



# **Level 2 Technical Certificate in Healthcare, Care and Childcare (3625-20)**

**Version 2.0 (August 2021)**

**Qualification Handbook**

## Qualification at a glance

<b>Industry area</b>	Healthcare, care and childcare
<b>City &amp; Guilds qualification number</b>	3625-20
<b>Age group</b>	16-18 (Key Stage 5), 19+
<b>Entry requirements</b>	Centres must ensure that any pre-requisites stated in the <i>What is this qualification about?</i> section are met.
<b>Assessment</b>	To gain this qualification, candidates must successfully achieve the following assessments: <ul style="list-style-type: none"> <li>• One externally set, externally moderated assignment</li> <li>• One externally set, externally marked test, sat under examination conditions</li> </ul>
<b>Additional requirements to gain this qualification</b>	Employer involvement in the delivery and/or assessment of this qualification is essential for all candidates and will be externally quality assured.
<b>Grading</b>	This qualification is graded Pass/Merit/Distinction/Distinction* For more information on grading, please see Section 7: Grading.
<b>Approvals</b>	These qualifications require full centre and qualification approval
<b>Support materials</b>	Sample assessments Guidance for delivery Guidance on use of marking grids Work placement workbook. Exam specification
<b>Registration and certification</b>	Registration and certification of this qualification is through the Walled Garden, and is subject to end dates.
<b>External quality assurance</b>	This qualification is externally quality assured by City & Guilds, and its internally marked assignments are subject to external moderation. There is no direct claim status available for this qualification.

Title and level	Size (GLH)	TQT	City & Guilds qualification number	Ofqual accreditation number
Level 2 Technical Certificate in Healthcare, Care and Childcare	360	600	3625-20	603/0296/3

Version and date	Change detail	Section
June 2017 V1.3	Addition of the examination paper based module number	1. Introduction – Assessment requirements and employer involvement 5. Assessment 5. Assessment – Exam Specification 7. Grading – Awarding grades and reporting results
	Removal of AO 6-8 from Synoptic Assignments	5. Assessment – Assessment Objectives
	Addition of Provisional Grade Boundaries for the Synoptic Assignment	7. Grading
	Revised Exam Specification and AO weightings	5. Assessment – Exam Specification
	Branding changes	Throughout
August 2017 V1.4	Addition of learning outcomes	5. Assessment – Exam Specification
November 2017 V1.5	Changed wording to Learning Outcomes Amended unit number	5. Assessment – Exam Specification
	Revised Exam Specification and AO weightings	
August 2020 V1.6	Amendments to Units	Unit 201 Unit 202 Unit 203 Unit 204 & 205
	Statement regarding work placement practice in 2020/2021	4. Employer Involvement
August 2021 V2.0	Amendments to Unit Topics	Unit 201 – Topic 1.1, 1.3, 1.4, 1.5, 1.6, 2.1, 2.2, 3.1, 3.3, 3.5, 4.1, 4.2, 4.5
		Unit 202 – Topic 1.1, 1.2, 1.3, 1.4, 2.1, 2.2, 3.1, 3.2, 3.3, 3.4, 4.1, 4.2, 4.4
		Unit 203 – 1.1, 1.2, 1.3, 2.1, 2.2, 2.3, 2.4, 3.1, 4.1, 4.2
		Unit 204 – 1.1, 1.2, 1.3, 1.4, 2.1, 2.2, 3.1, 4.1, 4.2
		Unit 205 – 1.1, 1.3, 2.1, 3.2

	Unit 206 – 1.1, 1.2, 1.3, 2.1, 2.2, 3.1
	Unit 207 – 1.1, 1.2, 1.3, 2.1, 2.2, 2.3, 3.1, 3.2, 3.3
	Unit 208 – 1.1, 2.2, 3.1, 3.2, 3.3
	Unit 209 – 1.1, 1.2, 1.5, 2.1, 2.2, 2.3, 3.1, 3.2, 4.1
Removal of statement regarding work placement 2020/2021	4. Employer involvement
Amendments to legislations and regulations	Appendix 2

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# 1 Introduction

## What is this qualification about?

The following purpose is for the **Level 2 Technical Certificate in Healthcare, Care and Childcare** (603/0296/3)

Area	Description
OVERVIEW	
Who is this qualification for?	<p>The Level 2 Technical Certificate in Healthcare, Care and Childcare aims to provide you with a range of essential technical and practical skills and knowledge which will equip you to seek employment or further training within one these industries.</p> <p>The knowledge and skills gained will ensure that you are able to operate in a Healthcare, Care or Childcare setting. You will cover communication skills, safe working and safeguarding skills as well as working skills specific to each sector.</p> <p>Following successful completion of this qualification you will be qualified to work in a number of employment destinations such as:</p> <ul style="list-style-type: none"><li>• Healthcare assistant</li><li>• Care assistant</li><li>• Childcare worker/assistant</li></ul> <p>This qualification is suitable for anyone over the age of 16 years. You don't need any previous knowledge or experience to start this qualification.</p>
What does this qualification cover?	<p>This qualification covers the basic skills, knowledge and understanding needed to work in Healthcare, Care or Childcare settings. The qualification content covers:</p> <ul style="list-style-type: none"><li>• Working in healthcare and care</li><li>• Working with babies, children, young people and families in care and education</li><li>• Values, beliefs and behaviours for working in healthcare, care and childcare settings</li><li>• Communicating for effective practice in healthcare, care and childcare</li><li>• Working safely in healthcare, care and childcare environments</li><li>• Safeguarding and protecting vulnerable individuals</li></ul>

Area	Description
	<ul style="list-style-type: none"> <li>• Supporting health and healthy living in healthcare, care and childcare</li> <li>• Principles and theories of human growth and development</li> <li>• Developing resilience for working in healthcare, care and childcare</li> </ul> <p>You will also have to complete 120-150 hours work experience. Your centre will support you in finding an employer who will provide this work experience.</p> <p>The work experience really gives you the opportunity to put the skills you would have gained into practice and handle real workplace situations.</p> <p>You will get lots of practice and support to enable you to develop the required skills and knowledge to prepare you for the learning and end assessment</p> <p>Your centre will work with local Healthcare, Care and Childcare employers who will contribute to the knowledge and delivery of training. The different ways in which centres could support your learning, by working with structured work-experience or work-placements within their business, include:</p> <ul style="list-style-type: none"> <li>• your attendance at classes or lectures given by industry experts</li> <li>• employers input into projects and exercises, or being involved with setting assessments and examinations</li> <li>• employers who act as ‘expert witnesses’ to contribute to the assessment of your work.</li> </ul> <p>This practical based training is ideal preparation for gaining employment in the Healthcare, Care or Childcare industry or further specialist study.</p>

WHAT COULD THIS QUALIFICATION LEAD TO?	
Will the qualification lead to employment, and if so, in which job role and at what level?	<p>Achievement of this qualification demonstrates to an employer that you have the necessary technical skills and knowledge they are looking for when recruiting for positions such as:</p> <ul style="list-style-type: none"> <li>• Healthcare assistant</li> <li>• Care assistant</li> <li>• Childcare worker/assistant</li> </ul>
Why choose this qualification over similar qualifications?	There are no other College-based qualifications within this suite at this Level.
Will the qualification lead to further learning?	On completion you may decide to move on to further learning, for instance onto one of the following qualifications:



Area	Description
	<ul style="list-style-type: none"> <li>• <b>Level 3 Technical Diploma for Early Years and Childcare (540)</b></li> <li>• <b>Level 3 Advanced Technical Diploma in Health and Care (540)</b></li> <li>• <b>Level 3 Advanced Technical Extended Diploma in Health and Care (1080)</b></li> <li>• <b>Level 3 Advanced Technical Diploma for the Early Years Practices (Early Years Educator) (1080)</b></li> </ul>

You may also want to consider apprenticeships in Adult Care, in Healthcare or Childcare and Early Years.

**WHO SUPPORTS THIS QUALIFICATION?**

Employer/Higher Education Institutions	Pre-school Learning Alliance Ashford and St Peter’s Hospitals Springboard Nursery Warrington Borough Council Barnsley Borough Council British Institute of Learning Disabilities (BILD) Cornwall Care
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## Qualification structure

For the **Level 2 Technical Certificate in Healthcare, Care and Childcare** the teaching programme must cover the content detailed in the structure below:

Unit number	Unit title	GLH
<b>Mandatory</b>		
201	Working in healthcare and care	90
202	Working with babies, children, young people and families in care and education	60
203	Values, beliefs and behaviours for working in healthcare, care and childcare settings	30
204	Communicating for effective practice in healthcare, care and childcare	30
205	Working safely in healthcare, care and childcare environments	30
206	Safeguarding and protecting vulnerable individuals	30
207	Supporting health and healthy living in healthcare, care and childcare	30
208	Principles and theories of human growth and development	30
209	Developing resilience for working in healthcare, care and childcare	30
<b>Total GLH</b>		<b>360</b>

NB – Candidates will be required to completed 120-150 hours work experience alongside the qualification.

## Total qualification time (TQT)

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

Title and level	GLH	TQT
Level 2 Technical Certificate in Healthcare, Care and Childcare	360	600

## Assessment requirements and employer involvement

To achieve the **Level 2 Technical Certificate in Healthcare, Care and Childcare** candidates must successfully complete **both** the mandatory assessment components, which cover the mandatory content of the qualification

Component number	Title
<b>Mandatory</b>	
020 or 520	Level 2 Health, Care and Childcare - Theory exam (1)*
021	Level 2 Health, Care and Childcare - Synoptic Assignment (1)*

In addition, candidates **must** achieve the mandatory employer involvement requirement for this qualification **before** they can be awarded a qualification grade. For more information, please see guidance in *Section 4: Employer involvement*.

### Employer involvement

Component number	Title
<b>Mandatory</b>	
820	Level 2 Employer involvement

*\*Number of mandatory assessments per assessment type*

## 2 Centre requirements

### Approval

New centres will need to gain centre approval. Existing centres who wish to offer this qualification must go through City & Guilds' **full** Qualification Approval Process. There is no fast track approval for this qualification. Please refer to the City & Guilds website for further information on the approval process: [www.cityandguilds.com](http://www.cityandguilds.com)

### Resource requirements

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

### Centre staffing

Staff delivering these qualifications must be able to demonstrate that they meet the following requirements:

- be technically competent in the areas in which they are delivering
- be able to deliver across the breadth and depth of the content of the qualification being taught
- have recent relevant teaching and assessment experience in the specific area they will be teaching, or be working towards this
- demonstrate continuing CPD.

### Physical resources

Centres must be able to demonstrate that they have access to the equipment and technical resources required to deliver this qualification and its assessment.

### Internal Quality Assurance

Internal quality assurance is key to ensuring accuracy and consistency of tutors and markers. Internal Quality Assurers (IQAs) monitor the work of all tutors involved with a qualification to ensure they are applying standards consistently throughout assessment activities. IQAs must have, and maintain, an appropriate level of technical competence and be qualified to make both marking and quality assurance decisions through a teaching qualification or recent, relevant experience.

### Learner entry requirements

Centres must ensure that all learners have the opportunity to gain the qualification through appropriate study and training, and that any prerequisites stated in the *What is this qualification about?* section are met when registering on this qualification.

### Age restrictions

This qualification is approved for learners aged 16 – 19, 19+.

### 3 Delivering technical qualifications

#### Initial assessment and induction

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

- if the learner has any specific learning or training needs,
- support and guidance they may need when working towards their qualification,
- the appropriate type and level of qualification.

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

#### Employer involvement

Employer involvement is essential to maximise the value of each learner's experience. Centres are required to involve employers in the delivery of technical qualifications at Key Stage 5 and/or their assessment, for every learner. This must be in place or planned before delivery programmes begin in order to gain qualification approval. See *Section 4: Employer involvement* for more detail.

#### Support materials

The following resources are available for this qualification:

Description	How to access
Sample assessments	
Guidance for delivery	
Guidance on use of marking grids	Available 2016 on the qualification pages on the City & Guilds Website: <a href="http://www.cityandguilds.com">www.cityandguilds.com</a>
Work placement workbook	

## 4 Employer involvement

Employer involvement is a formal component of Key Stage 5 Technical qualifications. It does not contribute to the overall qualification grading, but is a mandatory requirement that all learners must meet. As such it is subject to external quality assurance by City & Guilds.

Department for Education (DfE) requirements state:

*Employer involvement in the delivery and/or assessment of technical qualifications provides a clear 'line of sight' to work, enriches learning, raises the credibility of the qualification in the eyes of employers, parents and students and furthers collaboration between the learning and skills sector and industry.*

*[Technical qualifications] must:*

- *require all students to undertake meaningful activity involving employers during their study; and*
- *be governed by quality assurance procedures run by the awarding organisation to confirm that education providers have secured employer involvement for every student.*

Extract from: ***Vocational qualifications for 16 to 19 year olds, 2017 and 2018 performance tables: technical guidance for awarding organisations, paragraphs 89-90***

City & Guilds will provide support, guidance and quality assurance of employer involvement.

### Qualification approval

To be approved to offer City & Guilds technicals, centres must provide an Employer Involvement planner and tracker showing how every learner will be able to experience meaningful employer involvement, and from where sufficient and suitable employer representatives are expected to be sourced.

Centres must include in their planner a sufficient range of activities throughout the learning programme that provide a range of employer interactions for learners. Centres must also plan contingencies for learners who may be absent for employer involvement activities, so that they are not disadvantaged.

As part of the approval process, City & Guilds will review this planner and tracker. Centres who cannot show sufficient commitment from employers and/or a credible planner and tracker will be given an action for improvement with a realistic timescale for completion. **Approval will not be given** if employer involvement cannot be assured either at the start of the qualification, or through an appropriate plan of action to address this requirement before the learner is certificated.

