

City & Guilds Level 5 Diploma in Leadership and Management for Adult Care (England) (3096-51)

Version 2.0 (March 2023)

Qualification Handbook

Approved by



Qualification at a glance

Subject area	Adult Care
City & Guilds number	3096
Age group approved	18+
Entry requirements	None
Assessment	Portfolio of evidence
Grading	Pass/Fail
Approvals	Automatic approval
Support materials	Textbook, Smart Screen, Learning Assistant
Registration and certification	Consult the Walled Garden/Online Catalogue for last dates

Title and level	City & Guilds qualification number	Regulatory reference number	GLH	ΤQΤ
City & Guilds Level 5 Diploma in Leadership and Management for Adult Care (England)	3096-51	610/0977/5	598	900

Version and date	Change detail	Section
1.0 June 2022	Initial version	All
1.1 October 2022	Title changed to reflect the Leader in Adult Care apprenticeship standard	Front cover, footer, Sections 1 – 4
2.0 March 2023	Minor grammatical amendments to unit 511, 512, 521, 527, 528, 529, 531, 532, 536. Amendments to 533 AC3.2 and 535 AC4.2	Units

Contents

Qu	Qualification at a glance		2	
Co	ontents		4	
1	Introduo	ction	7	
		Structure	8	
		Total Qualification Time	11	
2	Centre i	requirements	12	
		Approval	12	
		Resource requirements	13	
		Quality assurance	13	
		Other legal considerations	14	
		Learner entry requirements	14	
		Age restrictions	15	
3	Deliveri	ng the qualification	16	
		Initial assessment and induction	16	
		Support materials	16	
4	Assess	nent	17	
		Assessment of the qualification	17	
		Assessment strategy	17	
		Evidence sources	18	
		Time constraints	19	
		Recognition of prior learning (RPL)	19	
5	Units	20		
		Structure of the units	20	
		Guidance for delivery of the units	20	
Un	it 450	Understanding Independent Advocacy in adult care	21	
Un	it 451	Study skills	24	
Un	it 452	Managing transitions in adult care	27	
Un	it 500	Understanding leadership and management in adult care	31	
Un	it 501	Governance and regulatory processes in adult care	37	
Un	it 502	Decision-making in leadership and management within adult care	41	
Un	it 503	Understanding business and resource management for adult care	44	
Un	it 504	Team leadership in adult care	49	
Un	it 505	Leading team learning and professional development in adult care	52	
Un	it 506	Professional supervision in adult care	56	

Unit 507	Safeguarding in adult care	60
Unit 508	Understanding mental capacity and restrictive practice in adult care	64
Unit 509	Leading and managing partnerships in adult care	69
Unit 510	Leading practice to manage comments and complaints	75
Unit 511	Leading the vision of an adult care setting/service	79
Unit 512	Continuous improvement within adult care	83
Unit 513	Effective communication in leadership and management in adult care	88
Unit 514	Managing the effective handling of information in adult care	93
Unit 515	Leading person-centred practice	96
Unit 516	Leading a service that promotes health and wellbeing in adult care	103
Unit 517	Leading and promoting equality, diversity, inclusion and human rights adult care	in 107
Unit 518	Leading and managing health and safety in adult care	111
Unit 519	Continuous development for leaders and managers in adult care	116
Unit 520	Personal wellbeing for leaders and managers in adult care services	120
Unit 521	Leading and managing end of life care in adult care	124
Unit 522	Managing support for sexual behaviour and promotion of sexual healt adult care settings/services	h in 128
Unit 523	Leading and managing clinical skills provision in adult care	133
Unit 524	Managing business development plans in adult care	138
Unit 525	Managing recruitment and selection in adult care	142
Unit 526	Leading and managing dementia care services in adult care	146
Unit 527	Leading and managing support for individuals with physical disabilitie and impairments	es 152
Unit 528	Leading and managing services for individuals with learning disabilitie and/or autism in adult care	es 157
Unit 529	Leading and managing services for mental health and wellbeing in adu care	ult 162
Unit 530	Leading and managing services for individuals with profound and complex needs in adult care	167
Unit 531	Managing adult domiciliary care services	172
Unit 532	Leading and managing groups in adult care	177
Unit 533	Managing services to promote independence for individuals in adult c	are 182
Unit 534	Leading operational management in adult care	186
Unit 535	Coaching and mentoring when leading and managing in adult care	190
Unit 536	Undertaking a research project	195

Appendix 1	Sources of general information	199
Appendix 2	Skills for Care and Development Assessment Principles March 2016 extract	200
Appendix 3	Digital skills mapping	204
Useful conta	cts	207

1 Introduction

This document tells you what you need to do to deliver the qualification:

Area	Description
Who is the qualification for?	The City & Guilds Level 5 Diploma in Leadership and Management for Adult Care (England) is an occupational qualification for learners who lead adult care settings in England.
	Learners must be in a leadership role which provides the opportunities to apply the knowledge, skills and behaviours required in this qualification. The outcome of the qualification is to confirm occupational competence at level 5.
	This qualification is applicable to variety of roles such as:
	Registered managersManagersAssistant managers
	Deputy managers
	In settings such as:
	 Residential services for older people/work age adults
	Domiciliary care services
	Day services
	Respite servicesCommunity based services
What does the qualification cover?	This qualification covers a range of skills and knowledge relating to leadership and management of adult care services in England, such as:
	Decision-making, safeguarding, leading and managing services, service improvement, leading person-centred care and governance and regulatory requirements.
What opportunities for progression are there?	This qualification allows learners to learn, develop and practise the skills and knowledge required for employment and/or career progression in adult care in England. Learners could progress to Apprenticeships in Social Work, or further Leadership and Management, Foundation Degree Programmes or Teaching and Learning and Assessment qualifications.
Who did we develop the qualification with?	This qualification is endorsed by Skills for Care the Sector Skills Council for adult social care in England and is based on their qualification criteria.
Is it part of an apprenticeship framework or initiative?	Yes. This qualification, is recognised as meeting the mandatory qualification requirement for the Leader in Adult Care Apprenticeship Standard.

Structure

To achieve the City & Guilds Level 5 Diploma in Leadership and Management for Adult Care (England) learners must achieve a minimum of **90** credits:

79 credits from the mandatory units

and

a minimum of **11** credits from the optional units.

City & Guilds unit number	Unit level	Unit title	Credit value	GLH
Mandatory				
3096-500	5	Understanding leadership and management in adult care	4	30
3096-501	5	Governance and regulatory processes in adult care	4	30
3096-502	5	Decision-making in leadership and management within adult care	3	20
3096-503	5	Understanding business and resource management for adult care	5	40
3096-504	5	Team leadership in adult care	3	25
3096-505	5	Leading team learning and professional development in adult care	4	30
3096-506	5	Professional supervision in adult care	3	20
3096-507	5	Safeguarding in adult care	5	35
3096-508	5	Understanding mental capacity and restrictive practice in adult care	3	20
3096-509	5	Leading and managing partnerships in adult care	5	35
3096-510	5	Leading practice to manage comments and complaints	3	20
3096-511	5	Leading the vision of an adult care setting/service	4	22
3096-512	5	Continuous improvement within the adult care	4	25
3096-513	5	Effective communication in leadership and management in adult care	3	20
3096-514	5	Managing the effective handling of information in adult care	3	20
3096-515	5	Leading person-centred practice	6	40
3096-516	5	Leading a service that promotes health and wellbeing in adult care	3	18
3096-517	5	Leading and promoting equality, diversity, inclusion and human rights in adult care	4	30
3096-518	5	Leading and managing health and safety in adult care	4	30
3096-519	5	Continuous development for leaders and managers in adult care	3	15
3096-520	5	Personal wellbeing for leaders and managers in adult care services	3	15

Optional				
3096-450	4	Understanding Independent Advocacy in adult care	3	15
3096-451	4	Study skills	3	17
3096-452	4	Managing transitions in adult care	3	15
3096-521	5	Leading and managing end of life care in adult care	4	25
3096-522	5	Managing support for sexual behaviour and promotion of sexual health in adult care settings/services	4	25
3096-523	5	Leading and managing clinical skills provision in adult care	4	25
3096-524	5	Managing business development plans in adult care	4	25
3096-525	5	Managing recruitment and selection in adult care	3	18
3096-526	5	Leading and managing dementia care services in adult care	4	25
3096-527	5	Leading and managing support for individuals with physical disabilities and impairments in adult care	3	18
3096-528	5	Leading and managing services for individuals with learning disabilities and/or autism in adult care	4	25
3096-529	5	Leading and managing services for mental health and wellbeing of individuals in adult care	4	25
3096-530	5	Leading and managing services for individuals with profound and complex needs in adult care	4	25
3096-531	5	Managing adult domiciliary care services	4	25
3096-532	5	Leading and managing groups in adult care	4	20
3096-533	5	Managing services to promote independence for individuals in adult care	3	16
3096-534	5	Leading operational management in adult care	3	18
3096-535	5	Coaching and mentoring when leading and managing in adult care	4	25
3096-536	5	Undertaking a research project	5	28

Total Qualification Time

Total Qualification Time (TQT) is the number of notional hours which represents an estimate of the total amount of time that could reasonably be expected for a learner to demonstrate the achievement of the level of attainment necessary for the award of a qualification.

TQT is comprised of the following two elements:

- 1) The number of hours that an awarding organisation has assigned to a qualification for Guided Learning, and
- 2) An estimate of the number of hours a learner will reasonably be likely to spend in preparation, study or any other form of participation in education or training, including assessment, which takes place as directed by - but, unlike Guided Learning, not under the immediate guidance or supervision of - a lecturer, supervisor, tutor or other appropriate provider of education or training.

Title and level	GLH	ΤQΤ
City & Guilds Level 5 Diploma in Leadership and Management for Adult Care (England)	598	900

2 Centre requirements

Approval

Full approval

To offer this qualification, **new centres** will need to gain both centre and qualification approval. Please refer to the document **Quality Assurance Standards: Centre Approval Process** for further information.

Centre staff should familiarise themselves with the structure, content and assessment requirements of the qualification before designing a course programme.

OR

Automatic approval

If your centre is approved to offer the Level 5 Diploma in Leadership and Management for Adult Care (3080-50) you will be automatically approved to offer the new City & Guilds Level 5 Diploma in Leadership and Management for Adult Care (England) (3096-51). Please refer to the document <u>Quality Assurance Standards: Centre Approval Process</u> for further information.

Centre staff should familiarise themselves with the structure, content and assessment requirements of the qualification before designing a course programme.

Resource requirements

Resources

The majority of assessment for this competence-based qualification will take place in the workplace under real work conditions.

Centre staffing

Staff delivering this qualification must be able to demonstrate that they meet the following occupational expertise requirements. They should:

- be occupationally competent or technically knowledgeable in the area(s) for which they are delivering training and/or have experience of providing training. This knowledge must be to the same level as the training being delivered
- have recent relevant experience in the specific area they will be assessing
- have credible experience of providing training.

Assessors must:

- maintain their occupational competence through clearly demonstrable continuing learning and professional development. This can be demonstrated through current statutory professional registration.
- hold or be working towards the most current Assessor qualifications, eg the Level 3 Award in Assessing Competence in the Work Environment or other Level 3 Certificate in Assessing Vocational Achievement or

hold the A1 Assessors Award or D32/33 units or

another suitable qualification equivalent/alternative in the assessment of work-based performance. This must be agreed in advance with the centre's External Quality Assurer.

Competence units MUST be assessed by occupationally competent assessors. Each assessor must be capable of carrying out the full requirements of the area they are assessing. Occupational competence means that they are also occupationally knowledgeable.

Occupationally knowledgeable assessors can assess units or learning outcomes which are designed to assess specific knowledge and understanding. Each assessor must have the relevant knowledge and understanding of the area they are assessing.

For further information on assessor requirements refer to the Skills for Care Assessment Principles March 2016 on the Skills for Care website:

https://www.skillsforcare.org.uk/Documents/Learning-and-development/Qualifications/SfCD-Assessment-Principles-March-2016.pdf

See also the assessment section for details from the assessment strategy on the role of the expert witness.

Centre staff may undertake more than one role, eg tutor and assessor or internal quality assurer, but cannot internally quality assure their own assessments.

Quality assurance

Approved centres must have effective quality assurance systems to ensure optimum delivery and assessment of qualifications. Quality assurance includes initial centre approval, qualification approval and the centre's own internal procedures for monitoring quality. Centres are responsible for internal quality assurance and City & Guilds is responsible for external quality assurance. For more detail on this visit the <u>Quality Assurance Standards</u> documents on the City & Guilds website.

Standards and rigorous quality assurance are maintained by the use of:

- Internal quality assurance
- City & Guilds external quality assurance.

Those performing the internal quality assurance role must be occupationally knowledgeable and possess the skills necessary to make quality assurance decisions. The qualification requirements for an IQA for competence-based qualifications are as follows, the IQA must:

- hold or be working towards the current Quality Assurance qualifications, eg
 - 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 or
 - Hold the D34 unit or V1 Verifiers Award.

External quality assurance for the qualification will be provided by City & Guilds EQA process. EQAs are appointed by City & Guilds to approve centres, and to monitor the assessment and internal quality assurance carried out by centres. External quality assurance is carried out to ensure that assessment is valid and reliable, and that there is good assessment practice in centres.

The role of the EQA is to:

- provide advice and support to centre staff
- ensure the quality and consistency of assessments within and between centres by the use of systematic sampling
- provide feedback to centres and to City & Guilds.

Other legal considerations

Learners working within care services may be legally required to undergo Disclosure and Barring Service (DBS) checks prior to taking up continuing 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 these requirements. These are usually the responsibility of the employer. A robust initial assessment is recommended to highlight any possible issues with the DBS check that could impact on the learner's ability to complete a full qualification.

Learner entry requirements

City & Guilds does not set entry requirements for this qualification. However, centres must ensure that learners have the potential and opportunity to gain the qualification successfully.

Learners must be in a leadership role within an adult care service to achieve this qualification either as a service leader or deputy leader. As a deputy leader, the learner must have the opportunities to demonstrate competence in their role relating to the skills requirements within this qualification. It is the responsibility of the centre to liaise with the employer to ensure the learner has met any requirements such as enhanced disclosure and barring checks prior to commencing the qualification. The centre should record this as part of initial assessment.

Where learners are undertaking an apprenticeship standard, they must undertake an enhanced disclosure and barring service check prior to starting the apprenticeship.

Age restrictions

This qualification is approved for learners aged 18 or above.

Access to assessment and special consideration

For information on how to apply for access arrangements please refer to *How and when to apply for access arrangements and special consideration (cityandguilds.com)*

3 Delivering the qualification

Initial assessment and induction

An initial assessment of each learner should be made before the start of their programme to identify:

- if the learner has any specific training needs
- support and guidance they may need when working towards their qualification
- any units they have already completed, or credit they have accumulated which is relevant to the qualification
- the appropriate type and level of qualification
- ensure that the range of optional units chosen are supported by the learner's job role and if appropriate, reflect requirements of the Leader in Adult Care apprenticeship standard.

We recommend that centres provide an induction programme so the learner fully understands the requirements of the qualification, their responsibilities as a learner and candidate, and the responsibilities of the centre. This information can be recorded on a learning contract.

Support materials

The following resources are available for this qualification:

Description	How to access
Textbook	www.cityandguilds.com
SmartScreen	www.smartscreen.co.uk
Learning Assistant	www.cityandguilds.com

4 Assessment

Assessment of the qualification

Learners must:

• have a completed portfolio of evidence covering the assessment criteria for each unit.

Units are assessed through Portfolio of Evidence. All evidence in the portfolio for the skills learning outcomes must be generated in the workplace.

City & Guilds endorses several ePortfolio systems, including our own, **Learning Assistant**, an easy-to-use and secure online tool to support and evidence learners' progress towards achieving qualifications. Further details are available at **www.cityandguilds.com/eportfolios**.

City & Guilds has developed a set of *Recording forms* including examples of completed forms, for new and existing centres to use as appropriate. *Recording forms* are available on the City & Guilds website.

Although new centres are expected to use these forms, centres may devise or customise alternative forms, which must be approved for use by the External Quality Assurers, before they are used by candidates and assessors at the centre. Amendable (MS Word) versions of the forms are available on the City & Guilds website.

Assessment strategy

The City & Guilds Level 5 Diploma in Leadership and Management for Adult Care (England) is a competence-based qualification which is assessed by a portfolio of evidence. The learner is measured against learning outcomes and assessment criteria described in each unit of the qualification. The learner must meet all the learning outcomes within the chosen units (must be within the rules of combination) to be able to be awarded the qualification.

The qualification/units must be assessed in line with the Skills for Care and Development Assessment Principles, which are published on the Skills for Care website:

https://www.skillsforcare.org.uk/Documents/Learning-and-development/Qualifications/SfCD-Assessment-Principles-March-2016.pdf See Appendix 2

Centres must carry out a robust initial assessment to ensure that the learner has the opportunity to provide evidence against all the requirements of the qualification.

There will be a combination of assessment methods for this qualification. All the identified assessment criteria must be evidenced and a holistic approach to assessment is encouraged.

Direct observation of candidate's performance by a qualified occupationally competent assessor and the assessor's judgement on testimony from an Expert Witness Testimony are the main methods of assessment and the main source of evidence. **Simulation is not permitted for any of the units within this qualification**.

Assessment decisions for skills-based learning outcomes must be made during the learner's normal work activity by an occupationally qualified, competent and knowledgeable assessor. Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time. Evidence should be naturally occurring and so minimise the impact on individuals who use care and support, their families and carers.

Assessment of knowledge-based learning outcomes may take place in or outside of a real work environment, but the final assessment decision must show application of knowledge within the real work environment.

Evidence 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.

Confidential records must not be included in learners' portfolios but must be referred to in the assessment records. Video or audio recording should not be used where this compromises the privacy, dignity or confidentiality of any individual or family using services.

The assessor role can be as part of a wider role within an organisation's training department. Where the assessor is not occupationally competent in a specialist area, expert witnesses can be used for direct observation. The use of expert witnesses should be determined and agreed by the assessor.

An expert witness must:

- have a working knowledge of the units for which they are providing expert testimony
- be occupationally competent in the area for which they are providing expert testimony
- have EITHER any qualification in assessment of workplace performance OR a work role which involves evaluating the everyday practice of staff.

Evidence sources

To help build a well-rounded portfolio, 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 competencebased 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 they 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.

Assessors should ensure that the voices and choices of people who use services drive their practice and that of their learner. This will be apparent throughout the evidence provided for a learner's practice.

NB Confidential records must not to be included in candidate portfolios but must be referred to in the assessment records.

Time constraints

Qualification registration is valid for five years.

Recognition of prior learning (RPL)

Recognition of prior learning means using a person's previous experience, or qualifications which have already been achieved, to contribute to a new qualification.

5 Units

Structure of the units

These units each have the following:

- City & Guilds reference number
- Title
- Unit level
- Credit value
- Guided learning hours (GLH)
- Assessment type
- Unit aim
- Learning outcomes, which are comprised of a number of assessment criteria
- Range statements (where given)
- Supporting information

Guidance for delivery of the units

This qualification is comprised of a number of **units**. A unit describes what is expected of a competent person in particular aspects of their job.

Each **unit** is divided into **learning outcomes** which describe in further detail the skills and knowledge that a learner should possess.

Each **learning outcome** has a set of **assessment criteria** (performance, and knowledge and understanding) which specify the desired criteria that have to be satisfied before a person can be said to have performed to the agreed standard.

Range statements define the breadth or scope of a learning outcome and its assessment criteria by setting out the various circumstances in which they are to be applied. Centres must deliver the full breadth of the range, where specified.

Supporting information provides guidance of the evidence requirement for the unit and specific guidance on delivery and range statements. Centres are advised to review this information carefully before delivering the unit. Learners must have access to work duties, tasks 'working directly with individuals using services' which will allow them to meet the real work environment requirements of the units in this qualification.

Understanding Independent Advocacy in adult care

Level:	4
Credit value:	3
GLH:	15
Assessment type:	Portfolio of evidence
Aim:	This unit enable learners to develop knowledge and understanding of Independent Advocacy within adult care. Learners will understand the legal requirements associated with the use of Independent Advocacy and different roles and responsibilities. Learners will explore how the leader and manager in adult care can use Independent Advocates within the setting/service to support the service delivery.

Learning outcome

The learner will:

LO1 understand Independent Advocacy within adult care

Assessment criteria

The learner can:

- AC1.1 explain the principles of advocacy
- AC1.2 explain how statutory advocacy differs from other types of advocacy
- AC1.3 explain the eligibility criteria for:
 - a. being an Independent Advocate
 - b. receiving Independent Advocacy support and services
- AC1.4 explain the role of the Independent Advocate
- AC1.5 evaluate the responsibilities of an Independent Advocate when supporting individuals

Learning outcome

The learner will:

LO2 understand legislation and regulatory requirements in relation to Independent Advocacy

Assessment criteria

The learner can:

- AC2.1 describe the requirements of current, relevant legislation and regulations
- AC2.2 evaluate the role and responsibilities of the following:
 - a. Independent Mental Capacity Advocate
 - b. Best Interests Assessor
 - c. Liberty Safeguards Assessor
 - d. Independent Mental Health Advocate
 - in relation to Independent Advocacy for individuals

Learning outcome

The learner will:

LO3 understand the responsibilities of a leader and manager in relation to independent, statutory advocacy

Assessment criteria

The learner can:

- AC3.1 explain the responsibilities of a leader and manager in engaging the services of the following:
 - a. Independent Mental Capacity Advocate
 - b. Best Interests Assessor
 - c. Liberty Safeguards Assessor
 - d. Independent Mental Health Advocate
- AC3.2 analyse considerations when using Independent Advocates in adult care to include:
 - a. service objectives
 - b. training
 - c. supporting others
 - d. resources
 - e. quality of provision
 - f. regulations
 - g. recording and reporting
- AC3.3 explain the benefits and impact of Independency Advocacy services

Unit 450

Understanding Independent Advocacy in adult care

Supporting Information

Evidence requirements

LO1, LO2 and LO3 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- How does my service use Independent Advocates?
- How does my service enable individuals to use Independent Advocates?
- What are the challenges in using Independent Advocates?
- Do I understand the legislation and regulation for Independent Advocacy?
- Does my team understand how to request the services of an independent advocate?
- AC1.4 Learners are expected to explore the importance, relevance and impact of using an Independent Advocate for individuals including any identified challenges and positive outcomes
- AC1.4 Learners should consider the following:
 - Guardianship order
 - Community treatment order
 - Admission to medical facility
- AC2.1 To include mental capacity and mental health legislation
- AC2.2 If IMCA or other roles change titles because of changes in statutory legislation then the new titles/roles would apply
- AC3.1 Learners must take into consideration adult case law only

Suggested supporting resources

www.mind.org.uk www.mencap.org.uk www.gov.uk www.ageuk.org.uk Unit 451

Level:	4
Credit value:	3
GLH:	17
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is to enable learners to gain confidence in the use of study skills in order to enhance their learning. It acknowledges the factors that can impact on the ability to study and seeks to encourage learners to develop their own ways of learning in order to support the achievement of their programme of study. Learners will be able to reflect on their strengths and areas for further development and explore a range of study techniques and tools including an introduction to research and use of information and data.

Learning outcome

The learner will:

LO1 be able to evaluate tools and techniques to develop study skills

Assessment criteria

The learner can:

- AC1.1 evaluate own study skills in relation to the following:
 - a. recognition of own learning style
 - b. strategies for improving memory
 - c. collating information
 - d. interpreting information
 - e. analysing information
 - f. evaluating information
 - g. planning and organising for study
 - h. undertaking research
- AC1.2 evaluate self against a range of study techniques, tools and their use including:
 - a. experiential learning
 - b. research methods in practice
 - c. self-reflection
 - d. reflective journaling
 - e. completing a written assignment
 - f. ways of avoiding plagiarism
 - g. mind mapping/brainstorming

- h. critical thinking skills
- i. use of learning styles
- j. technological aids for study
- k. use of referencing
- I. use of a bibliography

AC1.3 explain ways of choosing and using information from a range of sources

Range

AC1.3 Choosing and using information to include:

- where to locate relevant and current information
- establishing relevance and currency of data
- referencing and cross referencing
- peer reviews
- organisational data
- when not to include current information and data

Learning outcome

The learner will:

LO2 be able to apply study skills and techniques

Assessment criteria

The learner can:

AC2.1 analyse factors that can impact on the ability to study

AC2.2 develop a personal study plan as part of an overall study strategy

AC2.3 apply suitable tools and techniques for personal study

AC2.4 evaluate study tools and techniques used to achieve a set outcome

Learning outcome

The learner will:

LO3 understand how to use research skills

Assessment criteria

The learner can:

- AC3.1 explain ethical considerations that apply to research
- AC3.2 evaluate the impact of evidence-based research on own learning and practice
- AC3.3 evaluate the range of methods that can be used to collect data
- AC3.4 identify a range of tools that can be used to analyse data
- AC3.5 identify the importance of validity and reliability of data used within evidence-based research
- AC3.6 identify sources of support available to use in research

Unit 451 Study skills

Supporting Information

Evidence requirements

LO1, LO2 and LO3 - evidence can include assignment tasks, presentation, reflective accounts, questioning and professional discussion.

