necessary
- 7. attend meetings where necessary
- 8. summarise the issues involved in communicating with families in adult protection cases.

Outcome 9 Construct an IMCA written report that meets statutory requirements.

#### **Assessment Criteria**

The learner can:

- 1. identify a range of issues that should be addressed within an IMCA report
- 2. identify what should never be in an IMCA report
- 3. write an IMCA report
- 4. identify **good practice** in recording case work
- 5. explain the impact of data protection legislation on the recording of work.

#### **Good Practice**

It is envisaged the delivery of this unit will take place during taught sessions and on the job training. Tutors should consider which learning outcomes are delivered during taught elements and identify which competency based outcomes must be demonstrated through work based evidence. Service users should be supported to co-deliver taught sessions and have appropriate opportunity to comment on a candidate's competency across a range of learning outcomes.

### Additional guidance

- **Key principles**: include the five key principles and best interests framework
- Provisions include:
  - o new provisions within the Act including advance decisions to refuse treatment
  - Court of Protection
  - o office of public guardian
  - o lasting power of attorney and Court appointed deputies.
- **Challenges**: include:
  - o working with people who cannot instruct
  - o working with professionals
  - o challenging decisions
  - o time constraint of role
- Differences include:
  - o a range of differences between IMCA and general advocacy including differences in confidentiality boundaries
  - o information sharing
  - o seeking consent
  - o taking instructions
  - o accepting referrals
  - o securing outcomes.
- Dilemmas and challenges includes:
- dilemmas faced when taking referrals
- challenging decisions and accessing information
- **Evaluate** includes: identify requirements of the assessment of capacity and how IMCAs can raise concerns about the person's capacity to make the referral decision.
- Range of methods: includes verbal and non verbal communication.
- **Information:** taken from inspection reports
- Types of accommodation: includes
- supported living
- o residential care
- nursing homes
- o sheltered housing and receiving support in one's own home
- Regulatory bodies: includes CQC and CSSIW.

- **Decision:** the impact a range of decisions could have on the individual including end of life decisions and Do not Attempt Resuscitation orders.
- **Guidelines:** ADASS guidance on the criteria for the use of IMCAs in safeguarding adult cases.
- **Good Practice:** It is envisaged the delivery of this unit will take place during taught sessions and on the job training. Tutors should consider which learning outcomes are delivered during taught elements and identify which competency based outcomes must be demonstrated through work based evidence. Service users should be supported to codeliver taught sessions and have appropriate opportunity to comment on a candidate's competency across a range of learning outcomes.

## Appendix 1 Key Skills signposting

The Level 2 qualification provides opportunities to gather evidence for the accreditation of **Key Skills** as shown in the tables below. However, to gain Key Skills certification the Key Skills would need to be taken as additional qualifications.

Unit	Communication	Application of Number	Information Technology	Problem Solving	Improving own learning and performance	Working With Others
3565- 001	N/A	N/A	N/A	N/A	N/A	N/A
3565- 002	N/A	N/A	N/A	N/A	N/A	N/A
3565- 003	N/A	N/A	N/A	N/A	N/A	N/A
3565- 004	N/A	N/A	N/A	N/A	N/A	N/A
3565- 005	✓	N/A	N/A	N/A	N/A	N/A
3565- 006	✓	N/A	N/A	N/A	N/A	N/A
3565- 007	N/A	N/A	N/A	N/A	N/A	N/A
3565- 008	✓	N/A	N/A	N/A	N/A	N/A
3565- 009	N/A	N/A	N/A	✓	N/A	N/A
3565- 010	N/A	N/A	N/A	N/A	N/A	N/A
3565- 011	N/A	N/A	N/A	N/A	N/A	N/A
3565- 012	<b>√</b>	N/A	N/A	N/A	N/A	N/A
3565- 013	N/A	N/A	N/A	N/A	N/A	N/A
3565- 014	N/A	N/A	N/A	N/A	N/A	N/A
3565- 015	N/A	N/A	N/A	N/A	N/A	N/A
3565- 102	N/A	N/A	N/A	N/A	N/A	N/A
3565- 108	N/A	N/A	N/A	N/A	N/A	N/A