### Monitoring and reporting learner engagement

Employer involvement is a formal component of this qualification and is subject to quality assurance monitoring. Centres must record evidence that demonstrates that each learner has been involved in meaningful employer based activities against the mandatory content before claiming the employer involvement component for learners.

Centres must record the range and type of employer involvement each learner has experienced and submit confirmation that all learners have met the requirements to City & Guilds. If a centre cannot

provide evidence that learners have met the requirements to achieve the component, then the learner will not be able to achieve the overall Technical Qualification.

### **Types of involvement**

Centres should note that to be eligible, employer involvement activities **must** relate to one or more elements of the mandatory content of this qualification.

As the aim of employer involvement is to enrich learning and to give learners a taste of the expectations of employers in the industry area they are studying, centres are encouraged to work creatively with local employers.

Employers can identify the areas of skills and knowledge in their particular industry that they would wish to see emphasised for learners who may apply to work with them in the future. Centres and employers can then establish the type of input, and which employer representative might be able to best support these aims.

To be of most benefit this must add to, rather than replace the centre's programme of learning. Some examples of meaningful employer involvement are listed below. Employer involvement not related to the mandatory element of the qualification, although valuable in other ways, does not count towards this element of the qualification.

The DfE has provided the following examples of what does and does not count as meaningful employer involvement, as follows<sup>1</sup>:

#### ***The following activities meet the requirement for meaningful employer involvement:***

- *students undertake structured work-experience or work-placements that develop skills and knowledge relevant to the qualification;*
- *students undertake project(s), exercises(s) and/or assessments/examination(s) set with input from industry practitioner(s);*
- *students take one or more units delivered or co-delivered by an industry practitioner(s). This could take the form of master classes or guest lectures;*
- *industry practitioners operate as 'expert witnesses' that contribute to the assessment of a student's work or practice, operating within a specified assessment framework. This may be a specific project(s), exercise(s) or examination(s), or all assessments for a qualification.*

*In all cases participating industry practitioners and employers must be relevant to the industry sector or occupation/occupational group to which the qualification relates.*

#### ***The following activities, whilst valuable, do not meet the requirement for meaningful employer involvement:***

- *employers' or industry practitioners' input to the initial design and content of a qualification;*
- *employers hosting visits, providing premises, facilities or equipment;*
- *employers or industry practitioners providing talks or contributing to delivery on employability, general careers advice, CV writing, interview training etc;*
- *student attendance at career fairs, events or other networking opportunities;*
- *simulated or provider-based working environments eg hairdressing salons, florists, restaurants, travel agents, small manufacturing units, car servicing facilities;*
- *employers providing students with job references.*

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<sup>1</sup> Based on Technical and applied qualifications for 14 to 19 year olds Key stage 4 and 16 to 19 performance tables from 2019: technical guidance for awarding organisations, August 2016

## Types of evidence

For each employer involvement activity, centres are required to provide evidence of which learners undertook it, e.g. a candidate attendance register. The types of additional evidence required to support a claim for this component will vary depending on the nature of the involvement. E.g. for a guest lecture it is expected that a synopsis of the lecture and register would be taken which each learner and the guest speaker will have signed; expert witnesses will be identified and will have signed the relevant assessment paperwork for each learner they have been involved in assessing; evidence of contribution from employers to the development of locally set or adapted assignments.

## Quality assurance process

As the employer involvement component is a requirement for achieving the KS5 Technical qualifications, it is subject to external quality assurance by City & Guilds at the approval stage and when centres wish to claim certification for learners.

Evidence will be validated by City & Guilds before learners can achieve the employer involvement component. Where employer involvement is not judged to be sufficient, certificates cannot be claimed for learners.

## Sufficiency of involvement for each learner

It is expected that the centre will plan a range of activities that provide sufficient opportunities for each learner to interact directly with a range of individuals employed in the related industry. Centres must also provide contingencies for learners who may be absent for part of their teaching, so they are not disadvantaged. Any absence that results in a learner missing arranged activities must be documented. Where learners are unable to undertake all employer involvement activities due to temporary illness, temporary injury or other indisposition, centres should contact City & Guilds for further guidance.

## Live involvement

Learners will gain most benefit from direct interaction with employers and/or their staff; however the use of technology (e.g. the use of live webinars) is encouraged to maximise the range of interactions. Where learners are able to interact in real time with employers, including through the use of technology, this will be classed as 'live involvement'.

It is considered good practice to record learning activities, where possible, to allow learners to revisit their experience and to provide a contingency for absent learners. This is not classed as live involvement however, and any involvement of this type for a learner must be identified as contingency.

## Timing

A learner who has not met the minimum requirements cannot be awarded the component, and will therefore not achieve the qualification. It is therefore important that centres give consideration to scheduling employer involvement activities, and that enough time is allotted throughout delivery and assessment of the qualification to ensure that requirements are fully met.

## Work placement practice

Work placement practice may include

- Work experience placements set up, managed and supervised by the training provider.
- Volunteering work in healthcare, care and/or childcare practice (provided that the expectations of the employer is that the learner follows the same code of conduct and is treated equal to other employees and as an employee).
- Paid employment in healthcare, care and/or childcare.



Centres must also complete a record of students' placements which confirms a minimum of 120 – 150 work placement hours that have been completed. The process/format of recording is left to the centre to devise/manage.

### **Work Placement Practice – Workbook**

Learners are provided with a Work Placement Workbook. This can be downloaded/completed hard copy from the qualification webpage or saved and completed electronically.

One workbook would need to be used for each new placement that a learner undertakes. However in total and irrespective of the number of work placements undertaken, learners are required to complete a minimum of three, maximum of four Learner Diaries drawn from their work practice experience for their year of study. (The latter is defined as work practice which is set up and managed/supervised directly by the training provider). For example, one work practice placement could capture one Learner Diary and a second placement using a second workbook could capture the remaining three. Alternatively, all three/four could come from one work practice placement.

The purpose of the workbook is to enable learners to demonstrate their knowledge and skills and show how this informs their personal and professional development during their work placement(s).

Evidence produced therein will be used to support the interview task component of the synoptic summative assessment requirement of the qualification.

## 5 Assessment

### Summary of assessment methods and conditions

Component numbers	Assessment method	Description and conditions
020/520	Externally marked exam	<p>The exam is <b>externally set and externally marked</b>, and can be taken either online through City &amp; Guilds' computer-based testing platform (020) or as a paper based test (520).</p> <p>The exam is designed to assess the candidate's depth and breadth of understanding across content in the qualification at the end of the period of learning, using a range of question types and will be sat under invigilated examination conditions. See JCQ requirements for details: <a href="http://www.jcq.org.uk/exams-office/ice---instructions-for-conducting-examinations">http://www.jcq.org.uk/exams-office/ice---instructions-for-conducting-examinations</a></p> <p>The exam specification shows the coverage of the exam across the qualification content.</p> <p>Candidates who fail the exam at the first sitting will have <b>one</b> opportunity to re-sit. If the re-sit is failed the candidate will fail the qualification. For exam dates, please refer to the Assessment and Examination timetable.</p>
021	Synoptic assignment	<p>The synoptic assignment is <b>externally set, internally marked and externally moderated</b>. The assignment requires candidates to identify and use effectively in an integrated way an appropriate selection of skills, techniques, concepts, theories, and knowledge from across the content area. Candidates will be judged against the assessment objectives.</p> <p>Assignments will be released to centres as per dates indicated in the Assessment and Examination timetable published on our website.</p> <p>Centres will be required to maintain the security of all live assessment materials. Assignments will be password protected and released to centres through a secure method.</p> <p>There will be one opportunity within each academic year to sit the assignment. Candidates who fail the assignment will have one re-sit opportunity. The re-sit opportunity will be in the next academic year, and will be the assignment set for that academic year once released to centres. If the re-sit is failed, the candidate will fail the qualification.</p> <p>Please note that for externally set assignments City &amp; Guilds provides guidance and support to centres on the marking and moderation process.</p>

## **What is synoptic assessment?**

Technical qualifications are based around the development of a toolkit of knowledge, understanding and skills that an individual needs in order to have the capability to work in a particular industry or occupational area. Individuals in all technical areas are expected to be able to apply their knowledge, understanding and skills in decision making to solve problems and achieve given outcomes independently and confidently.

City & Guilds technical qualifications require candidates to draw together their learning from across the qualification to solve problems or achieve specific outcomes by explicitly assessing this through the synoptic assignment component.

In this externally set, internally marked and externally moderated assessment the focus is on bringing together, selecting and applying learning from across the qualification rather than demonstrating achievement against units or subsets of the qualification content. The candidate will be given an appropriately levelled, substantial, occupationally relevant problem to solve or outcome to achieve. For example this might be in the form of a briefing from a client, leaving the candidate with the scope to select and carry out the processes required to achieve the client's wishes, as they would in the workplace.

Candidates will be marked against assessment objectives (AOs) such as their breadth and accuracy of knowledge, understanding of concepts, and the quality of their technical skills as well as their ability to use what they have learned in an integrated way to achieve a considered and high-quality outcome.

## **How the assignment is synoptic for this qualification**

The typical assignment brief could be to design and plan an activity to meet the needs of a particular service setting (e.g. older adults, children) considering safeguarding, communication, policies and procedures etc. This will require the learner to consider the aims and objectives of service provision, methods of communication, theories that underpin practice and ways of supporting healthy living amongst services users. In connection with activity planning, candidates may also be required to complete a simulated communication activity which focuses on their interaction with others. Learners will complete written accounts and justifications of decisions alongside communication activities, as they would do in the workplace. Learners may also be required to produce written accounts to support their activities and implications on practice in healthcare, care and childcare settings.

## **External exam for stretch, challenge and integration**

The external assessment will draw from across the mandatory content of the qualification, using a range of shorter questions to confirm breadth of knowledge and understanding. Extended response questions are included to go into more depth, giving candidates the opportunity to demonstrate higher level understanding and integration through discussion, and ensuring the assessment can differentiate between 'just able' and higher achieving candidates.

## Assessment objectives

The assessments for this qualification are set against a set of assessment objectives (AOs) which are used across all City & Guilds Technicals to promote consistency among qualifications of a similar purpose. They are designed to allow judgement of the candidate to be made across a number of different categories of performance.

Each assessment for the qualification has been allocated a set number of marks against these AOs based on weightings recommended by stakeholders of the qualification. This mark allocation remains the same for all versions of the assessments, ensuring consistency across assessment versions and over time.

The following table explains all AOs in detail, including weightings for the synoptic assignments. In some cases, due to the nature of a qualification's content, it is not appropriate to award marks for some AOs. Where this is the case these have been marked as N/A. Weightings for exams (AOs 1, 2 and 4 only) can be found with the exam specification.

Assessment objective	Level 2 Technical Certificate in Healthcare, Care and Childcare Typical expected evidence of knowledge, understanding and skills	Approximate weighting (Assignment)
<b>AO1</b> Recalls knowledge from across the breadth of the qualification.	Professional/personal skills and qualities, regulations, safeguarding, values that underpin practice, codes of conduct, person centred care, inclusive care/practice, life stages and milestones, development theories, use of terminology, relevant legislation and initiatives, roles and responsibilities, health and safety / risk considerations, core behaviours, local services policy and resourcing services, wider health landscape and inequalities in health.	20%
<b>AO2</b> Demonstrates understanding of concepts, theories and processes from across the breadth of the qualification.	Concepts of skills and qualities, application of legislation and policy to situations (e.g. safeguarding), concepts of health, care and childcare values, concept of roles and responsibilities and their boundaries, principles of person centred care, principle of inclusion, developmental theories and principles, principles of communicating information to a range of age groups, risk management of activities.	35%
<b>AO3</b> Demonstrates technical skills from across the breadth of the qualification.	Supporting patients of different ages (e.g. supporting mobility, feeding, bathing etc.), using a range of communication methods, overcoming barriers to communication, using active listening, following safety procedures, applying infection control measures, risk assessment activity, supporting safety and security.	25%

Assessment objective	Level 2 Technical Certificate in Healthcare, Care and Childcare Typical expected evidence of knowledge, understanding and skills	Approximate weighting (Assignment)
<p><b>AO4</b> Applies knowledge, understanding and skills from across the breadth of the qualification in an integrated and holistic way to achieve specified purposes.</p>	<p>Applying knowledge and understanding to a particular situation, justifying decisions/ approaches taken, considerations of wider application across specific groups, working out solutions to problems, making links between practice in different areas, identification of common trends, consideration of the end user rather than just practice/process, adaptation of thoughts and approaches to meet different care needs, linking of theory to practice, linking values and behaviours to practice, interpreting, collating and filtering information for a range of audiences.</p>	<p>20%</p>
<p><b>AO5</b> Demonstrates perseverance in achieving high standards and attention to detail while showing an understanding of wider impact of their actions.</p>	<p>The requirement for evaluation or attention to detail is not significant enough in this qualification to contribute to the assessment grading.</p>	<p>N/A</p>

## Exam specification

AO weightings per exam

AO	Component 020/520 weighting (approx. %)
AO1 Recalls knowledge from across the breadth of the qualification.	50
AO2 Demonstrates understanding of concepts, theories and processes from across the breadth of the qualification.	30
AO4 Applies knowledge, understanding and skills from across the breadth of the qualification in an integrated and holistic way to achieve specified purposes.	20

The way the exam covers the content of the qualification is laid out in the table below:

**Assessment type:** Examiner marked, written exam\*

**Assessment conditions:** Invigilated examination conditions

**Grading:** X/P/M/D

020/520	Duration: 2 hours		
Unit	Learning outcomes	Number of marks	% (rounded)
	Understand healthcare and care services and settings		
201	Understand reasons why individuals may access healthcare and care services	10	16.7
	Understand factors that affect delivery of healthcare and care services		
202	Understand what childcare is and why it is provided for children and families	10	16.7
	Understand types of childcare services		
	Understand factors that affect access to children and young people's services		
205	Understand principles of health and safety legislation, workplace policies and procedures	7	11.7
	Follow infection control measures		
206	Understand safeguarding legislation including national and local policies	7	11.7
	Understand when safeguarding practices are needed		
208	Understand how theories emerge, become recognised and used	10	16.7
	Understand theories of human growth and development		
201 and 202	Understand career opportunities in healthcare and care	4	7

	Understand career opportunities in services for babies, children and young people		
N/A	Integration across units	12	20
	<b>Total</b>	<b>60</b>	<b>100</b>

\*These exams are sat under invigilated examination conditions, as defined by the JCQ:  
<http://www.jcq.org.uk/exams-office/ice---instructions-for-conducting-examinations>

Entry for exams can be made through the City & Guilds Walled Garden.

