



Qualification Specification

ProQual Level 5 Diploma in Leadership & Management in Health & Social Care Services (Northern Ireland)

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Introduction

The ProQual Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland) is a nationally recognised qualification designed for individuals working in, or progressing into, leadership and management roles within the health and social care sector.

The qualification supports the development of the knowledge, skills and professional practice required to lead and manage health and social care services in line with sector standards for quality service provision. The qualification is fully endorsed by the Northern Ireland Social Care Council (NISCC).

This qualification relates to the following National Occupational Standards:

[National Occupational Standards - Health and Social Care](#)

The qualification is unitised and assessed on a pass or fail basis. Learners are required to demonstrate a comprehensive understanding of leadership and management in health and social care services and apply this knowledge within their professional practice.

The qualification is aligned to Level 5 of the Regulated Qualifications Framework (RQF), reflecting an advanced level of knowledge, understanding and professional competence. The RQF comprises levels from Entry Level (Entry 1–3) to Level 8.

The ProQual Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland) aims to provide learners with leadership and management training aligned with sector standards for quality service provision.

The objectives of this qualification are to:

- Develop and evidence leadership and management knowledge, skills and practice within health and social care services.
- Support continuing professional development.
- Provide progression opportunities into leadership and management roles within the sector.

This qualification is approved for delivery only within Northern Ireland.

The awarding body for this qualification is ProQual Awarding Body (ProQual AB). The qualification is regulated by Ofqual, accredited on the Regulated Qualifications Framework (RQF) and published on CCEA's Register of Qualifications.

Qualification Profile

Qualification Title:	ProQual Level 5 Diploma in Leadership & Management in Health & Social Care Services (Northern Ireland)
Qualification Number:	610/7592/9
Level:	5
Total Qualification Time (TQT):	900 Hours 90 Credits
Guided Learning Hours (GLH):	666 Hours
Assessment:	Pass/Fail
	Internally assessed and verified by centre staff
	Externally quality assured by ProQual Verifiers
Qualification Start Date:	23/04/2026
Qualification Review Date:	23/04/2029

Learner Profile

This qualification is suitable for individuals working in roles such as Social Care Manager, Deputy Manager, or Enhanced Social Care Practitioner, who have the opportunity to develop and demonstrate knowledge and skills in the leadership and management of social care services.

The qualification supports learners to engage in continuing professional development (CPD) and provides opportunities for career progression into leadership and management roles within health and social care services.

There are no formal academic entry requirements for this qualification. However, candidates must have the opportunity to demonstrate appropriate leadership and management responsibilities within a health and social care service in Northern Ireland. Centres should carry out an initial assessment to establish a candidate's existing knowledge, skills and experience in order to inform the assessment plan.

Candidates must be aged 19 or over on the day they are registered for the qualification. Centres are reminded that no assessment activity may take place until the candidate has been registered.

Qualification Structure

This qualification is made up of mandatory and optional units.

Learners will be required to achieve a minimum of 90 credits in order to achieve the Diploma.

All mandatory units must be achieved (75 credits), with the remaining credits selected from optional units that align with each learner's service setting, role and responsibilities.

A maximum of one unit may be selected from Group A Optional Units, however there is no requirement to select any credits from Group A Optional Units.

Unit Number	Unit Title	Level	Credits	GLH
Mandatory Units – Candidates must complete all units in this group.				
H/652/1122	Understand Leadership and Management in Health and Social Care	5	5	38
L/652/1125	Leading and Managing Continuous Professional Development in a Health and Social Care Service	5	7	60
K/652/1133	Leading Operational Management in Health and Social Care	5	4	31
M/652/1135	Managing Effective Communication Systems and Practices in Health and Social Care	5	6	50
R/652/1136	Championing Equality, Diversity and Inclusion in Health and Social Care	5	4	30
Y/652/1138	Leading and Managing a Team in Health and Social Care	5	6	40
A/652/1139	Leading and Managing Health and Safety and Risk Management in Health and Social Care	5	4	30
H/652/1140	Leading and Managing Practice that Promotes Safeguarding in Health and Social Care	5	5	35
J/652/1141	Understand Mental Capacity, Deprivation of Liberty and Restrictive Practice Safeguards in Health and Social Care	5	3	25
K/652/1142	Leading and Managing Assessment of Individuals in Health and Social Care	5	4	30
L/652/1143	Leading and Managing Person-Centred and Outcomes-Based Practice with Individuals and Others in Health and Social Care	5	9	65

R/652/1145	Leading and Managing Quality Processes in Health and Social Care	5	9	65
Y/652/1147	Leading and Managing Supervision Practice in Health and Social Care	5	5	39
A/652/1148	Leading and Managing the Appraisal of Staff Performance	5	4	28

Unit Number	Unit Title	Level	Credits	GLH
Group A Optional Units – Candidates may select a maximum of one unit however there is no requirement to select any credits from this group.				
J/652/1150	Understand Independent Advocacy in Health and Social Care Services	5	2	12
K/652/1151	Understand Coaching and Mentoring in Health and Social Care	5	2	12
M/652/1153	Understand Models of Disability	5	2	12

Unit Number	Unit Title	Level	Credits	GLH
Group B Optional Units – Candidates must select remaining credits from this group.				
R/652/1154	Contribute to Recruitment and Selection Processes in Health and Social Care	5	4	31
T/652/1155	Leading and Managing Induction Processes in Health and Social Care	5	4	31
Y/652/1156	Managing Finances in Health and Social Care	5	4	28
A/652/1157	Leading and Managing Infection Prevention and Control within Health and Social Care	5	5	35
D/652/1158	Emergency Planning in Health and Social Care Settings	5	5	35
F/652/1159	Leading a Change Management Process in Health and Social Care	5	6	42
K/652/1160	Leading the Management of Transitions	5	3	21
H/652/1565	Leading and Managing Behavioural Support Strategies for Individuals in Health and Social Care	5	6	50
M/652/1162	Undertaking a Research Project within Health and Social Care Services	5	7	45
R/652/1163	Leading and Managing the Promotion of Active Support in Health and Social Care	5	4	24
J/652/1566	Supporting the Use of Assistive Technology in Health and Social Care	5	4	28

Y/652/1165	Leading and Managing Practice in Supporting Individuals to Take Positive Risks	5	4	28
A/652/1166	Managing Disciplinary Processes in Health and Social Care	5	5	39
D/652/1167	Leading and Managing a Service that provides Support for Individuals with Complex Disabilities	5	4	24

Centre Requirements

Centres must be approved to deliver this qualification. If your centre is not approved to deliver this qualification, please complete and submit the **ProQual Additional Qualification Approval Form**.

Materials produced by centres to support candidates should:

- Enable them to track their achievements as they progress through the learning outcomes and assessment criteria.
- Provide information on where ProQual's policies and procedures can be viewed.
- Provide a means of enabling Internal and External Quality Assurance staff to authenticate evidence.

Centres must have the appropriate equipment to enable candidates to carry out the practical requirements of this qualification.

To offer this qualification centres are mandated to establish the following roles as a minimum, although a single staff member may serve in more than one capacity:

- Centre contact.
- Programme Co-ordinator.
- Assessor.
- Internal Quality Assurer.

Note: An individual cannot serve as an Internal Quality Assurance verifier for their own assessments.

Tutors responsible for delivering this qualification are expected to possess a high degree of occupational competency. They should meet the following criteria:

Occupational Competency: Tutors should demonstrate a clear understanding of the subject matter, including up to-date knowledge of the health and social care sector. This competence should enable them to effectively impart knowledge and practical skills to learners.

Qualifications: Tutors should hold a relevant qualification at least at Level 5. This ensures that they have the necessary academic foundation to provide in-depth guidance and support to learners.

Relevant Industry Experience: In addition to academic qualifications, tutors must have a minimum of three years of relevant occupational competence in the health and social care sector. These requirements collectively ensure that learners receive training from highly qualified and experienced instructors, thereby enhancing the quality and effectiveness of their educational experience in the health and social care sector.

Certification

Candidates who achieve the requirements for this qualification will be awarded:

- A certificate listing all units achieved, and
- A certificate giving the full qualification title:

ProQual Level 5 Diploma in Leadership & Management in Health & Social Care Services (Northern Ireland)

Claiming Certificates

Centres may claim certificates for candidates who have been registered with ProQual and who have successfully achieved the qualification. All certificates will be issued to the centre for successful candidates.

Unit Certificates

If a candidate does not achieve all of the units required for a qualification, the centre may claim a unit certificate for the candidate which will list all of the units achieved.

Replacement Certificates

If a replacement certificate is required a request must be made to ProQual in writing. Replacement certificates are labelled as such and are only provided when the claim has been authenticated. Refer to the Fee Schedule for details of charges for replacement.

Assessment Requirements

Each candidate is required to produce a portfolio of evidence which demonstrates their achievement of all learning outcomes and assessment criteria for each unit.

The portfolio for this qualification is designed to provide a comprehensive view of a learner's skills and knowledge. It is a holistic collection of evidence that may include a single piece of evidence that satisfies multiple assessment criteria. There is no requirement for learners to maintain separate evidence for each assessment criterion.

When learners are creating their portfolio, they should refer to the assessment criteria to understand the evidence required.

It is essential that the evidence in the portfolio reflects the application of skills in real-world situations. Learners should ensure that they provide multiple examples or references whenever the assessment criteria require it.

When evidencing underpinning knowledge, learners can draw from their own organisation or another organisation they are familiar with to provide context.

Portfolio evidence can include:

- Observation report by assessor.
- Assignments/projects/reports.
- Professional discussion.
- Witness testimony.
- Candidate product.
- Worksheets.
- Record of oral and written questioning.
- Recognition of Prior Learning.

Candidates must demonstrate the level of competence described in the units. Assessment is the process of measuring a candidate's skill, knowledge and understanding against the standards set in the qualification.

In accordance with the [Skills for Care and Development Assessment Principles \(November 2025, V1.1\)](#):

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

Simulation is not appropriate for any competence-based assessment within this qualification.

Centre staff assessing this qualification must be **occupationally competent** and qualified to make assessment decisions. Assessors who are suitably qualified may hold a qualification such as, but not limited to:

- ProQual Level 3 Certificate in Teaching, Training and Assessment.
- ProQual Level 3 Award in Education and Training.
- ProQual Level 3 Award in Assessing Competence in the Work Environment. *(Suitable for assessment taking place in a working environment only.)*
- ProQual Level 3 Award in Assessing Vocational Achievement. *(Suitable for assessment taking place in a simulated training environment only.)*

Candidate portfolios must be internally verified by centre staff who are **occupationally knowledgeable** and qualified to make quality assurance decisions. Internal verifiers who are suitably qualified may hold a qualification such as:

- ProQual Level 4 Award in the Internal QA of Assessment Processes and Practice.
- ProQual Level 4 Certificate in Leading the Internal QA of Assessment Processes and Practice.

Occupationally competent means capable of carrying out the full requirements contained within a unit.

Occupationally knowledgeable means possessing relevant knowledge and understanding.

This qualification must be assessed in accordance with the [Skills for Care and Development Assessment Principles, November 2025, V1.1](#), [NISCC requirements](#), and [ProQual Awarding Body](#) assessment guidance.