While this unit has LOs that are based on self, it is advised that the assessment follows the above.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

This unit is aimed at those learners who are not familiar with study skills at this level. Delivery teams should discourage learners from taking this unit if they are confident in their study skills at this level or above.

Learners should consider the following questions as a starting point:

- What is meant by the term 'study skills'?
- What are my personal and professional barriers to learning?
- What are my past experiences of learning and achievement?
- What assessment methods will I be exposed to on my programme of study?
- Who could support my learning?
- What is the impact of learning on my working practice?
- AC1.1 This unit is recognising existing strengths and further areas of development for continued study. The learner will self-reflect on existing study skills areas and identify opportunities for development. The expectation is that this unit is undertaken within the early stages of the study period where required.
- AC2.1 The analysis is to include but not limited to:
 - Time constraints, time management
 - Personal factors motivation, interest, fatigue
 - Professional factors
 - Availability and use of support from others
- AC2.2 The plan should include details relating to:
 - Goal/s to be achieved
 - Tracking progress
 - Step by step plan for achieving goals
 - Support/resources required
 - Effective time management

Suggested supporting resources

The Study Skills Book - Kathleen McMillan The Study Skills Handbook - Stella Cottrell www.skillsyouneed.com

Unit level:	4
Credit value:	3
GLH:	15
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop their knowledge and skills in leading and managing transitions within adult care. Learners will understand the different types of transitions and the relevance of change theory. Learners will demonstrate how to manage transitions and evaluate current practices in own setting/service.

Learning outcome

The learner will:

LO1 understand the leadership and management of transition in adult care

Assessment criteria

The learner can:

- AC1.1 explain different types of change or transition that may affect individuals using adult care settings/services
- AC1.2 summarise theories relevant to managing change and transition
- AC1.3 explain the responsibilities of the leader and manager of adult care in managing change and transition for:
 - a. individuals
 - b. others
 - c. service objectives/planning
 - d. the service environment
- AC1.4 analyse the potential impact of change and transition on:
 - a. individuals
 - b. others
 - c. service objectives/plans

Learning outcome

The learner will:

LO2 be able to manage provision that supports effective transitions

Assessment criteria

The learner can:

- AC2.1 manage the implementation of the requirements of current, relevant local and national guidance on changes and transitions within own setting/service
- AC2.2 manage a service that recognises the potential impact of transition on:
 - a. individuals
 - b. on others
 - c. the environment
- AC2.3 manage a service that fosters a person-centred and strength-based approach during transitions by using:
 - a. an outcomes-based approach
 - b. positive risk management
 - c. co-production and co-design of services
 - d. anti-discriminatory practice
 - e. active participation
- AC2.4 support team members to develop skills sets and understanding of transitions
- AC2.5 evaluate own service to include:
 - a. assessment processes
 - b. implementation systems
 - c. review processes
 - d. quality improvement analysis
 - e. use of technologies
 - f. recording and reporting systems

Unit 452 Managing transitions in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point

- What changes or transitions do the individuals in my service experience?
- How are transitions and change managed at the moment?
- What are the effects of change and transition on individuals, family, friends and informal carers?
- How does change and transition affect staff and others?
- What environmental changes might be required?
- How are staff supported to manage transitions?
- AC1.1 This may include changes and transitions affecting:
 - life stages
 - · health or care needs of an individual
 - the environment
 - change of service type/provider
 - employment
- AC1.2 Theories may include:
 - Kubler-Ross theory of loss and change
 - Solution-focused practice
 - Bridges' model of transition
- AC1.4 Others: may include:
 - team members
 - other colleagues
 - those who commission health or social care services
 - families, carers and advocates
- AC2.2 To include how adverse effects of transitions can be minimised
- AC2.5 The learner must include the following for each area:
 - practice that has improved
 - practice that needs improving
 - actions to improve practice
 - ways to measure improvements

AC2.5 This may include an action plan that will inform future operational objectives in the delivery of a quality service in line with national standards. This AC may be linked to the business development unit.

Suggested supporting resources

www.nice.org www.gov.uk www.socialworkers.org www.ripfa.org.uk - look for transitions www.cqc.org.uk Unit 500

Understanding leadership and management in adult care

Unit level:	5
Credit value:	4
GLH:	30
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is to support adult care managers to develop their knowledge and understanding of the differences between leadership and management. Learners will analyse theories, models and styles of leadership and management and consider the impact of internal and external drivers in their leadership and management role As part of this unit, learners will be expected to evaluate their own effectiveness as leaders and managers in different situations and with different teams. Learners will explore how coaching, and mentoring can be used to support themselves and others. Learners will explore interaction between organisational values and cultures and their own leadership style.

Learning outcome

The learner will:

LO1 understand leadership management theories and styles

Assessment criteria

The learner can:

- AC1.1 analyse the differences between leadership and management
- AC1.2 analyse key theories of leadership and management relevant to own role
- AC1.3 explain how key theories of leadership can be applied in practice in a range of situations in the leadership role
- AC1.4 analyse the range of different leadership styles

Range

AC1.1 Leadership and management to include:

• vision/direction

- operational strategy
- motivation of self and others
- service representation
- improvement
- innovation
- decision-making/accountability
- nature versus nurture
- contingency planning
- organisation and coordination
- resource planning finance, staffing
- change
- coaching and mentoring
- conflict resolution
- AC1.4 Leadership styles to include but not limited to:
 - Autocratic
 - Authoritative
 - Pacesetting
 - Democratic
 - Coaching
 - Affiliative
 - Laissez-Faire

Learning outcome

The learner will:

LO2 understand how coaching and mentoring can be used to compliment leadership style

Assessment criteria

The learner can:

- AC2.1 explain the differences between coaching and mentoring
- AC2.2 outline how the use of coaching can complement a leadership style:
 - a. with self
 - b. with others
- AC2.3 outline how the use of mentoring can complement a leadership style:
 - a. with self
 - b. with others

Learning outcome

The learner will:

LO3 understand leadership and management in adult care settings/services

Assessment criteria

The learner can:

- AC3.1 analyse the impact of internal and external drivers on leadership and management in adult care settings/services
- AC3.2 explain the role of leadership and management skills in adult care settings/services
- AC3.3 describe how to adapt own leadership and management style for different situations
- AC3.4 describe how to adapt own leadership and management style for different teams:

- a. internal teams
- b. external teams
- c. partnerships with other professional teams
- AC3.5 evaluate the interaction between the values and culture of an adult care setting/service and own leadership behaviours

Range

AC3.4 Different teams must include but not limited to team:

- size
- cultures
- dynamics
- resources
- motivation
- performance management
- strengths and areas for ongoing development

Unit 500

Understanding leadership and management in adult care

Supporting Information

Evidence requirements

LO1, LO2 and LO3 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What is the difference between a leader and a manager and how do these reflect in their practice?
- What qualities contribute to making a good leader and manager and how could this be evaluated with others?
- What and who might be the potential barriers to effective leadership and management in adult care services?
- Does a good manager mean you have to be an effective administrator?
- How can coaching and mentoring support professional development?

There are opportunities for learners to apply their learning in the continuing development unit. Centres will devise their own teaching and learning plans with their learners to include independent study.

AC1.2 Learners should refer to at least two or three key theories that are linked to their role.

Key theories may include but not limited to:

- Urwick's Ten Principles of Management
- Trait Theory
- Behavioural Theory
- Goleman's leadership styles and emotional intelligence
- Motivation Theory Maslow's Hierarchy of Needs
- Situational Leadership (Hersey & Blanchard)
- Contingency Theory (Kouzes & Posner)
- Power and Influence Theory
- Management by Wandering Around (MBWA)
- SWOT Analysis in leadership and management role
- AC1.3 Learners can use the models they refer to in 1.2 to address this AC
- AC2.2 Self to include:
 - Self-analysis, self-evaluation and self-reflection
 - Problem solving in leadership role
 - Management peers
 - External support
 - Knowledge specialists

Others may include:

- Deputy managers
- Team leaders/supervisors
- Volunteers
- Advocates
- Informal carers
- Apprentices/learners from schools and colleges
- Agency staff
- Administration staff
- Teams
- Partnerships

AC2.3 Self may include:

- Focus on professional development within leadership role
- As part of own formal induction
- As part of own probationary period
- As part of own performance management

Others may include:

- Deputy manager(s)
- Team leaders/supervisors
- Volunteers
- Advocates
- Informal carers
- Apprentices/learners from schools and colleges
- Agency staff
- Administration staff
- Teams
- Peer to peer
- Partnerships

AC3.1 Impact could include:

- Wellbeing of self
- Professional confidence
- Existing strategy
- Staffing/recruitment
- Self-motivation
- Service delivery
- Funding/budgets
- Those in need of care and support
- Quality of care delivery

Internal and external drivers may include:

- Internal policy and/or strategy
- External policy and/or strategy
- Diversification in business models
- Organisational cultural changes
- Organisational financial challenges
- Public health challenges/initiatives
- Acute situation/extraordinary event
- Inspection internal and external
- Changes in the market
- AC3.3 Different situations may include:
 - Formality/informality of different working
 - Situations

- Working under pressure
- Leadership role in particular situations
- Management role in particular situations
- Managing conflict
- AC3.4 Internal teams directly employed by the care setting/service
- AC3.5 Values may include:
 - Compassion
 - Dignity
 - Independence
 - Privacy
 - Communication
 - Protection
 - Respect
 - Courage
 - Inclusion
 - Pride
 - Integrity

Culture may include:

- Effective governance
- Partnerships
- Responsiveness
- Person-centred care
- Safeguarding/protection
- Duty of candour
- Safety/risk management

Suggested supporting resources

Diploma in Leadership and Management for Adult Care - Tina Tilmouth How Management Works - Phillipa Anderson Effective Managers - Essential Managers Leadership - Essential Managers Leadership - a very short introduction - Keith Grint Management - a very short introduction - John Hendry The Little Book of Big Management Theories and how to use them - James McGrath Managing People - Essential Managers - DK The Complete Handbook of Coaching - Elaine Cox et al Manager As Coach -The new ways to get results - Jenny Rogers et al

Care Quality Commission/Key Lines of Enquiry www.cqc.org.uk/guidance-providers/adult-social-care/key-lines-enquiry-adult-social-care-services

Gov.UK Leadership and Management www.gov.uk/guidance/leadership-and-management

Skills for Care Management Induction Standards www.skillsforcare.org.uk/Support-for-leaders-and-managers/Developing-leaders-and-managers/Manager-induction-standards.aspx

Governance and regulatory processes in adult care

Unit level:	5
Credit value:	4
GLH:	30
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to consider how governance and regulatory processes work to monitor and improve service provision for adults in receipt of care in England. Learners will examine their own role and responsibility in leading and managing a service that meets regulatory requirements and show a thorough understanding of the regulatory process in England.

Learning outcome

The learner will:

LO1 understand legislation and statutory guidance that underpins adult care

Assessment criteria

The learner can:

- AC1.1 outline current legislation and statutory guidance that applies to **all aspects** of service provision
- AC1.2 explain own role, accountability, and responsibility in applying legislation and statutory guidance within own setting/service
- AC1.3 describe the roles, remits and responsibilities in a registered service, of the:
 - a. registered manager
 - b. nominated individual
 - c. fit and proper person

Learning outcome

The learner will:

LO2 understand internal governance arrangements within own organisation

Assessment criteria

The learner can:

AC2.1 describe internal governance procedures used within own setting/service

- AC2.2 explain own role in:
 - a. applying
 - b. leading
 - c. evaluating

own setting/service's governance procedures and agreed ways of working

Learning outcome

The learner will:

LO3 understand systems and requirements for the regulation of adult care services

Assessment criteria

The learner can:

- AC3.1 outline current legislation and statutory guidance underpinning and supporting inspection processes in England
- AC3.2 identify types of service provision subject to registration and inspection

Learning outcome

The learner will:

LO4 understand the inspection process in adult care

Assessment criteria

The learner can:

- AC4.1 explain the purpose of the inspection system
- AC4.2 explain how services are inspected and the role of the regulator
- AC4.3 describe different types of inspection
- AC4.4 describe the standards that the inspection process reviews
- AC4.5 explain how the ratings system is used
- AC4.6 explain when and how enforcement action may be used
- AC4.7 describe the ways information is collected about the service and used to inform inspection activities

Range

AC4.4 Standards: includes national minimum standards, themes/wider areas of focus

Learning outcome

The learner will:

LO5 understand the inspection process in own setting/service

Assessment criteria

- AC5.1 describe how the requirements of regulations are met within own setting/service
- AC5.2 explain who needs to be aware of, and involved in, the inspection process
- AC5.3 explain the range and types of evidence which can be used to demonstrate the setting/service is meeting requirements
- AC5.4 describe ways to address the outcome and impact of an inspection of own setting/service
- AC5.5 explain how outcomes of inspection can be used to drive setting/service improvements

Governance and regulatory processes in adult care

Supporting Information

Evidence requirements

LO1, LO2, LO3, LO4 and LO5 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What is included in the current standards for your service?
- If your service is not regulated, how can you use the standards to support your practice?
- What are the benefits of having an independent regulatory body?
- How can a service prepare for inspection?
- How can a manager ensure colleagues are aware of the internal governance processes and regulatory requirements?
- AC1.1 All aspects: relating to all aspects of responsibilities held within own organisation. If the learner is not currently providing regulated activity, then they should explore the formal role of a registered manager. The learner is only expected to provide a brief outline for this AC.
- AC1.2 Learners should include who they are accountable to and for.
- AC1.3 This must relate to a registered service regardless of learners' own role.
- LO2 Learners may consider the inspection process in their own work setting. If the service is not currently regulated or inspected, they should consider how they could use current regulations to support service improvement.
- AC2.2 Internal governance refers to the systems and processes in place to meet legal and regulatory requirements. The processes should address risk management quality improvements and provide clear auditing systems to monitor practice.
- AC4.1 This must relate to a registered service regardless of learners' own role.
- AC4.3 Types of Inspection: the different inspections carried out by the regulator within Adult Care services
- AC4.4 Key themes: the areas looked at during the inspection process
- LO5 Learners should consider the inspection process in their own work setting. If the service is not currently regulated or inspected, they should consider how they could use current regulations to support service improvement.

Suggested supporting resources

www.cqc.org.uk

www.gov.uk/government/organisations/department-of-health-and-social-care www.skillsforcare.org.uk/Home.aspx

Decision-making in leadership and management within adult care

Unit level:	5
Credit value:	3
GLH:	20
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to understand and apply the knowledge required for effective decision-making in adult care settings/services. Learners will be given the opportunity to look at the role which data and information plays in informing decision-making as well as how to enable others to be involved. Learners will explore how their own and others' values and priorities influence decision-making processes. Learners will identify when decisions need to be made and work with individuals and others to come to support the decision-making process.

Learning outcome

The learner will:

LO1 understand effective decision-making

Assessment criteria

- AC1.1 describe different types of decisions required in own role
- AC1.2 evaluate how data, information and intelligence inform evidence-based decisions to improve quality
- AC1.3 explain the importance of reviewing and evaluating decisions to improve quality
- AC1.4 analyse how values and priorities influence decision-making processes in relation to: a. self
 - b. others
- AC1.5 explain how to enable others to contribute to the decision-making

Learning outcome

The learner will:

LO2 be able to demonstrate effective decision-making within a leadership and management role

Assessment criteria

- AC2.1 establish when decisions need to be made within own role
- AC2.2 gather data, information and intelligence to inform decision-making
- AC2.3 identify potential solutions used to inform a decision in own role
- AC2.4 evaluate potential solutions to draw conclusions
- AC2.5 involve individuals and others in the:
 - a. decision-making process
 - b. implementation of the result of decision
- AC2.6 evaluate the:
 - a. decision
 - b. decision-making process used

Decision-making in leadership and management within adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What is a decision?
- What safeguards are in place for the decisions managers make?
- When is it right to make a decision based on intuition?
- What are the potential challenges to decision-making when working with difficult situations and/or disagreements?
- How does legislation impact on decision-making processes?
- Why do managers struggle to make decisions?

Performance evidence from other units may provide evidence for LO2 and opportunities for cross-referencing are encouraged.

- AC1.1 Types of decisions: may include but not limited to strategic, tactical, operational, short term and long term
- AC1.2 and AC2.2 Data is collected, then assembled into information, and only then handed to a human analyst to analyse and transform it into intelligence
- AC1.3 Reviewing should include an evaluation of decisions

AC1.4 and AC2.6: Others: in this context might include:

- Carers, loved ones, family, friends of those accessing care and support
- Services
- Colleagues and peers
- Team members
- Managers and supervisors
- Visitors/volunteers
- Advocates
- AC2.1 Decisions: may include but not limited to strategic, tactical, operational, short term and long term, financial, reactive and proactive decision-making
- AC2.6 The decision-making process should consider the potential solutions

Understanding business and resource management for adult care

Unit level:	5
Credit value:	5
GLH:	40
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to strengthen their understanding of how to manage resources within their own setting/service. Learners will also understand legislation, policies and the governance that drives the care sector and how this affects business and resource management.

Learning outcome

The learner will:

LO1 understand the principles of effective resource management within adult care

Assessment criteria

- AC1.1 explain the meaning of the term 'resource management' in adult care
- AC1.2 analyse the impact of national and local strategies and priorities on resource planning in relation to:
 - a. financial resources
 - b. physical resources
 - c. human resources
- AC1.3 describe the impact of national and local strategies and priorities on resource management in relation to:
 - a. financial resources
 - b. physical resources
 - c. human resources
- AC1.4 explain the importance of accurate forecasting for resource requirements including:
 - a. contingency planning
 - b. crisis management
 - c. day to day requirements/resources
- AC1.5 explain the value of using assets and resources outside of traditional services and in the community

- AC1.6 evaluate the place of technology as a resource in service delivery and service management
- AC1.7 describe the meaning of sustainability in resource management in adult care
- AC1.8 explain roles, responsibilities, and accountabilities for resource management within an adult care setting/service
- AC1.9 evaluate the importance of business continuity in respect of:
 - a. planning
 - b. processes available

Learning outcome

The learner will:

LO2 understand principles of effective human resource management

Assessment criteria

The learner can:

- AC2.1 explain legislation, policy and practices underpinning safe and fair recruitment
- AC2.2 describe potential challenges for safe and fair recruitment
- AC2.3 evaluate approaches which improve recruitment and retention of staff in adult care
- AC2.4 explain the process in own setting service for:
 - a. recruitment
 - b. selection
 - c. induction
 - d. managing staff absence
- AC2.5 explain own role in setting/service for:
 - a. recruitment
 - b. selection
 - c. induction
- AC2.6 explain the importance of ensuring employment practices are free from discrimination and harassment
- AC2.7 describe how to identify the numbers and patterns of staffing required to provide a person-centred, outcomes-based service
- AC2.8 analyse factors that could influence staffing requirements and patterns
- AC2.9 explain how to manage staffing patterns and adjust them to meet changing circumstances
- AC2.10 evaluate workforce succession and contingency planning in own adult care setting/service
- AC2.11 describe performance management systems and relevance to:
 - a. own setting/service
 - b. own role
- AC2.12 describe conduct, discipline and grievance procedures, and relevance to:
 - a. own setting/service
 - b. own role

Learning outcome

The learner will:

LO3 understand market provision in adult care

Assessment criteria

The learner can:

- AC3.1 explain how adult care services are commissioned, procured, and funded
- AC3.2 analyse how current drivers are shaping market provision in:
 - a. adult care
 - b. funding mechanisms
 - c. related services gaps
- AC3.3 explain how own setting/service meets the needs of:
 - a. the local population
 - b. the wider market of adult care
- AC3.4 explain how own setting/service will need to evolve to meet future demand for care services

Learning outcome

The learner will:

LO4 understand integrated approaches in health and social care

Assessment criteria

- AC4.1 explain what is meant by an integrated health and social care system
- AC4.2 analyse the rationale for integrated approaches to service provision in relation to:
 - a. providing person-centred support
 - b. the changing patterns of population needs
 - c. prevention and early intervention strategies
 - d. moving to more community-based practices
- AC4.3 evaluate local and national initiatives to better integrate health and social care systems and services
- AC4.4 explain the impact of more integrated systems and processes on working practices and relationships

Understanding business and resource management for adult care

Supporting Information

Evidence requirements

LO1, LO2, LO3 and LO4 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- How do national and local strategies impact planning and managing an organisation within adult care?
- How does legislation impact safe unfair practices?
- How the use of data and information gathering has on resource management?
- How is your own service setting funded and how this might change in the future?
- What impact integrated health and social care will have on your organisation?
- AC1.6 Technology may include but not limited to
 - Electrical communication devices
 - Electrical care plans/risk assessment
 - E-mars
 - Electrical rota systems
 - Video calling
 - Portals/hubs
- AC1.9 Business continuity planning: The process of planning to reduce threats to a company and how to recover from unexpected events. May include but not limited to:
 - Review of the sector on a regular basis
 - Review of the customer base
 - Business risk assessment
 - SWOT analysis
 - Exercise programme
- AC2.1 and AC2.2 Legislation, regulations and guidance: This may include, but is not limited to:
 - Legislation linked with equality
 - Legislation linked with Working Time and pensions
 - Regulatory body
 - Disclosure and barring service checks
 - Confirming identify and seeking references
- AC2.3 Approaches: These may include, but are not limited to:
 - Recruiting people with the right values and behaviours
 - Understanding the local area to inform business planning

- Innovative strategies to attract candidates in the local community eg Referral programmes
- Offering a supportive induction, quality training, career progression routes, good working conditions, rewards, recognition, flexibility and competitive, pay rates

AC2.4 and AC2.5 Should refer to values-based recruitment

- AC2.6 Factors could include, but are not limited to:
 - Changing care and support needs of individuals
 - Increases/decreases in demand for support services
 - Holiday/festive periods
 - Sickness
 - Weather conditions
- AC2.9 Performance management systems: the policies, procedures and tools/methods used within the service to plan, monitor, develop and improve employees' performance
- AC2.12 To include managing staff resources, absences and performance management
- AC3.2 Drivers may include, but not limited to national policy or local initiatives and which may impact planned and expected outcomes or activities
- AC3.3 Wider market influences on local market
- AC3.4 Learners should consider sustainability of the service
- AC4.1 Integrated health and social care system: better outcomes for people through a seamless experience. Systems work together in a coordinated way. Builds support around the individual
- AC4.2 Rationale includes legislation

Providing person-centred, compassionate care and support in a way that makes sense to the individual accessing services to reflect their lives, needs and wishes

The changing patterns of population needs eg aging population, complex care and health needs, financial pressures, widening health inequalities, stalling improvements in life expectancy

Move to more community-based practices that breakdown traditional barriers

- AC4.3 Local and national initiatives: These may include, but are not limited to:
 - Integrated care systems
 - Sustainability and transformation partnerships
 - Primary care networks
 - Enhanced health in care homes framework
 - Ageing well programme
- AC4.4 Working practices and relationships: May include, but are not limited to:
 - Discharge arrangements
 - Integrated assessment and care planning
 - Multi-disciplinary working arrangements
 - Data governance.

Suggested supporting resources

www.skillsforcare.co.uk www.businessballs.co.uk www.cqc.co.uk www.gov.uk

Unit level:	5
Credit value:	3
GLH:	25
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is to enable learners to demonstrate a range of skills and behaviours in team leadership that recognise and deliver objectives to provide safe and effective care for adults using services. Learners will show how to recognise and champion values and behaviours within teams required to work in adult settings/services. Learners will support teams to be both creative and innovative in their approach to planning and meeting objectives and understand how to support the health wellbeing and resilience of team members.

Learning outcome

The learner will:

LO1 be able to provide leadership for a team

Assessment criteria

The learner can:

- AC1.1 adapt leadership styles to respond to different stages and cycles within the team's development
- AC1.2 establish trust and accountability within the team
- AC1.3 build and maintain team's commitment to the setting/service and its values
- AC1.4 support a positive values-based culture within a team by:
 - a. developing strategies
 - b. implementing strategies
 - c. reviewing strategies
- AC1.5 demonstrate values and behaviours which recognise and champion diversity, equality and inclusion within the team

Learning outcome

The learner will:

LO2 be able to manage teamwork

Assessment criteria

The learner can:

- AC2.1 engage team members in agreeing team objectives
- AC2.2 encourage creativity and innovation in team members when:
 - a. planning how to meet team objectives
 - b. agreeing a team plan
- AC2.3 agree roles and responsibilities, considering individual team member's strengths and developmental needs
- AC2.4 support team members to work towards team objectives
- AC2.5 review team progress against objectives
- AC2.6 facilitate opportunities for team members to reflect on progress
- AC2.7 provide feedback which recognises team performance against team objectives

Learning outcome

The learner will:

LO3 be able to support the wellbeing and resilience of team members

Assessment criteria

- AC3.1 describe factors that influence the health and wellbeing of team members
- AC3.2 explain own role in monitoring, assessing, and promoting the health and wellbeing of team members
- AC3.3 explain the process to follow when concerns have been raised about the health and wellbeing and resilience of team members
- AC3.4 lead practice which develops resilience in team members
- AC3.5 implement procedures which enable team members to access support/services to enhance their health, wellbeing and resilience

Unit 504 Team leadership in adult care

Supporting Information

Evidence requirements

LO1 LO2 and LO3 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What are the stages and cycles of team development?
- What is 'a values-based culture' within a team?