## 6 Moderation and standardisation of assessment

City & Guilds' externally set assignments for technical qualifications are designed to draw from across the qualifications' content, and to contribute a significant proportion towards the learner's final qualification grade. They are subject to a rigorous external quality assurance process known as external moderation. This process is outlined below. For more detailed information, please refer to 'Marking and moderation - Technicals centre guidance' available to download on the City & Guilds website.

It is vital that centres familiarise themselves with this process, and how it impacts on their delivery plan within the academic year.

### Supervision and authentication of internally assessed work

The Head of Centre is responsible for ensuring that internally assessed work is conducted in accordance with City & Guilds' requirements.

City & Guilds requires both tutors and candidates to sign declarations of authenticity. If the tutor is unable to sign the authentication statement for a particular candidate, then the candidate's work cannot be accepted for assessment.

### Internal standardisation

For internally marked work<sup>2</sup> the centre is required to conduct internal standardisation to ensure that all work at the centre has been marked to the same standard. It is the Internal Quality Assurer's (IQA's) responsibility to ensure that standardisation has taken place, and that the training includes the use of reference and archive materials such as work from previous years as appropriate.

### Internal appeal

Centres must have an internal process in place for candidates to appeal the marking of internally marked components, i.e. the synoptic assignment and any optional unit assignments. This must take place before the submission of marks for moderation. The internal process must include candidates being informed of the marks (or grades) the centre has given for internally assessed components, as they will need these to make the decision about whether or not to appeal.

Centres cannot appeal the outcome of moderation for individual candidates, only the moderation process itself. A request for a review of the moderation process should be made to [appeals@cityandguilds.com](mailto:appeals@cityandguilds.com).

### Moderation

Moderation is the process where external markers are standardised to a national standard in order to review centre marking of internally marked assessments. These markers are referred to as 'moderators'. Moderators will mark a representative sample of candidates' work from every centre. Their marks act as a benchmark to inform City & Guilds whether centre marking is in line with City & Guilds' standard.

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<sup>2</sup> For any internally assessed optional unit assignments, the same process must be followed where assessors must standardise their interpretation of the assessment and grading criteria.



Where moderation shows that the centre is applying the marking criteria correctly, centre marks for the whole cohort will be accepted.

Where moderation shows that the centre is either consistently too lenient or consistently too harsh in comparison to the national standard, an appropriate adjustment will be made to the marks of the whole cohort, retaining the centre's rank ordering.

Where centre application of the marking criteria is inconsistent, an appropriate adjustment for the whole cohort may not be possible on the basis of the sample of candidate work. In these instances a complete remark of the candidate work may be necessary. This may be carried out by the centre based on feedback provided by the moderator, or carried out by the moderator directly.

Moderation applies to all internally marked assignments. Following standardisation and marking, the centre submits all marks and candidate work to City & Guilds via the moderation platform. The deadline for submission of evidence will be available on Walled Garden. See the *Marking and moderation - Technicals Centre Guidance* document for full details of the requirements and process.

In most cases candidate work will be submitted directly to the moderator for moderation. This includes written work, photographic and pictorial evidence, or video and audio evidence. For some qualifications there will be a requirement for moderators to visit centres to observe practical assessments being undertaken. This will be for qualifications where the assessment of essential learner skills can only be demonstrated through live observation. The purpose of these visits is to ensure that the centre is assessing the practical skills to the required standards, and to provide the moderators with additional evidence to be used during moderation. These visits will be planned in advance with the centre for all relevant qualifications.

### **Post-moderation procedures**

Once the moderation process has been completed, the confirmed marks for the cohort are provided to the centre along with feedback from the moderator on the standard of marking at the centre, highlighting areas of good practice, and potential areas for improvement. This will inform future marking and internal standardisation activities.

City & Guilds will then carry out awarding, the process by which grade boundaries are set with reference to the candidate evidence available on the platform.

### **Centres retaining evidence**

Centres must retain assessment records for each candidate for a minimum of three years. To help prevent plagiarism or unfair advantage in future versions, candidate work may not be returned to candidates. Samples may however be retained by the centre as examples for future standardisation of marking.

## 7 Grading

### Awarding individual assessments

Individual assessments will be graded, by City & Guilds, as pass/merit/distinction where relevant. The grade boundaries for pass and distinction for each assessment will be set through a process of professional judgement by technical experts. Merit will usually be set at the midpoint between pass and distinction. The grade descriptors for pass and distinction, and other relevant information (eg archived samples of candidate work and statistical evidence) will be used to determine the mark at which candidate performance in the assessment best aligns with the grade descriptor in the context of the qualification's purpose. Boundaries will be set for each version of each assessment to take into account relative difficulty.

Please note that as the Merit grade will usually be set at the arithmetical midpoint between pass and distinction, there are no descriptors for the Merit grade for the qualification overall.

### Grade descriptors

#### To achieve a pass, a candidate will be able to

- Demonstrate the knowledge and understanding required to work in the occupational area, its principles, practices and legislation.
- Describe some of the main factors impacting on the occupation to show good understanding of how work tasks are shaped by the broader social, environmental and business environment it operates within.
- Use the technical industry specific terminology used in the industry accurately.
- Demonstrate the application of relevant theory and understanding to solve non-routine problems.
- Interpret a brief for complex work related tasks, identifying the key aspects, and showing a secure understanding of the application of concepts to specific work related tasks.
- Carry out planning which shows an ability to identify and analyse the relevant information in the brief and use knowledge and understanding from across the qualification (including complex technical information) to interpret what a fit for purpose outcome would be and develop a plausible plan to achieve it.
- Achieve an outcome which successfully meets the key requirements of the brief.
- Identify and reflect on the most obvious measures of success for the task and evaluate how successful they have been in meeting the intentions of the plan.
- Work safely throughout, independently carrying out tasks and procedures, and having some confidence in attempting the more complex tasks.

#### To achieve a distinction, a candidate will be able to

- Demonstrate the excellent knowledge and understanding required to work to a high level in the occupational area, its principles, practices and legislation.
- Analyse the impact of different factors on the occupation to show deep understanding of how work tasks are shaped by the broader social, environmental, and business environment it operates within.
- Demonstrate the application of relevant theory and understanding to provide efficient and effective solutions to complex and non-routine problems.
- Analyse the brief in detail, showing confident understanding of concepts and themes from across the qualification content, bringing these together to develop a clear and stretching plan that would credibly achieve an outcome that is highly fit for purpose.

- Achieve an outcome which shows an attention to detail in its planning, development and completion, so that it completely meets or exceeds the expectations of the brief to a high standard.
- Carry out an evaluation in a systematic way, focussing on relevant quality points, identifying areas of development/ improvement as well as assessing the fitness for purpose of the outcome.

### Awarding grades and reporting results

The overall qualification grade will be calculated based on aggregation of the candidate's achievement in each of the assessments for the mandatory units, taking into account the assessments' weighting. The **Level 2 Technical Certificate in Healthcare, Care and Childcare** will be reported on a four grade scale: Pass, Merit, Distinction, Distinction\*.

All assessments **must** be achieved at a minimum of Pass for the qualification to be awarded. Candidates who fail to reach the minimum standard for grade Pass for an assessment(s) will not have a qualification grade awarded and will not receive a qualification certificate.

The contribution of assessments towards the overall qualification grade is as follows::

Assessment method	Grade scale	% contribution
Exam (020/520)	X/P/M/D	40%
Synoptic Assignment (021)	X/P/M/D	60%

Both the synoptic assignment and exam are awarded (see 'Awarding individual assessments', at the start of Section 7, above), and candidates' grades converted to points. The minimum points available for each assessment grade is listed in the table below. A range of points between the Pass, Merit and Distinction boundaries will be accessible to candidates. For example a candidate that achieves a middle to high Pass in an assessment will receive between 8 and 10 points, a candidate that achieves a low to middle Merit in an assessment will receive between 12 and 14 points. The points above the minimum for the grade for each assessment are calculated based on the candidate's score in that assessment.

	Pass	Merit	Distinction
Exam: 40%	6	12	18
Assignment: 60%	6	12	18

The candidate's points for each assessment are multiplied by the % contribution of the assessment and then aggregated. The minimum points required for each qualification grade are as follows:

Qualification Grade	Points
Distinction*	20.5
Distinction	17
Merit	11

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Pass	6
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Candidates achieving Distinction\* will be the highest achieving of the Distinction candidates.

## 8 Administration

Approved centres must have effective quality assurance systems to ensure valid and reliable delivery and assessment of qualifications. Quality assurance includes initial centre registration by City & Guilds and the centre's own internal procedures for monitoring quality assurance procedures.

Consistent quality assurance requires City & Guilds and its associated centres to work together closely; our Quality Assurance Model encompasses both internal quality assurance (activities and processes undertaken within centres) and external quality assurance (activities and processes undertaken by City & Guilds).

For this qualification, standards and rigorous quality assurance are maintained by the use of:

- internal quality assurance
- City & Guilds external moderation.

In order to carry out the quality assurance role, Internal Quality Assurers (IQAs) must have and maintain an appropriate level of technical competence and have recent relevant assessment experience. For more information on the requirements, refer to *Section 2: Centre requirements* in this handbook.

To meet the quality assurance criteria for this qualification, the centre must ensure that the following procedures are followed:

- suitable training of staff involved in the assessment of the qualification to ensure they understand the process of marking and standardisation
- completion by the person responsible for internal standardisation of the Centre Declaration Sheet to confirm that internal standardisation has taken place
- the completion by candidates and supervisors/tutors of the record form for each candidate's work.

### External quality assurance

City & Guilds will undertake external moderation activities to ensure that the quality assurance criteria for this qualification are being met. Centres must ensure that they co-operate with City & Guilds staff and representatives when undertaking these activities.

City & Guilds requires the Head of Centre to

- facilitate any inspection of the centre which is undertaken on behalf of City & Guilds
- make arrangements to receive, check and keep assessment material secure at all times,
- maintain the security of City & Guilds confidential material from receipt to the time when it is no longer confidential and
- keep completed assignment work and examination scripts secure from the time they are collected from the candidates to their dispatch to City & Guilds.

### Enquiries about results

The services available for enquiries about results include a review of marking for exam results and review of moderation for internally marked assessments.

For further details on enquiries and appeals process and for copies of the application forms, please visit the **appeals page** of the City & Guilds website at **www.cityandguilds.com**.

### **Re-sits and shelf-life of assessment results**

Candidates who have failed an assessment or wish to re-take it in an attempt to improve their grade, can re-sit assessments **once only**. The best result will count towards the final qualification. See guidance on individual assessment types in Section 5.

### **Factors affecting individual learners**

If work is lost, City & Guilds should be notified immediately of the date of the loss, how it occurred, and who was responsible for the loss. Centres should use the JCQ form, JCQ/LCW, to inform City & Guilds Customer Services of the circumstances.

Learners who move from one centre to another during the course may require individual attention. Possible courses of action depend on the stage at which the move takes place. Centres should contact City & Guilds at the earliest possible stage for advice about appropriate arrangements in individual cases.

### **Malpractice**

Please refer to the City & Guilds guidance notes *Managing cases of suspected malpractice in examinations and assessments*. This document sets out the procedures to be followed in identifying and reporting malpractice by candidates and/or centre staff and the actions which City & Guilds may subsequently take. The document includes examples of candidate and centre malpractice and explains the responsibilities of centre staff to report actual or suspected malpractice. Centres can access this document on the City & Guilds website.

Examples of candidate malpractice are detailed below (please note that this is not an exhaustive list):

- falsification of assessment evidence or results documentation
- plagiarism of any nature
- collusion with others
- copying from another candidate (including the use of ICT to aid copying), or allowing work to be copied
- deliberate destruction of another's work
- false declaration of authenticity in relation to assessments
- impersonation.

These actions constitute malpractice, for which a penalty (eg disqualification from the assessment) will be applied.

Where suspected malpractice is identified by a centre after the candidate has signed the declaration of authentication, the Head of Centre must submit full details of the case to City & Guilds at the earliest opportunity. Please refer to the form in the document *Managing cases of suspected malpractice in examinations and assessments*.

### **Access arrangements and special consideration**

Access arrangements are adjustments that allow candidates with disabilities, special educational needs and temporary injuries to access the assessment and demonstrate their skills and knowledge

without changing the demands of the assessment. These arrangements must be made before assessment takes place.

It is the responsibility of the centre to ensure at the start of a programme of learning that candidates will be able to access the requirements of the qualification.