Enquiries, Appeals and Adjustments

Adjustments to standard assessment arrangements are made on the individual needs of candidates. ProQual's Reasonable Adjustments Policy and Special Consideration Policy sets out the steps to follow when implementing reasonable adjustments and special considerations and the service that ProQual provides for some of these arrangements.

Centres should contact ProQual for further information or queries about the contents of the policy.

All enquiries relating to assessment or other decisions should be dealt with by centres, with reference to ProQual's Enquiries and Appeals Procedures.

Mandatory Units – Learning Outcomes and Assessment Criteria

Title:	Understand Leadership and Management in Health and Social Care			Level:	5
				Credit Value:	5
Unit Number:	H/652/1122	TQT:	50	GLH:	38
Unit Purpose and Aims:	<p>This unit will enable the learner to develop their understanding of leadership and management in order to develop their practice.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD36 - Promote the effectiveness of teams • HSCCLD46 - Lead the effectiveness of teams • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand leadership theories and management styles.	1.1	Distinguish between leadership and management and explain their interdependence.		
		1.2	Summarise at least two theories of leadership, including their underpinning values.		
		1.3	Evaluate the application of a range of management approaches and their potential impact on team performance in different situations.		
2	Understand the skills of leadership and management in health and social care.	2.1	Analyse the skills required to be an: <ul style="list-style-type: none"> a. effective leader b. effective manager 		
		2.2	Explain why both sets of skills are necessary in health and social care.		

2	<i>Continued</i>	2.3	Describe approaches for: <ul style="list-style-type: none"> a. conflict management b. conflict resolution
3	Understand the context of leadership and management in health and social care.	3.1	Summarise a range of external drivers that influence the leadership and management of health and social care and evaluate their impact on service delivery.
		3.2	Evaluate inspection processes, including ways in which information is collected and used to inform inspection activities.
		3.3	Explain how the outcomes of inspection can be used to support service improvement.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1, 2 and 3

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Assessment Criteria 1.3 - Potential impacts may support or be counter-productive to effective team performance and may depend on situation and team member expertise, competence, etc.

Assessment Criteria 2.3 - Conflict management may focus on ongoing management, aiming to minimise the negative/destructive effects of the conflict and keep relationships functional. Conflict resolution may focus on providing a definitive solution, aiming to eliminate the conflict and restore positive relationships.

Assessment Criteria 3.1 - External drivers may include legislation, Government policy, economic environment, technological and research developments, emerging needs/trends; workforce availability; inquiries/serious adverse incidents, media/public opinion, etc.

Assessment Criteria 3.2 - Inspection processes may include those associated with statutory and non-statutory regulators, funders, etc.

Title:	Leading and Managing Continuous Professional Development in a Health and Social Care Service			Level:	5
				Credit Value:	7
Unit Number:	L/652/1125	TQT:	70	GLH:	60
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to use reflective practice and continuous professional development to support their own and others' development in a health and social care service.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD23 - Develop reflective practice • HSCCLD43 - Lead and develop reflective practice • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand the importance of professional development in health and social care.	1.1	Analyse the importance of continually improving knowledge and practice.		
		1.2	Explain potential barriers to professional development and ways to overcome these barriers.		
		1.3	Explain factors to consider when selecting opportunities and activities for keeping knowledge and practice up to date.		
2	Be able to demonstrate commitment to your own professional development.	2.1	Evaluate own knowledge and performance, using standards and benchmarks.		
		2.2	Identify opportunities to support your own professional development, taking account of your own development goals.		
		2.3	Implement an agreed professional development plan, incorporating opportunities for others to provide feedback on your performance across agreed areas of responsibility.		

3	Be able to use research and study skills to support your own professional development.	3.1	Identify your own learning style using a recognised assessment tool.
		3.2	Select and use suitable tools and techniques for own study.
		3.3	Explain the importance of using valid and reliable data sources when researching areas of inquiry in health and social care.
		3.4	Select and use appropriate sources of reference, adhering to academic protocols.
4	Be able to lead learning and professional development practices for team members in your own setting.	4.1	Explain available mechanisms and resources to support learning and professional development for team members in your own setting.
		4.2	Promote a learning culture within your own team.
		4.3	Support team members to plan for and review their professional development goals.
		4.4	Facilitate the professional development of team members to support appropriate and effective delegation.
5	Know how to manage your own wellbeing.	5.1	Explain what is meant by: <ul style="list-style-type: none"> a. holistic wellbeing b. stress c. resilience
		5.2	Describe factors that affect your own wellbeing.
		5.3	Evaluate how your own wellbeing impacts your role performance.
		5.4	Explain strategies that maintain or improve your own wellbeing.
6	Know how to support team members to maintain and improve their own wellbeing.	6.1	Describe indicators that the wellbeing of team members may be deteriorating.
		6.2	Explain the potential impact of stress and low morale on team performance.
		6.3	Provide information to team members on a range of wellbeing supports available and ways to access them.
7	Be able to improve your practice through self-awareness and reflective practice.	7.1	Explain the importance of reflective practice to improve performance.

7	<i>Continued</i>	7.2	Analyse the use of reflective practice in your own setting.
		7.3	Analyse how your own: <ul style="list-style-type: none"> a. values and beliefs b. experiences impact on your own work practices.
		7.4	Use examples from your work environment in order to reflect on how your own practice: <ul style="list-style-type: none"> a. has improved b. may need to improve

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1, 5 and 6

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3, 4 and 7

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Assessment Criteria 3.2 - Tools and techniques may include the Eisenhower Matrix (prioritising); goal setting; active learning techniques, note taking, use of technology, environmental readiness, etc.

Useful Resources:

[Study Skills: Developing Effective Study Strategies.](#)

[15 Effective Study Techniques: Mastering the Art of Learning - BrainMatters](#)

Assessment Criteria 3.4 - Academic protocols include protocols in relation to the appropriate use of material generated through Artificial Intelligence.

Assessment Criteria 4.1 - May include in-house opportunities for shadowing, 'acting up'; formal training in person or online; access to recognised qualifications; funding mechanisms available to support learning, etc. NISCC CiP Framework gives insight to this also. [CiP Framework](#)

Learning Outcome 5: Wellbeing: in this context, wellbeing refers to that of the learner. Wellbeing is a broad concept referring to a person's quality of life, considering health, happiness and comfort. It may include aspects of social, emotional, cultural, spiritual, intellectual, economic, physical, and mental 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.

NB Wellbeing supports - may be internal or external to the learner's organisation. Consideration should include those availed of and those currently not availed of.

Learning Outcome 7: Improved Practice - may include areas of understanding, skills or values that underpin best practice; and align with sectoral standards and agreed ways of working.

Title:	Leading Operational Management in Health and Social Care			Level:	5
				Credit Value:	4
Unit Number:	K/652/1133	TQT:	40	GLH:	31
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to lead operational management in the learner's own setting, through planning, implementation and evaluation.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD46 - Lead the effectiveness of teams • HSCCLD416 - Collaborate with others to support individuals • HSCCLD418 - Lead service delivery planning • HSCCLD420 - Lead on regulatory requirements in the workplace • HSCCLD422 - Lead the use of digital technology 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand operational management in health and social care.	1.1	Explain the difference between strategic management and operational management.		
		1.2	Summarise key operational objectives within your own service.		
		1.3	Evaluate a manager's responsibilities in managing operational objectives in your service.		
2	Be able to develop an operational plan within your own area of responsibility.	2.1	Identify key operational objective(s) as the basis for a specific operational plan.		
		2.2	Summarise the link between the operational plan's objective(s) and the overall service vision and governance framework within which it operates.		
		2.3	Identify potential risks associated with the operational plan and associated mitigation strategies.		
		2.4	Develop contingency arrangements as part of operational planning.		

3	Be able to implement and manage an operational plan.	3.1	Manage the implementation of an operational plan within your own area of responsibility, including: <ul style="list-style-type: none"> a. appropriate use of delegation b. effective use of resources c. appropriate engagement with team members, and others as appropriate
		3.2	Manage risks and challenges that arise during the implementation of an operational plan.
4	Be able to monitor and evaluate an operational plan in your own area of responsibility.	4.1	Monitor the implementation of an operational plan within your own area of responsibility.
		4.2	Evaluate, in conjunction with others, an operational plan against its identified objective(s).
		4.3	Agree, with others, actions for the future as a result of the evaluation of an operational plan.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3 and 4

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Assessment Criteria 1.3 - Evaluation of responsibilities may include consideration of the areas of influence and also limitations associated with your own role in relation to operational management, for example, scope and autonomy in decisions making, stakeholder engagement, budget control, quality management, etc.

Learning Outcome 2, Learning Outcome 3 and Learning Outcome 4 – An identified operational plan will be specific to each service setting and a learner's specific areas of responsibility. The operational plan should be documented, align with a strategic focus, and identify practical outworking, within an identified time scale.

Skills that may need to be applied in developing and implementing operational plans may include: Planning, risk management, delegation, innovation, influencing and persuading, building consensus, communicating, involving others, etc.

Title:	Managing Effective Communication Systems and Practices in Health and Social Care			Level:	5
				Credit Value:	6
Unit Number:	M/652/1135	TQT:	60	GLH:	50
Unit Purpose and Aims:	<p>This unit will enable the learner to develop knowledge and skills to use and manage effective communication and information management systems in health and social care.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD41 - Lead effective communication • HSCCLD412 - Lead the provision of information on services and facilities • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand the importance of effective communication in managing a health and social care service.	1.1	Examine a range of communication methods used in managing a health and social care service.		
		1.2	Critically analyse a range of core communication skills used in managing a health and social care service.		
		1.3	Analyse barriers and challenges to effective communication when managing a health and social care service.		
2	Understand the importance of effective use of information management in a health and social care service.	2.1	Explain the legal and policy requirements in relation to information management, including confidentiality and data protection, in a health and social care service.		
		2.2	Describe best practice guidance in relation to recording, storing and sharing information within and between organisations.		

2	<i>Continued</i>	2.3	Analyse tensions that exist in relation to accessing and sharing information in a health and social care service.
		2.4	Describe consequences of poor practice in information management, for the organisation and others including potential fitness to practice processes.
3	Be able to use effective communication in managing a health and social care service.	3.1	Recognise and address barriers to effective communication within a health and social care service.
		3.2	Support team members to use effective communication in order to achieve positive outcomes for individuals.
		3.3	Demonstrate the effective use of a range of interpersonal communication skills with individuals, team members and others.
4	Be able to use information management systems that meet legal requirements and agreed ways of working.	4.1	Produce and maintain accurate, complete, retrievable and up to date records used in the management of a health and social care service.
		4.2	Utilise records and reports to inform judgments and decisions.
		4.3	Lead the sharing of information with team members and others in a timely manner in line with agreed ways of working.
		4.4	Lead practice to address challenges that arise between maintaining confidentiality and sharing information.
5	Be able to manage the use of digital communication systems in a health and social care service.	5.1	Demonstrate the appropriate and safe use of digital communication systems in managing a health and social care service, in line with agreed ways of working.
		5.2	Support team members to develop their competence in the use of digital communication systems.
		5.3	Monitor the use of digital communication systems in line with agreed ways of working.