The units 500 and 506, contain, in part, underpinning knowledge to support this unit.

- AC1.1 Stages and cycles: the different stages of team development, for instance 'forming, storming, norming and performing'. The different cycles teams encounter in their work in Adult Care eg new team members and changes to working practices. Consideration of the following models will provide frameworks for discussion of team development and its implications: John Adair's Action-centred Leadership model; Hersey's and Blanchard's Situational Leadership® model; Tannenbaum and Schmidt Continuum of Leadership Behaviour.
- AC1.4 Values-based: organisational guiding principles that provide agreed ways of working in order to inform decisions and choices
- AC1.4 Whilst learners are expected to show all stages of this process, evidence does not have to be linked to a single event/activity.
- AC2.6 Team members could be individuals, small teams, large teams

Suggested supporting resources

www.skillsforcare.org.uk

Leading team learning and professional development in adult care

Unit level:	5
Credit value:	4
GLH:	30
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is to develop the understanding and skills required to support team learning and development. Learners will consider the importance of developing a learning culture and ways of promoting workforce development. Learners will recognise the need to have a skilled workforce with comprehensive literacy, numeracy and digital skills, as well as the knowledge, skills and behaviours required for care related tasks.

Learning outcome

The learner will:

LO1 understand principles of learning and professional development in adult care

Assessment criteria

The learner can:

- AC1.1 outline the range of required and recommended learning and development for teams in adult care
- AC1.2 explain the differences between learning requirements and continuous professional development
- AC1.3 describe the purpose and benefits of workforce planning and development
- AC1.4 explain the importance of literacy, numeracy and digital skills in adult care
- AC1.5 describe how to develop literacy, numeracy and digital skills within the team
- AC1.6 evaluate the benefits of continually improving own and team's knowledge and practice
- AC1.7 describe the ways to develop/improve own and team's knowledge and practice
- AC1.8 analyse the **factors** to consider when:
 - a. identifying
 - b. planning
 - c. selecting
 - d. commissioning

activities or learning and professional development

AC1.9 explain the importance of reflective practice in improving team's performance AC1.10 describe different models that support reflective practice

Range

AC1.8 Factors: should include potential barriers and constraints

Learning outcome

The learner will:

LO2 be able to lead learning and professional development practices

Assessment criteria

- AC2.1 evaluate available mechanisms and resources to support learning and professional development in adult care
- AC2.2 promote a learning culture within own team
- AC2.3 support team members to plan for, achieve and review, their professional development goals
- AC2.4 facilitate the development of others to enable effective delegation

Leading team learning and professional development in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What is workforce planning?
- What is the importance of literacy, numeracy and digital skills within an adult care setting/service?
- What are the models of reflective practice?
- How can you promote a learning culture within the team?
- AC1.1 Teams: any staff working in adult care services/setting including ancillary and voluntary staff
- AC1.2 Learning requirements: may include:
 - Induction
 - Statutory learning
 - Mandatory learning
 - Specific service specialist training
- AC1.3 Workforce planning and development: an essential part of ensuring that the right people with the right attitudes, skills, values and experience are providing the care and support that the organisation is offering
- AC1.4 For people who work in adult care settings/services including ancillary and voluntary staff
- AC1.10 Assessors should ensure contemporary models are referenced
- AC2.1 Available mechanisms and resources: this may include a range of different methods used for learning and development. It should include approaches using technology within learning and development
- AC2.1 Technology to include remote learning, platforms, e-learning and electronic portfolios
- AC2.2 Learning culture: leading practice which embraces, provides opportunity and recognises the benefits of learning and professional development
- AC2.4 To enable the successful delegation of tasks and responsibilities

Suggested supporting resources

www.skillsforcare.org.uk

Unit level:	5
Credit value:	3
GLH:	20
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop their knowledge, understanding and skills in the supervision of others. Learners will understand the principles and purpose of professional supervision as a key component of performance development. Learners will be able to reflect upon and develop their own professional supervision practice and explore the use of supervision to improve and monitor performance of team members.

Learning outcome

The learner will:

LO1 understand the purpose and practice of professional supervision in adult care settings/services

Assessment criteria

- AC1.1 outline the requirements of regulation, codes of practice and agreed ways of working that influence and structure professional supervision requirements in adult care
- AC1.2 describe the function of effective professional supervision in adult care
- AC1.3 explain different **supervision activities and processes** which can be used in adult care
- AC1.4 describe how effective supervision supports and protects:
 - a. the supervisee
 - b. individuals
 - c. carers/volunteers
 - d. families
- AC1.5 describe how effective supervision can protect the supervisor and the setting/service
- AC1.6 explain why the wellbeing of the supervisee should be included within effective supervision and supportive practices
- AC1.7 describe ways to enable and promote effective supervision and supportive practices

- AC1.8 explain how external and internal factors influence practice and can be used within professional supervision objectives
- AC1.9 describe how supervision can be used alongside appraisals and professional development processes to enhance performance and aspirations of the supervisee
- AC1.10 evaluate the factors which can result in a power imbalance in professional supervision
- AC1.11 describe how to address any power imbalance in professional supervision
- AC1.12 describe ways to address any challenges that might arise during professional supervision

Range

- AC1.2 Function: should include principles, scope and purpose of professional supervision
- AC1.3 **Supervision activities and processes:** will include formal and informal ways supervision can be planned and provided in the environment

Learning outcome

The learner will:

LO2 be able to provide regular professional supervision

Assessment criteria

The learner can:

- AC2.1 establish understanding and agreement with supervisee on key areas including:
 - a. the purpose, frequency and location of supervision activities
 - b. actions which support preparation for supervision
 - c. sources of data and evidence used to inform supervision
 - d. need for confidentiality, respecting boundaries, roles and accountability, action planning
- AC2.2 use information from a range of sources to build an understanding of the supervisee's performance
- AC2.3 support a supervisee to review their own wellbeing, including a range of strategies and **support** available
- AC2.4 support a supervisee to reflect on and explore methods of addressing different situations in their work
- AC2.5 provide constructive feedback to the supervisee that can be used to improve and develop performance
- AC2.6 support a supervisee to identify, plan and achieve their own learning and professional development needs
- AC2.7 use supervision to meet objectives of the work setting and individual objectives of the supervisee by:
 - a. agreeing targets
 - b. reviewing targets
 - c. revising targets
- AC2.8 record outcomes of supervision activities in line with agreed ways of working
- AC2.9 store outcomes of supervision activities in line with agreed ways of working

Range

AC2.3 Support: this should include offers available internally and externally

Unit 506 Professional supervision in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 - observation of supervision is <u>not</u> permitted even with supervisee permission. AC2.4: Evidence could be professional discussion alongside examination of work products, work products must not be included in the portfolio. The assessor must report on the work products examined, expert witness testimony, supervision notes.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- Why is professional development important when working in adult care settings/services?
- What types of support and resources are available to teams to support their professional development?
- What are the key principles of formal supervision?
- What are the internal and external factors that may influence best practice?
- AC1.3 Supervision activities and processes examples: group, individual, team, observations of competencies, validating knowledge, shadowing activities, induction and learning processes
- AC1.6 Wellbeing may include health, happiness and comfort with aspects of social, emotional, cultural, spiritual, intellectual, economic, physical and mental wellbeing taken into consideration
- AC1.6 Supportive practice may include mentoring, 1:1, counselling, support networks, coaching, phone calls
- AC1.8 External and internal factors: external factors may include (but is not limited to): updated national policy or local procedures, emerging best practice, societal movements and campaigns. Internal factors may include (but are not limited to): lessons learned/learning reviews, concerns or complaints, skills development/training, emerging needs of individuals accessing services
- AC1.9 Professional development processes: may include personal development plans, learning logs, development requests
- AC2.3 Strategies: may include those which are personal to the learner and should include those that enable the learner to maintain their wellbeing as well as strategies to implement if indicators of deterioration are recognised
- AC2.4 Different situations: may include challenges that the supervisee or team face in their day-to-day role

Suggested supporting resources

www.skillsforcare.org.uk www.cqc.org.uk www.nhs.uk

Unit level:	5
Credit value:	5
GLH:	35
Assessment type:	Portfolio of evidence
Aim:	This unit explores the legal requirements, national and local policies, procedures and protocols that managers must follow and considers how they can best be applied in practice. Learners will develop an understanding of how investigations into failures in care are used to develop practice and have an opportunity to reflect on their own roles and responsibility in managing a service that promotes safe care for all. Learners will show they have ensured colleagues are aware of their responsibilities to safeguard both adults at risk and children and young people they may encounter in their work.

Learning outcome

The learner will:

LO1 understand requirements for safeguarding in adult care settings/services

Assessment criteria

- AC1.1 describe the current legislative framework and national guidance that underpins the safeguarding of adults
- AC1.2 describe local systems, procedures and agencies relating to adult safeguarding and own role within these
- AC1.3 explain how national and local guidelines, policies and procedures for safeguarding affect:
 - a. day to day work with individuals
 - b. own responsibilities towards individuals, their families and carers
 - c. team members
- AC1.4 explain how investigations into serious failures to uphold individuals' rights to live free from abuse and neglect have impacted on national policy
- AC1.5 describe legal provisions in relation to: a. whistleblowing

b. information sharing

- AC1.6 describe own role in **leading a response** to suspected or disclosed abuse or neglect
- AC1.7 explain how and when to engage others in relation to responding to safeguarding concerns
- AC1.8 explain issues relating to consent to share information
- AC1.9 describe own responsibilities to share information about suspicions or disclosures of abuse or neglect
- AC1.10 describe local systems, procedures and agencies relating to children's safeguarding and own role within these
- AC1.11 analyse tensions between maintaining the safety of colleagues and others, with the duty of care to individuals known to be a potential risk to children/adults

Range

AC1.6 Leading a response: this must include, but is not limited to:

- safety and wellbeing of the individual and others where applicable
- own actions
- own role in implementing, following, and engaging others in policies and procedures
- own role in ensuring individuals (and others where applicable) is kept informed and involved

Learning outcome

The learner will:

LO2 be able to lead the implementation of practices, policies and procedures to support safeguarding in adult care settings/services

Assessment criteria

- AC2.1 ensure that all policies, procedures, systems and processes used in the work setting comply with legal requirements, local and national guidance
- AC2.2 embed safeguarding principles throughout all practices, policies and procedures
- AC2.3 support team members to develop the knowledge and skills they need to safeguard adults at risk
- AC2.4 ensure team members understand their role in responding to concerns about the safeguarding of a child or young person
- AC2.5 review person-centred practices, policies and procedures to ensure continuous improvement in safeguarding of adults at risk of abuse or neglect in own setting/service
- AC2.6 evaluate the outcomes of the review of person-centred practices, policies and procedures to plan developments to ensure safeguarding of adults at risk of abuse or neglect in own setting/service
- AC2.7 implement revised person-centred practices, policies and procedures relating to safeguarding in own setting
- AC2.8 promote practices that encourage and empower adults at risk, and those who are important to them, to share concerns
- AC2.9 follow agreed protocols to participate in inter-agency, joint or integrated working in order to achieve the best outcomes for adults at risk

Unit 507 Safeguarding in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What do you understand by the terms 'safeguarding' 'abuse' 'harm'?
- How could a manager ensure colleagues are aware of signs and symptoms of harm or abuse?
- How could a manager monitor practice to ensure colleagues remain vigilant?
- Why is it crucial that managers in adult care services have an understanding of their responsibilities in safeguarding children and young people?

Safeguarding individuals from harm, abuse or exploitation is the responsibility of everyone. Those who lead adult care have a particular role to play in ensuring the safety and wellbeing of individuals in receipt of care, colleagues and visitors to setting/services they manage.

- Learning Outcome 1 is knowledge only, strong links may be made with LO2 which requires the learner to show how they implement and review safeguarding practice requirements. Learners must refer to the most recent legislation and practice guidance relating to safeguarding adults and children.
- AC1.7 Others in this context refers to those people who may need to be involved in a response, for instance:
 - Individuals accessing care and support services
 - Carers, loved ones, family, friends of those accessing care and support services
 - Team members
 - Managers and supervisors
 - Professionals from other services
- AC1.11 Tensions Learners should consider how their duty of care to individuals, whose behaviour may be challenging has to be balanced with the need to ensure the safety of others. Others in this context may include adults or children visiting a setting or in the community

Learners must consider their responsibility to colleagues and the wider community. They should explore ways of keeping people safe from individuals in their care who are known to be a potential threat to the safety of others, whilst at the same time maintaining their duty of care to those in receipt of the service

- AC2.5 Review: this might take into account:
 - Outcomes from Safeguarding reviews and investigations
 - trauma informed care
 - Current guidance arising from serious case reviews relating to adult care and its relevance to own organisation
 - organisational culture

This might include reviewing:

- Person-centred practices, policies and procedures
- When a response is required for external influences which impact internal practices, eg a pandemic or current reports published by CQC
- Communication and support systems for staff and others within own organisation
- How own team/service liaises with others and/or external organisations
- AC2.9 If the learner has not experienced issues relating to adults at risk, then a professional discussion on how they would follow agreed protocols may be used. The EQA needs to agree that this approach is warranted.

Suggested supporting resources

www.adass.org.uk/safeguarding-policy-page

www.ageuk.org.uk/information-advice/health-wellbeing/relationships-family/protection-from-abuse/

www.gov.uk/government/publications/working-together-to-safeguard-children--2 www.cqc.org.uk

www.skillsforcare.org.uk

Understanding mental capacity and restrictive practice in adult care

Unit level:	5
Credit value:	3
GLH:	20
Assessment type:	Portfolio of evidence
Aim:	 This unit aims to provide learners with an understanding of the legislation and practice requirements relating to all aspects of mental capacity and how this applies to their setting/service. Learners will consider assessment of risk and the role they have in upholding the rights of individuals to make valid choices. The unit asks learners to consider implications for individuals and others in restricting freedom of choice and movement and their own role in ensuring that both legal and ethical requirements are met. Learners will explore their own learning needs and those of the team in respect of mental capacity and restrictive practices.

Learning outcome

The learner will:

LO1 understand mental capacity and consent

Assessment criteria

- AC1.1 explain how current legislation, codes of practice and policy regarding mental capacity relate to adult care settings/services
- AC1.2 explain own role in applying and upholding key principles of mental capacity legislation, internal policy and codes of practice
- AC1.3 outline the support available when mental capacity needs to be assessed
- AC1.4 explain how to access support available for a mental capacity assessment
- AC1.5 explain own role in the assessment of risk in situations where an individual's capacity is a concern
- AC1.6 describe ways of working which support individuals' ability to provide valid consent
- AC1.7 evaluate development needs relating to mental capacity for:

- a. self
- b. team members

Range

AC1.7 **Development needs** including, but not limited to: Best Interest decisions, decisionmaker responsibilities, maximising capacity and their role in assessment

Learning outcome

The learner will:

LO2 understand the use and impact of restrictive practices in adult care

Assessment criteria

The learner can:

- AC2.1 explain what is meant by:
 - a. restrictive practices
 - b. restraint
 - c. deprivation of liberty
- AC2.2 describe **own responsibilities** in relation to restrictive practices and deprivations of liberty
- AC2.3 explain how the use of the following practices are managed in own work setting for: a. restrictive practices
 - b. restraint
 - c. deprivation of liberty
- AC2.4 analyse the current legal and ethical considerations of restricting an individual's rights and freedoms
- AC2.5 evaluate appropriate and proportionate responses to restrictions on an individual's rights and freedoms
- AC2.6 describe the potential impacts of restrictive practices on individuals and others
- AC2.7 explain how person-centred, outcomes-based practices can mitigate the use of restrictive practices
- AC2.8 evaluate **development needs** relating to the use of restrictive practices for: a. self
 - b. team members

Range

AC2.1 **Restrictive practices** includes any practice or intervention that limits the rights or freedoms of an individual

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

- AC2.2 **Own responsibilities** to include how to apply for an authorisation
- AC2.6 Impacts must include but not limited to:
 - safety
 - dignity
 - relationships
 - wellbeing of individuals

• team members responsible for implementing restrictions

AC2.8 **Development needs** must include, but not limited to:

- best interest decisions
- decision-maker responsibilities
- maximising capacity
- their role in assessment

Understanding mental capacity and restrictive practice in adult care

Supporting Information

Evidence requirements

LO1 and LO2 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What is the current legislation (including case law) relating to assessment of mental capacity, Best Interests and safeguarding the liberty of an individual?
- What constitutes valid and informed consent?
- What might be deemed a restrictive practice?
- How could a manager monitor practice to ensure it is not restrictive?
- How could a manager monitor practice to ensure that individuals are able to make valid choices?

LO1 and LO2 Learners must ensure that they consider current legislation, and codes of practice relevant to the service provision, from the list below:

- Current legislation/regulations relating to Mental Capacity
- Current legislation/regulations relating to Liberty Protection Safeguards/Deprivation of Liberty
- Current legislation/regulations relating to The Safeguarding of Vulnerable Groups
- Lasting Power of Attorney/Court of Protection
- Best Interest Decisions
- Advanced Decisions

Learners must be aware that legislation and guidance may change, and it is expected that centres cover the most up-to-date and applicable national and local requirements.

- AC2.3 Managed includes monitoring
- AC2.6 Individual: a person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.
- AC2.8 Development needs including, but not limited to: Best Interest decisions, decisionmaker responsibilities, maximising capacity and their role in assessment

Restrictive practices include any practice or intervention that limits the rights or freedoms of an individual. Least restrictive options should be considered

Restraint including but not limited to, covert medication (sometimes referred to as 'hidden restraint'). Least restrictive options should be considered

Legal and ethical including but not limited to:

• Legal principles and requirements

- Duty of Care
- Individuals' wishes
- Advanced decisions
- Decision-making authorities eg Lasting Power of Attorney, Court of Protection request
- Best Interest decisions.

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

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

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

Suggested supporting resources

www.cqc.org.uk www.gov.uk www.mentalhealth.org.uk www.mencap.org.uk www.mind.org.uk www.alzheimers.org.uk www.dignityincare.org.uk

Leading and managing partnerships in adult care

Unit level:	5
Credit value:	5
GLH:	35
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to understand different contexts for working collaboratively and within partnerships when leading and managing adult care services. Developing and maintaining positive relationships with internal and external partnerships and providing leadership will be a key objective for this unit. Learners will demonstrate their skills in managing challenges, conflicts and dilemmas inherent in partnership working and co-production.

Learning outcome

The learner will:

LO1 understand the context of relationships and partnership working in adult care

Assessment criteria

- AC1.1 outline the range of partnerships within adult care
- AC1.2 explain the complexity of different relationships within partnership-working
- AC1.3 explain how legislation and regulation influence working relationships with others
- AC1.4 explain how relationships with individuals, families and carers:
 - a. underpin person-centred practice
 - b. affect the achievement of positive outcomes
- AC1.5 describe how networking and working collaboratively with other agencies and community groups, benefits those using the service
- AC1.6 describe how networking and working collaboratively with other agencies and community groups benefits the sustainability and reach of the organisation
- AC1.7 explain how effective systems leadership supports integrated working with other agencies, overcomes barriers and delivers better outcomes for individuals
- AC1.8 describe different **communication** methods used to forge relationships and partnerships with other professionals and agencies for the following: a. methods

- b. protocols
- c. limitations
- AC1.9 explain potential conflicts within partnerships with other professionals and agencies
- AC1.10 evaluate **features** of effective, collaborative partnership working across agencies
- AC1.11 describe own role and responsibilities in establishing positive relationships within and beyond the organisation/service

Range

AC1.8 Different **communication** methods: learners must consider a range of communication methods including digital communications

AC1.10 Features must include, but are not limited to:

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

Learning outcome

The learner will:

LO2 be able to lead effective relationships with individuals, carers and families

Assessment criteria

The learner can:

- AC2.1 model open, respectful, and supportive relationships with individuals, their families, and carers
- AC2.2 embed co-production within day-to-day practices of team
- AC2.3 implement measures to ensure that individuals, carers and others are aware of their **rights** in partnership working

Range

AC2.3 Rights: including statutory rights

Learning outcome

The learner will:

LO3 be able to manage working relationships with colleagues in own setting to achieve positive outcomes for individuals

Assessment criteria

- AC3.1 develop systems and procedures which facilitate effective working relationships with a range of colleagues
- AC3.2 develop common objectives when working with colleagues ensuring they are agreed to

- AC3.3 implement systems and practices that allow colleagues to make appropriate contributions using their specific expertise
- AC3.4 work in ways that address conflicts or dilemmas constructively
- AC3.5 evaluate own working relationships with colleagues

Learning outcome

The learner will:

LO4 be able to work in partnerships with professionals and other agencies

Assessment criteria

The learner can:

- AC4.1 negotiate with professionals in external agencies to agree objectives, roles and responsibilities, procedures, and ways of working for a specific task or area of work
- AC4.2 use agreed ways of working within partnerships with professionals in external agencies to:
 - a. carry out own role
 - b. support others to carry out their responsibilities
- AC4.3 work in ways that address challenges constructively to promote change
- AC4.4 deal constructively with poor practice, or failure to work in agreed ways
- AC4.5 work in ways that address poor practice, or failure to work in agreed ways constructively
- AC4.6 use **communication and recording systems** that comply with current legislation for information sharing between agencies
- AC4.7 evaluate the effectiveness of partnership work and the processes that underpin it
- AC4.8 negotiate agreement for improvements for the effectiveness of partnership work

Range

AC4.6 Communication and recording systems: including digital technologies

Leading and managing partnerships in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2, LO3 and LO4 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- Who are the different agencies/individuals involved in collaborative partnership working within my service?
- What ways can digital technologies enhance partnership working in my service?
- How can I develop leadership when managing partnerships?
- How can I engage partners using effective working relationships?
- Do all partnerships work as well as they could?
- What are my feelings about conflict and the effect it has on my way of working?
- What effect do my interpersonal skills have on leading on partnership working?
- AC1.2 Partnership-working may include:
 - Formal
 - Informal
 - Multi-disciplinary
 - Integrated
 - Business relationships
- AC1.3 Legislation: learners should consider how different legislation relate to and influence working practice with others

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

- AC1.4 Individuals: a person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for
- AC1.5 Working collaboratively/collaborative: working with other partners, understanding, and prioritising their needs and establishing mutually beneficial and respectful relationships, whilst remaining focused on own desired outcomes, needs and agenda

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

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

- AC1.7 Systems leadership seeks to affect change for good across interconnecting systems eg health and social care, through leadership and collaboration that extends the usual limits of resources and responsibility
- LO2 Exploration of Stephen Covey's "7 Habits of effective people" may offer a framework for discussion about the concepts of self-mastery, teamwork and collaboration and the move from dependence to inter-dependence. Consideration of the Senses Framework and how it supports relationship centred care. https://www.kingsfund.org.uk/sites/default/files/mike-nolan-patient-centred-caresenses-framework-nov12.pdf

https://shura.shu.ac.uk/280/1/PDF_Senses_Framework_Report.pdf

- AC2.2 Co-production: an equal relationship between individuals accessing a service and the people responsible for the service. They work together to decide the best way to design and deliver services and implement those decisions together. Co-production recognises that people who use social care services (and their families) have knowledge and experiences that can be used to help make services better, not only for themselves but for other people who access social care
- AC2.3 Others could include:
 - Families
 - Other services
 - Advocates
- AC3.1 Colleagues involved in partnership working, may include:
 - Internal to the service/organisation
 - Other practitioners
 - Ancillary staff
 - Volunteers
- AC4.1 Professionals in external agencies involved in partnership working, may include:
 - External to the service/organisation
 - Other practitioners/professionals
 - Voluntary agencies
 - Community network groups
 - Educational settings
 - Expert user groups
- AC4.6 Learners must demonstrate how they implemented the systems for use by their teams.

Suggested supporting resources

www.gov.uk for updates on current legislation relating to partnership working, this may include:

The Care Act 2014 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 The Equality Act 2010 Data Protection and GDPR and where relevant to the service provision, from the list below:

Current legislation/regulations relating to Mental Capacity

Current legislation/regulations relating to Mental Health

Current legislation/regulations relating to Liberty Protection Safeguards/Deprivation of Liberty

Current legislation/regulations relating to The Safeguarding of Vulnerable Groups Power of Attorney

Organisational policy requirements for establishing partnership working with a range of external professionals and agencies

Learners must be aware that legislation and guidance may change, and it is expected that centres cover the most up-to-date and applicable national and local requirements.

Leading practice to manage comments and complaints

Unit level:	5
Credit value:	3
GLH:	20
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is to enable learners to understand the management of comments and complaints and be able to lead practice in acknowledging and responding to comments and complaints. Learners should consider ways of sharing compliments and positive comments with colleagues and others in addition to managing complaints and critical comments. Learners will explore reasons why this may be difficult for some individuals and what could be done to support an open culture in the service. Learners will consider ways of managing a range of comments and complaints including those that are persistent and unreasonable or abusive towards colleagues and how best to implement an effective comments and complaint policy culture that meets regulatory and legal requirements.