Please refer to the *JCQ access arrangements and reasonable adjustments and Access arrangements - when and how applications need to be made to City & Guilds* for more information. Both are available on the City & Guilds website: <http://www.cityandguilds.com/delivering-our-qualifications/centre-development/centre-document-library/policies-and-procedures/access-arrangements-reasonable-adjustments>

### **Special consideration**

We can give special consideration to candidates who have had a temporary illness, injury or indisposition at the time of the examination. Where we do this, it is given after the examination.

Applications for either access arrangements or special consideration should be submitted to City & Guilds by the Examinations Officer at the centre. For more information please consult the current version of the JCQ document, *A guide to the special consideration process*. This document is available on the City & Guilds website: <http://www.cityandguilds.com/delivering-our-qualifications/centre-development/centre-document-library/policies-and-procedures/access-arrangements-reasonable-adjustments>

<b>Level:</b>	2
<b>GLH:</b>	90

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### **What is this unit about?**

The purpose of this unit is for learners to be exposed to the range of services and employment opportunities in the healthcare and care industry sectors. There are many factors that interlink and cross over between the delivery of health and care and as part of this unit learners will consider the similarities and differences of these two sector areas.

Working in healthcare or care can be varied, exciting, and challenging and learners will gain an understanding of the breadth of services delivered by the healthcare and care sectors, the requirements expected of them and the prospects of working within them.

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

- What different types of healthcare services are there?
- What types of settings are care services delivered in?
- What are the benefits of working in healthcare services?
- What job opportunities are there within care?

### **Learning outcomes**

In this unit, learners will:

1. Understand healthcare and care services and settings
2. Understand reasons why individuals may access healthcare and care services
3. Understand factors that affect delivery of healthcare and care services
4. Understand career opportunities in healthcare and care



## *Learning outcome:*

### 1. Understand healthcare and care services and settings

#### Topics

1.1 Terms and definitions used within health and care services

1.2 Structure of healthcare services

1.3 The difference between care and support services

1.4 Settings that deliver services

1.5 Services provided by the healthcare sector

1.6 Services provided by the adult care sector

#### **Topic 1.1**

Definitions of terms used in healthcare:

- Health
- Healthcare
- Healthcare settings – e.g. acute/community/specialist/diagnostic
- Illness
- Disease
- Patients/Individuals using services
- Complex needs
- Long-term conditions
- Mental ill-health
- End of life services.

Definitions of terms used in care:

- Age related care
- Adult – legal definition
- Health
- Care
- Support
- Vulnerable adults and children.

Definitions of terms used in providing healthcare services:

- Acute healthcare
- Community healthcare/outreach services
- Specialist healthcare services – e.g. palliative care/end of life/dementia support/critical care
- Primary care
- NHS Trusts and Care Commissioning Groups
- Department of Health & Social Care including Public Health
- Donor services
- Voluntary and charitable services
- Informal healthcare support – e.g. non-paid family carers/carer support.

Definitions of adult service groups:

- Adults with learning disabilities/learning difficulties
- The older adult

- Adults with mental ill-health
- Adults with physical disability
- Adults with sensory disability
- Adults with complex needs.

### Topic 1.2

Structure of service provision:

- Private
- Charitable/Third Sector/Public
- Voluntary and community
- Informal – e.g. family and friends.

### Topic 1.3

Types of care and support, including how they may overlap:

Support

- Physical – e.g. assistance with eating and drinking, assistance with dressing and personal care
- Emotional – e.g. befriending, sitting services, befriending groups, support groups/specialist support programmes – e.g. eating disorders/ bereavement / pre-diabetes programmes
- Practical support– e.g. gardening, shopping, transport, cleaning and provision of technologies
- Social – e.g. day centre attendance, attending appointments, accessing facilities – work/school/college education.

Care

- Physical – e.g. washing, dressing, bathing, eating and drinking, sleeping, mobility
- Emotional – e.g. listening, providing company, relieving distress
- Practical – e.g. domestic duties, paying bills, collecting pensions, cleaning and provision of appliances/aids
- Social – e.g. engaging with someone to enable social interaction, mobility support to access outings/holidays.

### Topic 1.4

Settings in which healthcare services can be delivered:

- GP practices
- Hospitals – NHS, specialist, private
- Community settings – e.g. community hospitals, day centres, mobile provisions, clinics, shops and other outlets
- Leisure centres – e.g. exercise programmes – group and individual
- Personal homes – e.g. community nurses, domiciliary care, home from hospital services, specialist services – e.g. MacMillan/ Community Cardiac teams/palliative care/ Admiral nurses'
- Nursing homes, Residential Homes
- Hospices
- Schools.

Categories of care service provision:

- Short-term – e.g. crisis intervention, home from hospital, respite, self-referral

- Medium-term – e.g. domiciliary care, respite, rehabilitation (mobility, substance misuse, mental health)
- Long-term – e.g. nursing or residential services, day centres, hostels, palliative care, hospices.

### Topic 1.5

Services delivered by healthcare providers:

- Acute healthcare:
  - GP surgeries
  - Nurse led clinics, Nurse practitioner
  - emergency care – e.g. Ambulance/ paramedical services, A&E, out of hours services, Critical Care/ ICU
  - general Hospital care – e.g. midwifery services, inpatient acute care- surgical and medical
  - acute mental health services.
- Community healthcare:
  - Health Visitors, District Nurses, domiciliary care, sexual health services
  - re-ablement and rehabilitation services, speech and language, occupational health, physiotherapists, school nurses
  - mental health services – e.g. Dementia care, substance misuse clinics, eating disorder clinics and outreach services.
- Referral services:
  - Allied Health professionals – e.g. Dentists, Opticians, Pharmacies, Physiotherapists, Podiatrists, Audiology
  - prison services
  - Social workers and social care services
  - safeguarding services and police, Domestic Violence units
  - self-help groups – e.g. Alcoholics Anonymous, Desmond Programme, Weight management programmes; Expert patient groups (Parkinson’s disease/ Arthritis), specialist Therapeutic programmes – e.g. cognitive behavioural therapy groups.
- Specialist care – e.g. palliative care units, hospices, burns units, oncology/cancer units; hearty failure clinics; renal dialysis units.
- Public health services:
  - well-women and well-man screening services
  - health promotion – e.g. smoking cessation, healthy eating, exercise
  - immunisation services
  - sexual Health services including HIV
  - prevention of Diabetes programmes
  - CBT programmes for anxiety/depression/eating disorders.
- Donor services:
  - Blood and Bone Marrow
  - Organs – e.g. heart, lungs, corneas, kidney.

### Topic 1.6

Types of national and local service provision for adults with a learning disability/learning difference:

- Day centres/training centres/colleges
- Work and voluntary opportunities
- Supported living
- Mentoring services
- Short breaks and respite services
- Private, voluntary and charitable support
- Community based – social enterprises.

Types of national and local service provision for the older adult:

- Day centres
- Residential and nursing homes
- Sheltered accommodation
- Domiciliary care provision
- Private, voluntary and charitable support for specific service user groups – i.e. MacMillan, Admiral Nurses
- Respite services
- Befriending services
- Community based outreach services- District Nursing teams; GPs.

Types of national and local service provision for adults with mental ill-health:

- Supported/independent living
- Secure units
- Day/learning centres
- Hostels
- Drop in services
- Private, voluntary and charitable organisations
- Crisis centres
- Support groups
- Community based – outreach services – e.g. Community Psychiatric Nurses/ GPs.

Types of national and local service provision for adults with physical or sensory disability:

- Day centres/training centres/colleges
- Work and voluntary opportunities
- Mentoring services
- Short breaks and respite services
- Private, voluntary and charitable support – to include assistance animals
- Supported living
- Assistive technology
- Community based – outreach services – i.e. Library- talking books home service; mobility assessments.

Types of national and local service provision for adults with a range of complex needs:

- Integrated services – e.g. health and social care professional and services working together
- Translation/interpreting services
- Advocacy services
- Police services
- Immigration services
- Legal services
- Citizens advice services

- Social worker support
- Private, voluntary and charitable support
- Community based – social outreach services providing specialist medical and nursing services.

### *Learning outcome:*

2. Understand reasons why individuals may access healthcare and care services

### **Topics**

2.1 Reasons people require healthcare and care services

2.2 Conditions, illnesses and diseases that require healthcare services

#### **Topic 2.1**

Reasons why people may require healthcare services and support:

- Medical illnesses
- Conditions requiring surgery
- Mental ill-health
- Cognitive impairment issues
- Complex needs and comorbidity issues
- Health support/wellness – e.g. insurance requirements, travel vaccinations, occupational health and those who are - pregnant, attending screening services
- Trauma – e.g. emergency care, accidents
- Long-term conditions
- Symptom control
- End of life/palliative care.

Reasons why adults may require care:

- Physical needs
- Mental health needs
- Social needs
- Emotional needs.

#### **Topic 2.2**

Common conditions, illnesses and diseases that require the services of healthcare:

- Heart Disease – e.g. stroke, heart failure, high blood pressure
- Diabetes – e.g. type 1 and 2
- Cancer – e.g. leukaemia, breast cancer, prostate cancer, bowel cancer
- Mental illnesses – e.g. depression, eating disorders, anxiety, post-traumatic stress disorder
- Infections – e.g. COVID-19, influenza
- Associated complications and risks – MRSA, urinary tract infections, sepsis
- Health conditions that arise from complex needs – e.g. life limiting conditions, substance dependencies, pressure sores, chronic fatigue, secondary health issues.

## *Learning outcome:*

### 3. Understand factors that affect delivery of healthcare and care services

#### Topics

#### 3.1 Funding of services

#### 3.2 Personal choice and capacity in relation to healthcare and care services

#### 3.3 Legislation and regulation of healthcare and care services

#### 3.4 Differences between healthcare providers

#### 3.5 Challenges facing the sectors

#### **Topic 3.1**

Methods of funding for services:

- Government – national and local spending from taxes
- Charitable – e.g. lotteries, associations such as MacMillan
- Individual – self-funding
- Private companies/ health insurance.

#### **Topic 3.2**

Factors that impact whether individuals choose to access healthcare and care:

- Mental capacity and incapacity including accountability and consent
- Individual preference – e.g. culture, religion, beliefs and preferences, physical health
- Family intervention
- Compulsory/enforced provision
- Financial constraints
- Support network.

#### **Topic 3.3**

Key principles of current legislation and regulations relevant to different Health/Care sectors, country specific application and impacts on practice.

#### **Topic 3.4**

How the healthcare and care sectors work together:

- Integrated healthcare and care services and cross funding
- Multi-disciplinary teams of health and care professionals
- Early intervention initiatives – e.g. family support, home from hospital
- Needs assessment and health care packages.

#### **Topic 3.5**

Challenges that the healthcare and care sectors face:

- Financial versus emerging health issues
- Expensive treatments and medication
- Unhealthy lifestyle factors
- Technology
- Ageing population

- Multiple disease presentation (co-morbidity)
- Increasing demand and expectation for healthcare/care services – e.g. cancer treatments
- Changes in legislation and regulation – political climate
- Multi-culturalism
- Local population care issues
- A pandemic infection.

*Learning outcome:*

#### **4. Understand career opportunities in healthcare and care**

##### **Topics**

4.1 Job roles and career opportunities in health and care services

4.2 Clinical and non-clinical job roles in healthcare

4.3 Job roles and career opportunities in care

4.4 Transferrable skills when working in healthcare and care settings

4.5 Training and development for health and care work

##### **Topic 4.1**

Differences between job roles and career opportunities within the health and care sector including clinical and non-clinical roles:

Clinical job roles/opportunities in the health and care services: –

- Doctors – e.g. Hospital medical/ surgical doctors, GPs, surgeons, anaesthetists
- Clinical technicians – e.g. ECGs, Ultrasounds, MRI
- Nurses and Midwives and including the range of specialisms from acute care to school nurses
- Allied health care professions – e.g. physiotherapists, occupational therapists, pharmacists, lab work, healthcare support workers
- Healthcare worker and Assistant Practitioners.

Non-clinical job roles/opportunities in the healthcare services:

- Support staff – e.g. caterers, cleaners, porters, clerical administration; hospital clergy; specialist social worker; mortician
- Management – e.g. human resources, estates management, legal, finance
- Ancillary roles – e.g. facilities, maintenance/engineering, IT
- Education and training/learning and development.

Career opportunities and pathways in healthcare and care services with consideration of:

- Apprenticeships in Health; Adult Care; Business Admin; Customer Service
- Qualification requirements
- Experience requirements
- Opportunities for career progression
- Personal attributes/values and behaviours.

Importance of positive role models in healthcare and care – crossing gender, culture, ability.

## **Topic 4.2**

Key clinical and non-clinical tasks undertaken in in healthcare roles.

Clinical nursing undertaken in a range of healthcare settings:

- Taking and recording observations – e.g. blood pressure, temperature, respiration
- Administering and recording medication
- Administering and recording vaccinations
- Taking samples – e.g. blood, stool, urine
- Undertaking treatments and dressings
- Preventing pressure sores
- Other specialist clinical tasks.

Non-clinical tasks undertaken in a range of healthcare settings:

- ICT/use of technology
- Diagnostic testing
- Making appointments
- Food preparation and delivery
- Cleaning
- Teaching and training
- Operational and people management and logistics
- Building and equipment maintenance.

## **Topic 4.3**

Job roles in adult care:

- Domiciliary care – e.g. home care workers through to the levels of managers
- Adult/day centre – e.g. Care Assistant, Support Worker, Senior Support Worker, Team Leaders through to managers
- Residential care – e.g. Care Assistant, Senior Care Assistant, Manager
- Supported living – e.g. Support Worker, Senior Support Worker, Manager
- Allied professions – e.g. Occupational therapist, Physiotherapist, Speech and Language Therapist
- Other job opportunities – e.g. social work, youth Work, Psychologist, Trainer, Counsellor, IT and administration roles, facilities, HR, hospitality and catering, finance, housing, legal, police, probation, armed forces.