6	Be able to improve communication practices that support safe and effective service provision.	6.1	Evaluate the effectiveness of existing communication systems or practices.
		6.2	Propose improvements to communication practices in order to enhance effectiveness.
		6.3	Support the implementation of a revised communication practice.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1 and 2

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 3, 4, 5 and 6

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Title:	Championing Equality, Diversity and Inclusion in Health and Social Care			Level:	5
				Credit Value:	4
Unit Number:	R/652/1136	TQT:	40	GLH:	30
Unit Purpose and Aims:	<p>This unit will enable the learner to develop their knowledge and skills to effectively champion equality, diversity and inclusion in a health and social care service.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD38 - Promote equality, diversity, inclusion and rights of individuals • HSCCLD48 - Lead practice that ensures equality, diversity, inclusion and rights of individuals • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand equality, diversity and inclusion in health and social care.	1.1	Summarise key aspects of current legislation underpinning equality, diversity and inclusion.		
		1.2	Explain the impact of: <ul style="list-style-type: none"> a. historical influences b. current social influences c. current legislation on promoting a culture that embeds equality, diversity and inclusion in service provision.		
		1.3	Evaluate, using examples, challenges or conflicts that may arise when promoting equity in practice.		
2	Understand cultural competence in health and social care.	2.1	Explain what is meant by cultural competence.		
		2.2	Analyse the importance of cultural competence when leading and managing a health and social care service.		

2	<i>Continued</i>	2.3	<p>Explain the potential impacts that:</p> <ul style="list-style-type: none"> a. unconscious bias b. discriminatory behaviours <p>may have on individuals and others.</p>
3	Be able to lead a culture that promotes equality, diversity and inclusion in health and social care.	3.1	Use reflective practice to evaluate your own and others' practice, in relation to equality, diversity and inclusion.
		3.2	Promote equality, diversity and inclusion in practice in your own setting.
		3.3	Work with others to challenge discrimination and/or exclusion in ways that are likely to achieve change and promote positive outcomes.
		3.4	Evaluate the effectiveness of systems and processes to promote equality, diversity and inclusion in your own setting and propose improvements to address gaps or shortfalls.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1 and 2

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcome 3

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Assessment Criteria 1.2 - Historical influences are not confined to a specific timescale. Learners should consider significant themes from history that have influenced equality, diversity, inclusion and human rights in their region.

Assessment Criteria 1.3 - Equity recognises that to reach equal outcomes, individuals need different levels and kinds of support. It ought to be considered in relation to both workforce and individuals who access services.

Assessment Criteria 2.2 - The importance of cultural competence ought to be considered in relation to both workforce and individuals who access services.

Title:	Leading and Managing a Team in Health and Social Care			Level:	5
				Credit Value:	6
Unit Number:	Y/652/1138	TQT:	60	GLH:	40
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to effectively lead and manage a team that provides safe and effective care/support for individuals in the context of their own health and social care service.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD36 - Promote the effectiveness of teams • HSCCLD46 - Lead the effectiveness of teams • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Be able to provide leadership for a team in health and social care.	1.1	Communicate the vision and strategic direction of your service to your own team members.		
		1.2	Use systems and processes to build and maintain the team's commitment to your service and its values.		
		1.3	Encourage creative and innovative ways of working within your team.		
		1.4	Promote a positive values-based culture within the team through your own behaviours.		
2	Be able to support effective teamwork.	2.1	Explain approaches used in your service to support effective teamwork.		
		2.2	Engage team members in agreeing team objectives.		
		2.3	Agree roles and responsibilities, taking account of team members' competence and support needs.		
		2.4	Support team members to work towards agreed team objectives.		

3	Be able to manage team performance.	3.1	Monitor and evaluate progress towards agreed objectives.
		3.2	Provide feedback on performance to the team as a whole and to individual team members.
		3.3	Provide recognition when individual and team objectives have been achieved.
		3.4	Explain how team members are managed when: <ul style="list-style-type: none"> a. their performance does not meet requirements b. there are concerns about their wellbeing and/or resilience
4	Be able to manage appropriate human resource provision in a health and social care service.	4.1	Describe factors that influence staffing requirements and patterns in your own service.
		4.2	Manage staffing schedules and patterns and adjust them to meet changing needs and circumstances in your own service.
		4.3	Evaluate the effectiveness of the working schedules and patterns and recommend improvements as a result of evaluation
		4.4	Review the effectiveness of approaches to human resource management in maintaining a safe and effective service.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1, 2, 3 and 4

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Title:	Leading and Managing Health and Safety and Risk Management in Health and Social Care			Level:	5
				Credit Value:	4
Unit Number:	A/652/1139	TQT:	40	GLH:	30
Unit Purpose and Aims:	<p>This unit will enable the learner to develop knowledge and skills to lead and manage health and safety and risk management in a health and social care service.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD42 - Lead a healthy and safe workplace • HSCCLD44 - Lead the safeguarding of individuals and others • HSCCLD415 - Lead the development of risk management plans • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand the current legislative framework and organisational health and safety and risk management policies and procedures.	1.1	Summarise key aspects of the legislative framework for health and safety and risk management in health and social care.		
		1.2	Analyse how existing policies and procedures in your own work setting meet health and safety and risk management requirements.		
2	Be able to lead compliance with health and safety requirements.	2.1	Demonstrate your own compliance with health and safety policies and procedures, in accordance with your role and responsibilities.		
		2.2	Support team members to comply with organisational health and safety policies and procedures relevant to their role and responsibilities.		
		2.3	Explain actions to take when health and safety policies and procedures are not being complied with.		

2	<i>Continued</i>	2.4	Complete records and reports on health and safety, in accordance with agreed ways of working.
		2.5	Evaluate the implementation of health and safety procedures in your own setting and identify actions to improve practice.
3	Be able to lead the implementation of policies and procedures to manage risks in health and social care.	3.1	Describe your own responsibilities to assess and manage risk.
		3.2	Explain methods and tools available to inform and undertake risk management activities in your own setting.
		3.3	Work with team members and others to: <ul style="list-style-type: none"> a. identify and assess risks b. manage risks to mitigate their likelihood and impact on individuals and service provision
		3.4	Evaluate the use of risk management processes in your own setting and identify actions to improve practice.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2 and 3

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.

- 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.

Assessment Criteria 1.1 - Legislative framework ought to include that which relates to:

- Overarching health and safety.
- Fire safety.
- Hazardous substances.
- Moving and handling equipment or objects.
- Infection prevention and control.
- Risk management.

Learning Outcome 2 and Learning Outcome 3: Where a service setting is required by regulation to ensure that premises and grounds are safe, well maintained and remain suitable for their stated purpose, a learner's evidence **must** relate to premises, grounds, furniture/fittings/equipment, as well as more general safe and healthy working practices.

Assessment Criteria 3.1 - Responsibilities may include infection prevention and control.

Assessment Criteria 3.3 - Risks may include those that are particular to a specific setting/service.

Title:	Leading and Managing Practice that Promotes Safeguarding in Health and Social Care			Level:	5
				Credit Value:	5
Unit Number:	H/652/1140	TQT:	50	GLH:	35
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to lead and manage practice that promotes safeguarding in a health and social care service setting.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD44 - Lead the safeguarding of individuals and others • HSCCLD416 - Collaborate with others to support individuals • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand legislation and policies that underpin safeguarding procedures in health and social care.	1.1	Summarise the current legislative and policy frameworks that underpin the safeguarding of: <ul style="list-style-type: none"> a. adults b. children 		
		1.2	Analyse how investigations into serious failures to uphold individuals' rights to live free from abuse and neglect have impacted on policy and procedures for safeguarding.		
		1.3	Describe the role of key agencies and associated roles of those involved in safeguarding procedures in relation to: <ul style="list-style-type: none"> a. adults b. children 		
		1.4	Describe the operational management responsibilities for safeguarding, in your own service setting, in relation to: <ul style="list-style-type: none"> a. individuals b. team members and others 		

2	Be able to lead the implementation of policies, procedures and practices to support safeguarding in health and social care.	2.1	Support team members to develop the knowledge and skills they need to safeguard individuals at risk.
		2.2	Ensure team members know actions to take when there are concerns that an individual has been, or is in danger of being harmed or abused, including whistleblowing.
		2.3	Analyse tensions/challenges in maintaining the safety of team members and others, with duty of care to individuals who are recognised as being a potential risk to adults or children.
		2.4	Monitor compliance with requirements for safeguarding and take action where these are not being adhered to.
		2.5	Use management processes with team members to review compliance with safeguarding requirements and as support when engaged in safeguarding incidents or processes.
3	Be able to lead and manage practice that safeguards individuals from harm and abuse.	3.1	Promote a culture where the individual's needs and choices are balanced with expectations of safeguarding protocols.
		3.2	Promote practices that encourage and empower individuals at risk, and those who are important to them, to share concerns.
		3.3	Follow procedures to report suspected or disclosed incidents of harm or abuse in accordance agreed ways of working.
		3.4	Ensure that records and reports meet legislative and organisational requirements.
		3.5	Work collaboratively with others to achieve the best outcomes for an individual at risk.
		3.6	Monitor the effectiveness of systems to safeguard individuals and take action to improve practice in your own service setting.
		3.7	Reflect on how to adapt your own approach to safeguarding, in order to improve your own practice.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2 and 3

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Assessment Criteria 2.5 - Management processes may include debriefs, team meetings, supervisions, informal discussions, shared learning, etc.

Title:	Understand Mental Capacity, Deprivation of Liberty and Restrictive Practice Safeguards in Health and Social Care			Level:	5
				Credit Value:	3
Unit Number:	J/652/1141	TQT:	30	GLH:	25
Unit Purpose and Aims:	<p>This unit will enable the learner to understand legislation and practice requirements in relation to mental capacity and deprivation of liberty. It will also enable the learner to understand their role in upholding the rights of individuals and the appropriate use of restrictive practices in health and social care.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD38 - Promote equality, diversity, inclusion and rights of individuals • HSCCLD44 - Lead the safeguarding of individuals and others • HSCCLD48 - Lead practice that ensures equality, diversity, inclusion and rights of individuals • HSCCLD416 - Collaborate with others to support individuals • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand mental capacity and consent in health and social care.	1.1	Summarise current legislation relating to an individual's capacity.		
		1.2	Explain how codes of practice specific to mental capacity: <ul style="list-style-type: none"> a. protect individuals who may lack capacity b. provide safeguards around decisions in relation to deprivation of liberty for individuals who lack the capacity to make those decisions for themselves 		

1	<i>Continued</i>	1.3	Outline the support available when an individual's mental capacity needs to be assessed.
		1.4	Describe ways of working in your service area, which support individuals' ability to provide valid consent.
2	Understand the use of restrictive practice in health and social care.	2.1	Explain what is meant by the term restrictive practice.
		2.2	Summarise key aspects of the legal and policy frameworks and their implications for the use of restrictive practice.
		2.3	Analyse situations where restrictive practices might be appropriate and proportionate responses, in accordance with agreed ways of working.
		2.4	Describe operational management responsibilities in relation to restrictive practices in your service area.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1 and 2

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Assessment Criteria 2.3 - Analysis ought to consider the potential positive and/or negative impact for individuals who access services and others (such as team members, carers/families, other professionals, etc.).

Assessment Criteria 2.4 - Operational management responsibilities may include maintenance and review of DoLs and restrictive practices registers; care/support plan reviews; risk management processes; reporting procedures for unauthorised implementation of restrictive practices. Some circumstances may require a renegotiation of service suitability for an individual.