Learning outcome

The learner will:

LO1 understand the management of comments and complaints

Assessment criteria

- AC1.1 describe regulatory requirements, codes of practice and guidance for managing comments and complaints
- AC1.2 analyse the relationship between the management of comments and complaints and:
 - a. risk management
 - b. safeguarding
- AC1.3 explain why those using services and others may be reluctant to comment or complain
- AC1.4 describe attitudes and approaches that ensure comments and complaints inform continuous improvement of the setting/service

AC1.5 describe ways of managing complaints which can be:

- a. unreasonably persistent
- b. abusive

Learning outcome

The learner will:

LO2 be able to lead practice in acknowledging and responding to comments and complaints

Assessment criteria

- AC2.1 support team members to understand systems and procedures that ensure comments and complaints are actioned appropriately
- AC2.2 ensure accessible information and support is in place to enable, empower and encourage individuals and others to:
 - a. raise comments and complaints
 - b. follow-up on comments and complaints
- AC2.3 implement open and transparent systems and procedures that:
 - a. compassionately acknowledge comments and complaints
 - b. respond to comments and complaints within agreed time frames
- AC2.4 implement learning from comments and complaints to drive improvements to the setting/service

Leading practice to manage comments and complaints

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What constitutes a complaint?
- What is the difference between a complaint and a comment?
- How effective are my current procedures for complaint handling?
- What might I learn from comments and complaints?
- How can I as a manager create a culture that accepts and welcomes comments and complaints?

Learning Outcome 1 is knowledge only. Learners should be encouraged to review current policies, especially if they are not the author. Learners must refer to current regulatory and legal requirements relating to the management of comments and complaints.

- AC1.2 Others: may include family members, friends, carers, other practitioners
- AC1.2 Comments includes feedback, suggestions, remarks and statements and whistleblowing
- AC1.4 Attitudes and approaches could include those of:
 - Team members
 - Self
 - Family/carers
 - Visitors
 - Volunteers
 - Partners
 - Setting/service culture
 - Other internal/external stakeholders
- AC1.5 Unreasonably persistent complaints may include complaining about issues that have already been dealt with, complaining without evidence to support the matter, changing the basis of the complaint, not acting in the best interests of the person receiving care.
- AC1.5 Abusive refers to complainants that are abusive towards colleagues or make unfounded allegations against an individual. Learners should recognise the difference

between persistent, but reasonable comments and complaints and those which are unreasonable or abusive.

- LO2 Is about implementing and embedding ways of managing comments and complaints that leads to an open culture accepting of criticism. Learners could refer to training for colleagues or real instances of comment and complaint management. Confidentiality must be maintained if referring to an actual case.
- AC2.2 and AC2.3: Learners should consider ways of sharing compliments and positive comments with colleagues in addition to managing complaints and critical comments.
- AC2.3 Acknowledging includes active listening and respectful questioning

Learners should consider the vehicle for comment or complaint eg social media, regulatory body or some other official channel and its impact and subsequent management.

Suggested supporting resources

www.igo.org.uk/adult-social-care

Leading the vision of an adult care setting/service

Unit level:	5
Credit value:	4
GLH:	22
Assessment type:	Portfolio of evidence
Aim:	Learners will gain the ability to understand how to develop a vision for their setting/service and lead commitment to and implementation of their vision and future direction of their setting/service. Learners will create a plan to implement the vision and future direction of the setting/service which will include a review and possible revision.

Learning outcome

The learner will:

LO1 understand how to develop a vision for the setting/service

Assessment criteria

The learner can:

- AC1.1 explain the meaning of 'leading a vision' for a setting/service
- AC1.2 evaluate own role in developing a vision for a setting/service
- AC1.3 describe how factors may affect the:
 - a. vision for the setting/service
 - b. future of the setting/service
- AC1.4 explain how to ensure the vision and future direction of the service remains compatible with:
 - a. internal aspirations of the service
 - b. external adult care system

Learning outcome

The learner will:

LO2 be able to lead commitment and implementation of the vision and future direction of the setting/service

Assessment criteria

The learner can:

- AC2.1 build support for those implementing and communicating the vision and future direction of the setting/service by:
 - a. sharing the vision
 - b. encouraging ownership of the vision
- AC2.2 support stakeholders to:
 - a. be aware of the vision for the setting/service
 - b. understand the impact the vision may have on them
- AC2.3 create a plan to implement the vision and future direction of the setting/service
- AC2.4 review stages of the plan
- AC2.5 monitor stages of the plan
- AC2.6 revise stages of the plan, adapting implementation if required

Range

AC2.3 **Plan** must relate to specific aspect(s) of the vision or future direction. This could include but not limited to aims, objectives meeting regulatory requirements

Leading the vision of an adult care setting/service

Supporting Information

Evidence requirements

LO1 – evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 – evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

- LO1 Exploration of Kotter's 8-Step process for leading change will highlight the importance of developing and conveying a vision and the need to empower others to enact that vision. Schein's Cultural Levels and Johnson & Scholes Culture Web recognise the importance of organisational culture in developing a vision and McKinsey's 7S model provides a useful decision-making tool or framework.
- AC1.3 Factors may include:
 - Financial
 - Policy and procedure
 - Staffing
 - Environmental factors
 - Legislation
 - Partnership working
 - Health and wellbeing
 - Co-production
 - Digital technologies
 - Integration of health and care services
- AC1.4 Adult care system: the local and national systems which support and integrate the provision of adult care
- AC2.2 Stakeholders within and beyond the organisation

Suggested supporting resources

www.england.nhs.uk/ourwork/part-rel/transformation-fund/

www.cqc.org.uk/about-us/our-strategy-plans/new-strategy-changing-world-health-social-care-cqcs-strategy-2021

www.gov.uk/government/publications/people-at-the-heart-of-care-adult-social-care-reformwhite-paper/people-at-the-heart-of-care-adult-social-care-reform www.mindtools.com https://study.com/academy/lesson/the-rational-decision-making-model-steps-and-purpose-inorganizations.html www.time-management-guide.com/intuition-decision-making.html www.scie.org.uk/publications/guides/guide29/stakeholders/

Continuous improvement within adult care

Unit level:	5
Credit value:	4
GLH:	25
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to understand the principles of continuous quality improvement. Learners will understand and demonstrate how continuous quality improvement can support innovation and change. It also explores systems and processes that facilitate positive outcomes for individuals and will allow learners to identify opportunities for service improvement through change management. Lessons learned from incidents and national events will enable learners to reflect on how these might be used to implement change through transformation and innovation.

Learning outcome

The learner will:

LO1 understand continuous quality improvement in adult care

Assessment criteria

The learner can:

AC1.1 explain the meaning of:

- a. quality improvement in adult care
- b. continuous quality improvement in adult care
- c. quality improvement tools
- d. quality improvement techniques
- AC1.2 explain how to meet regulatory and best practice guidance requirements using:
 - a. continuous quality improvement tools
 - b. continuous quality improvement techniques
- AC1.3 outline the potential signs or indicators of poor practices in relation to quality improvement
- AC1.4 explain how quality assurance practices inform quality improvement activities
- AC1.5 explain how the following support person-centred practice: a. governance

- b. adult processes
- c. compliance activity
- AC1.6 explain how the following can support outcome-based practices:
 - a. governance
 - b. audit processes

Learning outcome

The learner will:

LO2 be able to lead continuous improvement in practice

Assessment criteria

The learner can:

- AC2.1 monitor progress towards the implementation of person-centred practice
- AC2.2 evaluate progress towards the implementation of person-centred practice
- AC2.3 monitor progress towards the achievement of positive outcomes
- AC2.4 evaluate progress towards the achievement of positive outcomes
- AC2.5 create opportunities for individuals and others to provide feedback on their experiences of the setting/service
- AC2.6 use the views of individuals once they have been acknowledged
- AC2.7 evaluate evidence-based research in best practice for:
 - a. person-centred practice
 - b. outcomes based practice
- AC2.8 identify areas where digital technology could enhance:
 - a. person-centred practice
 - b. outcomes based practice
- AC2.9 identify lessons learned from:
 - a. national incidents and events
 - b. internal incidents and events
- AC2.10 act on lessons learned from:
 - a. national incidents and events
 - b. internal incidents and events
- AC2.11 evaluate how positive outcomes for individuals are facilitated by:
 - a. internal systems
 - b. processes
 - c. agreed ways of working
 - d. individuals and others being involved in the decision-making process
- AC2.12 plan for the following:
 - a. improvements to internal systems
 - b. improvements to processes
 - c. improvements to agreed ways of working
- AC2.13 lead implementation for the following:
 - a. improvements to internal systems
 - b. improvements to processes
 - c. improvements to agreed ways of working

Learning outcome

The learner will:

LO3 be able to lead a culture that supports innovation and change to improve outcomes for individuals

Assessment criteria

The learner can:

- AC3.1 outline the meaning of the following terms in relation to adult care:
 - a. culture
 - b. innovation
 - c. change
 - d. transformation
- AC3.2 evaluate the achievement of outcomes for individuals to identify where improvements could be made
- AC3.3 work with others to identify the following opportunities for service improvement through:
 - a. transformation
 - b. innovation
- AC3.4 utilise the expertise of individuals and/or others in respect of:
 - a. driving innovation
 - b. driving improvement
 - c. driving change

Range

AC3.4 **Others:** the learner is to ensure that the others are recognised for their abilities to contribute to innovation/improvement/change

Learning outcome

The learner will:

LO4 understand how to implement effective change in adult care

Assessment criteria

- AC4.1 explain the term 'change management' in adult care
- AC4.2 explain models of best practice in 'change management'
- AC4.3 describe the processes of 'change management'
- AC4.4 describe tools and skills needed to inspire change, development and innovation across the setting/service
- AC4.5 outline the range of external drivers for change in adult care
- AC4.6 describe how external drivers for change impact on adult care setting/services
- AC4.7 explain the following in respect of implementing effective change:
 - a. success factors
 - b. barriers

Continuous improvement within adult care

Supporting Information

Evidence requirements

LO1 and LO4 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 and LO3 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

- AC1.2 Requirements could include:
 - Regulatory
 - Legislative
 - Best practice guidance
- AC1.4 QA practice: could include spot checks, competency checks, satisfaction surveys, phone calls

QA activities, could include review and monitor the practice, looking for inconsistencies, action planning, supervision, 1:1

- LO2 Exploration of Lewin's Forcefield Analysis model and Change Management model, Kotter's 8-Step process for leading change and Stephen Covey's "7 Habits of effective people" all offer well established frameworks to support change and innovation leading to practice improvements.
- AC2.5 The learner should think about settings/services that adopt and implement a culture that is honest, open, and transparent and uses tools such as the following:
 - Individual meetings
 - Group meetings
 - Evaluation tools, feedback processes and procedures of service provision
 - Events
 - Complement, complaint and suggestions policies

AC2.5, AC2.11, AC3.4 Others in this context might include:

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

- Advocates
- AC2.6 Acknowledged includes active listening and respectful questioning
- AC2.12 Processes: governance, audit processes and compliance activity
- AC3.4 The learner is to ensure that the others are recognised for their abilities to contribute to innovation/improvement/change
- AC4.2 Consideration the following models will offer a diverse framework within which to explore change and change management within organisations: Lewin's Forcefield Analysis model and Change Management model, Kotter's 8-Step process for leading change, Stephen Covey's "7 Habits of effective people", John Fisher's Personal Transition Curve and Kubler Ross's stages of Grief.
- AC4.4 Resources may include
 - Personal skills
 - Tools
 - Techniques
- AC4.7 Success factors: how outcomes are measured as a result of change.

Suggested supporting resources

www.skillsforcare.org.uk www.hse.gov.uk/leadership/auditing.htm www.gov.uk www.cqc.org.uk www.england.nhs.uk/about/equality/equality-hub/resources/tools/ www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutoryguidance

Effective communication in leadership and management in adult care

Unit level:	5
Credit value:	3
GLH:	20
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is to support leaders and managers of adult care to develop their knowledge, understanding and skills of effective communication within their role. Learners will evaluate models of communication and demonstrate communication methods used to achieve positive interactions for all. Learners will explore how to manage and resolve conflict in the work setting/service.

Learning outcome

The learner will:

LO1 know how to use communication skills to achieve positive interactions

Assessment criteria

- AC1.1 explain how to achieve positive interactions within an adult care setting/service considering:
 - a. communication skills
 - b. methods of communication
 - c. models of communication
 - d. leadership and management responsibilities
- AC1.2 explain the circumstances in which a leader/manager may use the following to achieve maximum impact:
 - a. communication skills
 - b. methods of communication
 - c. models of communication
- AC1.3 explain how communication skills underpin:
 - a. achievement of positive outcomes for individuals
 - b. the leadership and management of teams
 - c. sustainable relationships and partnerships

Range

AC1.1 Models to include:

- Linear
- Interactional
- Transactional

Learning outcome

The learner will:

LO2 know how to manage and resolve conflict

Assessment criteria

The learner can:

- AC2.1 describe approaches for conflict management and conflict resolution
- AC2.2 outline factors within workplace that may cause:
 - a. friction
 - b. conflict
- AC2.3 evaluate personal skills that underpin conflict management and conflict resolution techniques

Range

AC2.2 Factors must include communication styles of self and others:

- passive
- passive aggressive
- aggressive

Learning outcome

The learner will:

LO3 be able to communicate effectively with others

Assessment criteria

- AC3.1 demonstrate a range of effective communication styles, methods and skills expected of leaders and managers in adult care
- AC3.2 apply communication skills appropriately for maximum impact taking into consideration the:
 - a. message
 - b. audience
 - c. emotional context of self and others
 - e. communication style of others
- AC3.3 manage barriers to communication

Learning outcome

The learner will:

LO4 be able to develop communication practices

Assessment criteria

- AC4.1 monitor communication systems and practices for effectiveness in the work setting
- AC4.2 evaluate the effectiveness of communication systems and practices that promote positive outcomes
- AC4.3 propose improvements to communication systems and practices
- AC4.4 lead the implementation of improvement to communication systems and practices

Unit 513 Effective communication in leadership and management in adult care

Supporting Information

Evidence requirements

LO1 and LO2 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO3 and LO4 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What different models of communication there and how they might apply to leadership and management practice?
- What systems are in place to ensure that the team you are leading/managing fully understand policies and procedures that apply to best practice in relation to effective communication?
- What are the barriers to effective communication both internally and externally?
- Why it is important to lead/manage others in maintaining accuracy and confidentiality in record keeping?

Use of digital technology when leading and managing communication should be embedded throughout.

AC1.3 Individuals: the person accessing care and support.

Others: may include:

- Family and friends
- Team members
- Managers and supervisors
- Professionals from other services
- Visitors to the work setting
- Members of the community
- Volunteers
- Advocates

Relationships and partnerships may include those involved in the care service provision.

- AC1.4 Relationships and partnerships eg networks, communities, other professionals and organisations.
- AC2.1 Approaches may include:
 - Danger

- Safety
- Relationship
- Decision-making
- Awareness
- Self-preparation
- Conflict reduction
- Negotiation
- AC2.3 This may include:
 - Active Listening
 - Emotional Intelligence
 - Patience
 - Impartiality
 - Positivity
 - Open Communication

Suggested supporting resources

Communication Skills for Dummies - Kuhnke www.skillsforcare.org.uk

Managing the effective handling of information in adult care

Unit level:	5
Credit value:	3
GLH:	20
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is to develop learner's knowledge, understanding and skills required for effective information management within an adult setting/service. Learners will be able to implement a plan that addresses the training needs of the team in relation to handling information which will include how to initiate processes and systems in respect of cyber security.

Learning outcome

The learner will:

LO1 understand effective information management

Assessment criteria

The learner can:

- AC1.1 outline own role and responsibilities in effective information handling management
- AC1.2 describe how to support others to effectively handle information
- AC1.3 explain how own setting/service business continuity plan informs the management of a data/cyber security breach following agreed ways of working
- AC1.4 explain how to respond to a data breach

Learning outcome

The learner will:

LO2 be able to implement systems for effective information management

Assessment criteria

The learner can:

AC2.1 lead the implementation of policies, procedures and systems for effective information handling to meet **legal and ethical** requirements

- AC2.2 lead practice to address legal and/or ethical conflicts that arise between maintaining confidentiality and sharing information
- AC2.3 identify team's training needs in relation to handling information
- AC2.4 implement a plan that addresses team's training needs in relation to handling information

Range

AC2.1 Legal and ethical must include:

- current data protection regulations
- data security and protection
- subject access requests
- data control
- sharing information
- safeguarding

Managing the effective handling of information in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What is effective information management?
- What is a business continuity plan?
- What are data breaches?
- What are the legal and ethical conflicts around confidentiality?

LO2 Effective information management will include consideration of:

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

Suggested supporting resources

Communication Skills in Health and Social Care – Bernard Moss Communication Skills for Dummies - Kuhnke www.skillsforcare.org.uk www.gov.uk www.cqc.org.uk www.ico.org.uk

Unit level:	5
Credit value:	6
GLH:	40
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop an understanding of principles and values needed to lead person-centred practice including strength-based approaches and the relationship to an individual's choice and control over decisions affecting them. Learners will demonstrate the ability to foster and manage an organisational culture which considers all aspects of individuals' wellbeing, including their relationships. Learners will develop an understanding of the importance of integrated services and will work in partnership with a range of others. Learners will develop the skills to lead the implementation of practices, policies, procedures to manage risk and positive risk-taking.

Learning outcome

The learner will:

LO1 understand person-centred, outcomes-based practice

Assessment criteria

- AC1.1 evaluate the following ways of working:
 - a. strength-based approaches
 - b. person-centred practice
 - c. active participation
 - d. outcomes-based practice
- AC1.2 describe how the following influence outcomes-based practices:
 - a. strength-based approaches
 - b. person-centred practice
- AC1.3 analyse how outcomes-based practices impacts on individuals':
 - a. health and wellbeing
 - b. independence

c. choice and control

Range

AC1.1 Ways of working must include the:

- features
- principles
- drivers
- underpinning values

Learning outcome

The learner will:

LO2 understand the value of person-centred practice in partnership working to enable individuals to achieve their desired outcomes

Assessment criteria

The learner can:

- AC2.1 evaluate the role of partnerships, collaboration and co-production with individuals and others in enabling individuals to achieve their desired outcomes
- AC2.2 describe own setting/service's role in enabling individuals to build and maintain relationships and connections with their community
- AC2.3 analyse how integrated service provision that crosses traditional boundaries may achieve better outcomes for individuals

Learning outcome

The learner will:

LO3 be able to lead person-centred practice to facilitate positive outcomes for individuals

Assessment criteria

The learner can:

- AC3.1 facilitate the development and implementation of a plan to ensure team members have the training and development needed to support individuals in person-centred ways to achieve desired outcomes
- AC3.2 support team members to work in partnership with individuals and others to recognise and respond to individuals' changing strengths, needs and preferences
- AC3.3 support others to apply person-centred approaches to ensure positive outcomes for individuals and those important to them in complex situations
- AC3.4 facilitate the development and review of individuals' care and support, ensuring: a. individuals and others are actively involved
 - b. plans and activities reflect individuals' preferences, wishes, strengths and needs
- AC3.5 manage resources to ensure that: individuals can make choices about their health and wellbeing to achieve positive outcomes

reasonable adjustments are provided to enable individuals to access care and support

- AC3.6 implement systems and processes for recording that identifies: a. progress towards achievement of individual's desired outcomes
- City & Guilds Level 5 Diploma in Leadership and Management for Adult Care (England) (3096-51)

Learning outcome

The learner will:

LO4 understand the relevance of relationships when promoting health and wellbeing

Assessment criteria

The learner can:

- AC4.1 explain why it is important to follow a proactive approach when supporting individuals to build and maintain relationships
- AC4.2 describe how having an open, proactive culture, which supports individuals' rights to have the relationships they choose, can support health and wellbeing
- AC4.3 analyse the support an individual may need to maintain and build relationships
- AC4.4 outline when external services may be required to enable an individual to maintain or build relationships

Learning outcome

The learner will:

LO5 be able to lead practice in recognising individuals' relationships

Assessment criteria

The learner can:

- AC5.1 lead a culture which fosters approaches that recognises and values an individual's gender identity, sexuality and relationship needs
- AC5.2 promote an open, proactive culture where individuals and others feel confident to discuss gender identity, sexuality and safe relationships
- AC5.3 ensure individuals and others have access to support, information and advice about relationships and sexuality

Learning outcome

The learner will:

LO6 understand positive risk-taking in context of supporting individuals

Assessment criteria

- AC6.1 explain how positive risk-taking can contribute to the achievement of positive outcomes for individuals
- AC6.2 describe the potential impact of a risk-averse culture on person-centred practice and the wellbeing of individuals
- AC6.3 analyse the **considerations** which need to be applied in the management of positive risk-taking
- AC6.4 explain how supporting others to balance risks and rights promotes person-centred practices

Range

AC6.3 **Considerations**: including, but not limited to mental capacity, safeguarding, individuals' rights, duty of care

Learning outcome

The learner will:

LO7 be able to lead the implementation of practices, policies, procedures to manage risk and positive risk

Assessment criteria

- AC7.1 lead a culture which promotes the benefits of positive risk taking in person-centred practice where the wellbeing of individuals is recognised
- AC7.2 facilitate a person-centred approach in the management of risks
- AC7.3 evaluate own and others practice in leading a balanced approach to risk taking

Unit 515 Leading person-centred practice

Supporting Information

Evidence requirements

LO1, LO2, LO4 and LO6 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO3, LO5 and LO7 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- How can services be managed to meet best practice guidelines and benchmarks for person-centred practice?
- What training and support do staff need to ensure services achieve positive outcomes for individuals who use services?
- What kinds of integrated services are currently provided to enable the achievement of positive outcomes for individuals who use my service?
- How can my service be improved to ensure individuals receive a person-centred approach to their care package?
- How can I use person-centred practices to enhance relationships?
- Why is positive risk-taking is part of person-centred care?

This unit offers an opportunity for holistic assessment when linked with 500, 507 and 508.

AC1.1 Strength-based approaches: also referred to as 'asset-based' approaches. This approach focuses on individuals' strengths, resources and what they are able to do themselves to keep well and maintain independence.

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

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

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

LO2 and LO3 Consideration of the Senses Framework and how it supports a culture of personcentred and relationship centred care.

https://www.kingsfund.org.uk/sites/default/files/mike-nolan-patient-centred-care-senses-framework-nov12.pdf

https://shura.shu.ac.uk/280/1/PDF_Senses_Framework_Report.pdf

AC2.1 Partnerships: working with the individual, networks, communities and other professionals and organisations.

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

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

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

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

- Carers, loved ones, family, friends of those accessing care and support services
- Colleagues and peers
- Team members
- Managers and supervisors
- Professionals from other services
- Visitors to the work setting
- Members of the community
- Volunteers
- Advocates
- AC2.2 Community: may include but not limited to how the individual is supported to engage with and access their local community, ie social and recreational activities, transport, leisure services, spiritual and cultural services and support, hobbies, education, housing provision and voluntary activities. For some individuals, their community will be very close to home, for others it will be much wider.

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

AC2.3 Integrated service provision: joined up, coordinated care and support that is planned and organised around the desires, needs and preferences of the individual. It may involve health, social care, housing, education and other services.

Traditional boundaries – may include:

- Funding
- Training
- Lack of communication
- Lack of information
- Organisation barriers
- AC3.2 Support in this assessment criterion includes development
- AC3.3 Support in this assessment criterion includes development

Complex situation: might include the following:

Psychological

- Physical changes
- Social
- Financial
- Environmental
- Emotional

AC3.4, AC5.2 and AC6.4 Others: in this context, refers to everyone a worker is likely to come in to contact with, including:

- Carers, loved ones, family, friends of those accessing care and support services
- Colleagues and peers
- Team members
- Managers and supervisors
- Professionals from other services
- Visitors to the work setting
- Members of the community
- Volunteers
- Advocates
- AC4.2 Proactive: Ongoing monitoring and active involvement of the individuals receiving care

Includes how failure to maintain relationships can have a negative impact on an individual

- AC5.2 Evidence examples:
 - Training for staff
 - 1-2-1's
 - Tool kits for staff to help have an open conversation
 - Space in the care plan for this to be addressed
 - Surveys given to the individuals and others and how open and approachable the management team are
 - Policies the learner has created to embed this practice.
- AC5.3 Others: in this context refers to everyone a worker is likely to come in to contact with, including:
 - Carers, loved ones, family, friends of those accessing care and support services
 - Colleagues and peers
 - Team members
 - Visitors to the work setting
 - Volunteers

Suggested supporting resources

www.mind.co.uk www.nhs.uk www.skillsforcare.co.uk www.cqc.co.uk

Leading a service that promotes health and wellbeing in adult care

Unit level:	5
Credit value:	3
GLH:	18
Assessment type:	Portfolio of evidence
Aim:	This unit aims to enable learners to lead a culture that promotes individuals' wellbeing and independence in all aspects of day to day practice. Learners will understand the importance of promoting and leading practice that supports an individual's health and wellbeing.