## **Topic 4.4**

Transferrable skills across roles in healthcare and care

- Literacy and numeracy appropriate to role
- Communication
- Teamwork
- Time management
- Report writing and record keeping
- Values.

## **Topic 4.5**

Training and development opportunities within healthcare and care:

- Employment in different roles
- Apprenticeships – e.g. business and administration, healthcare, IT, customer service, adult care, digital/IT, hospitality and catering
- Further full-time education – vocational and academic leading to professional training



- Voluntary work – UK or overseas
- Working within a charity delivering health and care services – e.g. homeless projects; Admiral Nurses; Father's houses.

## Guidance for delivery

Learners should be encouraged to explore the similarities and differences between the two employment areas and tutors should plan delivery of the unit accordingly.

Tutors need to be aware of the current changing demographic trends local to delivery as well as across England, Wales and Northern Ireland. Tutors should be aware of the impact of the roll out of government initiatives in healthcare and adult care delivery for example 'Transforming Your Care'. Tutors should also ensure that they keep up to date with changes and amendments to legislation covered by this unit and include delivery of locally relevant policy and standards where relevant.

The learning outcome on career opportunities should be supported by visits to, or talks from employers from a variety of the areas covered in the depth section. Representatives from industry should be invited to meet with learners and discuss a typical day in their work setting, including reference to personal values, behaviours and how they work in partnership with other roles, teams and departments.

In support of this unit tutors are encouraged to incorporate the use of employers and/or other healthcare and care professionals as external speakers and to facilitate work experience placements to build on the students learning and development

For learning outcome 1, topic 1.1 it is recognised that terminology used in the industry may change over time and it is expected that tutors deliver this topic using terms in current practice.

For learning outcome 2, topic 2.1 tutors should ensure they provide learners with relevant examples for each of the reasons why people may require healthcare services e.g. medical – following surgery etc.

This unit could be delivered in conjunction with or alongside unit 202 'Working with babies, children, young people and families in care and education'.

<b>Level:</b>	2
<b>GLH:</b>	60

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**What is this unit about?**

The purpose of this unit is for learners to gain an understanding of working with babies, children, young people, their families and carers. The unit covers reasons why children and families may require support and gives an overview of the importance of services and support provided by the sector.

Learners will look at the variety of settings where services for babies, children, young people and families are delivered including childcare, play therapy and youth work, and associated age, sector or country curricula. Developing this understanding will enable learners to appreciate how practitioners from different settings work together to ensure the best outcomes for babies, children and young people.

This unit also provides learners with the opportunity to explore the many career paths and options available within the sector from introductory to management or senior practitioner level.

Learners may be introduced to this unit by asking themselves questions such as:

- What services are available for children and families?
- Where are services for children and families offered?
- How are different age groups of children categorised?
- What job roles are there for professionals working with children and families?

**Learning outcomes**

In this unit, learners will:

1. Understand what childcare is and why it is provided for babies, children and families
2. Understand types of services for babies, children and young people
3. Understand factors that affect access to services for babies, children and young people
4. Understand career opportunities in services for babies, children and young people

## *Learning outcome:*

1. Understand what childcare is and why it is provided for babies, children and families

### **Topics**

- 1.1 Definitions of terms used in services for babies, children and young people
- 1.2 Supporting and engaging with parents
- 1.3 Specific needs in services for babies, children and young people
- 1.4 Why babies, children and families may require care and support

#### **Topic 1.1**

Definitions of terms used in childcare:

- Childhood – definitions of legal ages
- Babies, children and young people
- Actual age vs legal age issues
- Special educational needs
- Parent(s)
- Legal guardian
- Social worker
- Family
- Key worker
- Speech, Language and Communication Needs (SLCN)
- Preschool
- Alternative Education Programs (AEPs)
- Foster care
- Non statutory childcare services
- Statutory education services.

#### **Topic 1.2**

Ways of supporting and engaging with parents:

- Positive engagement
- Open communication
- Fixing problems
- Communicating through technology/written information
- Seeking support from other agencies/professionals when required.

#### **Topic 1.3**

Babies, children and young people with specific needs:

- Behavioural issues – e.g. Attention Deficit Hyperactivity Disorder (ADHD)
- Autistic spectrum disorders
- Childhood infections
- Childhood long-term conditions – e.g. Asthma, Eczema, Diabetes, Coeliac, sickle cell
- Accidents – e.g. broken limbs, allergies – i.e. food allergies (nuts, dairy, shellfish, strawberry, gluten)
- Learning disability/learning difficulty – e.g. dyslexia, dyscalculia, dyspraxia
- Physical requirements – e.g. support from sight loss, hearing difficulties, wheelchair users
- Life limiting conditions – e.g. cancer, leukaemia's.

#### **Topic 1.4**

Reasons why babies, children, young people and families may require care:

- Physical support needs
- Mental health support needs
- Social support needs
- Supporting employment needs – e.g. parents or young people
- Family support needs
- Educational and skills support and development needs.

#### *Learning outcome:*

2. Understand types of services for babies, children and young people

#### **Topics**

2.1 Settings that offer services to babies, children, young people and families

2.2 Services available to babies, children, young people and families

#### **Topic 2.1**

Settings that offer services to babies, children, young people and families:

- Day Nurseries/Day Care
- Crèches
- Nursery School/Pre-school/School
- Sessional Care/Play Groups
- Out of School Groups/Clubs/Centres and School Aged Childcare
- Childminding services
- Wraparound care – e.g. breakfast club, homework club
- Home-based informal care – e.g. grandparents, siblings
- Foster care
- Residential care
- Hostels
- Secure units/youth offender institutions
- Alternative approaches – e.g. Montessori, HighScope, Reggio Emilia, Forest, Playwork, Steiner
- Community outreach health services units
- Paediatric units in hospitals.

#### **Topic 2.2**

Services available to babies, children, young people and families:

- Childcare – informal and formal
- Education
- Support from family members
- Specialist services – e.g. specialist groups for children with learning disabilities, eating disorder services; counselling services for under 18s; speech and language development services; Around the Child, Early Help services
- Sports – e.g. clubs; swimming for mothers and babies, horse-riding for people with disabilities
- Arts – e.g. music, and drama groups to support mental health

- Health – acute services including paediatric services.
- Community outreach health services units – i.e. mental health and sexual health
- Paediatric units in hospitals
- Social services
- Community initiatives – Guides, Scouts, Church groups, Toddler groups
- Youth work, youth justice.

*Learning outcome:*

3. Understand factors that affect access to services for babies, children and young people

**Topics**

3.1 Structure of services for babies, children and young people

3.2 Funding of services

3.3 Legislation and regulation relating to services for babies, children and young people

3.4 Impacts of legislation on practice and services

**Topic 3.1**

Structure of service provision for babies, children and young people:

- Private
- Charitable/Third Sector/Voluntary sector – e.g. social enterprise
- Statutory
- Informal – e.g. family, friends.

**Topic 3.2**

Methods of funding for services for babies, children and young people:

- Government – i.e. through taxation
- Local authority
- Private Charitable/Third Sector.

**Topic 3.3**

Learners should have an awareness of current legislation and regulations relevant to their work sector, country and the specific application of these to practice.

**Topic 3.4**

Ways in which legislation and policy impacts on day-to-day practice in babies, children and young people's settings:

- Rights of the child
- Health, safety and risk management
- First aid provision
- Education and training
- National strategies to address radicalisation and extremism, where these exist.
- Regulation of care provision
- Safeguarding
- Recruitment and training of staff working within sector.

### *Learning outcome:*

4. Understand career opportunities in services for babies, children and young people

#### **Topics**

4.1 Career opportunities working in services for babies, children and young people

4.2 Job roles in childcare and young people's services

4.3 Transferrable skills when working in services for babies, children and young people

4.4 Training and development opportunities in services for babies, children and young people

#### **Topic 4.1**

Career opportunities and pathways working in services for babies, children and young people:

- Qualification requirements
- Experience requirements
- Opportunities for career progression within and across sectors
- Personal attributes/qualities and behaviours.

Importance of positive role models in childcare - e.g. gender, culture, inclusivity and accessibility, relevance of media role modelling.

#### **Topic 4.2**

Job roles in services for babies, children and young people:

- Nursery Nurse/Assistant/Supervisor/Deputy Manager/Manager
- Playwork Assistant/Supervisor/Deputy Manager/Manager
- Childcare Assistant/Supervisor/Deputy Manager/Manager
- Deputy Officer in Charge /Officer in Charge
- Designated Safeguarding Officer Residential Childcare Officer/Senior Officer/Residential Childcare Manager
- Youth Worker
- Educational Psychologist
- Speech and Language Therapist
- Social Worker
- Youth Offending Officer
- Teaching Assistant/Higher Level Teaching assistant/Teacher/Lecturer
- Special Educational Needs Co-ordinator
- Midwife/Paediatric Nurse /Health Visitor /CPN
- Children and young people's counsellor.

#### **Topic 4.3**

Transferrable skills across roles in childcare:

- Literacy and numeracy appropriate to role
- Communication
- Teamwork
- Time management
- Report writing and record keeping.

#### Topic 4.4

Training and development opportunities within childcare:

- Employment in different roles within a child service
- Apprenticeships – e.g. business and admin, childcare, healthcare, residential childcare
- Further full-time education – vocational and academic courses in childcare
- Voluntary work – UK or overseas
- Residential setting manager
- Teaching in schools and colleges up to school leaving age.

#### Guidance for delivery

Learners should be able to access a range of settings to explore the range of services offered to children, young people and families. This should include looking at the range of qualifications and career pathways that exist within these roles and settings. Learners should be given access to a wide range of sources in order to gain an understanding of the different approaches used in these settings.

The learner should have a sound knowledge of current legislation and policy and how this informs policies, procedures and practice in settings. The learner needs to understand how this legislation impacts on the work environment and practice and how curricula can vary across the countries within the UK e.g. National Curriculum, alternative curriculums, Early Years Foundation Stage, Early Years Foundation Phase, NI Pre-school Curriculum, Flying Start, Developmental Programme for 2-3yr old, Playwork and Youthwork curricula.

Learners will need to understand what is meant by effective communication and the importance of this in enabling the learner to develop the skills required to communicate effectively with the range of people involved with children, young people and their families.

Tutors should use a wide range of techniques to support learners in this unit. These should include small and large group discussions, demonstrations, research using the internet and/or other library resources and presentations by guest speakers.

Placement practice is an essential part of this unit that offers an opportunity to see practice first hand and explore some possible roles in working with children, young people and families.

Learners would also benefit from visits from those involved in delivering services to children, young people and families. Case studies and presentations describing the roles and responsibilities involved in different posts would provide learners with a range of experiences. The use of case studies, digital and archive material and photographic material will be useful as a secondary source of data.

Employer engagement is essential in order to maximise the value of the learners' experience. A partnership approach is critical to ensuring that learners have access to a broad range of practice opportunities to support their learning in the setting, including experiencing and reflecting on the delivery of specific curriculum within the chosen work placement(s).

The learning outcome on career opportunities should be supported by visits to, or talks from employers from a variety of the areas covered in the depth section. Representatives from the childcare industry should be invited to meet with learners and discuss a typical day in their work setting, including reference to personal values, behaviours and how they work in partnership with other roles, teams and departments.

This unit could be delivered in conjunction with or alongside unit 201 'Working in healthcare and care.'



## Unit 203

## Values, beliefs and behaviours for working in healthcare, care and childcare settings

<b>Level:</b>	2
<b>GLH:</b>	30

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### What is this unit about?

The purpose of this unit is for learners to understand the importance of developing positive values and behaviours that can be applied and demonstrated when working within a healthcare, care or childcare setting. This unit also requires learners to become more self-aware as they examine the principles and values required for working in their preferred sector and use these to evaluate their own personal qualities and value base.

This unit will support work placement(s) which will provide learners with the opportunity to develop through working alongside other workers in a real-life situation. It is recommended that this unit is offered before learners start their work placement practice. This will enable learners to be aware of what constitutes good practice in any healthcare, care or childcare setting.

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

- What is the difference between principles and behaviours?
- Why are values important when working in healthcare, care and childcare settings?
- What is the difference between personal and professional behaviours?
- How can differences in personal and professional values be overcome?

### Learning Outcomes

In this unit, learners will:

1. Understand personal qualities required for working in healthcare, care and childcare settings
2. Understand workplace values required for working in healthcare, care and childcare settings
3. Understanding person-centred approaches in healthcare, care and childcare work
4. Provide care and support in health, care and childcare settings

### *Learning outcome:*

1. Understand personal qualities required for working in healthcare, care and childcare settings

#### **Topics**

- 1.1 Qualities for working with people in healthcare, care and childcare settings
- 1.2 Core behaviours for working in healthcare, care and childcare settings
- 1.3 Conflicts in values when working in healthcare, care and childcare settings

##### **Topic 1.1**

Positive qualities required for working with all people in all healthcare, care and childcare settings.

Qualities include:

- Adaptability
- Flexibility
- Motivation
- Enthusiasm
- Reliability
- Good sense of humour
- Self-presentation
- Resilience
- Courage.

##### **Topic 1.2**

Core behaviours essential for working with people using services:

- Caring
- Interested and enthusiastic
- Compassionate
- Empathetic
- Courageous
- Effective communicator
- Competent
- Committed
- Approachable
- Aspirational – solution focussed
- Creative.