Title:	Leading and Managing Assessment of Individuals in Health and Social Care			Level:	5
				Credit Value:	4
Unit Number:	K/652/1142	TQT:	40	GLH:	30
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to lead and manage assessment of individuals in the context of their own health and social care service.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD414 - Lead the assessment process with individuals Lead the assessment process with individuals • HSCCLD416 - Collaborate with others to support individuals • HSCCLD418 - Lead service delivery planning • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand assessment processes in health and social care.	1.1	Explain processes used for initial assessment in your service, including: <ul style="list-style-type: none"> a. criteria b. timescales c. roles and responsibilities 		
		1.2	Describe the range and purpose of different types of assessment used within your service.		
		1.3	Explain how collaborative working can positively support the assessment process.		
2	Be able to lead and manage assessment processes in health and social care.	2.1	Ensure that team members are appropriately trained and competent to carry out assessment, as appropriate, and within the boundaries of their roles.		

2	<i>Continued</i>	2.2	<p>Manage assessment processes to ensure:</p> <ul style="list-style-type: none"> a. timeliness and compliance with operational requirements b. active participation of the individual, and others as appropriate, so that the needs and preferences of the individual are accurately reflected in the assessment
		2.3	<p>Monitor assessment processes and outcomes against agreed quality indicators.</p>
3	Be able to manage the outcomes of assessment.	3.1	<p>Demonstrate the use of recording and information management processes to support assessment.</p>
		3.2	<p>Use evidence benchmarked against identified criteria, to support an assessment decision.</p>
		3.3	<p>Communicate assessment decisions in a timely manner.</p>
		3.4	<p>Describe challenges or conflicts that may arise during the assessment process; and approaches to resolve these.</p>
		3.5	<p>Implement interventions and/or referrals which will contribute to positive outcomes for the individual.</p>
4	Be able to review the effectiveness of assessment processes in health and social care.	4.1	<p>Use reflective practice to evaluate the assessment processes used in your service.</p>
		4.2	<p>Outline actions to address and improve assessment processes.</p>

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3 and 4

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Title:	Leading and Managing Person-Centred and Outcomes-Based Practice with Individuals and Others in Health and Social Care			Level:	5
				Credit Value:	9
Unit Number:	L/652/1143	TQT:	90	GLH:	65
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to lead and manage person-centred and outcomes-based practice with individuals and others in the context of their own health and social care service.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD415 - Lead the development of risk management plans • HSCCLD414 - Lead the assessment process with individuals • HSCCLD416 - Collaborate with others to support individuals • HSCCLD417 - Lead partnership working arrangements • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand person-centred and outcomes-based practice in health and social care.	1.1	Summarise the nature of: <ul style="list-style-type: none"> a. person-centred practice b. active participation 		
		1.2	Explain the nature of outcomes-based practice and how it can: <ul style="list-style-type: none"> a. be supported by a strengths-based approach b. positively impact individuals 		

2	Understand the importance of collaborative working and co-production to support person-centred and outcomes-based practice.	2.1	<p>Explain the importance of:</p> <ul style="list-style-type: none"> a. co-production b. collaboration <p>with individuals and others in enabling individuals to achieve their desired outcomes.</p>
		2.2	Analyse potential barriers or conflicts that may arise when working collaboratively with other professionals and agencies.
		2.3	Evaluate the use of a range of communication methods to support collaborative working with other professionals and agencies.
3	Be able to support effective relationships with individuals, and carers/families as appropriate.	3.1	Model open, respectful and supportive relationships with individuals, and carers/families as appropriate.
		3.2	Support the integration of co-production processes within your own setting.
		3.3	Implement measures to ensure that individuals, and carers/families as appropriate, are aware of their rights in relation to service provision.
		3.4	<p>Use appropriate approaches to address conflicts/dilemmas that may arise between individuals and:</p> <ul style="list-style-type: none"> a. team members b. others
4	Be able to work collaboratively with professionals and other agencies to support person-centred and outcomes-based practice.	4.1	Explain own role and responsibilities in working with professionals and other agencies.
		4.2	Implement agreed procedures to build effective working relationships with professionals and other agencies.
		4.3	Agree common objectives when working with professionals and other agencies within the boundaries of your own role and responsibilities.
		4.4	Address conflicts/challenges that may arise with professionals or other agencies, ensuring the best interests of individuals remain central.

5	Be able to lead practice that promotes person-centred practice and positive outcomes for individuals.	5.1	Facilitate the development of group activity plans and/or individual care/support plans, ensuring they reflect: <ul style="list-style-type: none"> a. the active participation of individuals, and others as appropriate b. individuals' preferences, wishes, strengths and needs
		5.2	Promote a culture among team members of adopting a holistic approach to well-being, in day-to-day practice with groups and/or individuals, as appropriate.
		5.3	Support individuals and others to adopt a balanced approach to risk taking, that reflects: <ul style="list-style-type: none"> a. the potential benefits to individuals of positive risk taking b. individuals' rights c. the views and concerns of others
		5.4	Manage resources to support person-centred practice and positive outcomes for groups and/or individuals, as appropriate.
		5.5	Monitor and review progress towards the achievement of identified outcomes.
6	Be able to review person-centred practice and positive outcomes for individuals.	6.1	Use reflective practice to evaluate the extent to which systems and processes promote person-centred practice and positive outcomes for individuals in your service.
		6.2	Outline improvements to enhance person-centred and outcomes-based practice in your service.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1 and 2

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 3, 4, 5 and 6

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Assessment Criteria 1.2 - A strengths-based approach values the capacity, skills, knowledge, connections and potential in individuals and communities. It is holistic, however, its focus on strengths does not mean ignoring challenges. Practitioners working in this way have to work in collaboration - supporting people to do things for themselves, thereby becoming co-producers of support, rather than passive consumers of support.

Assessment Criteria 2.1 - Collaboration may include ways in which integrated services and local community provision may cross traditional boundaries to achieve better outcomes for individuals.

Learning Outcome 5 - Where a learner's service setting is required by regulation to offer a structured programme of varied activities and events, Learning Outcome 5 **must** be evidenced in relation to both groups and individuals.

Assessment Criteria 5.2 - Practice that supports a holistic approach to well-being may include support to maintain or develop physical, mental health or relationships through social inclusion; support to engage in activities that are safe, enjoyable, purposeful, age and culturally appropriate and responsive to changing needs and preferences, etc.

Title:	Leading and Managing Quality Processes in Health and Social Care			Level:	5
				Credit Value:	9
Unit Number:	R/652/1145	TQT:	90	GLH:	65
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to lead and manage the implementation of a range of quality processes in the context of their own health and social care setting.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD418 - Lead service delivery planning • HSCCLD419 - Lead quality assurance assessments • HSCCLD420 - Lead on regulatory requirements in the workplace • SCDCPC302 - Contribute to the effective performance of your organisation • SCDCPC402 - Promote compliance with organisational responsibility 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand the context of leading and managing quality processes in health and social care.	1.1	Explain the concepts of: <ul style="list-style-type: none"> a. quality assurance b. quality improvement 		
		1.2	Analyse how legislative and regulatory frameworks inform quality management, including the roles and Standards associated with Regulatory Bodies applicable to you and your service.		
		1.3	Analyse ways in which relevant reports have informed quality management in health and social care.		
		1.4	Describe three methods that can be used to measure the achievement of quality standards.		
		1.5	Explain how quality standards relate to performance management of team members.		

2	Be able to lead and manage the implementation of quality assurance processes in order to improve service provision.	2.1	Provide information to team members and others to develop their knowledge of quality standards.
		2.2	Support team members to carry out their roles and responsibilities in implementing quality standards.
		2.3	Implement systems and processes to monitor and measure the progress of the service against agreed quality indicators.
		2.4	Record and report on findings in relation to the quality-of-service provision, benchmarked against the agreed quality indicators.
		2.5	Agree with others plans to improve the quality-of-service provision in identified areas, in order to meet performance indicators.
3	Be able to lead practice that responds to compliments, concerns and complaints, in order to improve service provision.	3.1	Promote a culture where compliments, concerns and complaints are recognised as a tool to improve service provision.
		3.2	Ensure accessible information and support is in place to enable and encourage individuals and others to raise compliments, concerns and complaints.
		3.3	Support team members to understand procedures and their responsibilities to ensure compliments, concerns and complaints are recorded and actioned appropriately.
		3.4	Undertake routine reviews of compliments, concerns and complaints to identify trends, areas of good practice and areas for improvement within the service provision.
		3.5	Implement procedures to record and respond to concerns or complaints within agreed time frames.
		3.6	Work with others to implement learning derived from compliments, concerns or complaints, to improve the quality-of-service provision.
4	Be able to lead the delivery of a quality improvement plan in order to improve service provision.	4.1	Work with team members and others to identify an area of service provision for quality improvement.
		4.2	Produce a quality improvement plan outlining the necessary steps to achieve the identified quality improvement outcomes.

4	<i>Continued</i>	4.3	Implement the quality improvement plan in collaboration with team members and others and in line with agreed ways of working.
		4.4	Monitor the implementation of the quality improvement plan.
		4.5	Evaluate the impact of the quality improvement plan on the service provision.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3 and 4

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Assessment Criteria 1.3 - Relevant reports may include research evidence, inquiries, serious case reviews, learning from adverse incidents, investigations, fitness to practice reports, etc.

Learning Outcome 4 - A quality improvement plan may derive from internal or external reviews of service provision.

Title:	Leading and Managing Supervision Practice in Health and Social Care			Level:	5
				Credit Value:	5
Unit Number:	Y/652/1147	TQT:	50	GLH:	39
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to lead and manage supervision practice in the context of their own health and social care service.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD317 - Promote learning and development or employment opportunities for individuals • HSCCLD340 - Supervise and support team members • HSCCLD36 - Promote the effectiveness of teams • HSCCLD43 - Lead and develop reflective practice • HSCCLD46 - Lead the effectiveness of teams • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand the purpose of supervision in health and social care.	1.1	Analyse the principles, scope and purpose of supervision.		
		1.2	Outline two theories and/or models of supervision.		
		1.3	Explain how the requirements of legislation, Standards, policies and procedures influence supervision.		
		1.4	Explain how findings from relevant reports can be used within supervision to promote improved practice.		
		1.5	Explain how supervision can protect the: <ul style="list-style-type: none"> a. individual b. supervisor c. supervisee 		

2	Understand how supervision can inform performance management.	2.1	Analyse how supervision supports effective performance through review of key performance indicators.
		2.2	Explain why the wellbeing of the supervisee should be included within supervision.
3	Be able to undertake preparation for supervision with supervisees.	3.1	Agree with at least two supervisees confidentiality, boundaries, roles and accountability within the professional supervision process.
		3.2	Agree with at least two supervisees the frequency and location of supervision.
		3.3	Agree with at least two supervisees' sources of evidence that can be used to inform supervision.
		3.4	Agree with at least two supervisees' actions to be taken in preparation for supervision.
4	Be able to provide effective supervision.	4.1	Explain factors which may result in a power imbalance during supervision and ways to address these.
		4.2	Support at least two supervisees to reflect on their own practice.
		4.3	Provide positive feedback about the achievements of the supervisees.
		4.4	Provide constructive feedback that can be used to improve performance.
		4.5	Support the supervisees to identify their own development needs.
		4.6	Review and revise supervision targets to meet the identified objectives of the work setting.
		4.7	Support the supervisees to explore different methods of addressing challenging situations.
		4.8	Record agreed supervision decisions/outcomes.
5	Be able to manage conflict situations during supervision.	5.1	Summarise two examples from own practice of managing conflict situations within supervision.
		5.2	Reflect on your own practice in managing conflict situations experienced during supervision process.