Learning outcome

The learner will:

LO1 be able to lead a culture that promotes individuals' wellbeing and independence

Assessment criteria

The learner can:

- AC1.1 lead a culture where an individual's preferences, wishes, needs and strengths are prioritised and responded to
- AC1.2 lead a culture which enables individuals to enjoy full and meaningful lives connected to:
 - a. those important to them
 - b. their communities
- AC1.3 lead a culture which enables individuals and those important to them to influence and co-design how care and support services are provided

Learning outcome

The learner will:

LO2 understand the importance of promoting individuals' health and wellbeing

Assessment criteria

The learner can:

AC2.1 describe factors that influence individuals' health and wellbeing

AC2.2 explain:

- a. own role
- b. role of others
- in monitoring, assessing, and promoting individuals' wellbeing
- AC2.3 explain own role in providing sufficient training, support, and supervision to enable team members to monitor individuals' health and wellbeing
- AC2.4 evaluate how lines of accountability and responsibility are understood when delegating healthcare tasks

Learning outcome

The learner will:

LO3 be able to lead practice in promoting individuals' health and wellbeing

Assessment criteria

- AC3.1 lead practices which support others to meet an individual's identified health and wellbeing needs
- AC3.2 lead practice which supports others to monitor, and assess changes to, individuals' health and wellbeing using agreed ways of working
- AC3.3 lead practice which supports others to understand the importance of early identification of deterioration in an individual's health and wellbeing
- AC3.4 lead practice which ensures others record and respond to assessments and observations of an individual's health and wellbeing
- AC3.5 implement procedures which involve others in responding to any changes in an individual's health and wellbeing
- AC3.6 work in partnership with individuals and others to agree roles and responsibilities in achieving individuals' health and wellbeing outcomes

Leading a service that promotes health and wellbeing in adult care

Supporting Information

Evidence requirements

LO1 and LO3 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

LO2 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- Why is wellbeing important?
- How do I find out what aspects of wellbeing are valued by individuals who use the service I manage?
- Does my service currently have an embedded culture where fostering wellbeing is seen as important as other aspects of service delivery?
- How could I improve the way this culture is promoted and fostered?
- AC1.1 Individuals: the person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.
- AC1.2 Communities: may include but not limited to how the individual is supported to engage with and access their local community, ie social and recreational activities, transport, leisure services, spiritual and cultural services and support, hobbies, education, housing provision and voluntary activities. For some individuals, their community will be very close to home, for others it will be much wider.
- AC1.2 and AC1.3 Those important to them: may include but not limited to those the individual chooses to be involved in their life, eg partners, families, friends, carers and advocates.
- AC2.1 Factors affecting health and wellbeing will be different for different people. Learners should show consideration for environmental, physical, social, financial and psychological factors.
- AC2.2 and AC3.6: Others: in this context could refer to:
 - Individuals accessing care and support services
 - Carers, loved ones, family, friends of those accessing care and support services
 - Team members
 - Colleagues and peers
 - Advocates
 - Managers and supervisors
 - Professionals from other services

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

AC3.1 and AC3.2: Others: in this context could refer to:

- Individuals accessing care and support services
- Carers, loved ones, family, friends of those accessing care and support services
- Team members
- Advocates
- Managers and supervisors
- Professionals from other services
- Volunteers.
- AC3.5 Changes may be positive or negative

Suggested supporting resources

www.gov.uk/government/publications/coronavirus-covid-19-health-and-wellbeing-of-the-adultsocial-care-workforce/health-and-wellbeing-of-the-adult-social-care-workforce www.nice.org.uk/about/nice-communities/social-care/tailored-resources/mwop/maintaininghealth-and-wellbeing www.alzheimers.org.uk www.mind.org.uk www.mencap.org.uk Leading and promoting equality, diversity, inclusion and human rights in adult care

Unit level:	5
Credit value:	4
GLH:	30
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to lead practice of equality, diversity, inclusion and human rights within adult care. Learners will understand the history of legislation and the changes that have promoted the rights of individuals, the workforce and others. Learners will lead and manage processes that challenge poor practice and promote changes that support inclusive practice.

Learning outcome

The learner will:

LO1 understand equality, diversity, inclusion, and human rights in relation to adult care

Assessment criteria

- AC1.1 summarise current legislation underpinning equality, diversity, inclusion and human rights in relation to adult care
- AC1.2 describe how current legislation underpins equality, diversity, inclusion and human rights in supporting own role that promotes a culture which values individuals and others
- AC1.3 explain other influences that impact on leading a **culture** which values individuals and others:
 - a. societal
 - b. historical
- AC1.4 explain the impact discriminatory or closed cultures have on individuals and others within adult care
- AC1.5 evaluate how own values, beliefs and experience may **impact** on practices and behaviours relating to equality, diversity, inclusion, and human rights within adult care

AC1.6 evaluate how the values, beliefs and experience of others may **impact** on practices and behaviours relating to equality, diversity, inclusion, and human rights within adult care

Range

- AC1.3 **Culture:** when considering the culture, learners should consider how they lead this for individuals accessing services and for the workforce.
 - Must include:
 - legal
 - societal
 - historical influences

AC1.5, AC.6 Impact: to include both in a positive and a negative way

Learning outcome

The learner will:

LO2 be able to lead a culture that promotes, values and celebrates equality, diversity, inclusion and human rights within adult care

Assessment criteria

- AC2.1 evaluate own and others inclusive practice
- AC2.2 evaluate how the setting/service promotes, values and celebrates equality, diversity, inclusion, and human rights
- AC2.3 revise practices, policy or procedures to improve how the service promotes, values, and celebrates equality, diversity, inclusion, and human rights
- AC2.4 monitor changes and improvements that lead to better outcomes for individuals and others in own setting/service
- AC2.5 review changes and improvements that lead to better outcomes for individuals and others in own setting/service
- AC2.6 challenge discrimination, harassment and exclusion in ways that are likely to achieve change and promote positive outcomes
- AC2.7 support others to challenge, discrimination, harassment and exclusion in ways that are likely to achieve change and promote positive outcomes

Leading and promoting equality, diversity, inclusion and human rights in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What current legislation underpins equality diversity inclusion and human rights?
- The impact Society and history influences have on current practice.
- How do own beliefs and values and those of others have on promoting equality diversity inclusion and human rights?
- How can own practises implement changes and challenge discrimination?

The principles and values within this topic should be embedded in all units in this qualification.

- AC1.2 and AC1.3: Historical influences are not confined to a specific timescale. Learners should consider themes from history that have influenced equality, diversity, inclusion and human rights.
- AC1.4 Closed cultures: a closed culture is a poor culture in an adult care service/service that increases the risk of harm. This includes abuse and human rights breaches. The development of closed cultures can be deliberate or unintentional either way it can cause unacceptable harm to a person and their loved ones.

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

- AC1.6, AC2.1 Others: in this context may include:
 - Individuals accessing care and support services
 - Carers, loved ones, family, friends of those accessing care and support services
 - Team members
 - Colleagues and peers
 - Managers and supervisors
 - Professionals from other services
 - Visitors to the work setting
 - Members of the community

- Volunteers.
- Advocates
- AC2.1 Inclusive practice:
 - To include how this can be improved
 - For both the workforce and the individuals being supported/cared for
- AC2.3 May include but not limited to:
 - Policies and procedure changes
 - Recruitment and retention
 - Reviewing of care plans and risk assessment
 - Revise: to implement any identified changes
- AC2.6 May include but not limited to:
 - Complaints log with positive impacts
 - Training being provided
 - Information by written communication
 - 1-2-1s and supervision
 - Direct challenge

Suggested supporting resources

www.gov.uk - legislation www.nhs.uk - legislation www.acas.org.uk www.mind.org.uk www.skillsforcare.org.uk

Unit level:	5
Credit value:	4
GLH:	30
Assessment type:	Portfolio of evidence
Aim:	 The aim of this unit is for learners to understand their role when leading and managing systems which ensure and promote health and safety within their setting/service. This includes implementing processes which meet legislative and regulatory requirements involving others in driving forward health and safety processes reducing risks for all those in receipt of services and for those working or visiting in the setting/service. Learners will understand their role in identifying and managing risk within the setting/service so that it is minimised. This will include developing, implementing and revising policies and procedures to manage risk within service design and delivery. Throughout this unit learners should be encouraged to evaluate their own effectiveness as leaders and managers of health and safety in adult care.

Learning outcome

The learner will:

LO1 understand health and safety requirements in adult care

Assessment criteria

- AC1.1 explain the current legislative framework for health and safety in adult care
- AC1.2 outline current key sources of information and guidance for health and safety management in the workplace

Learning outcome

The learner will:

LO2 be able to lead the implementation of health and safety requirements in adult care

Assessment criteria

The learner can:

- AC2.1 explain the processes which ensure that health and safety requirements are met, to include:
 - a. internal to the organisation
 - b. external to the organisation
- AC2.2 support others to comply with relevant organisational health and safety practices, policies, procedures
- AC2.3 enable team members to access training to meet health and safety requirements
- AC2.4 monitor compliance with safe working practices
- AC2.5 provide appropriate intervention if procedures are not adhered to
- AC2.6 evaluate health and safety working practices, policies and procedures making improvements where required
- AC2.7 complete records and reports on health and safety according to legislative and organisational requirements

Learning outcome

The learner will:

LO3 understand effective risk management

Assessment criteria

The learner can:

- AC3.1 describe what is meant by risk management
- AC3.2 describe potential risks in own adult setting/service
- AC3.3 describe own responsibilities to assess and manage risk
- AC3.4 explain methods and tools available to inform and undertake risk management activities

Learning outcome

The learner will:

LO4 be able to lead the implementation of policies, procedures and practices to effectively manage risk

Assessment criteria

- AC4.1 develop policies, procedures and practices to identify, assess and manage risk
- AC4.2 support team members to:
 - a. understand risk management
 - b. adhere to guidance which promotes safe practices

- AC4.3 work with others to identify and assess risks
- AC4.4 work with others to manage risks to minimise their impact
- AC4.5 analyse the effectiveness of health and safety processes
- AC4.6 evaluate existing processes and recommend changes where necessary

Leading and managing health and safety in adult care

Supporting Information

Evidence requirements

LO1 and LO3 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 and LO4 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What do you understand by the terms 'risk management'?
- How much do you know about wider aspects of risk, danger and harm and how these may relate to your service?
- How are you supporting and educating all work colleagues to follow health and safety guidance and procedures within the service/settling?
- Why is it crucial that you understand your responsibilities in leading teams to ensure health and safety is prioritised?
- Are there any risks that are particular to your setting/service?
- AC1.1 Legislative framework: this should include the range of Health and Safety legislation and specific regulations applicable to the environment and care service being provided.
- AC1.2 Key sources of information and guidance: eg Health and Safety Executive, Public Health England, may also include other internal and external support mechanisms.
- AC2.1 Legislation and guidance: this may include local guidance, changing and updated guidance and specific information available to support legislation and regulations eg The Code of Practice on the prevention and control of infections and related guidance. Processes should reflect current legislation and guidance.
- AC2.2 Others: in this context might include, but not limited to:
 - Individuals receiving care and support
 - Carers
 - Loved ones
 - Family
 - Friends of those accessing care and support services
 - Team members
 - Professionals from other services
 - Visitors to the work setting
 - Volunteers

- AC3.3 Including infection prevention and control
- AC3.4 Methods and tools could include the use of digital technology

Suggested supporting resources

www.hse.gov.uk/pUbns/priced/hsg220.pdf www.hse.gov.uk/healthservices www.cqc.org.uk www.skillsforcare.org.uk

and where relevant to the service provision, any from the list below: Current legislation/regulations relating to Health and Safety Current legislation/regulations relating to Prevention of Infection Current legislation/regulations relating to Risk management Organisational policy requirements for ensuring Health and Safety within the service and when working with a range of external professionals and agencies.

Learners must be aware that legislation and guidance may change, and it is expected that centres cover the most up-to-date and applicable national and local requirements.

Continuous development for leaders and managers in adult care

Unit level:	5
Credit value:	3
GLH:	15
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to recognise the importance of their own continuous development when leading and managing adult care services. The unit considers learners' commitment to self-awareness, include exploring ways to identify and meet their own professional development needs and to manage all aspects of own work role.

Learning outcome

The learner will:

LO1 be able to demonstrate commitment to own development

Assessment criteria

The learner can:

- AC1.1 evaluate own knowledge and performance using standards and benchmarks
- AC1.2 prioritise own professional development needs and aspirations
- AC1.3 implement plans to meet own professional development needs and aspirations
- AC1.4 identify opportunities to support own professional development taking account of own learning style
- AC1.5 create opportunities for others to provide feedback on own performance across all aspects of role
- AC1.6 evaluate how own practice has been improved through:
 - a. implementation of a professional development plan
 - b. reflection on feedback from others
 - c. reflection on learning from achievements and adverse events

Learning outcome

The learner will:

LO2 be able to demonstrate commitment to self-awareness

Assessment criteria

The learner can:

- AC2.1 use feedback from others to proactively increase own self-awareness
- AC2.2 reflect on own skills, values and behaviours to increase:
 - a. self-awareness
 - b. professional development
- AC2.3 analyse how own values, belief systems and experiences impact own work practices
- AC2.4 analyse how own emotions:
 - a. affect own behaviour
 - b. impact on others

Learning outcome

The learner will:

LO3 be able to manage own workload

Assessment criteria

- AC3.1 use strategies and tools to:
 - a. plan and identify priorities for work
 - b. revise plans when priorities change
 - c. access support mechanisms when workload is difficult to manage
- AC3.2 use digital technology to enhance own and others' efficiency
- AC3.3 facilitate the development of team members to enable effective delegation
- AC3.4 reflect on impact on own wellbeing when planning and responding to organisation priorities

Continuous development for leaders and managers in adult care

Supporting Information

Evidence requirements

LO1, LO2 and LO3 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Endorsement of the learner's evidence could be from an EWT Assessor-created projects and assignments may be used to show how the learner has used skills to maintain continuous development.

Information disclosed is at the learners' discretion.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What is the impact of own belief systems and experiences on continuous development?
- How easy is it to managing own work/life balance?
- Continuous development and opportunities for professional development myth or reality?
- What are your own personal and professional barriers to continuous development?
- How useful are models of reflection for leaders and managers?
- AC1.1 Standards may include Codes of Practice, regulations, minimum standards, national occupational standards, job description/role specification/work objectives
- AC1.2 prioritising own professional development needs within timescales and available resources
- AC1.4 Opportunities may include:
 - Formal or informal support
 - Supervision, appraisal, mentoring, peer support opportunities within and outside the organisation
 - Different types of learning and ways to achieve
 - Self-led and directed learning opportunities.
- AC1.5 Feedback may include verbal, written, management tools, eg 360 supervision appraisal, compliments, comments and complaints

Others in this context might include:

- Carers, loved ones, family, friends of those accessing care and support services
- Colleagues and peers
- Team members

- Managers and supervisors
- Professionals from other services
- Volunteers
- AC1.6c Adverse events an incident or disruption which has associated risks which may lead to unexpected, unintended, and preventable harm to others
- AC2.1 Self-awareness in relation to strengths and areas for further development within role
- AC2.2 Learners should be encouraged to use an accepted model of reflection
- AC3.1 This is practical application within the context managing the workload.

Suggested supporting resources

www.skillsforcare.org.uk/Support-for-leaders-and-managers/Developing-leaders-and-managers/Leadership-programmes-and-CPD.aspx

www.england.nhs.uk/improvement-hub/wp-content/uploads/sites/44/2017/11/ILG-3.4-Leading-Improvement.pdf

Personal wellbeing for leaders and managers in adult care services

Unit level:	5
Credit value:	3
GLH:	15
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to understand the importance of personal wellbeing when managing adult care services. Learners will recognise the relevance of maintaining and improving own wellbeing. Learners will understand the impact of this on self and others in the effective management of services. Recognising and managing stress and anxiety in self is considered essential to leadership of adult care services.

Learning outcome

The learner will:

LO1 understand own wellbeing

Assessment criteria

The learner can:

- AC1.1 explain what is meant by:
 - a. personal wellbeing
 - b. self-care
 - c. resilience
- AC1.2 describe factors that positively and negatively influence own wellbeing
- AC1.3 describe indicators of own wellbeing
- AC1.4 describe indicators that own wellbeing may be deteriorating

Learning outcome

The learner will:

LO2 understand the importance of maintaining and improving own wellbeing

Assessment criteria

The learner can:

AC2.1 analyse how own wellbeing impacts on role and behaviour

AC2.2 explain how own wellbeing impacts others

AC2.3 describe challenges to own wellbeing

Learning outcome

The learner will:

LO3 know how to maintain and improve own wellbeing

Assessment criteria

The learner can:

- AC3.1 explain why it is important to maintain and improve own wellbeing
- AC3.2 identify a range of wellbeing support offers available to self and how to access them
- AC3.3 explain strategies that maintain and improve own wellbeing
- AC3.4 describe how to access support if needing professional therapeutic help to maintain own wellbeing

Range

AC3.2 **Support offers** should include offers available inside and outside the learner's workplace. Learners should consider offers they use as well as those they currently choose not to.

Learning outcome

The learner will:

LO4 know how to manage own stress and anxiety

Assessment criteria

- AC4.1 define what is meant by 'stress' and 'anxiety'
- AC4.2 identify indicators of stress and anxiety in oneself
- AC4.3 describe factors that can trigger stress and anxiety in oneself
- AC4.4 explain how stress and anxiety may affect own reactions and behaviours towards others
- AC4.5 explain how stress and anxiety may affect own health
- AC4.6 analyse strategies for managing own stress and anxiety
- AC4.7 describe how to access a range of support offers for managing own stress and anxiety

Personal wellbeing for leaders and managers in adult care services

Supporting Information

Evidence requirements

LO1, LO2, LO3 and LO4 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

Reflective practice will be especially useful for learners, so direction on the use of appropriate reflective practice models will be beneficial. Learners may also have created some individualised improvement plans to address specific aspects of their personal wellbeing and stress management, these could be referenced to other units where applicable.

Learners may research some of the topics within this unit such as stress and anxiety and their impact on health. This evidence may be linked to 512 to show skills in reflection and also researching information.

Information disclosed is at the learner's discretion.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What is the impact on personal wellbeing of undertaking a leadership and management role?
- What are the responsibilities of self, and the effects of not managing own wellbeing on others?
- What is the relation of resilience to stress and anxiety?
- AC1.2 Own wellbeing: in this context, wellbeing refers to that of learner. Wellbeing is broad concept referring to a person's quality of life considering health, happiness and comfort. It may include aspects of social, emotional, cultural, spiritual, intellectual, economic, physical, and mental wellbeing.

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

- AC1.3 Indicators: these should be specific to the learner.
- AC2.2 Others: may include team members, other colleagues, individuals accessing care and support services, families, carers and other professionals.

Impacts: includes both positive and negative impacts.

AC2.3 Needs to be personal to the learner and may include both positive and negative challenges.

- AC3.3 Strategies: learners' strategies should be personal to them. Strategies should include those that enable the learner to maintain their wellbeing as well as strategies to implement if indicators of deterioration are recognised.
- AC3.4 Professional therapeutic help: may include alternative therapies, talking therapies.
- AC4.1 and AC4.4 Stress can have positive, as well as negative, effects on a person. In this context, we refer to the negative impacts of stress.
- AC4.6 This should include effective and ineffective strategies.
- AC4.7 Support offers may include offers available inside and outside the learners' workplace. Learners should consider offers they use as well as those they currently choose not to. For example:
 - Internal: supervision, employee assistance scheme, coaching, mentor or buddying systems
 - External: self-help tools, apps and websites, local groups and networks

Suggested supporting resources

Search for 'wellbeing' www.nhs.gov.uk www.mentalhealth.org.uk whatworkswellbeing.org

Leading and managing end of life care in adult care

Level:	5
Credit value:	4
GLH:	25
Assessment type:	Portfolio of evidence
Aim:	This unit aims to provide learners with opportunities to develop their knowledge and skills when leading and managing end of life care in a setting/service. Learners will understand the relevance of legislation, guidelines and regulation when managing end of life and the principles of advanced decision-making. Learners will demonstrate the skills needed to lead and manage advance care planning, partnership working and leading on the provision of support in end of life care.

Learning outcome

The learner will:

LO1 understand legislative requirements in respect of end of life care

Assessment criteria

- AC1.1 summarise current relevant legislation, regulation and national and local guidelines which apply to end of life care in adult care settings/services
- AC1.2 describe the following terms:
 - a. end of life
 - b. palliative care
- AC1.3 describe own leadership and management role in respect of end of life care in adult care settings/services, to include:
 - a. actions prior to death
 - b. actions after immediate death
 - c. notification of death
 - d. cultural and religious observances
 - e. care of the deceased body
- AC1.4 evaluate own setting/service in adult care in relation to end of life care requirements

Learning outcome

The learner will:

LO2 understand advanced decision-making in end of life care

Assessment criteria

The learner can:

- AC2.1 explain the term 'advanced decision-making' in relation to end of life
- AC2.2 describe the impact of the following on advanced decision-making:
 - a. individual control
 - b. legal, cultural and ethical issues
 - c. active participation
 - d. positive risk taking
 - e. review and evaluation
 - f. others

AC2.3 analyse the impact of current frameworks used in advanced care planning

Learning outcome

The learner will:

LO3 be able to lead and manage advanced care planning in end of life care

Assessment criteria

The learner can:

- AC3.1 lead communication strategies in advanced care planning.
- AC3.2 work with others to establish mental capacity to ensure the following:
 - a. active participation
 - b. acknowledgement of limited/no capacity to consent
 - c. valid legal consent/power of attorney
 - d. engagement of others/those with legal responsibilities
- AC3.3 provide training and support for team members involved in the advanced care planning process
- AC3.4 lead on creating an advanced care plan using person-centred approaches
- AC3.5 manage the implementation of the advanced care plan
- AC3.6 evaluate the advanced care plan with individuals and others

Learning outcome

The learner will:

LO4 be able to lead and manage partnership working in end of life care

Assessment criteria

The learner can:

- AC4.1 manage partnership working processes in end of life care in own setting/service
- AC4.2 lead team(s) in own service to maximise partnership working in end of life care

AC4.3 facilitate partnership working with others outside of own service during end of life care

AC4.4 evaluate the impact of partnership working processes in end of life care in own setting/service

Learning outcome

The learner will:

LO5 be able to lead on the provision of support for those in end of life care

Assessment criteria

The learner can:

- AC5.1 identify the support and resources that may be required by individuals at end of life including:
 - a. prescribed medication
 - b. other approaches to relieve symptoms
 - c. other medical interventions
 - d. use of other professionals/services
- AC5.2 provide training for staff on:
 - a. recognising symptoms
 - b. identifying support
 - c. accessing resources available
- AC5.3 lead the provision of support and resources in own setting/service
- AC5.4 evaluate the impact of interventions to support those in end of life care

Learning outcome

The learner will:

LO6 be able to lead and manage support systems required in managing grief, loss and bereavement.

Assessment criteria

- AC6.1 evaluate the types of support that are provided in own setting/service for:
 - a. training and development needs in respect of palliative and end of life care
 - b. how those providing end of life care, support the choices and wishes of those receiving care and how this can be effectively managed
 - c. religious, cultural and spiritual needs of those delivering end of life care
 - d. services available to support team members engaged in end of life care
- AC6.2 enable team members to support an individual's and others emotional wellbeing in end of life care
- AC6.3 support team members' emotional wellbeing when working in end of life care

Unit 521 Leading and managing end of life care in adult care

Supporting Information

Evidence requirements

LO1 and LO2 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO3, LO4. LO5 and LO6 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What knowledge and skills should managers possess when leading on and managing end of life care?
- What policies and procedure need to be in place in respect of achieving best practice and how is best practice monitored in respect of end of life care?
- What staff training and development is required by those caring for those who are dying?
- How are cultural differences recognised and respected in your area of care provision in respect of death and dying?
- AC3.6 Others includes:
 - Team members
 - Other colleagues
 - Specialist services
 - Families, carers and advocates
- AC4.4 If no improvement can be made the learner must explain why.
- AC6.3 Emotional wellbeing could include aspects of grief loss and bereavement where relevant. Learners may find it useful to research any of the following:
 - TEAR model of grief
 - Ambiguous loss
 - Disenfranchised grief
 - Stages of grief

Suggested supporting resources

www.nice.org.uk/guidance/ng31?unlid=8299497420161285432 www.cqc.org.uk/content/priorities-care-part-new-approach-care-dying-people www.skillsforcare.org www.gov.uk www.nhs.uk

Managing support for sexual behaviour and promotion of sexual health in adult care settings/services

Level:	5
Credit value:	4
GLH:	25
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop their knowledge and understanding of sexuality, gender identity, sexual behaviour and sexual health in order to lead and manage the promotion of an environment that takes into account and respects an individual's needs and preferences. Learners will be able to support the knowledge and practise of team members in order to in order to promote a positive attitude towards sexuality and sexual behaviours.