##### **Topic 1.3**

Conflicts and personal challenges that may arise between own ideas and values (e.g. religious, social, moral codes, cultural values, peer values, behavioural codes from life experience and upbringing) and behaviours expected within the work place or that arise from working with individuals.

### *Learning outcome:*

2. Understand workplace values required for working in healthcare, care and childcare settings

#### **Topics**

2.1 Legislation, regulations and codes of conduct

2.2 Workplace values for healthcare, care and childcare settings

2.3 Professional behaviour within the workplace

2.4 Responsibilities and accountabilities

#### **Topic 2.1**

Key principles of current legislation and regulations relevant to work sector, country and specific application to practice.

Relevance of legislation, regulations, codes of conduct and organisational policies/procedures that represent the core values and behaviours for each sector.

#### **Topic 2.2**

Concepts of workplace values:

- Professionalism
- Valuing rights and choices
- Fairness
- Respect
- Equality of opportunity
- Anti-discriminatory practice
- Valuing diversity
- Partnerships
- Empowerment
- Valuing and promoting inclusive practice Maintaining dignity and privacy
- Honesty
- Integrity
- Self-esteem and a positive self-image
- Person centred working
- Celebrating Individuality and self- identity
- Confidentiality
- Care, compassion, courage, effective communication, competence, commitment
- Needs, rights and views of the individual being at the centre of all practice and provision.

#### **Topic 2.3**

Essential components of professional behaviour within the workplace:

- Effective communication with all people
- Completing tasks to required standard
- Meeting deadlines
- Planning workloads
- Timekeeping
- Teamwork

- Maintaining confidentiality
- Prioritising
- Working with risk
- Continual professional development (CPD)
- Giving and receiving of feedback – e.g. peer, supervisor/manager.

#### **Topic 2.4**

Understanding the limits of, and the importance of, working within the job roles:

- Setting boundaries when working in professional relationships with people
- The difference between being friends and being professionally friendly
- Safe use of social and media sites
- Responsibilities for reporting poor practice; whistleblowing
- Accountability – understanding consequences when acting within and outside of role
- Courage to say ‘no’.
- Duty of care in own role.

#### *Learning outcome:*

3. Understanding person-centred approaches in healthcare, care and childcare work

#### **Topics**

3.1 Principles of person-centred working

3.2 Application of person-centred working

#### **Topic 3.1**

Principles of person-centred approaches including rights. The right:

- To be heard
- To be informed
- To be involved in decisions made about self
- To consent to interventions offered or not.
- To take risks
- To access a range of services
- To rest, relaxation and play/leisure activities
- To refuse services.

#### **Topic 3.2**

Process of person-centred approaches in healthcare, care and childcare:

- Assessment
- Planning approaches
- Delivery – e.g. active participation, supporting participation
- Decision making for positive outcomes
- Impact of approaches and decisions made
- Review and evaluation of the above
- Reassessment.

### *Learning outcome:*

4. Provide care and support in health, care and childcare settings

#### **Topics**

4.1 Providing care and support

4.2 Planning and reviewing support provision

##### **Topic 4.1**

Provide care and support to individuals in work settings:

- **Adult:**
  - washing and dressing (including washing and brushing hair and shaving)
  - cleaning teeth/oral health
  - support with toileting
  - preparing food and drinks
  - supporting with eating and drinking
  - support with taking medication
  - support with moving and handling
  - enabling access to activities
  - providing company.
  
- **Babies, Children, Young people:**
  - support with changing a nappy, toileting/ toilet training when needed – e.g. young child or young person with disabilities)
  - preparing and helping with bottle feeding
  - bathing and dressing – e.g. baby, young child or young person with disabilities)
  - cleaning teeth/oral health training
  - support with moving and handling – e.g. baby, young child or young person with disabilities)
  - providing activities to support and develop individual preparing food and drink under guidance
  - preparing utensils and equipment for food and drink
  - assisting with socialising activities
  - providing comfort.

##### **Topic 4.2**

Information and planning for support provision:

- Assessment of needs/aspirations
- Planning
- Preparing resources
- Timings
- Sharing information with colleagues.

## Guidance for delivery

It is important that this unit is started early on in the programme delivery as it provides the basis of knowledge required to undertake an effective work placement. Tutors should guide learners to develop their understanding of principles, values and behaviours required for working within healthcare, care and childcare settings. Learners will need to understand how these are essential for employment within the sector.

Learners should be aware of how their study and professional development can be optimised by the use of technology and other tools and resources. These may include notebooks, Dictaphones, collaborative learning, role play and other active learning strategies.

The topics discussed may resonate with some personal circumstances and the learners should be encouraged to identify personal support systems as well as those provided by the learning environment. Support may include family, friends, colleagues, peers and trainers.

Learner should know how to avoid plagiarism and the consequences of plagiarising other people's work. They should understand the principles of academic writing and use study centres and libraries, relevant television and other media to extend their understanding of the topics  
Learners should be aware of the opportunities to motivate, boost self-confidence, minimise distractions and develop self-awareness.

Learners could be supported to undertake case study exemplars, review video clips showing different values and behaviours, write reflective accounts, discuss reported malpractice where values and behaviours have not been upheld and interview practitioners.

This unit supports the work placement practice requirement for the qualification and is supported by a work placement workbook. This will enable the learner to record their work placement experience(s) and develop their skills in active learning, and the development of their core values and behaviours in their practice.

This unit has strong links with unit 204 'Communicating for effective practice in healthcare, care and childcare' and the delivery of learning could therefore be combined.

The unit presents opportunities to support English learning for example:

- Completion of the work placement workbook

<b>Level:</b>	2
<b>GLH:</b>	30

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**What is this unit about?**

The purpose of this unit is to enable the learner to understand the importance of effective communication in healthcare, care and childcare settings. The learner will develop their knowledge of different forms of communication and how to use these confidently within their role in a range of services. Learners will appreciate how the quality of interpersonal communication directly impacts on the experience of those in receipt of services. Learners will understand that developing confidence to communicate with people from different cultures and communities enriches their own interpersonal skills.

Effective communication is essential to all healthcare, care and childcare settings and the quality of communication directly affects the outcomes of the services provided and the ways the service is viewed by regulators. Learners will need to understand that different cultures express their beliefs, values and customs through communication and that these should enrich the ways communication is addressed within services.

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

- What is effective communication and why is it important?
- What interpersonal skills do I need to develop in order to work in a healthcare, care or childcare setting?
- What are barriers to effective communication and how can these be overcome?
- How can communication skills be adapted to suit the requirements of a range of people who use services such as children, older people or people from different cultures?

**Learning outcomes**

In this unit, learners will:

1. Communicate effectively with others
2. Overcome potential barriers to effective communication
3. Communicate using active listening skills
4. Understand responsibilities when producing written records

## *Learning outcome:*

1. Communicate effectively with others

### **Topics**

- 1.1 Why communication is important
- 1.2 Ways of communicating
- 1.3 Differing communication requirements
- 1.4 Considerations when communicating

#### **Topic 1.1**

Importance and impact of effective communication in healthcare, care and childcare environments:

- Communication cycle - providing, receiving and sharing information (including raising concerns, teaching and learning)
- Encouraging choice and independence when communicating with those accessing services
- Promoting active participation of those accessing services
- Supporting and developing partnership working with other professionals, services and external agencies
- Building and maintaining positive relationships within teams
- Building and maintaining positive relationships with those accessing services (including parents, other family members and friends)
- Developing, promoting and reinforcing speech and language acquisition in children and young people
- Promoting and reinforcing speech and language rehabilitation.

#### **Topic 1.2**

Communicating using different methods:

- Verbal communication – e.g. use of language, tone and pitch, pace, use of colloquialisms, jargon and appropriate language for the work environment
- Non-verbal communication – e.g. position, eye contact, body language, gestures, posture, positioning self at the same level
- Touch – e.g. shaking hands, hands-on approach, importance of touch in providing comfort
- Signs, symbols and pictures – e.g. Braille, Makaton, emojis, communication passport
- Written – e.g. reports, essays, letters, memos, posters,
- Electronic media and technology – e.g. phones, social media sites, internet, Assistive technology, Online meetings and video calling texting, email, apps, monitoring systems.

#### **Topic 1.3**

Communicating with people with different communication requirements:

- Internal communication -
  - Team members and colleagues
  - Those requiring care or support – e.g. children, adults in health/care settings
  - Significant others – e.g. parents, friends, family members
  - Other professionals within setting – e.g. doctors, Special Educational Needs Co-ordinators (SENCO), nurses, Allied health professionals.



- External communication -
  - The public
  - Other service providers – e.g. delivery services, food suppliers, pharmacists, outreach services
  - Other professionals – e.g. GPs, social workers, teachers, educational psychologist, external agencies and partner organisations.

#### **Topic 1.4**

Considerations when communicating with others:

- Age – actual and developmental
- Learning differences and disabilities
- Professional background – e.g. reporting to other professionals
- Cultural and ethnic grouping
- Life experience – e.g. someone who has just been bereaved, young parent, toddler
- Mental state – e.g. confused, anxiety, distressed
- Language – e.g. speech, language, normal development and delay difficulties, those with English as a second language
- Awareness of possible communication, speech, language difficulties -dyslexia; dysphasia, aphasia; post stroke, cerebral palsy
- Environment – e.g. suitable for purpose.

*Learning outcome:*

2. Overcome potential barriers to effective communication

#### **Topics**

2.1 Barriers to communication

2.2 Overcoming barriers to communication

#### **Topic 2.1**

Potential barriers to effective communication:

- Sensory impairment
- Cognitive impairment – e.g. brain injury, moderate to profound learning needs
- Developmental delay/learning differences – including speech, language and communication needs, dyslexia/specific learning differences, Autistic spectrum disorders
- Confusional states – e.g. dementia, substance misuse, severe psychiatric illness
- Illnesses giving rise to communication, speech, language difficulties through to being nonverbal – e.g. stroke, cerebral palsy
- Language differences
- Cultural, ethnic and community differences
- Inappropriate or complex terminology – e.g. misinterpretation
- Stereotypical attitudes – e.g. ageism, gender stereotyping.

#### **Topic 2.2**

Overcoming barriers to effective communication:

- Active listening, patience, empathy and negotiation skills
- Questioning techniques – open and closed questions
- Communication needs/skills assessments
- Specialist communication services – e.g. mediator, translator, signer, speech therapists
- Assisted technology – e.g. hearing aids/loops, electronic communication passport, speech synthesizer

- Overcoming environmental barriers.

*Learning outcome:*

3. Communicate using active listening skills

**Topics**

3.1 Listening skills

3.2 Confirming understanding with others

**Topic 3.1**

Using active listening skills, including understanding meaning and importance:

- Listening to what people say
- Valuing what is spoken
- Acknowledging what people say
- Identifying and acknowledging non-verbal cues
- Enabling environments to be conducive for listening.

**Topic 3.2**

Using different methods to confirm understanding and reasons for doing so:

- Use of questioning
- Repeating back
- Inviting responses
- Interpreting non-verbal cues/body language.

*Learning outcome:*

4. Understand responsibilities when producing written records

**Topics**

4.1 Considerations when completing written records

4.2 Legislation and work-based policies relating to written records

**Topic 4.1**

Responsibilities and considerations when completing written records:

- Accuracy of content
- Relevance of content
- Attention to spelling and grammar
- Completeness – including signed, dated and timed where appropriate
- Legibility
- Use of appropriate vocabulary
- Timing
- Importance of using correct forms.

**Topic 4.2**

Learners should have an awareness of current legislation and workplace policies and procedures relevant to communication within the work sector, country and specific application and impact to practice.

## Guidance for delivery

Learners should be encouraged to identify and apply knowledge to their own experience and practice throughout the unit delivery. Learners should gain experience in communication within appropriate health and care placements and from completing case studies, and role play activities.

Knowledge and skills gained throughout this unit are linked to current professional standards in healthcare, care and childcare.

The topics discussed may resonate with some personal circumstances and the learners should be encouraged to identify personal support systems as well as those provided by the learning environment. Support may include family, friends, colleagues, peers and trainers.

Learners should understand their own preferences for effective study and positive and negative effects which noise, setting or room temperature may have on them. They should also be aware of the impact of their own personal circumstances on their work, study, wellbeing and family and work responsibilities.

Learners could be supported to undertake case study exemplars, review video clips showing different values and behaviours and write reflective accounts.

The learning outcome on overcoming barriers to effective communication lends itself to being supported by employer engagement. This could include representatives from healthcare, care and/or childcare discussing these issues and experiences overcoming them in practice for example sensory impairment. They might also include coverage of topic 1.1 as to the importance and impact of effective communication with all those in receipt of care and support services.

This unit has strong links with unit 203 'Values, beliefs and behaviours for working in healthcare, care and childcare settings' and the delivery of learning could therefore be combined.

## Unit 205

## Working safely in healthcare, care and childcare environments

<b>Level:</b>	2
<b>GLH:</b>	30

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### What is this unit about?

The purpose of this unit is for learners to understand the principles and importance of health and safety within healthcare, care and childcare settings. This unit covers health and safety legislation which provides the requirements upon which policies and procedures within settings are based.

Learners will be introduced to the importance of risk assessment, record keeping as well as safe working practices.

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

- Why is Health and Safety important in healthcare, care and childcare settings?
- What is a risk assessment and how may it be used within healthcare, care and childcare settings?
- What health and safety records must be kept when working in healthcare, care and childcare settings?
- Can people be supported to improve their health and sense of wellbeing when working in a healthcare, care and childcare setting?