6	Be able to review supervision practice in your own service.	6.1	Use examples in order to reflect on how supervision practice is planned and implemented in your setting; and ways in which it could be improved.
		6.2	Reflect on how to adapt your own approach to supervision, in order to improve your own practice.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1 and 2

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 3, 4, 5 and 6

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Assessment Criteria 1.4 - Relevant reports may include research evidence, inquiries, serious case reviews, learning from adverse incidents, investigations, fitness to practice reports, etc.

Title:	Leading and Managing the Appraisal of Staff Performance			Level:	5
				Credit Value:	4
Unit Number:	A/652/1148	TQT:	40	GLH:	28
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to effectively lead and manage the appraisal of staff performance in a health and social care setting.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD317 - Promote learning and development or employment opportunities for individuals • HSCCLD341 - Provide assessment on the performance of others • HSCCLD36 - Promote the effectiveness of teams • HSCCLD43 - Lead and develop reflective practice • HSCCLD46 - Lead the effectiveness of teams • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand the nature of and policies that underpin the appraisal of staff performance.	1.1	Research and evaluate two models of staff appraisal, exploring their potential effectiveness and application in a health and social care setting.		
		1.2	Distinguish between the purposes of appraisal and disciplinary processes.		
		1.3	Summarise agreed ways of working for the appraisal of staff performance in your service setting and how they are used to inform each of the following: <ul style="list-style-type: none"> a. achievement of objectives b. overall performance c. future objectives 		
		1.4	Explain how to minimise power imbalances within the appraisal process.		

2	Be able to lead preparation for appraisals.	2.1	Confirm with at least two appraisees the objectives against which performance will be appraised.
		2.2	Identify with the appraisees the actions they need to take to prepare for their appraisal.
		2.3	Gather evidence from a range of sources in relation to the appraisees' achievement of objectives.
		2.4	Prepare documentation for appraisals in line with agreed ways of working.
3	Be able to lead and facilitate appraisal meetings.	3.1	Demonstrate how to prepare the environment for appraisal meetings.
		3.2	Support at least two appraisees to engage in an evaluation of their performance over the past year to include: <ul style="list-style-type: none"> a. areas of practice which have met or exceeded standards b. areas for development
		3.3	Provide feedback to appraisees on their performance over the past year to include: <ul style="list-style-type: none"> a. areas of practice which have met or exceeded standards b. areas for development
		3.4	Identify and agree with appraisees work objectives for the forthcoming year.
		3.5	Identify and agree with appraisees professional development plans for the forthcoming year.
		3.6	Record the appraisals in line with agreed ways of working.
4	Be able to review appraisal processes and practice in your own service.	4.1	Use examples in order to reflect on how appraisal practice is planned and implemented in your setting, and ways in which it could be improved.
		4.2	Reflect on how to adapt your own approach to appraisal, in order to improve your own practice.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3 and 4

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Learning Outcome 1 - Appraisal usually occurs on a yearly basis, involving a meeting between a staff member and a more senior member of staff. It usually entails a reflection on the past year, a recognition of the staff member's contribution to the team/service and setting objectives for the following year. Objectives are likely to include both personal objectives and organisational objectives.

Appraisals ought to be participative, fair and evidence-based, as well as constructive, supportive and developmental in focus.

Group A Optional Units – Learning Outcomes and Assessment Criteria

Title:	Understand Independent Advocacy in Health and Social Care Services			Level:	5
				Credit Value:	2
Unit Number:	J/652/1150	TQT:	20	GLH:	12
Unit Purpose and Aims:	This unit will enable the learner to develop their knowledge and understanding of independent advocacy within health and social care services.				
	<p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD327 - Work with individuals to develop and maintain relationships • HSCCLD49 - Advocate with and on behalf of individuals 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand Advocacy in health and social care.	1.1	Define what is meant by advocacy.		
		1.2	Explain key principles underpinning independent advocacy.		
2	Understand the role of Independent Advocacy in health and social care.	2.1	Summarise the regulatory requirements associated with independent advocacy in health and social care.		
		2.2	Analyse examples where independent advocacy may be appropriate and beneficial for individuals in your own service setting.		
		2.3	Evaluate managerial responsibilities in your own service setting in relation to the role of independent advocates.		

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1 and 2

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Learning Outcome 1 - Independent Advocacy - Advocacy is taking action to help people say what they want, secure their rights, represent their interests and obtain services they need. Advocates and advocacy schemes work in partnership with the people they support and take their side. Advocacy promotes social inclusion, equality and justice. Independent advocacy is used when the advocate is operationally independent from the service provider. (Advocacy Charter produced by Action for Advocacy)

<https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/care-standards-nursing-homes.pdf>

Assessment Criteria 2.1 - Regulatory requirements include those related to Minimum Standard requirements associated with specific service areas.

Title:	Understand Coaching and Mentoring in Health and Social Care			Level:	5
				Credit Value:	2
Unit Number:	K/652/1151	TQT:	20	GLH:	12
Unit Purpose and Aims:	<p>This unit will enable the learner to develop their understanding of coaching and mentoring in health and social care.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD317 - Promote learning and development or employment opportunities for individuals • HSCCLD36 - Promote the effectiveness of teams • HSCCLD43 - Lead and develop reflective practice 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand coaching and mentoring in health and social care settings.	1.1	Distinguish between coaching and mentoring, including their similarities and differences.		
		1.2	Analyse how coaching and mentoring can contribute to creating a positive learning culture.		
		1.3	Justify the importance of reflective practice and supervision to support the effectiveness of coaching or mentoring.		
2	Know how coaching and mentoring may be applied when leading and managing in health and social care.	2.1	Describe examples where: <ul style="list-style-type: none"> a. coaching b. mentoring may be the best or most suitable intervention to support a team member in your service setting.		
		2.2	Evaluate the potential management implications of supporting coaching and mentoring within your service setting.		

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1 and 2

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Assessment Criteria 1.1 - Similarities and differences may include consideration of specific models; purposes, contracting, time scales, areas of focus, levels of expertise and direction, skills usage, structure etc. It may also consider use of external/internal personnel, use of AI, etc.

Assessment Criteria 1.2 - A learning culture is one that embeds learning into how things are done and requires organisational systems, values and resources to be aligned with continual learning at individual, team and organisational levels. Potential barriers may include time, resources, attitudes, values, lack of training as a coach or mentor, ownership. Barriers may be individual or organisational.

Assessment Criteria 2.1 - Examples may relate to improving individual or organisational performance, personal effectiveness, motivation and confidence, succession planning, etc.

Individual development needs ought to be clearly stated for each example, as well as the desired outcomes.

Assessment Criteria 2.2 - Management implications may include strategies necessary to address barriers identified in Assessment Criteria 1.2.

Title:	Understand Models of Disability			Level:	5
				Credit Value:	2
Unit Number:	M/652/1153	TQT:	20	GLH:	12
Unit Purpose and Aims:	<p>This unit will enable the learner to develop their understanding of models of disability and ways to promote best practice.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD317 - Promote learning and development or employment opportunities for individuals • HSCCLD43 - Lead and develop reflective practice • HSCCLD46 - Lead the effectiveness of teams 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand theoretical models of disability.	1.1	Summarise at least two theoretical models of disability, including their underlying assumptions and principles.		
		1.2	Compare and contrast the strengths and limitations of the selected models of disability.		
2	Know how models of disability may be applied in health and social care.	2.1	Analyse ways in which at least two models of disability may influence service delivery in a health and social care setting.		
		2.2	Describe and justify ways to raise awareness of a model of disability applicable to your own service setting, including how to address its: <ul style="list-style-type: none"> a. alignment with organisational values b. potential impact on individuals 		

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1 and 2

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Assessment Criteria 1.1 - Models of disability may include the medical, social, biopsychosocial, economic, social identity, charity models, etc.

Assessment Criteria 2.1 - Influence on service delivery may include:

- Agreed ways of working that promote or minimise active participation, empowerment, advocacy.
- Working practices and 'culture', etc.

Assessment Criteria 2.2 - Ways to raise awareness may include bespoke training, supervision, team meetings, policy review, shared reflective learning from incidents, reports, etc.

Awareness may focus on deepening understanding, challenging assumptions, embedding reflective practice, promoting a rights based and anti-discriminatory approach in practice, etc.

Group B Optional Units – Learning Outcomes and Assessment Criteria

Title:	Contribute to Recruitment and Selection Processes in Health and Social Care			Level:	5
				Credit Value:	4
Unit Number:	R/652/1154	TQT:	40	GLH:	31
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to recruit and select staff within a health and social care setting.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD339 - Promote the recruitment of team members • HSCCLD46 - Lead the effectiveness of teams 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand recruitment and selection in health and social care.	1.1	Analyse current workforce challenges in recruiting staff in health and social care.		
		1.2	Describe strategies to promote health and social care as an attractive career choice, including the roles of Government and Regulators.		
		1.3	Explain the impact of legislation and regulation on the recruitment and selection of staff in health and social care.		
		1.4	Summarise key principles underpinning recruitment and selection in health and social care.		
		1.5	Describe circumstances when it may be necessary to seek specialist expertise in relation to recruitment and selection.		
2	Be able to contribute to a recruitment process in your own service setting.	2.1	Review a job description and personnel specification in order to meet organisational requirements.		

2	<i>Continued</i>	2.2	Work with others to agree the criteria and methods that will be used in a recruitment and selection process.
		2.3	Explain the role of individuals and/or others, as appropriate, in a recruitment process in your own service setting.
3	Be able to participate in a selection process in your own service setting.	3.1	Use agreed processes and criteria to assess candidates.
		3.2	Record the selection process in accordance with agreed ways of working.
4	Be able to review the recruitment and selection process in your own service setting.	4.1	Use examples in order to reflect on how recruitment and selection processes are implemented and ways in which they could be improved.
		4.2	Reflect on how to develop your own practice in relation to recruitment and selection in your own service setting.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3 and 4

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Assessment Criteria 1.4 - Principles may include merit (based on the candidate's knowledge, skills, abilities, competencies and qualifications); fairness (processes are robust and auditable); equity (free from discrimination, prejudice or bias); consistency (compliant with legislation and regulation); transparency (use of clear criteria in the personnel specification and job description). In addition, selection ought to ensure the values of the candidate align with the values of the organisation.

Assessment Criteria 2.3 - Others may include service user representatives, advocates, carers, trade union personnel, specialist professional personnel etc.

Title:	Leading and Managing Induction Processes in Health and Social Care			Level:	5
				Credit Value:	4
Unit Number:	T/652/1155	TQT:	40	GLH:	31
Unit Purpose and Aims:	<p>This unit will enable the learner to develop their knowledge and skills to lead and manage induction processes in their own health and social care setting.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD43 - Lead and develop reflective practice • HSCCLD46 - Lead the effectiveness of teams • HSCCLD412 - Lead the provision of information on services and facilities • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand the purpose of staff induction for health and social care settings.	1.1	Explain why a planned and structured induction process is important for the following: <ul style="list-style-type: none"> a. practitioners b. individuals c. organisations 		
		1.2	Summarise information and resources available to support effective induction.		
		1.3	Analyse the role of the induction process in supporting practitioners to understand the values and agreed ways of working within a work setting.		
2	Be able to plan and develop the induction process in your own health and social care setting.	2.1	Summarise factors that may influence the induction process for practitioners.		
		2.2	Describe at least three different methods that can be used to support the induction process for practitioners.		
		2.3	Plan an induction process in collaboration with others.		