Learning outcome

The learner will:

LO1 understand gender identity, sexuality and sexual health

Assessment criteria

- AC1.1 define the following:
 - a. sexuality
 - b. capacity for sexual feelings
 - c. sexual orientation
 - d. gender identity
 - e. gender binary
 - f. sexual behaviour
 - g. sexual consent
 - h. sexual health
- AC1.2 summarise the following in relation to sexual behaviour:
 - a. current/relevant legislation
 - b. national initiatives
 - c. organisational policies and procedures in adult care
- AC1.3 summarise the following in relation to sexual health:

- a. national initiatives
- b. organisational policies and procedures in adult care

Learning outcome

The learner will:

LO2 be able to lead and manage a setting/service that promotes a positive attitude towards sexuality and sexual behaviours

Assessment criteria

The learner can:

- AC2.1 lead the promotion of a safe and lawful environment that supports the sexual needs and behaviours of individuals in adult care
- AC2.2 lead an adult care service that works to promote:
 - a. a diverse and accepting culture in respect of sexuality and gender identity
 - b. an environment void of prejudice and discrimination in relation to sexual behaviours

c. an environment that promotes non-judgmental and honest conversations about sex, sexuality and gender identity

- AC2.3 evaluate own procedures for managing prejudice, discrimination and unconscious bias relating to:
 - a. sexuality
 - b. gender identity
 - c. sexual needs

Learning outcome

The learner will:

LO3 understand the importance of the promotion of sexual health within adult care services

Assessment criteria

The learner can:

- AC3.1 evaluate resources which enable individuals to access advice, guidance and services for sexual health
- AC3.2 explain the potential impact of poor sexual health on individuals on the following:
 - a. physical health
 - b. psychological wellbeing
 - c. meaningful relationships
 - d. social activities
- AC3.3 explain how the following health conditions:
 - a. physical
 - b. mental
 - c. sexual

may impact on sexual behaviours of individuals

Learning outcome

The learner will:

LO4 be able to manage a service that promotes sexual health through training

Assessment criteria

- AC4.1 manage the evaluation of team members knowledge and understanding in relation to promoting the sexual health of individuals
- AC4.2 support access to sexual health training for team members
- AC4.3 evaluate the impact of team members training on the promotion of sexual health for: a. self
 - b. team members/advocates
 - c. individuals
- AC4.4 lead on reporting outcomes of training to relevant stakeholders

Managing support for sexual behaviour and promotion of sexual health in adult care settings/services

Supporting Information

Evidence requirements

LO1 and LO3 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 and LO4 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- Do some people find it difficult to talk openly about sex and the sexual needs of individuals?
- Does my setting/service promote a positive approach to sex and sexual health?
- Do my own values and beliefs in respect of sex and gender identity impact on my leadership and management practice?
- Are team members comfortable with discussing what it means for individuals to have a healthy sex life?
- Could more be done to educate others about gender identity?

Learners must be aware that legislation and guidance may change, and it is expected that centres cover the most up-to-date and applicable national and local requirements.

- AC1.1 Definitions must be current and respect current terminologies and language
- AC2.1 Should include but not limited to reference to:
 - Age of consent
 - Valid Consent
 - Mental capacity
 - Privacy
 - Dignity
 - Confidentiality
 - Respect

AC2.2 To include:

- Individuals
- Others
- External services

Learners should consider the use of care support plans to obtain/record information from individuals.

AC2.3 Learners must consider the following:

- Between fellow users of adult care services
- From users of adult care services towards staff
- From staff towards users of adult care services
- Between fellow staff members
- Challenges experienced from external services
- AC3.1 Learners are to include internal and external services
- AC4.1 Learners may include:
 - Signs and symptoms of Sexually Transmitted Infections (STIs)
 - Protection from STIs
 - Use of contraception
 - Application of treatments
 - Reporting and recording
 - Personal care
 - Duty of care/capacity and support for decision-making
 - Managing embarrassment and denial in self and others
 - Reasons why sexual health issues might affect people differently
- AC4.4 To include stakeholders, individuals and others

Stakeholders: include anyone that feeds into the service or setting or receives service or outputs from the setting/service

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

Others may include:

- Team members
- Other colleagues
- Specialist
- Therapists
- Families
- Informal carers

Suggested supporting resources

www.rcn.org.uk www.cqc.org.uk www.nice.org.uk www.nhs.uk www.Alzheimers.co.uk www.socialworkengland.org.uk www.skilssforcare.org.uk www.mencap.co.uk

Leading and managing clinical skills provision in adult care

Level:	5
Credit value:	4
GLH:	25
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop their knowledge and skills when leading and managing clinical skill provision within adult care settings/services. Learners will understand how to analyse the impact of clinical skill competencies against organisational objectives. Learners will demonstrate how to plan, implement, and evaluate improvements to clinical skills activities within their own setting/service. Learners do not have to be proficient in clinical skills delivery themselves to lead and manage clinical skills provision.

Learning outcome

The learner will:

LO1 understand clinical competence within adult care services

Assessment criteria

- AC1.1 explain what is meant by 'clinical competence'
- AC1.2 summarise current, relevant legislation, guidelines and protocols for the provision of clinical skills in adult care
- AC1.3 explain responsibilities and accountabilities of a leader and manager when leading and managing clinical skill provision when working in partnership with:
 - a. other professionals/specialists
 - b. team members
 - c. individuals
 - d. informal carers
- AC1.4 analyse how developing clinical skills competencies of team members can impact on:
 - a. organisational objectives
 - b. individuals
- AC1.5 explain tools used by managers to assess clinical competence

Learning outcome

The learner will:

LO2 be able to lead and manage development of a plan to improve clinical competence

Assessment criteria

The learner can:

- AC2.1 lead on the analysis of the need for clinical competencies required within setting/service in relation to:
 - a. clinical competencies required
 - b. current skillsets within team
 - c. areas of proficiency
 - d. gaps in skills
 - e. benefits of using own team versus acquiring external services cost
- AC2.2 develop a workforce plan for clinical competence which:
 - a. meets organisational objectives
 - b. identifies clinical skills required for the setting/service
 - c. aligns to current staff responsibilities
 - d. sets a timeline for achieving plan
 - e. provides suitable training initiatives
 - f. is agreed by relevant stakeholders

Learning outcome

The learner will:

LO3 be able to lead and manage implementation of planned clinical activities

Assessment criteria

The learner can:

- AC3.1 manage the provision of training for team members to improve clinical competence which:
 - a. is cost effective
 - b. meets legislative/industry standards
 - c. is aligned to organisational objectives
 - d. increases clinical competence
 - e. focuses on a person-centred approach
 - f. utilises the skillset of other health professionals
- AC3.2 manage the supply of physical **resources** required for the delivery of clinical skills activities
- AC3.3 lead the delivery of clinical skills activities as required by individuals which ensure team members:
 - a. follow best practice guidelines
 - b. ensure safe practice
 - c. encourage active participation of the individual (where possible) and others
 - e. follow reporting and recording processes

f. identify improvements/deteriorations and concerns of individuals and/or others during the clinical activity

AC3.4 manage the evaluation of reporting and recording processes for clinical skills activities

Range

AC3.2 Resources to include equipment

Learning outcome

The learner will:

LO4 be able to manage ongoing clinical skills competency as part of the organisational strategic plan

Assessment criteria

- AC4.1 manage the delivery of relevant CPD activities through supervision of team members to ensure ongoing development of clinical skill competencies
- AC4.2 analyse the impact of the improvements to clinical skills competency on:
 - a. individuals
 - b. team members
 - c. service delivery
- AC4.3 evaluate how clinical skills activities support the organisations strategic plan

Leading and managing clinical skills provision in adult care

Supporting Information

Evidence requirements

LO1 and LO2 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO3 and LO4 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What clinical skills are required in my setting/service?
- What are the current challenges in ensuring clinical skills competence within my staff teams?
- What are the benefits of increasing the level of clinical skills competence within the workforce?
- How can teams be supported to ensure their clinical skills are kept current?
- How do I evaluate the quality of delivery of clinical skills within my setting/service?

AC1.1 May include:

- Tissue viability
- Phlebotomy
- Capillary blood testing
- Catheter care
- Undertaking physiological measurements
- Undertaking electrocardiograph procedures
- Stoma care
- Wound care
- Extended feeding techniques
- Oxygen therapy
- AC2.2 Stakeholder: include anyone that feeds into the service or setting or receives service or outputs from the setting/service

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

- AC3.3 Reports may include:
 - Body maps
 - Incident and accident forms
 - Handover processes and procedures
 - Referral processes to specialists/other health professionals
- AC.3.3 Others may include:

- Team members
- Other colleagues
- Specialist
- Therapists
- Families
- Informal carers

Suggested supporting resources

www.clinicalskills.net www.nice.org.uk www.skillsforhealth.org.uk www.england.nhs.uk www.cqc.co.uk www.skillsforcare.co.uk

Managing business development plans in adult care

Level:	5
Credit value:	4
GLH:	25
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop their knowledge and skills of business development. Learners will explore the needs of the local community and how these can best be met in the current climate. Learners will understand how national drivers, legislation and regulation can shape service provision within adult care. Learners will be able to consider factors influencing proposals for developing their own service.

Learning outcome

The learner will:

LO1 understand the wider market of service provision of adult care

Assessment criteria

The learner can:

AC1.1 analyse the relationship between the current market and service provision in adult care

AC1.2 analyse current drivers shaping service provision in adult care

AC1.3 evaluate current provision against market needs in adult care

Learning outcome

The learner will:

LO2 be able to develop a plan for business development

Assessment criteria

- AC2.1 work with others to identify opportunities for business growth/diversification in adult care
- AC2.2 summarise legislative or regulatory requirements influencing development of business in adult care

- AC2.3 evaluate ways of increasing demand for services offered in own setting
- AC2.4 analyse ways of marketing service provision
- AC2.5 work with others to analyse changes needed to redesign the business to include:
 - a. services offered
 - b. human resources
 - c. finances
 - d. environment
- AC2.6 communicate details of business development proposal to stakeholders
- AC2.7 work with others to develop the plan for business development
- AC2.8 evaluate the impact of proposed business development on others

Managing business development plans in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What are the adult care needs of my local area?
- Does my service need to diversify to meet those needs?
- What services in my local area compete with my business?
- Does my service meet the needs of the local area?
- AC1.1 To include the local community and trends/demographics
- AC1.2 Must include local as well as national drivers
- AC1.2 Learners can be sector specific eg Learning Disabilities, Mental Health, Dementia Care, in this analysis. This may include:

Internal:

- Management
- Organisational culture
- Products and processes
- Resources
- location

External:

- Political
- Economic
- Social
- Technological
- Legal
- Environmental
- AC1.3 This may include service provision in adult care
- AC2.1 Others may include:
 - Investors
 - Local Authority
 - Regulatory bodies

- Individuals
- Staff
- Carers
- Family and friends
- Other professionals
- Community

Business refers to service delivery

- AC2.3 and AC2.4 Learners should consider social media and digital technologies
- AC2.4 Learners should use business/marketing models eg 7Ps, R.A.C.E. framework etc.
- AC2.5 Learners may include but not limited to:
 - Ansoff Matrix
 - Porter's Generic Strategies
 - Collins' Hedgehog Model
 - Five Forces Analysis
 - Mendelow Stakeholder Analysis
 - Segmentation, Targeting and Positioning (STP)
- AC2.6 Stakeholders could include:
 - Individuals
 - Carers
 - Families
 - Workforce
 - Commissioners
 - Regulators
 - Investors
- AC2.7 Others may include but not limited to:
 - The individual
 - Team members
 - Other colleagues
 - Families
 - Informal carers
 - Stakeholders
 - Other financial/legal services
- AC2.8 To include any risks including positive and negative effects

Suggested supporting resources

www.blog.hubspot.com www.businessballs.com www.smartnsights.com www.gov.uk www.cqc.co.uk www.skillsforcare.co.uk

Managing recruitment and selection in adult care

Level:	5
Credit value:	3
GLH:	18
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop their knowledge in recruitment and selection processes as leaders and managers within adult care setting/services. Learners will be able to explore the factors which underpin recruitment and selection systems and the challenges faced when recruiting to service roles. Learners will be able to demonstrate how they manage the evaluation of recruitment and selection strategies and the impact of these on service delivery, workforce planning and development. This unit is aimed at learners who have direct responsibility for recruitment and selection.

Learning outcome

The learner will:

LO1 understand the leadership and management of recruitment and selection

Assessment criteria

- AC1.1 analyse how workforce development strategies influence recruitment in a range of adult care settings/services
- AC1.2 explain factors affecting the leadership and management of recruitment including:
 - a. current regulatory and legislative requirements
 - b. budget
 - c. marketing and advertising
 - d. defining task profiles
 - e. strategic/operational challenges
 - f. interviewing and selection processes
 - g. ensuring recruitment and selection processes are inclusive
- AC1.3 analyse **potential consequences** of selection and recruitment to an adult care setting/service which are:
 - a. successful
 - b. unsuccessful

Range

AC1.3 Potential consequences must include those relating to:

- individuals
- others
- service objectives; short and long term

Learning outcome

The learner will:

LO2 be able to manage recruitment and selection in an adult care setting/service

Assessment criteria

- AC2.1 analyse current recruitment and selection processes in own setting/service against:
 - a. organisational objectives
 - b. service requirements
 - c. budget
 - d. ensuring safe staffing levels
 - e. individual needs
- AC2.2 evaluate how developments to recruitment and selection processes in own setting/service may impact on:
 - a. future strategic objectives
 - b. attracting applicants/apprentices
 - c. skills sets required
 - d. changes to service provision
 - e. meeting individual/others needs for services
 - f. stakeholder influences
- AC2.3 manage intelligence gained from evaluations to present recommendations for improvements to relevant stakeholders

Managing recruitment and selection in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- How do legislation regulatory requirements recruitment and selection processes?
- How effective are my current procedures to recruit new staff?
- How may the recruitment of apprentices support workforce planning and career opportunities in my service?
- How can I encourage the return of those who have left the care sector?
- LO1 This should be a broad spectrum analysis at what affects work force development strategies in general.
- AC1.1 Considerations should be given to:
 - Governmental strategy changes
 - Strategies of a service
 - objectives of a service
 - Skills gaps, staff retention
 - Challenges faced in the recruitment of staff at all levels/service roles
 - Apprenticeships in adult care
 - Role of volunteers
 - Role of credible work placement opportunities for learners from local schools/colleges
- AC1.2 Legislative requirements to include current UK employment law

Marketing and advertising: considerations to include digital media considerations and competitor considerations

- AC1.3 Others: may include:
 - Team members
 - Other colleagues
 - Those who commission health or social care services
 - Families, carers and advocates
- AC2.3 Stakeholders: include anyone that feeds into the service or setting or receives service or outputs from the setting/service

Suggested supporting resources

www.equalityhumanrights.com www.gov.uk www.elas.uk.com www.cqc.org.uk www.acas.org.uk

Leading and managing dementia care services in adult care

Level:	5
Credit value:	4
GLH:	25
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop the knowledge and skills for leading and managing dementia care services. Learners will understand the legal and organisational requirements and the importance of developing knowledge and skills of team members to ensure strength-based approaches. Learners will consider the impact of dementia on individuals and others, including potential risks to safety. Learners will demonstrate how they lead teams to deliver effective dementia care services.

Learning outcome

The learner will:

LO1 understand the leadership and management of dementia care services

Assessment criteria

The learner can:

- AC1.1 explain the role of the leader and manager of dementia care services
- AC1.2 explain the principles of an 'integrated health and care service' for dementia care
- AC1.3 summarise current, relevant legislation, regulation and guidelines for dementia care services
- AC1.4 evaluate the impact of current models of dementia care on dementia services

Learning outcome

The learner will:

LO2 be able to lead and manage team members to understand dementia and its impact on individuals and others

Assessment criteria

- AC2.1 lead team members to develop their understanding and skills with regard to dementia, to include:
 - a. increasing knowledge of dementia
 - b. assessment and diagnosis methods
 - c. guidelines for best practice for treatment, care and support
 - d. challenges in providing care and support
- AC2.2 lead team members to understand the impact of dementia on individuals to include:
 - a. physical health
 - b. mental health
 - c. emotional wellbeing
- AC2.3 lead team members to understand the impact of dementia on others, to include effects on:
 - a. physical health
 - b. mental health
 - c. emotional wellbeing

The learner will:

LO3 be able to lead and manage practice that promotes the wellbeing of individuals living with dementia

Assessment criteria

The learner can:

- AC3.1 lead practice which ensures the promotion of:
 - a. anti-discriminatory practice
 - b. inclusive practice
 - c. person-centred, values-based practice
 - d. active participation
 - e. safeguarding
- AC3.2 manage the development of a strength-based approach which enhances the wellbeing of individuals with dementia and others
- AC3.3 manage tools and digital technologies which promote independence for individuals and others living with dementia
- AC3.4 manage recording and reporting systems on dementia care service delivered in own setting/service

Learning outcome

The learner will:

LO4 be able to manage risk processes specific to dementia care services

Assessment criteria

- AC4.1 manage processes which identify risk concerns for:
 - a. individuals living with dementia
 - b. others
- AC4.2 manage processes which actively minimise identified risks for:

- a. individuals living with dementia
- b. others
- AC4.3 manage referrals to outside agencies and services where additional support is required to maintain the safety of:
 - a. individuals living with dementia
 - b. others
- AC4.4 collaborate with others on managing new referrals where additional support is required to maintain the safety of:
 - a. individuals living with dementia
 - b. others
- AC4.5 support team(s) and others experiencing behaviours that challenge from an individual with dementia

Range

AC4.1 Risk concerns to include:

- hazards
- personal safety
- health and wellbeing risks
- accidents and incidents
- safeguarding
- vulnerability

Learning outcome

The learner will:

LO5 be able to lead a quality review of services provided for individuals with dementia

Assessment criteria

- AC5.1 lead on a quality review of provision for individuals in own setting/service to include views from:
 - a. individuals
 - b. team members
 - c. others
- AC5.2 evaluate findings of the quality review to include:
 - a. strengths in service delivery
 - b. areas for further development
 - c. recommendations for operational planning
 - d. challenges in improving quality provision in service delivery
- AC5.3 manage intelligence gained from evaluations to present recommendations to relevant stakeholders

Unit 526

Leading and managing dementia care services in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO1, LO2 and LO3 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- How can I ensure my service supports people to live well with dementia?
- What opportunities are there to raise the profile of dementia care in my setting/service?
- What are the current challenges to dementia care?
- What does a' first-class service' look like in supporting people living with dementia?
- How does my service currently meet the 'first-class service'?

Others may include:

- Other colleagues
- Specialist
- Therapists
- Families
- Informal carers
- AC1.2 Community Mental Health teams:
 - Occupational therapy teams (including speech and language therapy.; memory clinics)
 - NHS provision GPs, community nursing, Admiral Nurses
 - Others volunteers, friends, families
 - Specialist charities/media representation (Dementia 2020 challenge/Dementia Friends)
- AC2.1 May include training programmes on:
 - Types of dementia
 - Age ranges
 - Signs and symptoms
 - Assessment tools
 - Medical diagnosis/treatments
 - Care and support guidelines for best practice
 - Challenges in providing care and support
- AC2.2 Changes in communication abilities:
 - Loss of independence/diminished responsibilities

- Lack of decision-making skills
- Behaviours changes
- Loss of confidence/self esteem
- Loss of sense of self
- Altered sense of reality/changes to memory
- AC2.3 Changes in relationship dynamics:
 - Loss of independence
 - Being the decision-maker
 - Understanding behaviour changes
 - Stigma
 - Altered sense of own self
 - Lifestyle changes
 - Managing prognosis
- AC2.3, AC3.2 and AC3.3 Others may include:
 - Other colleagues
 - Those who use or commission health or social care services
 - Families and carers
 - Other specialist role/practitioners
 - Other service users
- AC4.1 Others may include:
 - Team members
 - Other colleagues
 - Those who use or commission health or social care services
 - Families, carers and advocates
 - Visiting tradespeople
 - Other specialist role/practitioners
 - Other service users
- AC4.2 To be considered:
 - Promoting appropriate positive risk taking to maintain independence
 - · Identifying concerns affecting wellbeing of others
 - · Working to achieve individuals' identified goals and outcomes
- AC4.3 To include safeguarding agencies
- AC4.4, AC5.1 Others may include:
 - Team members
 - Those who commission health or social care services
 - Advocates
 - Other specialist role/practitioners
- AC4.5 May include:
 - Teams/others understanding of possible behaviours that may challenge
 - Recognising an individual expressing behaviour(s) that may challenge
 - acceptable and reasonable restriction is in line with current legislation and regulations
 - De-escalation
 - Positive behaviour support
 - SPECAL method
 - Validation
 - Butterfly approach
 - Dignity, respect and inclusion
 - Dementia mapping

This may include opportunities through team training, coaching and mentoring and individual supervision.

- AC5.1 Others may include:
 - Those who commission health or social care services
 - Advocates
 - Other specialist role/practitioners
- AC5.3 This may include an action plan that will inform future operational objectives in the delivery of a quality service in line with national standards. If no recommendations the learner should say why.

Suggested supporting resources

www.alzheimers.org.uk www.dementia.org www.dementiafriends.org.uk www.nice.org www.skillsforcare.org.uk www.dementiacarematters.com www.cqc.org.uk www.gov.uk

Unit 527

Leading and managing support for individuals with physical disabilities and impairments

Level:	5
Credit value:	3
GLH:	18
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to understand and demonstrate how to lead and manage a service which supports individuals with physical disabilities or impairments. Learners will understand how to lead practice that promotes inclusion and independence and how to lead and manage a setting/service with promotes a strength bases approach. Learners will be able to lead and manage a setting/service which promotes independence for individuals with physical disabilities or impairments.

Learning outcome

The learner will:

LO1 understand how to lead and manage a service which supports individuals with physical disabilities or impairments

Assessment criteria

- AC1.1 explain the following:
 - a. physical impairment
 - b. physical disability
 - c. acquired disability/impairment
 - d. congenital disability/impairment
- AC1.2 analyse how physical disabilities or impairments may impact on the day to day life of
 - a. individuals
 - b. families
 - c. informal carers
- AC1.3 evaluate types of organisations offering support for physical disabilities or impairments to include:
 - a. national and local services

- b. nationally led initiatives
- AC1.4 explain how to lead access to support services for physical disabilities and impairments
- AC1.5 explain ways of working that lead and manage on:
 - a. person-centred care
 - b. strengths-based planning
 - c. active participation
 - d. positive risk taking
 - e. service delivery improvement
- AC1.6 analyse the use of:
 - a. digital technology
 - b. aids
 - c. adaptations to the environment
 - in meeting identified needs of individuals with physical disabilities or impairments

The learner will:

LO2 understand the impact of legislation and models on services for individuals with physical disabilities or impairments

Assessment criteria

The learner can:

- AC2.1 summarise current, relevant legislation and regulation which supports the management of independence and inclusion
- AC2.2 evaluate the impact of the following models on care provision:
 - a. medical model
 - b. social model
 - c. bio psychosocial model
 - d. tragedy and/or charity model
 - e. identity model
- AC2.3 evaluate how legislation and models of care aims to prevent **prejudice**, **discrimination and unconscious bias** in services for individuals with physical disabilities or impairments

Range

AC2.3 **Prejudice, discrimination and unconscious bias:** to include misconceptions and stereotypes

Learning outcome

The learner will:

LO3 be able to lead and manage a setting/service which promotes independence for individuals with physical disabilities or impairments

Assessment criteria

AC3.1 lead a setting/service which fosters a culture which focuses on:

- a. a strength-based approach
- b. person-centred planning
- c. inclusion
- d. co-production
- e. promoting independence
- AC3.2 manage systems which support team members to promotes inclusion and independence for individuals with physical disabilities or impairments through:
 - a. supervision
 - b. training
 - c. coaching and/or mentoring

Learning outcome

The learner will:

LO4 be able to lead a quality review of services provided for individuals with physical disabilities or impairments

Assessment criteria

- AC4.1 lead on a quality review of provision for individuals in own setting/service to include views from:
 - a. individuals
 - b. team members
 - c. others
- AC4.2 evaluate findings of the quality review to include:
 - a. strengths in service delivery
 - b. areas for further development
 - c. recommendations for operational planning
 - d. challenges in improving quality provision in service delivery
- AC4.3 manage intelligence gained from evaluations to present recommendations to relevant stakeholders

Leading and managing support for individuals with physical disabilities and impairments

Supporting Information

Evidence requirements

LO1 and LO2 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO3 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What constitutes a physical disability or impairment?
- How does the language used to describe physical disabilities or impairments impact on perceptions?
- How do I promote and monitor independence and inclusion?
- How is disability portrayed through the media?

AC1.2 May include:

- Emotional impact
- Social impact
- Physical impact
- Relationship impact
- Financial impact
- Accommodation/housing
- Independence
- Access to cultural or social activities
- Access to local services
- Access to transport
- Access to employment
- Access to education

Learners should consider both positive and negative impact relative to individuals

AC1.3 This may include:

- Practical support
- Staff training or information
- Self help
- Advocacy
- Use of voluntary support
- Charities
- Government led initiatives
- Reablement programmes

AC4.1 Others may include:

- Those who commission health or social care services
- Advocates
- Other specialist role/practitioners
- AC4.3 This may include an action plan that will inform future operational objectives in the delivery of a quality service in line with national standards. If no recommendations the learner should say why.

Suggested supporting resources

www.thedtgroup.org www.scope.org.uk www.cqc.org.uk bda.org.uk rnid.org.uk www.rnib.org.uk www.skilsforcare.co.uk www.gov.uk

Leading and managing services for individuals with learning disabilities and/or autism in adult care

Level:	5
Credit value:	4
GLH:	25
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop their knowledge and skills when leading and managing services for individuals with learning disabilities and/or autism. Learners will understand the relevant legislation and national initiatives governing these services and ways to support a culture that benefits the individual. Learners will be able to lead practice that empowers individuals with learning disabilities and/or autism and review the quality of service provision.