### Learning outcomes

In this unit, learners will:

1. Understand principles of health and safety legislation, workplace policies and procedures
2. Keep individuals safe and secure
3. Follow infection control measures

## *Learning outcome:*

1. Understand principles of health and safety legislation, workplace policies and procedures

### **Topics**

- 1.1 Health and safety legislation, policies and procedures
- 1.2 Terminology used in health and safety
- 1.3 Hazards and risks in the workplace

#### **Topic 1.1**

Learners should have an awareness of current legislation and workplace policies and procedures relevant to their work sector, country and specific application and impact to practice.

- Health and Safety at Work Act
- COSHH Regulations
- Environmental Protection Act
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations
- Special Waste and Hazardous Waste Regulations
- Fire precaution (Workplace) Regulations
- Management of Health and Safety at Work Regulations
- Health and Safety (First-Aid) Regulations
- Risk assessments and guidelines for workplaces – e.g. COVID-19 safe.

#### **Topic 1.2**

Definitions of terms used in health and safety working practice:

- Risks and hazards
- Risk assessment and risk benefit analysis
- Accidents and incidents
- Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR)
- Control of Substances Hazardous to Health (COSHH)
- Security
- Infection and infestation including communicable diseases
- Manual handling.

#### **Topic 1.3**

Principles of hazards and risks:

- Identifying hazards and risks:
  - Physical environment (indoors and outdoors) – e.g. broken equipment (toys, furniture, wheelchairs), loose wires and plugs, wear and tear (carpets, fixtures and fittings)
  - People risks – e.g. stress, trips and falls, pressure sores, infections, vulnerable people, access to workplace (e.g. intruders).
- Completing risk assessments:
  - Physical environment indoor and outdoor
  - People
  - Extra risk assessment for infection control – e.g. Covid-19.
- How to reduce the risks of accidents and incidents while recognising people's right to take risks and be challenged – e.g. climbing trees, using public transport, new social experiences, taking exercise, not wearing a coat, sexual activity.
- Recording and reporting accidents and incidents:
  - Completion of forms /documentation

- Submitting information to external bodies.
- Using, storing and disposing of hazardous substances safely:
  - Cleaning products
  - Soiled materials – e.g. infectious and non-infectious
  - Clinical waste
  - Body fluids – e.g. infectious and non-infectious
  - Medications.

*Learning outcome:*

2. Keep individuals safe and secure

**Topics**

2.1 Safety and security in the work environment

2.2 Supporting safety and security within job role

**Topic 2.1**

Assess safety and security considerations in the work environment:

- Safe access to workplace settings and related environments – visitors, staff, service users' entrance and exit checks, signing in sheets, visitor's books
- Security systems – e.g. keypads, key safes, night access, locks, alarms
- Procedures for vehicle use and travel – e.g. insurance, MOT, licencing
- Managing security of valuables and personal property
- Sufficient staffing ratios within setting and when taking individuals off site
- Fire safety – e.g. equipment checks, designated H&S officers, prevention equipment, assembly points
- First aid – e.g. first aider, first aid box
- Checking equipment is in safe working order
- Workplace risk assessments for Covid-19 and other infections.

**Topic 2.2**

Support safety and security within the limits of personal role responsibilities:

- Monitoring access
- Fire safety including raising awareness and participating in drills
- Identifying risks, benefits and completing assessments
- Reporting emergencies – e.g. missing people, reporting accidents and incidents
- Approved administration of agreed medications
- Moving, positioning and handling – e.g. use of hoists and slings, lifting and carrying children, safe moving of equipment/loads
- Knowledge of specific conditions and needs of service users – e.g. allergies, wheelchair access, challenging behaviours.

*Learning outcome:*

3. Follow infection control measures

**Topics**

3.1 Infection and infestation

3.2 Infection control measures

### **Topic 3.1**

Similarities and differences between types of infection:

- Viral
- Fungal
- Protozoan
- Parasitic
- Bacterial.

Routes of infection:

- Inhalation/respiratory
- Ingestion/digestive tract
- Breaks in skin including stings, bites
- Contact with the skin.

Types of infestation:

- Lice (body)
- Nits (head).

### **Topic 3.2**

Follow measures that contribute to the 'when and how' of infection control measures:

- Hand washing
- Social distancing
- Isolation of infection/exclusion from setting
- Track and trace systems
- Safe disposal of waste
- Personal protective equipment (PPE)
- Personal presentation considerations – e.g. clean own clothing, jewellery, hair
- Personal hygiene
- Animals
- Medication
- Any other sector specific guidelines.

## Guidance for delivery

This unit links closely with all other units and provides the basis of knowledge required to undertake an effective work placement. Tutors should guide learners to develop their understanding of principles of health and safety required for working within healthcare, care and childcare settings. Learners will need to understand how these are essential for employment within the sector.

Learners should gain experience in health and safety processes within appropriate healthcare, care and/or childcare placements and from completing class based activities. Learners should be aware of how their study and professional development can be optimised by the use of technology and other tools and resources. These may include notebooks, Dictaphones, collaborative learning, role play and other active learning strategies.

Learners should understand their own preferences for effective study and positive and negative effects which noise, setting or room temperature may have on them. They should also be aware of the impact of their own personal circumstances on their work, study, wellbeing and family and work responsibilities.

This unit could be supported by visits to employment settings to discuss how health and safety applies itself in practice to a working environment. This would enable the learner to fully understand why health and safety is important and what records must be kept. It could also be supported by inviting those responsible for health and safety compliance to provide talks to learners as to their responsibilities in their roles as care practitioners.

This unit could be a starting point to the learning in unit 206 'Safeguarding and protecting vulnerable individuals'.

The unit presents opportunities to support English learning for example:

- Completion of safety report and risk assessment documentation



<b>Level:</b>	2
<b>GLH:</b>	30

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**What is this unit about?**

The purpose of this unit is for learners to develop knowledge and understanding of safeguarding. Learners will have the opportunity to explore their own role in relation to safeguarding practices.

Learners will develop the knowledge to support them in developing effective safeguarding practices that will keep both themselves and the people around them safe. Even though there is a very broad range of job roles within the healthcare, care and childcare sectors learners completing this unit will gain a common understanding of safeguarding across all areas, including different levels of support needed due to the capacity and/or age/stage of development of those at risk.

The unit also explores legislation and national and local policies that relate to protecting service users of healthcare, care and childcare and how to recognise types of potential abuse including signs and symptoms, and suspected radicalisation and extremism.

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

- What do we mean by safeguarding?
- What is my role in relation to safeguarding?
- Why is safeguarding important?
- How can I ensure that I am following safe working practices?

**Learning outcomes**

In this unit, learners will:

1. Understand safeguarding legislation and policies
2. Understand when safeguarding practices are needed
3. Follow safeguarding procedures that protect individuals from abuse

## *Learning outcome:*

### 1. Understand safeguarding legislation and policies

#### **Topics**

##### 1.1 Defining safeguarding

##### 1.2 Safeguarding legislation, guidance, policies and procedures

##### 1.3 Safeguarding considerations for different groups

#### **Topic 1.1**

Principles and purpose of safeguarding in healthcare, care and childcare:

- Safety and feeling safe
- Guarding and being guarded
- Protection and being protected
- Related safeguarding legislation
- Child and Vulnerable person protection
- Vulnerability – relating to different age groups and mental and physical capacity (birth to end of life)
- Lone working and protection procedures
- Self-protection awareness
- Risk taking behaviours
- Awareness of exploitation
- Procedures for disclosure of safeguarding concerns
- Whistleblowing policies
- Confidentiality policies.

#### **Topic 1.2**

Learners should have an awareness of current safeguarding related legislation, regulations, guidance, policies and procedures relevant to work sector, country and specific application to practice.

#### **Topic 1.3**

How safeguarding applies to different groups:

- Babies
- Children
- Young people
- Adults
- Older adults
- People with learning disabilities/learning differences/additional needs
- People with physical disabilities
- Adults in crisis – e.g. domestic abuse
- Individuals with acute/ongoing mental ill-health
- Those requiring extra support – e.g. frail, those at end of life, cancer treatment, looked-after children, individuals who lack mental capacity to make decisions themselves.

### *Learning outcome:*

2. Understand when safeguarding practices are needed

#### **Topics**

2.1 Types of abuse, harm and neglect

2.2 Signs and symptoms of abuse

##### **Topic 2.1**

Categories of abuse, harm and neglect:

- Financial/material
- Sexual
- Neglect and acts of omission
- Abandonment
- Bullying
- Online – e.g. cyberbullying, grooming
- Physical including violence (domestic or other)
- Self-harm
- Emotional/Psychological
- Institutional
- Radicalisation and extremism.

##### **Topic 2.2**

Signs and symptoms associated with the different categories of abuse:

- Behaviour changes – e.g. withdrawal, anti-social behavior (anger, aggression), harming behaviours, diet
- Emotional changes – e.g. mood swings, anxiety
- Physical signs – e.g. Unexplained bruising, broken bones, drastic changes in appearance (weight), skin disorders, female genital mutilation
- Environmental evidence – e.g. irregularities on financial statements, ignoring of safe and best work practices.

### *Learning outcome:*

3. Follow safeguarding procedures that protect individuals from abuse

#### **Topics**

3.1 Working practices that support safeguarding

3.2 Reporting safeguarding concerns

##### **Topic 3.1**

Follow workplace practices that support safeguarding:

- Safeguarding policy:
  - when to report incidents, disclosures or concerns including whistleblowing
  - who to report incidents, disclosures or concerns to
  - how to record incidents, disclosures or concerns
  - what to do if there are ongoing concerns (whistleblowing).
- Other related working policies – e.g. E-safety, risk assessments, intimate care policy, 'Deprivation of Liberty Safeguarding measures'

- Mental and physical capacity, informed consent, behaviour/codes of conduct, data management and confidentiality
- Requirements to report to regulatory bodies and external agencies
- National strategies to address radicalisation and extremism, where these exist.

### **Topic 3.2**

Record and report safeguarding concerns following standard working practice:

- Taking factual, clear and accurate details
- Remaining objective
- Recording information clearly/legibly
- Including date, time, people involved, and location
- Describing what was observed/heard/said/disclosed
- Keeping records securely
- Sharing information only when appropriate – e.g. when there is a risk to an individual or others or a law has been broken
- Sharing information with appropriate parties - 'need to know' basis, sharing with external agencies
- Maintaining confidentiality and data protection.

## **Guidance for delivery**

Learners will need to gain a good understanding of safeguarding that can be applied to various roles within the healthcare, care and childcare settings and that vulnerability to abuse can increase depending on mental and physical capacity or in instances where liberty and freedoms are restricted.

Tutors should ensure that appropriate reference to local and national guidance, policies and procedures are mentioned. Not all legislation is UK relevant.

This unit is well supported by guest speakers/managers who are responsible and accountable for safeguarding and protecting vulnerable individuals within their care. This would include coverage of the principles and purposes of safeguarding, how safeguarding applies to different groups and why it is crucial to follow work place practices that support safeguarding.

The unit presents opportunities to support English learning for example:

- Clearly and appropriately recording and reporting safeguarding concerns using relevant documentation(s)

## Unit 207

## Supporting health and healthy living in healthcare, care and childcare

<b>Level:</b>	2
<b>GLH:</b>	30

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### What is this unit about?

The purpose of this unit is for learners to understand the importance of living healthily to maintain health. Learners will explore examples of inequalities and challenges in healthcare, care and childcare delivery and their impact on the wider community. Through their study of the unit learners will understand the importance of health and healthy living for themselves as well as their role in encouraging others to maintain a healthy lifestyle.

The unit also covers the impact health and healthy living can have on improving a personal sense of wellbeing and quality of life. Learners will understand how they can support others within healthcare, care and childcare settings to improve their health through changes and improvements to their lifestyle.

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

- Why is it important to have a healthy lifestyle?
- What is the impact of making healthier choices on an individual?
- How can people be encouraged to improve or change their lifestyle choices?
- What types of health and wellbeing campaigns influence healthcare, care and childcare?

### Learning outcomes

In this unit, learners will:

1. Understand factors that impact on health and healthy living
2. Understand how to encourage lifestyle changes and improvements in healthy behaviour
3. Understand how national and local campaigns support health and healthy living

## *Learning outcome:*

1. Understand factors that impact on health and healthy living

### **Topics**

- 1.1 Challenges to health and healthy living
- 1.2 Factors contributing to health issues
- 1.3 Health inequalities in the UK

#### **Topic 1.1**

Challenges raised by current health issues facing the UK:

- Obesity
- Smoking
- Alcohol abuse/binge drinking
- Illegal drugs and legal highs
- Depression and suicide
- Dementia
- Cancer – e.g. bowel cancer, cervical cancer
- Cardiovascular disease
- STIs
- Oral health – e.g. child dental health
- Diabetes
- Infectious illnesses – e.g. Covid-19; flu; antimicrobial resistance
- Effects of air pollution.

Challenges to UK health resources:

- Ageing population
- Increasing population
- Illness and disability rates
- Economic costs of poor health – e.g. costs of drug treatments
- Employment of staff in the industry
- Environmental impacts – e.g. quality of water, air pollution from smoke
- Lack of education about healthy living
- Teenage pregnancy/infertility
- Premature births
- Effects on resources of Pandemics – e.g. Covid-19.

#### **Topic 1.2**

Factors that may contribute to some current health issues:

- Work life balance
- Changes in diet
- Culture of convenience
- Sedentary lifestyles
- Media and advertising
- Lack of regular exercise
- Pollution
- Poverty.

#### **Topic 1.3**

Factors influencing health and health inequalities in the UK:

- Geographic location – e.g. postcode
- Socio-economic groups

- Ethnic groups
- Income
- Age
- Educational status
- Gender
- Physical environment – urban and rural living
- Life events beyond personal control.