3	Be able to implement and manage the induction process in your own health and social care setting.	3.1	Manage the implementation of an induction process within your own area of responsibility, including: <ul style="list-style-type: none"> a. appropriate use of delegation b. effective use of resources c. appropriate engagement with team members, and others as appropriate
		3.2	Manage risks and challenges that arise during the implementation of an induction process.
4	Be able to monitor and evaluate an induction process in your own health and social care setting.	4.1	Monitor the implementation of an induction process within your own area of responsibility.
		4.2	Provide feedback to a practitioner on their achievement of induction requirements.
		4.3	Support development planning for a practitioner on completion of induction.
5	Be able to evaluate an induction process in your own health and social care setting.	5.1	Explain the importance of continuous organisational improvement in the provision of induction.
		5.2	Evaluate the effectiveness of an induction process, in conjunction with others.
		5.3	Identify actions for improvement of induction, as a result of the evaluation of an induction process.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3, 4 and 5

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Learning Outcome 1 and Learning Outcome 2 - Practitioners may include team members, agency staff, volunteers, placement students, etc.

Title:	Managing Finances in Health and Social Care			Level:	5
				Credit Value:	4
Unit Number:	Y/652/1156	TQT:	40	GLH:	28
Unit Purpose and Aims:	<p>This unit will enable the learner to develop knowledge and skills required to manage finances, in accordance with their own responsibilities and agreed ways of working in their health and social care service setting.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD334 - Promote quality systems and procedures • HSCCLD46 - Lead the effectiveness of teams • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand financial management in health and social care.	1.1	Analyse significant factors and priorities that influence funding in health and social care services.		
		1.2	Describe the importance of effective financial management systems in health and social care services.		
		1.3	Summarise relevant sources of funding that are used to develop a budget for your own service setting.		
		1.4	Analyse the potential impact of insufficient budget on: <ul style="list-style-type: none"> a. service delivery b. individuals 		
2	Be able to manage a budget in accordance with your own responsibilities and agreed ways of working in your own service setting.	2.1	Explain roles, responsibilities and accountabilities for financial management within your own service setting, including those associated with: <ul style="list-style-type: none"> a. budget setting b. recording expenditure c. budget monitoring 		

2	<i>Continued</i>	2.2	Accept an allocated budget, including areas of planned expenditure, for a specific financial period or project.
		2.3	Record and monitor the implementation of the budget.
		2.4	Analyse variances and/or discrepancies between budgeted and actual expenditure.
		2.5	Implement actions to address variances and/or discrepancies, in accordance with your own responsibilities.
		2.6	Record findings from budget reviews, including recommendations for adjustments to budget setting and management.
3	Be able to review the management of a budget in your own service setting.	3.1	Use examples in order to reflect on the effectiveness of budget management in your own setting and ways in which it could be enhanced.
		3.2	Reflect on how to adapt your approach to managing a budget, to improve your practice.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2 and 3

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Assessment Criteria 1.1 - Factors and priorities may include those associated with legislation, Government policies and strategies, regulatory requirements, socio-economic and demographic changes, etc.

Assessment Criteria 2.5 - Actions may include escalation to others in accordance with legislation, regulation and/or agreed ways of working.

Title:	Leading and Managing Infection Prevention and Control in Health and Social Care			Level:	5
				Credit Value:	5
Unit Number:	A/652/1157	TQT:	50	GLH:	35
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to effectively lead and manage infection prevention and control within their own health and social care setting.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD42 - Lead a healthy and safe workplace • HSCCLD44 - Lead the safeguarding of individuals and others • HSCCLD415 - Lead the development of risk management plans • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand current infection prevention and control policies and procedures.	1.1	Summarise policies and procedures for infection prevention and control that apply to your own service setting and how they meet regulatory requirements.		
		1.2	Compare applying a proportionate approach to infection prevention and control in a domestic setting with that of a formal health and social care setting.		
		1.3	Explain factors that contribute to the spread and reduction of infection in your own service setting.		
2	Be able to lead the implementation of infection prevention and control policies and procedures in your own service setting.	2.1	Model compliance with infection prevention and control policies and procedures in your own service setting.		
		2.2	Manage the implementation of controls identified through risk assessment processes to minimise infection in partnership with others.		

2	<i>Continued</i>	2.3	Demonstrate effective communication of infection prevention and control policies and procedures to others within your own service setting.
		2.4	Demonstrate how to provide access to adequate resources to support compliance with infection prevention and control policies and procedures.
		2.5	Manage the learning and development needs of team members in relation to infection prevention and control.
		2.6	Allocate roles and responsibilities to others in accordance with infection prevention and control procedures within your own service setting.
		2.7	Monitor the implementation of infection prevention and control policies and procedures in your own service setting.
		2.8	Explain actions to take when there is non-compliance with infection prevention and control policies and procedures.
3	Be able to manage processes for the exchange of information regarding infections.	3.1	Explain why it is important to share information with others, particularly during critical periods of infection prevention and/or control.
		3.2	Manage systems for recording: <ul style="list-style-type: none"> a. suspected or actual levels of infection within your own service setting b. compliance with infection prevention and control procedures
		3.3	Manage the reporting of hazards and risks relating to infection prevention and control that are outside your own area of responsibility.
4	Be able to review infection prevention and control practice in your own service.	4.1	Use examples in order to reflect on the effectiveness of infection prevention and control practice in your own service and ways in which it could be improved.
		4.2	Reflect on how to adapt your approach to leading and managing infection prevention and control in your service setting, to improve your practice.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3 and 4

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Assessment Criteria 2.3 - Learning and development needs may be associated with induction and/or ongoing professional development.

Assessment Criteria 3.1 - Others may include individuals who use services, carers/families, visitors to a facility, professionals, etc.

Title:	Emergency Planning in Health and Social Care Settings			Level:	5
				Credit Value:	5
Unit Number:	D/652/1158	TQT:	50	GLH:	35
Unit Purpose and Aims:	<p>This unit will enable the learner to understand the knowledge and skills required to formulate an emergency plan to ensure adequate emergency preparedness, resilience and response in health and social care settings.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD44 - Lead the safeguarding of individuals and others • HSCCLD415 - Lead the development of risk management plans • HSCCLD417 - Lead partnership working arrangements • HSCCLD418 - Lead service delivery planning • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Be able to ensure leadership and governance in the event of an emergency.	1.1	Explain the importance of having a policy statement which outlines organisational commitment to emergency preparedness as part of governance requirements.		
		1.2	Summarise the importance of leadership in the event of an emergency and identify key people who will take on leadership roles.		
		1.3	Summarise appropriate sources of support and training for people who take on leadership roles in the event of an emergency.		
		1.4	Communicate who emergency leads are to staff and others how they can be contacted.		
2	Be able to evaluate risk.	2.1	Explain the importance of regularly evaluating risk which may impact service provision, nationally, regionally and locally.		
		2.2	Summarise six potential risks to own service which may require an emergency response.		

2	<i>Continued</i>	2.3	Carry out risk assessment on own work setting.
		2.4	Maintain a comprehensive risk register.
3	Be able to plan for maintaining critical services in the event of an emergency.	3.1	Summarise the importance of working in partnership with other organisations and statutory bodies to mitigate emergency impact.
		3.2	Explain the importance of having an emergency communication strategy in place to notify staff and others.
		3.3	Carry out a review to confirm clear and concise action plans are in place for each of the risks identified on the service risk register including: <ul style="list-style-type: none"> a. availability and storage of appropriate physical resources b. alerting of appropriate emergency services c. identified evacuation/shelter area and site d. triage in evacuation site/shelter e. transport arrangements and support
4	Be able to manage staff training and awareness to enable appropriate emergency response.	4.1	Research and identify appropriate staff training to enable emergency action plans to be carried out safely and quickly.
		4.2	Summarise individual staff roles and responsibilities in the event of an emergency.
		4.3	Plan training evacuation plan exercises as per regulation with minimal disruption to individuals and service provision.
		4.4	Review staff induction to verify inclusion of emergency response training.
5	Be able to manage information and tracking in the event of an emergency.	5.1	Explain the importance of having remote access to service user information.
		5.2	Research and identify an appropriate method of tracking service users and others during an emergency evacuation.
6	Be able to evaluate emergency plans.	6.1	Work in conjunction with others to evaluate emergency plans.
		6.2	Update risk register and action plans to address emerging threats as required.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1, 2, 3, 4, 5 and 6

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Title:	Leading a Change Management Process in Health and Social Care			Level:	5
				Credit Value:	6
Unit Number:	F/652/1159	TQT:	60	GLH:	42
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to lead a change management process within their own health and social care setting.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD418 - Lead service delivery planning • HSCCLD420 - Lead on regulatory requirements in the workplace • HSCCLD421 - Lead changes to workplace policies, procedures and practices 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand the principles of change management in health and social care.	1.1	Analyse significant factors that drive organisational change in health and social care.		
		1.2	Explain the importance of effective change management in order to maintain a quality service provision.		
		1.3	Summarise two underpinning theories of change management.		
		1.4	Describe effective approaches and techniques that support a change management process.		
2	Be able to facilitate a process to develop a shared understanding of the need for change in your own health and social care setting.	2.1	Summarise methods to use with: <ul style="list-style-type: none"> a. staff b. service users, and/or others as appropriate to promote the rationale for and benefits of a proposed change.		
		2.2	Create opportunities for others to express their opinions about the identified change.		
		2.3	Address challenges that may arise during the process of developing a shared understanding of the need for change.		

3	Be able to develop a change management plan in your own health and social care setting.	3.1	Identify key objective(s) as the basis for a specific change management plan.
		3.2	Undertake an impact assessment of a proposed change to a given service provision.
		3.3	Produce a change management plan that addresses identified objectives and includes: <ul style="list-style-type: none"> a. clear timelines b. roles and responsibilities of those involved in the change process c. a communication plan d. proposed outcomes and performance criteria e. tracking processes and protocols
4	Be able to implement a change management plan in your own health and social care setting.	4.1	Agree roles and responsibilities for implementing a change management plan.
		4.2	Support others to carry out their agreed roles in a change management plan.
		4.3	Demonstrate how to be a positive role model when introducing change.
		4.4	Explain why it is important to adapt the change management plan to address issues as they arise.
		4.5	Establish strategies for ensuring that the quality of service for individuals is maintained during a change process.
5	Be able to evaluate a change management process in your own health and social care setting.	5.1	Use agreed processes to monitor the effectiveness of the change management plan.
		5.2	Work with others to review the change against the identified outcomes and performance criteria.
		5.3	Evaluate the effectiveness of the change and its impact on individuals and the service provision.
		5.4	Identify a strategy to sustain the change over time.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3, 4 and 5

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Assessment Criteria 3.2 - An impact assessment includes an analysis of how the change will affect people, processes and/or systems within a health and social care setting. It supports an understanding of the potential challenges and benefits of a proposed change.