Learning outcome

The learner will:

LO1 understand the context in which learning disability and/or autism services operates

Assessment criteria

- AC1.1 summarise current, relevant legislation and national initiatives in relation to managing services for individuals with learning disabilities and/or autism
- AC1.2 evaluate the following in relation to learning disability and/or autism services:
 - a. services available
 - b. support available from those services
 - c. access to services
- AC1.3 evaluate ways to manage a service which promote the following:
 - a. an inclusive culture
 - b. co-production/co-design
 - c. person-centred/strength-based practice
 - d. active participation
 - e. positive behaviour support

The learner will:

LO2 be able to lead and manage practice that empowers individuals with a learning disability and/or autism and supports their health and wellbeing

Assessment criteria

The learner can:

- AC2.1 lead the implementation of a service which promotes:
 - a. an inclusive culture
 - b. co-production/co-design
 - c. person-centred/strength-based practice
 - d. active participation
 - e. positive behaviour support
 - f. health and wellbeing
- AC2.2 promote care/support plans for individuals which:
 - a. have considered an innovative approach to engagement
 - b. are person-centred
 - c. recognise and build on individual strengths
 - d. embrace techniques to promote positive behaviour
 - e. promote effective communication
- AC2.3 review care/support plans for individuals with a learning disability and/or autism in a way which:
 - a. enables active participation
 - b. promotes empowerment
 - c. values positive risk taking
- AC2.4 evaluate training needs of team members and others
- AC2.5 provide opportunities for knowledge and skills development for team members and others to include:
 - a. formal training
 - b. informal training

Learning outcome

The learner will:

LO3 be able to lead a quality review of services provided for individuals with a learning disability and/or autism

Assessment criteria

- AC3.1 lead on a quality review of provision for individuals in own setting/service to include views from:
 - a. individuals
 - b. team members
 - c. others
- AC3.2 evaluate findings of the quality review to include:
 - a. strengths in service delivery

- b. areas for further development
- c. recommendations for operational planning
- d. challenges in improving quality provision in service delivery
- AC3.3 manage intelligence gained from evaluations to present recommendations to relevant stakeholders

Leading and managing services for individuals with learning disabilities and/or autism in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 and LO3 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- How effective is my current service provision in supporting individuals with learning disabilities and or autism and what improvements might I want to consider?
- Is person-centred practice truly empowering for people with learning disabilities and or autism?
- How can I make sure my setting/service is promoting wellbeing and independence?

AC2.2a and e to include use of digital technologies

AC2.2e communication to include use of aids, techniques and adaptations

- AC2.4 and AC2.5 Others: may include:
 - Family members
 - Informal carers
 - Advocates
 - Other professionals
 - Non care staff/volunteers
- AC3.1 Others may include:
 - Those who commission health or social care services
 - Advocates
 - Other specialist role/practitioners
- AC3.3 This may include an action plan that will inform future operational objectives in the delivery of a quality service in line with national standards. If no recommendations the learner should say why.

Suggested supporting resources

www.gov.uk www.skillsforcare.org.uk/Developing-your-workforce/Care-topics/Learning-disability/Learningdisability.aspx www.autism.org.uk www.bps.org.uk www.disabilitymatters.org.uk www.downs-syndrome.org.uk www.learningdisabilities.org.uk www.gmc-uk.org/learningdisabilities www.hee.nhs.uk/our-work/learning-disability/oliver-mcgowan-mandatory-training-learningdisability-autism www.mencap.org.uk www.england.nhs.uk/learningdisabilities www.bild.org.uk

Leading and managing services for mental health and wellbeing in adult care

Level:	5
Credit value:	4
GLH:	25
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop their knowledge and skills for leading and managing mental health adult care services/setting. Learners will analyse factors affecting individuals' mental health, including signs and symptoms and relevant treatments and therapies. Learners will demonstrate leading and developing team members and others to ensure quality delivery in mental health adult care services. Learners will undertake a quality review of existing services to inform future operational planning.

Learning outcome

The learner will:

LO1 understand mental health conditions and the impact they have on wellbeing

Assessment criteria

The learner can:

- AC1.1 analyse factors that can affect an individual's mental health and wellbeing
- AC1.2 describe how a decline in mental health can impact on the wellbeing of: a. individuals
 - b. others
- AC1.3 analyse mental ill-health conditions
- AC1.4 outline relevant, current treatments and therapies that may be recommended for mental ill-health conditions.
- AC1.5 analyse the concept of 'recovery' in relation to mental ill health

Range

AC1.1 Factors must include but not limited to:

- biological factors eg infections, other physical illness or long-term chronic health conditions, genetic inheritance
- behavioural eg drugs, alcohol, self-harm/suicide

- social, situational factors eg loneliness, relationships, levels of support or isolation, discrimination
- psychological/emotional factors eg mood changes, impulsive actions, chronic stress/anxiety
- environmental factors eg housing, employment
- historical eg school context, academic attainment, life events, bereavement, other lifestyle choices
- cognitive eg thought patterns, levels of resilience
- financial security
- cultural factors
- AC1.3 Considerations must be made to both signs and symptoms and clinical and non-clinical conditions

AC1.5 To include:

- having no symptoms
- management of symptoms
- · regaining control of life including work life
- new ways to live life/lifestyles

Learning outcome

The learner will:

LO2 understand legislation, regulatory requirements, national and local strategies relating to mental health and wellbeing

Assessment criteria

The learner can:

- AC2.1 summarise the following in relation to mental health and wellbeing:
 - a. current, relevant legislation
 - b. regulatory requirements
 - c. national guidelines/initiatives
 - d. local requirements/initiatives
- AC2.2 evaluate the following in relation to mental health and wellbeing:
 - a. services available
 - b. support available from those services
 - c. access to services

Learning outcome

The learner will:

LO3 be able to lead and manage a mental health setting/service that promotes mental health and wellbeing

Assessment criteria

- AC3.1 lead on the promotion of positive mental health and wellbeing for individuals in own setting/service
- AC3.2 manage the processes that give team members access to current work practice requirements
- AC3.3 lead a mental health setting/service that promotes:

- a. active participation
- b. co-production
- c. co-design of services
- d. a person-centred and strengths-based approach
- e. honest and open conversations about mental health and wellbeing
- AC3.4 lead a mental health service that supports others to recognise and understand:
 - a. signs and symptoms of mental ill-health conditions
 - b. the needs of individuals with mental ill-health conditions, diagnosed/non-diagnosed
 - c. how to support individuals' wellbeing
 - d. strategies for self-care

The learner will:

LO4 be able to lead a quality review of services provided for mental health and wellbeing

Assessment criteria

- AC4.1 lead on a quality review of provision for individuals in own setting/service to include views from:
 - a. individuals
 - b. team members
 - c. others
- AC4.2 evaluate findings of the quality review to include:
 - a. strengths in service delivery
 - b. areas for further development
 - c. recommendations for operational planning
 - d. challenges in improving quality provision in service delivery
- AC4.3 manage intelligence gained from evaluations to present recommendations to relevant stakeholders

Unit 529

Leading and managing services for mental health and wellbeing in adult care

Supporting Information

Evidence requirements

LO1 and LO2 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO3 and LO4 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- How effective is my current service provision in supporting people with mental health conditions?
- What improvements can be made to my service?
- What steps do we take to promote the wellbeing of individuals, family members and team members?
- How can integrated services support recovery from mental illness?
- Why is suicide currently the biggest killer of men under the age of 45 years in the UK?
- What makes an effective mental health service?
- AC1.2 Others may include:
 - Team members
 - Other colleagues
 - Specialist
 - Therapists
 - Families
 - Informal carers

To include:

- Physical wellbeing
- Individual relationships
- Work/life balance
- Family life
- Social, cognitive and emotional abilities
- AC1.3 To include but not limited to:
 - Personality disorders
 - Eating disorders
 - Obsessive compulsive disorder (OCD)
 - Schizophrenia
 - Post-traumatic stress disorder (PTSD)
 - Stress, anxiety and panic disorders

- Depression
- Post-natal depression
- Substance use and misuse (legal and illegal)
- Addictive behaviours
- AC1.4 May include but not limited to:
 - Talking therapies (counselling, psychotherapy individual, group, family, marital)
 - Alternative therapies (eg herbalism acupuncture, homeopathy, hypnotherapy)
 - Exercise
 - Support groups
 - CBT behavioural therapy relaxation
 - Prescribed medication antidepressants, antipsychotics (major tranquilisers), anxiolytics and others eg mood stabilisers
 - ECT or other brain stimulation therapy
 - Eye Movement Desensitisation and Reprocessing (EMDR) therapy.
 - Acute inpatient treatment programmes
 - Community outreach programmes
- AC2.1 May include:
 - Legislation and requirements relating to:
 - o mental capacity
 - o mental health
 - well-being initiatives
 - Liberty Safeguards
- AC3.2 To include training, coaching and mentoring, supervisions, appraisals.

AC3.4 Others may include:

- Partner/spouse
- Family members
- Friends
- Employers
- Social networks/organisations
- AC4.1 Others may include:
 - Those who commission health or social care services
 - Advocates
 - Other specialist role/practitioners
- AC4.3 This may include an action plan that will inform future operational objectives in the delivery of a quality service in line with national standards. If no recommendations the learner should say why.

Suggested supporting resources

www.gov.uk www.cqc.co.uk www.skillsforcare.co.uk www.nhs.uk www.skillsforhealth.co.uk www.mind.co.uk www.age.org.uk

Leading and managing services for individuals with profound and complex needs in adult care

Level:	5
Credit value:	4
GLH:	25
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop their understanding of the leadership and management of services for individuals who have enduring profound and complex needs. Learners will consider the challenges that may be encountered when managing the delivery of services and the importance of assessment and review. Learners will demonstrate skills in leading and managing the implementation and review of assessments.

Learning outcome

The learner will:

LO1 understand leadership and management when providing services for those with complex and profound needs in adult care

Assessment criteria

The learner can:

- AC1.1 explain the relationship between the following:
 - a. complex needs
 - b. profound needs

when encountered within adult care services

- AC1.2 analyse the potential impacts on lives of individuals and others of enduring complex and profound needs
- AC1.3 summarise current, relevant legislation and regulations for the provision of services for individuals with complex and profound needs
- AC1.4 analyse the responsibilities of a leader and manager when designing and delivering services to individuals with complex and profound needs
- AC1.5 analyse possible challenges for leaders and managers when providing services to individuals with complex and profound needs in relation to:
 - a. individuals with complex and profound needs
 - b. others

The learner will:

LO2 be able to manage assessments of complex and profound needs

Assessment criteria

The learner can:

- AC2.1 facilitate assessments of individuals with complex and profound needs which include:
 - a. personal preferences
 - b. active participation
 - c. engagement with others
 - d. co-production
 - e. strengths based
- AC2.2 analyse assessment outcomes when establishing the care and support required by individuals with complex and profound needs
- AC2.3 evaluate assessment processes that ensure team members involved in assessments and reviews:
 - a. are monitored
 - b. receive support and training
 - c. are competent to carry out the assessment/review
- AC2.4 evaluate digital technologies in supporting the assessment process

Learning outcome

The learner will:

LO3 be able to lead and manage the implementation and review of care/support services for individuals with complex and profound needs

Assessment criteria

The learner can:

- AC3.1 manage integrated approaches when delivering services to individuals with complex and profound needs to include:
 - a. partnerships within the service
 - b. external partnerships
- AC3.2 lead the implementation of services for individuals with complex and profound needs which:
 - a. encourage self-autonomy of individuals
 - b. ensure active participation in decision-making
 - c. are strengths based
 - d. ensure co-production and co-design of the delivery of services
 - e. ensure inclusivity and anti-discriminatory practice

Learning outcome

The learner will:

LO4 be able to lead a quality review of services provided for individuals with complex and profound needs

Assessment criteria

- AC4.1 lead on a quality review in own setting/service to include views from:
 - a. individuals
 - b. team members
 - c. others
- AC4.2 evaluate findings of the quality review to include:
 - a. strengths in service delivery
 - b. areas for further development
 - c. recommendations for operational planning
 - d. challenges in improving quality provision in service delivery
- AC4.3 manage intelligence gained from evaluations to present recommendations to relevant stakeholders

Leading and managing services for individuals with profound and complex needs in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 and LO3 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- How does the service I manage assess the care and support needs of individuals with profound and complex needs?
- What are the special resource considerations needed for the care and support needs of individuals with profound and complex needs?
- Are our assessment and review processes fit for purpose?
- How can partnership working with other professionals and services improve care packages for individuals with complex needs?
- AC1.2 May include but not limited to:
 - Socio-economic status
 - Housing and accommodation
 - Relationships
 - Employment/education
 - Mental health and wellbeing
 - Physical health

Others may include:

- Team members
- Other colleagues
- Specialist
- Therapists
- Families
- Informal carers

AC1.4 Designing and delivering including but not limited to:

- Procurement of funding
- Equipment resourcing
- Staffing and training

- AC1.5 Learners are asked to think about challenges outside of settings, financial, physical and interpersonal.
- AC1.5 Others may include:
 - Other colleagues
 - Specialist
 - Therapists
 - Families
 - Informal carers
- AC4.1 Others may include:
 - Those who commission health or social care services
 - Advocates
 - Other specialist role/practitioners
- AC4.3 This may include an action plan that will inform future operational objectives in the delivery of a quality service in line with national standards. If no recommendations the learner should say why.

Suggested supporting resources

www.kingsfund.org.uk www.complexneeds.org.uk www.careengland.org.uk/sensory-loss-care-homes-diagnosis-awareness-response Unit 531

Level:	5
Credit value:	4
GLH:	25
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop the skills required for managing a domiciliary service. Learners will understand the impact of legislation and statutory requirements on the management of domiciliary services. Learners will demonstrate how to manage the implementation of domiciliary services and evaluate current practices in own service.

Learning outcome

The learner will:

LO1 understand the impact of legislation and statutory requirements on the management of domiciliary services

Assessment criteria

The learner can:

- AC1.1 summarise current, relevant legislation and regulatory requirements that inform the management of domiciliary services
- AC1.2 analyse the impact on outcomes-based practice of:
 - a. legislation
 - b. regulatory requirements
 - c. commissioning requirements
- AC1.3 explain how person-centre practice in domiciliary services support the following principles:
 - a. an outcomes-based approach
 - b. positive risk management
 - c. co-production and co-design of services
 - d. strengths-based approach
 - e. active participation
 - f. anti-discriminatory practice

Learning outcome

The learner will:

LO2 understand how to manage the delivery of care provision in domiciliary services

Assessment criteria

The learner can:

- AC2.1 evaluate the responsibilities of a manager in domiciliary services to include:
 - a. strategic and operational management
 - b. financial management
 - c. resource management
 - d. staff recruitment/retainment
 - e. quality management
 - f. risk management
 - g. safeguarding
 - h. lone working
 - i. integrated working

AC2.2 evaluate how digital technologies enhances the management of domiciliary services

Learning outcome

The learner will:

LO3 be able to manage the delivery of care provision in domiciliary services

Assessment criteria

- AC3.1 manage the implementation of agreed ways of working with team members and others that promote:
 - a. an outcomes-based approach
 - b. positive risk management
 - c. co-production and co-design of services
 - d. strengths-based approach
 - e. active participation
 - f. anti-discriminatory practice
 - g. safeguarding systems
 - h. effective recording and reporting
- AC3.2 manage the safety and security of individuals and others in own service to include:
 - a. risk assessments
 - b. incident/accident reporting
 - c. lone working
 - d. safeguarding
 - e. use of resources and equipment
 - f. public health initiatives
- AC3.3 manage team members to develop innovative and creative approaches which informs practice

The learner will:

LO4 be able to lead a quality review of delivery of care provision in domiciliary services

Assessment criteria

- AC4.1 lead on a quality review in own setting/service to include views from:
 - a. individuals
 - b. team members
 - c. others
- AC4.2 evaluate findings of the quality review to include:
 - a. strengths in service delivery
 - b. areas for further development
 - c. recommendations for operational planning
 - d. challenges in improving quality provision in service delivery
- AC4.3 manage intelligence gained from evaluations to present recommendations to relevant stakeholders

Unit 531 Managing adult domiciliary care services

Supporting Information

Evidence requirements

LO1 and LO2 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO3 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What legislation and statutory requirements relate to my service?
- Do I understand why these are so important for my organisation and for all adult care?
- How do I make sure my setting/service is person-centred and promotes strength based approaches?
- Does my service promote positive risk assessment?
- Is there a place for digital technology within my service?
- AC2.1 To include but not limited to:
 - Changes
 - Emergencies
 - Challenges
 - Unforeseen circumstances
- AC3.1 Others may include:
 - Other colleagues
 - Specialist
 - Therapists
 - Families
 - Informal carers
- AC3.1h Learners must show how they ensure confidential information protected.
- AC3.2 The learner should have evidence of action taken and follow ups.
- AC3.2f Eg vaccinations
- AC3.2e Should include PPE
- AC3.3 Learners should provide evidence that the team members are supported to do this through any of the following:
 - Internal/external training
 - Supervision
 - Team meetings
 - Coaching and mentoring
- AC4.1 Others may include:

- Those who commission health or social care services
- Advocates
- Other specialist role/practitioners
- AC4.3 This may include an action plan that will inform future operational objectives in the delivery of a quality service in line with national standards. If no recommendations the learner should say why.

Suggested supporting resources

www.cqc.org.uk www.skillsforcare.org.uk www.hse.gov.uk www.equalityhumanrights.com

Level:	5
Credit value:	4
GLH:	20
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop their knowledge and skills when leading and managing groups in adult care settings/services. Learners will understand the range of groups in their service and the principles of group dynamics which can affects their effectiveness. Learners will consider potential reasons for conflict and how this can be minimised by inclusive practices. Learners will demonstrate skills of enabling and supporting groups within the service they manage. Learners will be able to lead the promotion of effective groups. The reference to groups in this unit is wide ranging and learners are encouraged to be creative in their thinking about how groups can support individuals and others in the care setting/service.

The learner will:

LO1 understand how to lead and manage groups in adult care settings/services

Assessment criteria

The learner can:

AC1.1 describe the range of groups in own care setting/service:

- a. formal groups for individuals
- b. informal groups for individuals
- c. formal groups for others
- d. informal groups for others
- AC1.2 explain the purpose of groups within own setting/service:
 - a. formal
 - b. informal
- AC1.3 analyse theories which may affect group dynamics

- AC1.4 evaluate how different management styles can affect the formation and maintenance of groups:
 - a. positively
 - b. negatively
- AC1.5 evaluate the impact of own organisational ethos and culture on group experiences within own setting/service
- AC1.6 explain how the following can impact on the establishment of a group within a setting/service:
 - a. styles of facilitation
 - b. setting realistic expectations
 - c. supporting positive behaviours
 - d. managing participation
 - e. energising participants
 - f. monitoring group effectiveness

The learner will:

LO2 understand management approaches to resolve conflicts and tensions within groups

Assessment criteria

The learner can:

AC2.1 evaluate reasons why tensions and conflicts can arise in groups

AC2.2 evaluate different approaches to conflict resolution within groups

Learning outcome

The learner will:

LO3 be able to lead and manage an organisational culture that facilitates effective groups in adult care

Assessment criteria

- AC3.1 lead a team in a way which:
 - a. supports diversity within a group
 - b. enables others to use power and authority constructively
 - c. fosters inclusive practice
- AC3.2 manage the use of power and authority constructively when leading a group
- AC3.3 identify barriers that are impeding a positive group experience
- AC3.4 promote inclusive innovative approaches within the group
- AC3.5 lead a culture that enables:
 - a. active participation of group members
 - b. co-design of group aims and objectives
 - c. group participants to lead own group where possible
 - d. acknowledgement of group outcomes
 - e. integration of group outcomes into service design and delivery

The learner will:

LO4 be able to manage changes to the environment to enhance group experience

Assessment criteria

- AC4.1 manage environmental factors that may affect the experience of groups
- AC4.2 manage compliance with current, relevant legislation and regulation impacting on a group's experiences
- AC4.3 manage work systems and processes to support group experiences
- AC4.4 lead the evaluation of the effectiveness of group experiences

Unit 532

Leading and managing groups in adult care

Supporting Information

Evidence requirements

LO1 and LO2 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO3 and LO4 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- How does the service I manage foster an organisational culture that actively promotes effective groups?
- What kind of training and support do my staff team need to ensure our service achieves positive outcomes for all members of the groups?
- What kinds of integrated services and partnerships with other professionals are currently provided to facilitate the achievement of positive outcomes of group?
- How can I improve services to ensure individuals within the groups feel valued and they have a meaningful part to play?
- How can the group feel engaged and empowered to make choices which foster wellbeing, whilst being safe and inclusive of the needs, wants, wishes and desires of all individuals?
- AC1.1 Groups: can cover any type of group for individuals or others which has a specific theme or purpose. This may be for one occasion or run over a specific time period. This unit does not include team meetings.
- AC1.1, AC3.1 Others: may include:
 - Team members forming a group with a specific purpose
 - Other colleagues forming a group with a specific purpose
 - Families/visitors
 - Informal carers
 - Advocates
- AC1.3: Theories may include:
 - Tuckman
 - Belbin
 - DISC
- AC1.4 Should include:
 - Negotiation and persuasion skills
 - Decision-making and problem-solving skills

AC2.1 Should include:

- Perception and assumption
- Different values and objectives
- Limited resources
- Conflicting roles
- Boundaries in relationships between staff and groups within groups
- AC2.2 May include:
 - Resolution processes
 - Mediation processes
 - The importance of dialogue and communication
 - Managing discrimination; power imbalances, threats
 - Processes for reporting concerns about conflict
- AC3.4 May include:
 - Use of digital technology
 - Co work with other organisations
 - Co-production with group participants
 - Thinking 'outside the box'
- AC4.1 For example:
 - Personal space
 - Safe spaces
 - Shape and size of rooms
 - Formal and neutral areas
 - Use of colour, light and furnishings
 - Equal positions within a physical space
 - Online meetings security
 - Possible risks
- AC4.3 For example:
 - Budget constraints
 - Staff development and training programs
 - Shift patterns
 - Continuity of work force
 - Skill mix
 - Specialist support
 - Informal carers

Suggested supporting resources

www.changingminds.org

www.skillsyouneed.com/ips/group-life-cycle.html www.slideshare.net/knraja50/managing-groups-teams www.mindtools.com/pages/article/improving-group-dynamics.htm www.mindtools.com/pages/article/eight-causes-conflict.htm

Managing services to promote independence for individuals in adult care

Level:	5
Credit value:	3
GLH:	16
Assessment type:	Portfolio of evidence
Aim:	This unit aims to provide learners with the knowledge and skills to lead and manage the promotion of independence for individuals within own setting/service. Learners will explore drivers for change, the responsibilities of advocates and how digital technologies can impact on promoting independence. Learners will demonstrate how to lead and manage systems to support the promotion of independence for individuals.

Learning outcome

The learner will:

LO1 understand drivers for promoting independence and autonomy in care settings/services

Assessment criteria

The learner can:

- AC1.1 analyse drivers which promote independence within care setting/services
- AC1.2 explain how to manage changes to practice when promoting independence
- AC1.3 explain the responsibilities of advocates when promoting autonomy and independence
- AC1.4 describe ways of managing the expectations of others in the promotion of the independence of individuals

Learning outcome

The learner will:

LO2 be able to lead and manage systems for promoting independence

Assessment criteria

The learner can:

AC2.1 manage systems that promote independence for individuals

- AC2.2 lead on training and support for team members to enable them to promote independence for individuals
- AC2.3 lead a culture that values independence and active participation
- AC2.4 obtain feedback from individuals and others regarding practices which promote independence
- AC2.5 evaluate systems and practices which promote independence for individuals in own setting/service

Learning outcome

The learner will:

LO3 understand the role digital technology has on promoting independence

Assessment criteria

The learner can:

- AC3.1 summarise types of digital technologies used to promote independence for individuals
- AC3.2 describe how the use of digital technologies supports the promotion of independence throughout adult care
- AC3.3 evaluate the impact digital technologies have on promoting independence of individuals

Range

AC3.2 must include both:

- positive factors
 - negative factors

Unit 533

Managing services to promote independence for individuals in adult care

Supporting Information

Evidence requirements

LO1 and LO3 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What do I mean by 'independence'?
- How do I assess appropriate levels of independence within my service?
- How do I ensure I meet legislative and statutory frameworks for the promotion of independence?
- Do my team members enable positive risk taking and active participation?
- Do my current systems actively support the promotion of independence?
- How does digital technology support the promotion of independence?
- AC1.1 May include but not limited to:
 - Legislation
 - National and local initiatives
 - Changing demographics
 - Funding
 - Social trends
 - Changes to service delivery and design
- AC1.2 Changes: may include but not limited to:
 - Legislation
 - National and local initiatives
 - Changing demographics
 - Funding
 - Social trends
 - Changes to service delivery and design
- AC1.3 Advocates: may include but not limited to:
 - Independent Advocate
 - Independent Mental Capacity Advocate (IMCA)
 - Independent Mental Health Advocate (IMHA)
- AC1.4 Others: may include but not limited to:

- Carers, loved ones, family, friends of those accessing care and support
- Services
- Colleagues and peers
- Team members
- Managers and supervisors
- Visitors/volunteers
- Advocates
- AC2.1 Systems: may include but not limited to those which support the following:
 - Adhering statutory and legislative requirements
 - Use of technology
 - Ensuring valid consent
- AC2.3 May include but not limited to those which support the following:
 - Meeting individual specific needs
 - person-centred and strength based practice
 - Positive risk-taking
 - Promoting choice and control

Suggested supporting resources

www.ageuk.org.uk autism.org.uk www.mencap.org.uk www.mind.org.uk www.cqc.org.uk www.cqc.org.uk www.skillsforcare.org www.gov.uk www.nhs.uk www.open.edu

Leading operational management in adult care

Level:	5
Credit value:	3
GLH:	18
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop their knowledge and skills of operational management. Learners will consider how operational plans are developed and objectives set which will meet regulatory and legislative requirements. Learners will be able to establish operational objectives within a plan taking account of risk and how to minimise these. Learners will lead on the evaluation of operational plans. Learners will identify risks associated with these plans, complete a risk assessment and evaluate the success of the operational plans. This unit is aimed at those learners that have direct responsibility for operational management within their care setting or service.