3565- 109	✓	N/A	N/A	N/A	N/A	N/A
3565- 113	<b>√</b>	N/A	N/A	N/A	N/A	N/A
3565- 116	<b>√</b>	N/A	N/A	N/A	N/A	<b>√</b>
3565- 120	✓	N/A	<b>√</b>	N/A	N/A	N/A
3565- 121	✓	N/A	N/A	✓	✓	N/A
3565- 422	<b>√</b>	N/A	N/A	<b>√</b>	N/A	<b>√</b>

### **Appendix 2** Sources of general information

The following documents contain essential information for centres delivering City & Guilds qualifications. They should be referred to in conjunction with this handbook. To download the documents and to find other useful documents, go to the **Centres and Training Providers homepage** on **www.cityandguilds.com**.

**Providing City & Guilds qualifications** – a guide to centre and qualification approval contains detailed information about the processes which must be followed and requirements which must be met for a centre to achieve 'approved centre' status, or to offer a particular qualification. Specifically, the document includes sections on:

- The centre and qualification approval process and forms
- Assessment, verification and examination roles at the centre
- Registration and certification of candidates
- Non-compliance
- Complaints and appeals
- Equal opportunities
- Data protection
- Frequently asked questions.

**Ensuring quality** contains updates and good practice exemplars for City & Guilds assessment and policy issues. Specifically, the document contains information on:

- Management systems
- Maintaining records
- Assessment
- Internal verification and quality assurance
- External verification.

**Access to Assessment & Qualifications** provides full details of the arrangements that may be made to facilitate access to assessments and qualifications for candidates who are eligible for adjustments in assessment.

The **centre homepage** section of the City & Guilds website also contains useful information such on such things as:

#### • Walled Garden

Find out how to register and certificate candidates on line

#### • Events

Contains dates and information on the latest Centre events

**Centre Guide – Delivering International Qualifications** contains detailed information about the processes which must be followed and requirements which must be met for a centre to achieve 'approved centre' status, or to offer a particular qualification. Specifically, the document includes sections on:

- The centre and qualification approval process and forms
- Assessment, verification and examination roles at the centre
- Registration and certification of candidates
- Non-compliance
- Complaints and appeals

- Equal opportunities
- Data protection
- Frequently asked questions..

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## **Useful contacts**

UK learners General qualification information	T: +44 (0)844 543 0033 E: learnersupport@cityandguilds.com			
International learners General qualification information	T: +44 (0)844 543 0033 F: +44 (0)20 7294 2413 E: intcg@cityandguilds.com			
Centres Exam entries, Registrations/enrolment, Certificates, Invoices, Missing or late exam materials, Nominal roll reports, Results	T: +44 (0)844 543 0000 F: +44 (0)20 7294 2413 E: <b>centresupport@cityandguilds.com</b>			
Single subject qualifications Exam entries, Results, Certification, Missing or late exam materials, Incorrect exam papers, Forms request (BB, results entry), Exam date and time change	T: +44 (0)844 543 0000 F: +44 (0)20 7294 2413 F: +44 (0)20 7294 2404 (BB forms) E: <b>singlesubjects@cityandguilds.com</b>			
International awards Results, Entries, Enrolments, Invoices, Missing or late exam materials, Nominal roll reports	T: +44 (0)844 543 0000 F: +44 (0)20 7294 2413 E: intops@cityandguilds.com			
Walled Garden Re-issue of password or username, Technical problems, Entries, Results, GOLA, Navigation, User/menu option, Problems	T: +44 (0)844 543 0000 F: +44 (0)20 7294 2413 E: walledgarden@cityandguilds.com			
<b>Employer</b> Employer solutions, Mapping, Accreditation, Development Skills, Consultancy	T: +44 (0)121 503 8993 E: business_unit@cityandguilds.com			
Publications Logbooks, Centre documents, Forms, Free literature	T: +44 (0)844 543 0000 F: +44 (0)20 7294 2413			

If you have a complaint, or any suggestions for improvement about any of the services that City & Guilds provides, email: feedbackandcomplaints@cityandguilds.com

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