Title:	Leading the Management of Transitions			Level:	5
				Credit Value:	3
Unit Number:	K/652/1160	TQT:	30	GLH:	21
Unit Purpose and Aims:	<p>This unit will enable the learner to understand the knowledge and skills required to lead and support workers engaging with individuals who are experiencing transition and change.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD45 - Lead the care or support planning process • HSCCLD418 - Lead service delivery planning 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand the impact of change and transitions on the well-being of individuals.	1.1	Explain ways in which transitions and significant life events might impact on an individual's well-being.		
		1.2	Critically compare two theories of change and how they might inform approaches to the management of transitions.		
		1.3	Explain the concept of resilience in relation to transitions and significant life events.		
		1.4	Analyse factors that may impact on an individual's ability to manage transition and change.		
2	Be able to lead and manage provision that supports workers to manage transitions and significant life events.	2.1	Explain how a solution-focused approach can be used to support the management of transitions and significant life events.		
		2.2	Lead and support a culture that encourages individuals to explore challenges.		
		2.3	Summarise the importance of and how to lead and support workers to engage with individuals and others to develop and implement plans to build on own strengths and abilities.		
		2.4	Support workers to identify any additional help they may require to assist individuals through transition and change.		

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcome 2

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Title:	Leading and Managing Behavioural Support Strategies for Individuals in Health and Social Care			Level:	5
				Credit Value:	6
Unit Number:	H/652/1565	TQT:	60	GLH:	50
Unit Purpose and Aims:	<p>This unit will enable the learner to develop knowledge and skills to lead and manage behavioural support strategies for individuals who display behaviours of concern, in health and social care settings.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD327 - Work with individuals to develop and maintain relationships • HSCCLD415 - Lead the development of risk management plans • HSCCLD418 - Lead service delivery planning • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand behaviour as a means of expression.	1.1	Analyse what is meant by behaviour as a means of expression.		
		1.2	Summarise a range of factors that may contribute to, or trigger behaviours of concern.		
		1.3	Explain key methods for analysing behaviour, including the core components of functional analysis.		
		1.4	Analyse the application of the Time Intensity Model in social care settings.		
		1.5	Evaluate the contribution of specialist professionals/agencies involved in assessing and analysing individuals' behaviours.		

2	Understand strategies to support the management of behaviours of concern.	2.1	Summarise a range of approaches to support the management of behaviours of concern within an identified context, including: <ul style="list-style-type: none"> a. primary prevention strategies b. secondary prevention strategies c. non-aversive reactive strategies
		2.2	Explain the importance of daily planning and consistency in the management of behaviours of concern.
3	Be able to lead the implementation of primary prevention strategies within your own setting.	3.1	Demonstrate the use of effective communication and positive interaction with <ul style="list-style-type: none"> a. individuals b. others in relation to primary prevention strategies to support the management of behaviours of concern.
		3.2	Support others to implement agreed person-centred primary prevention strategies, using least restrictive practices and respecting an individual's dignity, rights and choice.
		3.3	Work with an individual and others to review the individual's routine and daily activities to identify areas for increased participation and choice.
4	Be able to lead the implementation of secondary prevention strategies within your own setting.	4.1	Identify indicators of behavioural agitation and possible secondary prevention strategies that may be used with an individual.
		4.2	Ensure that agreed secondary prevention strategies are clearly documented in an individual's care/support plan.
		4.3	Support others to implement agreed person-centred secondary prevention strategies, using least restrictive practices and respecting an individual's dignity and rights.
5	Be able to lead the implementation of non-aversive reactive strategies within your own setting.	5.1	Assess risks involved in the use of non-aversive reactive strategies that may be used with an individual.
		5.2	Ensure that agreed non-aversive reactive strategies are clearly documented in an individual's care/support plan.

5	<i>Continued</i>	5.3	Support others to implement an agreed non-aversive reactive strategy using least restrictive practices and respecting an individual's dignity and rights.
		5.4	Manage post-incident support needs of: <ul style="list-style-type: none"> a. an individual b. others c. self taking account of immediate, intermediate and long-term support needs.
		5.5	Demonstrate the use of agreed incident recording and reporting processes.
		5.6	Evaluate the effectiveness of the implementation of the agreed non aversive reactive strategy and identify areas for service improvement.
6	Be able to evaluate the use of behavioural support strategies for individuals in your own setting.	6.1	Evaluate your own role in leading and managing behavioural support strategies for individuals in your own setting and identify possible areas for: <ul style="list-style-type: none"> a. your own practice development b. service improvement

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcomes 1 and 2

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 3, 4, 5, and 6

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.

- 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.

Assessment Criteria 1.2 – Factors may include communication difficulties, mental health issues, cognitive impairments, medical conditions/pain, medication effects; environmental influences e.g. sensory overload, unfamiliar surroundings, routine disruptions; social interactions with others, trauma etc.

Assessment Criteria 1.3 - Functional analysis refers to the process for identifying or analysing the function or purpose of an individual's behaviour, using a range of structured measures.

Resource: [Functional Analysis \(MSc Applied Behaviour Analysis\)](#)

Assessment Criteria 1.4 – The Time-Intensity Model refers to the cycle of behaviour that show the stages of a crisis/escalation. This model is also known as the 'Crisis Cycle', 'Assault Cycle' or 'Emotional Arousal Cycle'.

[The Time Intensity Model](#)

[The 5 Stages of the Assault Cycle](#)

scottishconflictresolution.org.uk

Learning Outcome 3 - Primary prevention - Proactive strategies that involve changing aspects of an individual's living, working and recreational environments so that the possibility of incidents of behaviours of concern are reduced.

Learning Outcome 4 - Secondary prevention - Strategies that apply when an individual's behaviours of concern begin to escalate, in order to prevent a significant incident.

Learning Outcome 5 - Non-aversive reactive strategies - are ways of responding safely and efficiently to behaviours of concern that have not been prevented. They can include physical interventions that do not cause pain and do minimise discomfort and comply with care/support plans and safeguarding protocols.

Useful Resources:

[Positive Behaviour Support Planning](#)

[Positive Behavioural Support](#)

[Understanding the Behaviour Cycle – Beyond Autism](#)

Title:	Undertaking a Research Project in Health and Social Care Services			Level:	5
				Credit Value:	7
Unit Number:	M/652/1162	TQT:	70	GLH:	45
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to undertake a research project and to consider its implications for the management of their own health and social care service.</p> <p>This unit is linked to the following NOS:</p> <p>HSCCLD424 - Lead a research project</p>				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Be able to justify a topic for research which is relevant to your own service setting.	1.1	Identify a research topic, showing relevance to your own service setting.		
		1.2	Conduct a literature review using a range of sources relevant to the research topic, adhering to academic protocols.		
		1.3	Develop a clear aim and objectives for the research project.		
		1.4	Explain relevant ethical considerations and ways in which these will be addressed during the research process.		
2	Be able to develop a research methodology for an identified research project.	2.1	Justify the selection of: <ul style="list-style-type: none"> a. the research design b. at least two research methods to be used in the research project.		
		2.2	Explain the importance of validity and reliability of data used within research.		
		2.3	Develop research questions for use in the research project.		

3	Be able to conduct a research project which is relevant to your own service setting.	3.1	Develop a research project plan.
		3.2	Conduct the research using the identified research methods.
		3.3	Record and collate the research data.
4	Be able to analyse research findings to inform project conclusions and application to practice.	4.1	Analyse the research data to: <ul style="list-style-type: none"> a. draw conclusions from the findings b. determine correlation and/or disparity with the initial literature review
		4.2	Identify implications of the research findings for the management of your own service setting.
		4.3	Make recommendations to support the application of the research findings in your own service setting.

Guidance for Assessors

Evidence Requirements

- The primary type of evidence is a documented Research Project Report addressing Learning Outcomes 1-4.
- Evidence may also include presentation, reflective account, professional discussion, as appropriate.
- Learners ought to select a research topic of relevance to their own service setting.
- Learners should be discouraged from choosing projects that require ethics committee approval.

Assessment Criteria 1.2 - A literature review of chosen area of research may include sources such as journals; books; internet sites; papers; presentations; the media; past/current research.

Academic protocols include protocols in relation to the appropriate use of material generated through Artificial Intelligence.

Assessment Criteria 1.3 - Ethical considerations include authorisation or permissions that may be required to undertake the identified research project. In addition, they may include consideration of confidentiality, sensitivity of data, participant engagement arrangements, etc.

Assessment Criteria 2.1 (a)- Research designs may be qualitative, quantitative, or a mixed methods design. Each type serves different purposes and is selected based on the nature of the research objectives, and resources.

Assessment Criteria 2.1 (b) - Research methods may include survey and questionnaire; interview; observation; case study, etc. It is expected that for ethical reasons, experiment would not be used as a research method.

Assessment Criteria 2.2 - Validity and reliability of data used within research may include consideration of currency, credibility, cogency, legitimacy, authority, authenticity, etc.

Assessment Criteria 4.1 - Conclusions may include qualitative and/or quantitative analysis.

Title:	Leading and Managing the Promotion of Active Support in Health and Social Care			Level:	5
				Credit Value:	4
Unit Number:	R/652/1163	TQT:	40	GLH:	24
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills to effectively lead and manage the promotion of active support for individuals within their own health and social care setting.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD327 - Work with individuals to develop and maintain relationships • HSCCLD415 - Lead the development of risk management plans • HSCCLD418 - Lead service delivery planning • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand the use of active support in health and social care.	1.1	Explain the nature of and principles underpinning the use of active support in health and social care.		
		1.2	Analyse the relevance and appropriateness of active support in your own service setting.		
2	Be able to promote active support in your own service setting.	2.1	Explain how team members are supported to understand the importance of active support.		
		2.2	Lead a culture that values active support.		
		2.3	Demonstrate how individuals are involved in the development of their active support plans.		
		2.4	Demonstrate how team members are supported to develop active support plans.		

3	Be able to manage the implementation of active support in your own service setting.	3.1	Support team members to use active support that is appropriate to individuals' needs and abilities.
		3.2	Support team members to monitor the use of active support to promote individuals' independence and autonomy.
		3.3	Support team members to take remedial action to ensure that structured activity steps match individuals' needs and abilities.
		3.4	Monitor team members' recording of individuals' participation and the use of active support.
4	Be able to review the use of active support in your own service setting.	4.1	Use examples in order to reflect on the effectiveness of active support in your own setting and ways in which it could be enhanced.
		4.2	Reflect on how to adapt your approach to leading and managing the promotion of active support, to improve your practice.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3 and 4

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Learning Outcome 3 - The level of support provided ought to be matched directly to the individual's need for support in an identified activity and be person-centred in practice. While the support provided ought to be enough, the aim is always to promote the individual's independence by providing only as much support as is necessary. Assistance may gradually be reduced or altered as the individual's skills level changes.