Learning outcome

The learner will:

LO1 understand operational management

Assessment criteria

- AC1.1 explain the purpose of operational planning
- AC1.2 explain the difference between strategic management and operational management
- AC1.3 explain current, relevant legislation and regulation supporting operational management
- AC1.4 describe how a manager would go about setting operational objectives
- AC1.5 evaluate a manager's responsibilities in leading and managing operational objectives

Learning outcome

The learner will:

LO2 be able to lead and manage risk associated with operational management

Assessment criteria

The learner can:

- AC2.1 lead on the identification of potential risks within an operational plan
- AC2.2 manage the completion of risk assessments associated with an operational plan

AC2.3 lead on the implementation of plans to minimise risk

Range

AC2.1 contingency arrangements must be included

Learning outcome

The learner will:

LO3 be able to lead and manage the evaluation of operational plans

Assessment criteria

- AC3.1 lead on monitoring the implementation of operational plans
- AC3.2 manage the evaluation of the success of the operational plans
- AC3.3 lead on recommendations arising from the evaluation of the operational plans with:
 - a. internal stakeholders
 - b. external stakeholders

Unit 534

Leading operational management in adult care

Supporting Information

Evidence requirements

LO1 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO2 and LO3 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What is my responsibility for operational management?
- What is an operational objective?
- What is an operational plan?
- Are there any risks to be considered?
- Who are my stakeholders?

LO2 and LO3 Learners are expected to have already ensured that their operational plans meet strategic and organisational objectives.

- AC3.2 May include but not limited to:
 - Success/achievement of operational objectives
 - Areas for review and further development
 - Impact on resources
 - Recommendations to inform future operational planning
 - How the outcomes of operational plans inform future setting/service strategy

This may include, but is not limited to:

- Vision
- Purpose
- Goals
- Resource requirements including associated costs
- Timescales for delivery
- Delegated responsibilities
- Information management
- Monitoring procedures
- Revisions in objectives
- AC3.3 If no improvement can be made the learner must explain why.

Stakeholders include anyone that feeds into the service or setting or receives service or outputs from the setting/service

Suggested supporting resources

www.businessballs.com www.linkedin.com

Coaching and mentoring when leading and managing in adult care

Level:	5
Credit value:	4
GLH:	25
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is for learners to develop their understanding and skills of coaching and mentoring when leading and managing an adult care setting/service. Learners will understand the principles of coaching and mentoring and the establishment of a contract. Learners will be able to demonstrate their skills in leading on the planning and implementation of coaching/mentoring within their setting/service. Learners will be able to demonstrate the importance of gaining feedback to measure the impact of a coaching/mentoring programme.

Learning outcome

The learner will:

LO1 understand coaching and mentoring when leading and managing in an adult care setting/service

Assessment criteria

- AC1.1 analyse the similarities and differences between coaching and mentoring
- AC1.2 describe communication skills which support effective 'coaching' and 'mentoring' approaches
- AC1.3 explain managers role in managing relationships as:
 - a. 'coach'
 - b. 'mentor'
- AC1.4 evaluate organisational factors affecting 'coaching' and 'mentoring' strategies:
 - a. positively
 - b. negatively
- AC1.5 analyse ways to measure the impact of 'coaching' and 'mentoring' for:
 - a. self
 - b. participants
 - c. team members
 - d. organisation

AC1.6 evaluate 'coaching' and 'mentoring' models suitable for use in care settings/services

Range

AC1.5 **Self** to include:

- reflective practice
- self-evaluation

Learning outcome

The learner will:

LO2 understand the use of contracts when planning for 'coaching' and 'mentoring' in care settings/services

Assessment criteria

The learner can:

- AC2.1 describe reasons for developing a contract when undertaking 'coaching' and 'mentoring'
- AC2.2 explain different characteristics of a contract which supports 'coaching/mentoring'
- AC2.3 describe factors which may influence a contract for 'coaching' and 'mentoring'
- AC2.4 describe the process for agreeing a contract for 'coaching' and 'mentoring'

Learning outcome

The learner will:

LO3 be able to lead and manage the planning of coaching and mentoring programmes in adult care settings/services

Assessment criteria

The learner can:

AC3.1 evaluate the need for a coaching and mentoring programme for:

- a. participants' needs
- b. service needs
- AC3.2 select potential, relevant tools and techniques for:
 - a. measuring
 - b. monitoring
 - c. reviewing
 - d, the coaching and mentoring process
- AC3.3 establish a coaching and mentoring contract
- AC3.4 agree a plan for a coaching and mentoring programme with consideration of:
 - a. the participants
 - b. timescales
 - c. environment
 - d. goal identification
 - e. target setting
 - f. organisational/participant objectives
 - g. other stakeholders
- AC3.5 record the plan using digital technologies

Learning outcome

The learner will:

LO4 be able to lead and manage the implementation of coaching and mentoring programmes in adult care settings/services

Assessment criteria

- AC4.1 lead the implementation of the coaching and mentoring programme
- AC4.2 lead on the use communications skills to enhance delivery of coaching and mentoring
- AC4.3 manage the monitoring of the progress of the plan against objectives and goals
- AC4.4 evaluate the impact of coaching and mentoring programmes for:
 - a. self
 - b. participants
 - c. organisation
 - d. individuals
 - e. others
- AC4.5 manage the recording and reporting of outcomes of the programme to relevant stakeholders
- AC4.6 manage feedback from participants on the performance of the coach and mentor

Unit 535

Coaching and mentoring when leading and managing in adult care

Supporting Information

Evidence requirements

LO1 and LO2 - evidence can include assignment tasks, reflective accounts, questioning and professional discussion.

LO3 and LO4 - evidence must include direct observation, which may be supported by witness testimony where applicable. Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation, this will need to be agreed by the EQA.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What is my experience of coaching and mentoring?
- How can coaching and mentoring benefit my service/staff members?
- What types of coaching mentoring programmes would benefit my service?
- When does coaching and mentoring not work?
- AC1.1 A clear definition of the following terms is expected to be included:
 - Coaching
 - Mentoring
- AC1.4 Must include barriers and how to overcome them
- AC3.3 This is to include co production and sign off by participants where required.
- AC4.4 Participants could include staff members, individuals or others participating in the programme

Others may include:

- Team members
- Other colleagues
- Families/visitors
- Informal carers
- Advocates
- AC4.5 Stakeholders include anyone that feeds into the service or setting or receives service or outputs from the setting/service

Suggested supporting resources

www.ukcoaching.org/resources/topics/diagram-infographic/five-benefits-of-reflective-practice www.get.mentoringcomplete.com/blog/kirkpatrick-model-to-evaluate-your-mentoring-program www.mindtools.com/pages/article/newLDR_89.htm

www.cipd.co.uk/knowledge/fundamentals/people/development/coaching-mentoring-factsheet#gref

www.mindtools.com/pages/article/newLDR_86.htm

Unit 536

Level:	5
Credit value:	5
GLH:	28
Assessment type:	Portfolio of evidence
Aim:	The aim of this unit is to develop learners' knowledge, understanding and skills in undertaking a research project. Learners will be required to justify a topic for research, design a research proposal and carry out the research project using identified research methods. Learners will be required to analyse their research findings and make recommendations related to their area of research, identifying potential uses for their research findings within their practice.

Learning outcome

The learner will:

LO1 be able to justify a topic for a research project

Assessment criteria

The learner can:

- AC1.1 identify the area for the research project
- AC1.2 develop the aims and objectives of the research project
- AC1.3 explain ethical considerations that apply to the area of the research project
- AC1.4 complete a literature review of chosen area of research

Learning outcome

The learner will:

LO2 understand how the components of research are used

Assessment criteria

- AC2.1 compare different types of research
- AC2.2 evaluate a range of methods that can be used to collect data
- AC2.3 analyse a range of tools that can be used to analyse data
- AC2.4 explain the importance of validity and reliability of data used within research

Learning outcome

The learner will:

LO3 be able to conduct a research project

Assessment criteria

The learner can:

AC3.1 identify sources of support whilst conducting a research project

AC3.2 create a detailed proposal for a research project

AC3.3 select research methods for the project

AC3.4 develop research questions to be used within the project

- AC3.5 conduct the research using identified research methods
- AC3.6 record and collate data

Learning outcome

The learner will:

LO4 be able to analyse research findings

Assessment criteria

- AC4.1 use methods to analyse the data
- AC4.2 draw conclusions from findings
- AC4.3 reflect how own research findings substantiate initial literature review
- AC4.4 make recommendations related to area of research
- AC4.5 identify potential uses for the research findings within own practice

Unit 536 Undertaking a research project

Supporting Information

Evidence requirements

LO1, LO2. LO3, LO4 - evidence can include assignment tasks, presentation, reflective accounts, questioning and professional discussion.

LO3 (AC3.1 and 3.5), LO4 (AC4.4, 4.5) direct observation of practice may also be considered viable depending on:

- Sources of support for the chosen research project
- Research methods selected
- The methods in which research recommendations and use of research findings are communicated to those who may have been involved in supporting the research proposal/project.

Learners must choose projects in own work setting that are agreed by the line manager.

Learners should be discouraged from choosing projects that require ethics committee approval.

Please refer to the Assessment section of this Handbook for full details.

Unit guidance

Learners should consider the following questions as a starting point to this unit:

- What interests me in respect of a research project within my setting/service?
- Who can I include to support me in my chosen research?
- What research methods could be best suited for my working environment?
- Does a literature review mean I have to only read books?
- What problems might I encounter when undertaking a research project?
- AC1.2 Aims and objectives: the reasons, understanding and methods for conducting the research project.
- AC1.3 Ethical considerations: confidentiality, sensitivity of data, seeking agreements with research participants.
- AC1.4 Literature review: should include:
 - Findings/outcomes of similar previous research (ideally UK based)
 - Information/statistics available
 - Introduction/reference to academic/practitioners, schools of thought/previous lines of enquiry in similar area of research
 - Supports learner's knowledge and understanding
- AC3.2 Research proposal to include:
 - Title of project
 - Brief introduction rationale for the research
 - Aim(s) and objectives
 - Study population research sample
 - Research method(s)
 - Data analysis methods
 - Timetable for completion of the research project

- Participants in the study
- Ethical considerations
- References/bibliography
- Appendices (copy of a questionnaire, interview questions)
- AC3.3 This must be more than one research method.
- AC3.4 These are questions that will be asked directly of others.
- AC3.5 This must be more than one research method.

Appendix 1 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 <u>Centre Document Library</u> on <u>www.cityandguilds.com</u> or click on the links below:

Quality Assurance Standards: Centre Handbook

This document is for all approved centres and provides guidance to support their delivery of our qualifications. It includes information on

- Centre quality assurance criteria and monitoring activities
- Administration and assessment systems
- Centre-facing support teams at City & Guilds/ILM
- Centre quality assurance roles and responsibilities.

The Centre Handbook should be used to ensure compliance with the terms and conditions of the Centre Contract.

Quality Assurance Standards: Centre Assessment

This document sets out the minimum common quality assurance requirements for our regulated and non-regulated qualifications that feature centre assessed components. Specific guidance will also be included in relevant qualification handbooks and/or assessment documentation.

It incorporates our expectations for centre internal quality assurance and the external quality assurance methods we use to ensure that assessment standards are met and upheld. It also details the range of sanctions that may be put in place when centres do not comply with our requirements, or actions that will be taken to align centre marking/assessment to required standards. Additionally, it provides detailed guidance on the secure and valid administration of centre-assessments.

Access arrangements - When and how applications need to be made to City & Guilds

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 Document Library* also contains useful information on such things as:

- Conducting examinations
- Registering learners
- Appeals and malpractice

Appendix 2 Skills for Care and Development Assessment Principles March 2016 extract

1. Introduction

1.1 Skills for Care and Development (SfC&D) is the UK sector skills council (SSC) for social care, children, early years and young people. Its structure for realising the SSC remit is via a partnership of four organisations: Care Council for Wales, Northern Ireland Social Care Council, Scottish Social Services Council and Skills for Care (adult social care only).

1.2 This document sets out the minimum expected principles and approaches to assessment, and should be read alongside qualification regulatory arrangements and any specific requirements set out for particular qualifications. Additional information and guidance regarding assessment can be obtained from Awarding Organisations and from SfC&D partner organisations.

1.3 The information is intended to support the quality assurance processes of Awarding Organisations that offer qualifications in the Sector.

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

http://www.skillsforhealth.org.uk/images/standards/qcf/Assessment%20of%20Competence%2 0-%20Skills%20for%20Health%20Assessment%20Principles.pdf

1.5 Throughout this document the term unit is used for simplicity, but this can mean module or any other similar term.

1.6 In all work we would expect assessors to observe and review learners practising core values and attitudes required for quality practice. These include embracing dignity and respect, rights, choice, equality, diversity, inclusion, individuality and confidentiality. All learners should follow the appropriate standards for conduct2 and all those involved in any form of assessment must know and embrace the values and standards of practice set out in these documents.

1.7 Assessors should ensure that the voices and choices of people who use services drive their practice and that of their learner. This will be apparent throughout the evidence provided for a learner's practice'.

2. Assessment Principles

Good practice dictates the following:

2.1 Learners must be registered with the Awarding Organisation before formal assessment commences.

2.2 Assessors must be able to evidence and justify the assessment decisions that they have made.

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

2.4 Skills-based assessment must include direct observation as the main source of evidence, and must be carried out over an appropriate period of time. Evidence should be naturally occurring and so minimise the impact on individuals who use care and support, their families and carers.

2.5 Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

2.6 Assessment decisions for skills-based learning outcomes must be made by an assessor qualified to make assessment decisions. It is the responsibility of the Awarding Organisation to confirm that their assessors are suitably qualified to make assessment decisions.

2.7 Simulation may not be used as an assessment method for skills-based learning outcomes except where this is specified in the assessment requirements. In these cases, the use of simulation should be restricted to obtaining evidence where the evidence cannot be generated through normal work activity. Video or audio recording should not be used where this compromises the privacy, dignity or confidentiality of any individual or family using services.

2.8 Where the assessor is not occupationally competent in a specialist area, expert witnesses can be used for direct observation where they have occupational expertise in the specialist area. The use of expert witnesses should be determined and agreed by the assessor, in line with internal quality assurance arrangements and Awarding Organisation requirements for assessment of units within the qualification and the sector. The assessor remains responsible for the final assessment decision.

2.9 Where an assessor is occupationally competent but not yet qualified as an assessor, assessment decisions must rest with a qualified assessor. This maybe expressed through a robust countersigning strategy that supports and validates assessment decisions made by as yet unqualified assessors, until the point where they meet the requirements for qualification.

2.10 Witness testimony from others, including those who use services and their families, can enrich assessment and make an important contribution to the evidence used in assessment decisions.

2.11 Assessment of knowledge-based learning outcomes

- may take place in or outside of a real work environment
- must be made by an occupationally qualified and knowledgeable assessor, qualified to make assessment decisions
- must be robust, reliable, valid and current; any assessment evidence using pre-set automated tests, including e-assessment portfolios, must meet these requirements and can only contribute to overall decisions made by the assessor

2.12 It is the responsibility of the Awarding Organisation to ensure that those involved in assessment can demonstrate their continuing professional development, up to date skills, knowledge and understanding of practice at or above the level of the unit.

2.13 Regardless of the form of recording used for assessment evidence, the guiding principle must be that evidence gathered for assessment must comply with policy and legal requirements in relation to confidentiality and data protection. Information collected must be

traceable for internal and external verification purposes. Additionally assessors must ensure they are satisfied the evidence presented is traceable, auditable and authenticated and meets assessment principles.

3 Quality Assurance

3.1 Internal quality assurance is key to ensuring that the assessment of evidence is of a consistent and appropriate quality. Those carrying out internal quality assurance must be occupationally knowledgeable in the unit they are assuring and be qualified to make quality assurance decisions. It is the responsibility of the Awarding Organisation to confirm that those involved in internal quality assurance are suitably qualified for this role.

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

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

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

4 Definitions

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

4.2 **Occupationally knowledgeable**: This means that each assessor should possess, knowledge and understanding relevant to the qualifications and/or units they are assessing. Occupationally knowledgeable assessors may assess at unit level for specialist areas within a qualification, while the final assessment decision for a qualification remains with the lead assessor. This occupational knowledge should be maintained annually through clearly demonstrable continuing learning and professional development.

4.3 **Qualified to make assessment decisions**: This means that each assessor must hold a qualification suitable to support the making of appropriate and consistent assessment decisions. Awarding Organisations will determine what will qualify those making assessment decisions according to the unit of skills under assessment. The Joint Awarding Body Quality Group maintains a list of assessor qualifications,

4.4 **Qualified to make quality assurance decisions**: Awarding Organisations will determine what will qualify those undertaking internal and external quality assurances to make decisions about that quality assurance.

4.5 **Expert witness**: An expert witness must:

- have a working knowledge of the units for which they are providing expert testimony
- be occupationally competent in the area for which they are providing expert testimony

 have EITHER any qualification in assessment of workplace performance OR a work role which involves evaluating the everyday practice of staff within their area of expertise.

4.6 **Witness testimony**: Witness testimony is an account of practice that has been witnessed or experienced by someone other than the assessor and the learner. Witness testimony has particular value in confirming reliability and authenticity, particularly in the assessment of practice in sensitive situations. Witness testimony provides supporting information for assessment decisions and should not be used as the only evidence of skills.

Appendix 3

Digital skills mapping

Digital Skills may be practiced, developed, and/or embedded in the following units, learning outcomes and assessment criteria.

Unit Number	Unit Title	Learning Outcome (LO) and Assessment Criteria (AC)			
Mandator	Mandatory Units				
	Any activities requiring, research, recording, updating or storage of information or use of digital equipment, could provide opportunities for learners to further develop their digital skills.				
500	Understanding leadership and management in adult care	Throughout if using electronic/web-based resources to research different leadership and management theories.			
501	Governance and regulatory processes in adult care	Likely to use digital records in record-keeping associated with preparation for or in response to CQC inspections. CQC guidance and standards are also usually accessed via the CQC website			
502	Decision making in leadership and management within adult care	LO1 AC 1.2 LO2 ACs 2.2, 2.5			
503	Understanding business and resource management for adult care	LO1 ACs 1.2,1.6 LO2 ACs 2.7, 2.9, 2.11			
504	Team leadership in adult care	Any AC which involves the use of electronic records.			
505	Leading team learning and professional development in adult care	LO1 ACs 1.4, 1.5, 1.8 LO2 ACs 2.8, 2.9			
506	Professional supervision in adult care	LO2 ACs 2.2, 2.8, 2.9			
507	Safeguarding in adult care	LO1 ACs 1.4, 1.9 LO2 ACs 2.2, 2.9			
508	Understanding mental capacity and restrictive practice in adult care	LO2 AC 2.4			
509	Leading and managing partnerships in adult care	LO3 ACs 3.1, 3.2 LO4 AC 4.6			
510	Leading practice to manage comments and complaints	LO1 AC 1.2 LO2 AC 2.3			
511	Leading the vision of an adult care setting/service	LO2 ACs 2.2, 2.3, 2.4, 2.5, 2.6			

512	Continuous improvement within the adult care	LO2 ACs 2.1, 2.2, 2.3, 2.4, 2.7, 2.8, 2.9, 2.10, 2.11, 2.12, 2.13
513	Effective communication in leadership and management in adult care	Guidance to embed digital skills throughout
514	Managing the effective handling of information in adult care	LO1 All ACs
515	Leading person-centred practice	LO1 AC 1.3 LO3 ACs 3.1, 3.4, 3.5, 3.6 LO7 AC 7.3
516	Leading a service that promotes health and wellbeing in adult care	LO3 AC 3.4 Any activity which involves researching or using digital materials or record keeping
517	Leading and promoting equality, diversity, inclusion and human rights in adult care	LO1 AC 1.1 LO2 ACs 2.3,2.4, 2.5
518	Leading and managing health and safety in adult care	LO2 AC 2.7 LO3 AC 3.4
519	Continuous development for leaders and managers in adult care	LO3 ACs 3.1, 3.2
520	Personal wellbeing for leaders and managers in adult care services	LO4 AC 4.5
Optiona	I Units	
Any activities requiring, research, recording, updating or storage of information or use of digital equipment, could provide opportunities for learners to further develop their digital skills.		
450	Understanding Independent Advocacy in adult care	LO3 AC 3.2
451	Study skills	LO1 ACs 1.1, 1.2 LO2 ACs 2.1, 2.2, 2.3, 2.4 LO3 AC 3.4
452	Managing transitions in adult care	LO2 AC 2.5
521	Leading and managing end of life care in adult care	LO1 ACs 1.1, 1.4 LO2 AC 2.3 LO3 AC 3.4 LO4 AC 4.4 LO5 AC 5.4
522	Managing support for sexual behaviour and promotion of sexual health in adult care settings/services	LO1 ACs 1.2, 1.3 LO3 AC 3.1 LO4 ACs 4.2, 4.4
523	Leading and managing clinical skills provision in adult care	LO2 ACs 2.1, 2.2 LO3 3.1, 3.3, 3.4

525	Managing recruitment and selection in adult	LO1 AC 1.2
	care	LO2 ACs 2.1, 2.2, 2.3
526	Leading and managing dementia care services in adult care	LO1 ACs 1.3, 1.4
		LO3 ACs 3.3, 3.4
527	Leading and managing support for individuals	LO1 ACs 1.3, 1.6
	with physical disabilities and impairments in adult care	LO2 ACs 2.1, 2.2
528	Leading and managing services for individuals	LO1 AC 1.1
	with learning disabilities and/or autism in adult	LO2 AC 2.2
	care	LO3 ACs 3.1, 3.2, 3.3
529		LO1 AC 1.2
	Leading and managing services for mental	LO2 AC 2.2
	health and wellbeing of individuals in adult care	LO3 AC 3.2
		LO4 ACs 4.1, 4.2, 4.3
530	Leading and managing services for individuals	LO1 AC 1.3
	with profound and complex needs in adult care	LO2 ACs 2.2, 2.3,2.4
531	Managing adult dominiliany core convisoo	LO2 AC 2.2
	Managing adult domiciliary care services	LO3 ACs 3.1, 3.2, 3.4
		LO1 AC 1.3
532	Leading and managing groups in adult care	LO3 AC 3.4
		LO4 All ACs
533	Managing services to promote independence for	LO2 ACs 2.4, 2.5
	individuals in adult care	LO3 All ACs
		LO2 ACs 2.2, 2.3
534	Leading operational management in adult care	LO3 All ACs
535	Coaching and mentoring when leading and	LO3 ACs 3.2, 3.5
	managing in adult care	LO4 ACs 4.4, 4.5, 4.6
536	Undertaking a research project	LO1 AC 1.4
		LO2 ACs 2.2, 2.3
		LO3 All ACs
		LO4 AC 4.1
	•	

Useful contacts

Please visit the Contact Us section of the City & Guilds website, Contact us

City & Guilds

For over 140 years we have worked with people, organisations and economies to help them identify and develop the skills they need to thrive. We understand the life changing link between skills development, social mobility, prosperity and success. Everything we do is focused on developing and delivering high-quality training, qualifications, assessments and credentials that lead to jobs and meet the changing needs of industry.

We partner with our customers to deliver work-based learning programmes that build competency to support better prospects for people, organisations and wider society. We create flexible learning pathways that support lifelong employability, because we believe that people deserve the opportunity to (re)train and (re)learn again and again – gaining new skills at every stage of life, regardless of where they start.

The City & Guilds community of brands includes Gen2, ILM, Intertrain, Kineo and The Oxford Group.

Copyright

The content of this document is, unless otherwise indicated, © The City & Guilds of London Institute and may not be copied, reproduced or distributed without prior written consent. However, approved City & Guilds centres and learners studying for City & Guilds qualifications may photocopy this document free of charge and/or include a PDF version of it on centre intranets on the following conditions:

- centre staff may copy the material only for the purpose of teaching learners working towards a City & Guilds qualification, or for internal administration purposes
- learners may copy the material only for their own use when working towards a City & Guilds qualification

The Standard Copying Conditions (see the City & Guilds website) also apply.

Published by City & Guilds, a registered charity established to promote education and training

City & Guilds of London Institute Giltspur House 5-6 Giltspur Street London EC1A 9DE

cityandguildsgroup.com