<https://arcengland.org.uk/wp-content/uploads/2018/05/Active-Support-Handbook-updated-2019.pdf>

Title:	Supporting the Use of Assistive Technology in Health and Social Care			Level:	5
				Credit Value:	4
Unit Number:	J/652/1566	TQT:	40	GLH:	28
Unit Purpose and Aims:	<p>This unit will enable the learner to understand, plan, provide and review assistive technologies in order to best support the individual in health and social care settings.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD411 - Manage requests for health, social or other care services • HSCCLD414 - Lead the assessment process with individuals Lead the assessment process with individuals • HSCCLD416 - Collaborate with others to support individuals • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Be able to research and evaluate assistive technologies.	1.1	Research and develop a report on the types, availability and the impact of assistive technologies on individuals within own area of responsibility.		
2	Be able to facilitate the use of assistive technologies by the individual.	2.1	Explain how assistive technologies solutions can be adapted according to need and context.		
		2.2	Summarise the potential risks associated with assistive technology solutions.		
		2.3	Summarise assessment and referral processes which are used to secure assistive technology.		
		2.4	Demonstrate how to support the individual to secure and use appropriate assistive technology.		
3	Be able to support others to facilitate the use of assistive technology.	3.1	Support others to facilitate the use of assistive technology by providing information and guidance.		

4	Be able to review the provision of assistive technology.	4.1	Review the assessment and referral processes used to secure assistive technology.
		4.2	Review the outcomes of assistive technology support to individuals against identified needs.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Learning Outcome 1 - Evidence Requirements

- The primary type of evidence for Learning Outcome 1 is a documented report on the types, availability and the impact of assistive technologies on individuals within the learner's area of responsibility.

Primary assessment method(s) for Learning Outcomes 2, 3 and 4

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Title:	Leading and Managing Practice in Supporting Individuals to Take Positive Risks			Level:	5
				Credit Value:	4
Unit Number:	Y/652/1165	TQT:	40	GLH:	28
Unit Purpose and Aims:	<p>This unit will enable the learner to understand the knowledge and skills required to lead and manage practice which supports individuals to take positive risks.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD44 - Lead the safeguarding of individuals and others • HSCCLD414 - Lead the assessment process with individuals • HSCCLD415 - Lead the development of risk management plans • HSCCLD418 - Lead service delivery planning • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand the relationship between person-centred assessment, care planning and positive risk taking for individuals.	1.1	Analyse the difficulties that may arise between positive risk-taking and person-centred planning.		
		1.2	Explain why positive risk taking should be considered within the context of a person-centred assessment.		
		1.3	Explain how models of risk management may be used in positive risk taking for individuals.		
		1.4	Analyse how taking positive risks may contribute to personal growth for the individual.		

2	Be able to lead and promote staff understanding of the legal and policy frameworks which underpin an individual's right to make decisions and take risks.	2.1	Lead and support staff to work in line with the legal and policy frameworks for decision making which underpin an individual's right to make decisions and take risks.
		2.2	Lead and support staff to integrate human rights principles in supporting individuals to make decisions and take risks.
3	Be able to lead the development of practice which includes the individual and others in positive risk assessment and planning.	3.1	Lead and manage practice which supports person-centred assessments rather than service-led assessments.
		3.2	Develop assessment practice with staff which engages the individual and others in identifying activities to support the individual to achieve their personal goals.
		3.3	Support staff to engage in inclusive assessment practice to identify hazards and risks associated with achieving personal goals.
		3.4	Support practice which enables the individual and others to balance individual personal goals with health, safety and well-being considerations.
		3.5	Lead the development of risk management strategies for engaging the individual and others to build in safeguards to mitigate against risks to the individual.
		3.6	Support others to develop care plans which address positive risk taking.
4	Be able to support others to understand an individual's personal goals, how to support them and the consent required.	4.1	Support staff to understand how their own values and belief systems may impact on supporting an individual to take positives risks.
		4.2	Support others to facilitate the individual to enable them to identify and communicate their personal goals.
		4.3	Support staff to develop good practice in the confirmation of consent from the individual and others prior to taking positive risks.
		4.4	Support staff to use advocacy skills with families and others to gain appropriate support for individuals prior to taking positive risks.
		4.5	Support staff to record how decisions about positive risk taking have been reached.

5	Be able to lead and manage systems and practice for positive risk taking.	5.1	Lead and support staff to understand the principle of duty of care while supporting the individual to take positive risks.
		5.2	Manage systems to ensure staff and others understand actions required if the individual chooses to take unplanned risks.
		5.3	Lead and manage practice to ensure that: <ul style="list-style-type: none"> a. risk taking is compliant with risk assessment b. appropriate support is in place to enable the individual to undertake identified risks c. consent is obtained from individuals and others d. outcomes for individuals are reviewed
6	Be able to evaluate the practice of positive risk taking.	6.1	Evaluate with staff and others: <ul style="list-style-type: none"> a. risk assessment methods b. risk management model used c. the benefits to the individual from positive risk taking
		6.2	Support staff to evaluate their practice in facilitating positive risk taking by individuals.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3, 4, 5 and 6

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Title:	Managing Disciplinary Processes in Health and Social Care			Level:	5
				Credit Value:	5
Unit Number:	A/652/1166	TQT:	50	GLH:	39
Unit Purpose and Aims:	<p>This unit will enable the learner to develop the knowledge and skills required to be able to manage disciplinary processes in the context of their own health and social care service.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD36 - Promote the effectiveness of teams • HSCCLD44 - Lead the safeguarding of individuals and others • HSCCLD46 - Lead the effectiveness of teams • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand disciplinary processes in health and social care.	1.1	Summarise the principles that underpin disciplinary processes in health and social care.		
		1.2	Distinguish between the purposes of disciplinary processes and at least one other performance management process.		
		1.3	Use examples to explain what may be considered as: <ul style="list-style-type: none"> a. misconduct b. gross misconduct in health and social care.		
		1.4	Explain the relationship between disciplinary and regulatory processes in health and social care.		
2	Be able to implement disciplinary processes in a health and social care setting.	2.1	Summarise line manager responsibilities in relation to disciplinary processes, in accordance with your organisation's agreed ways of working.		
		2.2	Agree actions with a team member when their practice falls below agreed standards.		

2	<i>Continued</i>	2.3	Initiate a disciplinary process in accordance with agreed ways of working, including the provision of information to the team member, in relation to the disciplinary process and their rights.
		2.4	Work with others to implement the stages of the disciplinary process in accordance with your organisation's agreed ways of working.
		2.5	Communicate effectively and in a timely manner with all parties involved, ensuring the wellbeing of the team member is considered.
		2.6	Describe a range of outcomes that may arise following screening, in line with your organisation's agreed ways of working.
		2.7	Use examples to summarise the use of sanctions that may be imposed as a result of a disciplinary process.
3	Be able to compile and present evidence for a disciplinary process in a health and social care setting.	3.1	Complete records in accordance with your organisation's agreed ways of working, to include: <ul style="list-style-type: none"> a. the nature and evidence of the complaint/incident/error/concern that has arisen in relation to the team member b. evidence of the process undertaken with the team member c. identification of risks and mitigating actions taken to stabilise the situation
		3.2	Present evidence as part of a disciplinary process.
4	Be able to manage the outcomes of a disciplinary process in a health and social care setting.	4.1	Implement the decisions of a disciplinary process, in accordance with your own role and responsibilities and agreed ways of working.
		4.2	Manage the implications of the outcomes for individuals and others, as appropriate.
5	Be able to review disciplinary processes in a health and social care setting.	5.1	Reflect on your experience of the effectiveness of disciplinary processes in your own service.
		5.2	Reflect on how to adapt your own approach to disciplinary processes in order to improve your own practice.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3, 4 and 5

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

Assessment Criteria 1.1 - Principles may include fairness, confidentiality, equality, natural justice, health and social care values, etc.

Assessment Criteria 2.6 - Outcomes may include no further action, the identification of a system or process issue, a capability issue requiring training/development, the implementation of a disciplinary/informal process, instigating a fast-track procedure or a formal investigation.

Assessment Criteria 2.7 - Sanctions may include formal warning, final warning, dismissal, summary dismissal, transfer or downgrading, etc.

Title:	Leading and Managing a Service That Provides Support for Individuals with Complex Disabilities			Level:	5
				Credit Value:	4
Unit Number:	D/652/1167	TQT:	40	GLH:	24
Unit Purpose and Aims:	<p>This unit enables the learner to develop the knowledge and skills required to lead and manage a service that provides support for individuals with complex disabilities.</p> <p>This unit is linked to the following NOS:</p> <ul style="list-style-type: none"> • HSCCLD416 - Collaborate with others to support individuals • HSCCLD414 - Lead the assessment process with individuals • HSCCLD418 - Lead service delivery planning • HSCCLD420 - Lead on regulatory requirements in the workplace 				
Learning Outcomes <i>The learner will be able to:</i>		Assessment Criteria <i>The learner can:</i>			
1	Understand complex disabilities for individuals in health and social care services.	1.1	Research and explain links between specific factors and a range of complex disabilities, among individuals in your service setting.		
		1.2	Analyse the impact of complex disabilities on individuals in your service setting.		
		1.3	Use practice examples to describe how service provision can be tailored to facilitate positive outcomes for individuals with complex disabilities.		
2	Be able to lead support for individuals with complex disabilities.	2.1	Manage the assessment of individuals with complex disabilities.		
		2.2	Support team members to work collaboratively with individuals and others to provide support that is person-centred, holistic and strengths based.		

2	<i>Continued</i>	2.3	Use referral processes to support the needs and preferences of individuals with complex disabilities.
3	Be able to manage the development of others in order to support individuals with complex disabilities.	3.1	Facilitate the professional development of team members to enhance their support of individuals with complex disabilities.
		3.2	Demonstrate how to effectively provide information and guidance to others to support individuals with complex disabilities.
4	Be able to review service provision for individuals with complex disabilities.	4.1	Use reflective practice in order to evaluate the extent to which systems and processes: <ul style="list-style-type: none"> a. support positive outcomes for individuals with complex disabilities in your service setting and b. ways in which they could be improved
		4.2	Reflect on how to adapt your approach to leading and managing service provision for individuals with complex disabilities.

Guidance for Assessors

General Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for Learning Outcome 1

- Written tasks.
- Verbal questioning, documented by the assessor.
- Professional Discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for Learning Outcomes 2, 3, 4 and 5

- Direct Observation of the learner in their work setting; review of work products and associated questioning.
- 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 are in receipt of care/support, their families and carers.
- 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.

In this unit, the term 'complex disabilities' refers to individuals with multiple conditions, disabilities and/or complex, interacting needs across health, communication, mobility, cognition or social engagement.

Assessment Criteria 1.1 - Factors may include genetics, age, gender, ethnicity, socio-economic status, lifestyle choices, traumatic experiences, etc.

Assessment Criteria 1.2 - Impact of complex disabilities may include physical, emotional, social, mental, economic, intellectual, spiritual, etc.

Appendix One – Command Verb Definitions

The table below explains what is expected from each **command verb** used in an assessment objective. Not all verbs are used in this specification

Apply	Use existing knowledge or skills in a new or different context.
Analyse	Break a larger subject into smaller parts, examine them in detail and show how these parts are related to each other. This may be supported by reference to current research or theories.
Classify	Organise information according to specific criteria.
Compare	Examine subjects in detail, giving the similarities and differences.
Critically Compare	As with compare but extended to include pros and cons of the subject. There may or may not be a conclusion or recommendation as appropriate.
Describe	Provide detailed, factual information about a subject.
Discuss	Give a detailed account of a subject, including a range of contrasting views and opinions.
Explain	As with describe but extended to include causation and reasoning.
Identify	Select or ascertain appropriate information and details from a broader range of information or data.
Interpret	Use information or data to clarify or explain something.
Produce	Make or create something.
State	Give short, factual information about something.
Specify	State a fact or requirement clearly and in precise detail.



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