### *Learning outcome:*

2. Understand how to encourage lifestyle changes and improvements in healthy behaviour

#### **Topics**

2.1 Recommendations for health and healthy living

2.2 Considerations of personal health and healthy living

2.3 Supporting others with health and healthy living

#### **Topic 2.1**

Recommendations for health and healthy living with consideration of:

- Healthy eating and drinking – e.g. portion control, 5 a day, control of sugar/fat/salt intake and labelling awareness, recommended alcohol units, avoiding additives and energy supplements, eating regular meals, maintaining a balanced diet
- Physical activity for health – e.g. appropriate exercise according to age and ability
- Effective rest and sleep
- Lifestyle choices – e.g. sun protection, not smoking, reducing screen time, practising safe sex, awareness of technology dependence, getting outdoors
- Mental wellbeing – e.g. managing stress, support networks (i.e. having positive relationships with friends and family).

#### **Topic 2.2**

Considerations of personal health and healthy living:

- Aspects of own lifestyle which could be improved
- Factors that may prevent health and wellbeing improvements
- Principles of behavioural change which can support improvements – e.g. CBT
- Methods of action planning for implementing changes for short and long-term benefits.

#### **Topic 2.3**

Factors that can support others with health and healthy living:

- Ways to communicate healthy living information
- Gaining support and motivation from the individual
- Gaining support from their family/friends/teachers/carers/parents
- Acknowledging personal contribution and willingness to change
- Supporting manageable and achievable targets for change.



## *Learning outcome:*

### 3. Understand how national and local campaigns support health and healthy living

#### **Topics**

#### 3.1 National health and healthy living campaigns

#### 3.2 Specialist services that support health and healthy living

#### 3.3 Impacts of health and healthy living campaigns

##### **Topic 3.1**

Types of national health and healthy living campaigns:

- Immunisation programmes
- Healthy eating
- Weight management and exercise – e.g. The Obesity Challenge
- Disease specific campaigns – e.g. heart disease, type 2 diabetes, dementia, FAST
- Smoking cessation campaigns
- Mental wellbeing – e.g. social isolation, preventing loneliness
- Alcohol awareness campaigns
- Dementia awareness campaigns
- Flexible work patterns awareness
- Volunteering and charity work.

##### **Topic 3.2**

Specialist services that can support health and healthy living including and how to access them – e.g. through GP, practice nurse, school nurse, dietician etc:

- Memory clinics
- Gyms and specialist exercise services – e.g. horse riding for disabled.
- Animals for disabled children and adults – e.g. Dogs for Blind, Dogs for children with epilepsy)
- Sexual health services
- Counselling
- Mental health services – e.g. eating disorders and body dysmorphia support services
- Speech and language therapy
- Voluntary services and charities including social enterprises and community groups
- Women's and men's health clinics
- Domestic violence support agencies
- Occupational health
- Alternative therapies
- Physiotherapy.

##### **Topic 3.3**

Ways in which national campaigns have impacted health and healthy living in the UK:

- Adapted patterns of working – e.g. flexible working hours, working from home)
- Educational curriculum interventions
- Legal changes – e.g. illegal to smoke in public places
- Changes in personal behaviour due to awareness of issues raised
- Increase in private leisure services and facilities and access to these for all groups
- Changes in health and food industries – e.g. specialist brands, food labelling, healthy alternative menus
- Improved personal health and wellbeing.

## Guidance for delivery

Learners should be aware of how their study and professional development can be optimised by the use of technology and other tools and resources, especially when researching different campaigns and how the information is imparted. Active learning strategies such as small projects and group work will be useful and many of the topics could directly relate to the learner's own lifestyle.

The topics discussed may resonate with some personal circumstances and the learners should be encouraged to identify personal support systems as well as those provided by the learning environment. Support may include family, friends, colleagues, peers and trainers.

Learners should understand their own preferences for effective study and positive and negative effects which noise, setting or room temperature may have on them. They should also be aware of the impact of their own personal circumstances on their work, study, wellbeing and family and work responsibilities.

Learners should know how to avoid plagiarism and the consequences of plagiarising other people's work. They should understand the principles of academic writing and use study centres and libraries, relevant television and other media to extend their understanding of the topics  
Learners should be aware of the opportunities to motivate, boost self-confidence, minimise distractions and develop self-awareness.

This unit could lend itself to talks from dieticians, personal trainers and those responsible for diet and nutrition within healthcare, care and/or childcare settings. If possible a GP or community/ mental health nurse could support teaching and learning in respect of immunisation programmes, alcohol and dementia awareness and their role in providing specialist services in supporting conditions of this kind.

Themes on the impacts of healthy living and welfare covered in this unit could support in part unit 209 'Developing resilience for working in healthcare, care and childcare' in respect of work life balance, diet, stress management and support services.

The unit presents opportunities to support Maths learning for example:

- Calculations of sugar and salt levels in foods and drinks
- Calorie consumption and relation to energy
- BMI calculations based on weight and ratios

<b>Level:</b>	2
<b>GLH:</b>	30

**What is this unit about?**

The purpose of this unit is for learners to understand how theories and concepts of development impact on working practices in healthcare, care and childcare. The unit covers the fundamentals of what theory is, how they provide structure for standardising practice and how they can gain popularity or fall out of favour.

Learners will have the opportunity to apply their understanding of theoretical approaches to explore ideas of human growth, looking specifically at stages of development and the variety of influences that can positively or negatively shape transition through these milestones.

The unit also covers the principles of different theoretical approaches that have shaped and informed practice in healthcare, care and childcare. As well as providing a starting point for exploration of specific theories and theorists in future study, the unit brings together the elements of theory and practice highlighting how they are linked.

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

- How do concepts and theories develop?
- What are the different stages of human development?
- What influences can environment have on development progress?
- How does theory impact on ways of working in healthcare, care and childcare settings?

**Learning outcomes**

In this unit, learners will:

1. Understand how theories emerge, become recognised and used
2. Understand theories of human growth and development
3. Understand how theories influence current practice in healthcare, care and childcare

### *Learning outcome:*

1. Understand how theories emerge, become recognised and used

#### **Topics**

1.1 Terms and definitions relating to theories

1.2 Reasons for using theories

1.3 Support for theories

##### **Topic 1.1**

Definitions of terms relating to theories:

- Formal theory
- Informal theory – e.g. practice wisdom, tacit knowledge
- Theories describing aspects of life stages
- Theories about important transitions.

##### **Topic 1.2**

Reasons for using theories:

- Sharing knowledge
- Confirming best practice
- Standardising practice
- Evidence based practice.

##### **Topic 1.3**

Factors that impact support for theories:

- Scientific
- Demographic
- Cultural
- Political and financial
- Social attitudes.

### *Learning outcome:*

2. Understand theories of human growth and development

#### **Topics**

2.1 Life stages and milestones

2.2 Influences on development

##### **Topic 2.1**

How humans grow, develop and mature through their lifespan including key milestones stages:

- Social
- Physical
- Emotional and psychological
- Cognitive/intellectual
- Behavioural
- Language/communication.

## Topic 2.2

Influences on development, growth and maturity through life stages and transitions between them.

Influences:

- Parenting style / nurturing
- Culture and ethnicity
- Beliefs and values
- Environment – e.g. access to opportunities and services
- Demographic – e.g. location, personal wealth, poverty cycle
- Health and predisposition to disease
- Disability
- Gender
- Sexuality
- Getting older
- Other events out of normal control – e.g. impact of pandemic restrictions, refugee status due to migration, abuse.

Impacts:

- Self-confidence, self-esteem and self-image
- Resilience and motivation
- Relationships
- Physical and mental health
- Educational achievement
- Morals and beliefs
- Independence and autonomy
- Employment status
- Opportunities in retirement.

### *Learning outcome:*

3. Understand how theories influence current practice in healthcare, care and childcare

### Topics

3.1 Social, emotional and psychological development theories

3.2 Cognitive and intellectual development theories

3.3 Physical development theories

3.4 Theories used in planning

### Topic 3.1

Principle factors within social, emotional and psychological development theories:

- Social learning
- Attachment and loss
- Transition and change
- Socio-emotional
- Socio-cultural
- Cognitive development.

### Topic 3.2

Principle factors within of cognitive/intellectual development theories:

- Language acquisition

- Concept development
- Development of schemas
- Self-actualisation
- Self-regulation.

### **Topic 3.3**

Principle factors within physical development theories:

- Brain development and awareness of external environment
- Motor skills – e.g. fine and gross
- Links with cognitive/intellectual skills development
- Growth from Birth to maturity
- Maturation and ageing.

### **Topic 3.4**

Ways in which theories are used in planning for activities in healthcare, care and/or childcare settings.

### **Guidance for delivery**

Although at this level there is no requirement for detailed knowledge of specific theories and theorists Tutors should encourage learners to explore different theories relating to their specific areas of interest and relating to their work placement. The detail of specific theoretical approaches will be explored at higher qualification levels.

In outcome three under topic 3.4 activities can include educational, play/leisure, care planning, needs assessment etc. Application of theories can be related to appropriate disciplines and areas of learner interest.

Tutors should ensure that appropriate reference to local and national guidance, policies and procedures are mentioned. Not all legislation is UK relevant.

This unit could be supported by healthcare, care and/or childcare professionals providing talks or workshop activities which might focus on parenting styles, working with disabilities, behavioural developments, transition and change and how theoretical models apply themselves in the realities of practice. Discussions might be informed by allowing learners to apply theories of human growth and development to their work placement practice and related experiences.

<b>Level:</b>	2
<b>GLH:</b>	30

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### **What is this unit about?**

The purpose of this unit is for learners to understand the types of situations and events that can cause them personal stress and possible emotional upset within professional practice. In the unit the word 'stress' refers to both positive and negative stress and looks at the importance of developing coping strategies when working in healthcare, care and childcare settings. The unit should be offered as learners start their placement practice.

As part of the unit learners will examine how situations in the working environment can cause personal stress. Learners will consider coping strategies that can be used to minimise stress, develop resilience and help to maximise the potential of their placement experiences whilst in healthcare, care and/or childcare settings.

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

- What types of situation can cause personal stress and emotional upset for care/childcare professionals?
- What is emotional resilience?
- Why it is important to identify work-based stressful situations?
- What coping mechanisms are there that can help to reduce stress in the work place?

### **Learning outcomes**

In this unit, learners will:

1. Understand the nature of stress and how stress can be experienced
2. Understand challenging situations in healthcare, care and childcare settings which may cause stress
3. Understand potential challenges when working with colleagues and teams
4. Know strategies to develop resilience for working in healthcare, care and childcare.



## Learning outcome:

### 1. Understand the nature of stress and how stress can be experienced

#### Topics

##### 1.1 Defining stress

##### 1.2 Physical reactions to stress

##### 1.3 Emotional reactions to stress

##### 1.4 Behavioural reactions to stress

##### 1.5 Impacts of work-related stress on services

#### Topic 1.1

##### Definitions of stress:

- Natural body responses to stress - flight/fright response
- Beneficial and negative stress - 'eustress' and 'distress'
- Physiological, emotional, psychological and behavioural impact of short and long-term stress.

#### Topic 1.2

##### Potential physiological responses to positive and negative stress:

- Common symptoms of negative stress on the body:
  - headaches
  - muscular tension
  - stress related illness – e.g. irritable bowel syndrome; eczema; heart disease.
- Effects on mental health – e.g. anxiety and depression, self-harming, behaviour changes
  - lower immune system
  - individual coping mechanisms.
- Impact of long-term negative stress on physical and mental health
- Common symptoms of positive stress on the body:
  - cognitive enhancer – helps brain to focus
  - lots of energy and drive to act
  - survival motivation to get out of danger.

#### Topic 1.3

##### Potential emotional responses to positive and negative stress:

- Exaggerated emotional responses from negative stress
- Heightened emotions – including anxiety and crying
- Difficulty in identifying own emotional reactions
- Increased drive and motivation.

#### Topic 1.4

##### Potential behavioural responses to positive and negative stress:

- Engaging in obsessive and harmful behaviours
- Effects of stress, sleep patterns, appetite/food choices, working practices/lack of Concentration/forgetfulness, negative impact on decision making abilities
- Listening to warnings from family and friends - being receptive to offers of support and advice
- Increased physical performance and endurance.

#### Topic 1.5

##### Potential impacts of work-related stress on healthcare, care and childcare services:

- Caring for with others, including colleagues
- Impact on working relationships within teams

- Sickness rates
- Staff turnover/retention rates and related impacts
- Employment costs as a consequence of stress related absenteeism
- Giving up training.

Tutors may want to include the following in their teaching and learning support for this unit - 'Research into the effects of workplace stress' (2009 Milczarek, Scneider and Gonzalez).

### **Learning outcome:**

2. Understand challenging situations in healthcare, care and childcare settings which may cause stress

### **Topics**

2.1 Incidents of trauma and injury

2.2 Witnessing challenging behaviours

2.3 Caring for people who have complex needs, are critically ill or at end of life

#### **Topic 2.1**

Types of trauma and injury and exposure to body fluids that may be encountered in healthcare and care:

- Incidents and types of trauma and injury in work practice environments
- Sudden childhood illness - including sudden infant death syndrome, meningitis, hand foot and mouth, slap cheek, infectious illness
- Sudden adult illness - including stroke, heart attack; severe infectious illness
- First aid emergencies/accidents when working with children and adults – falls, bumps to the head, broken bones, choking, burns, loss of consciousness, violent acts
- Body fluids – including blood, vomit, incontinence of urine and faeces, changing nappies-impact of infection.

#### **Topic 2.2**

Challenging behaviours, from those who use services, or their family, and situations that may be encountered when working in healthcare, care and childcare settings:

- People with mental ill-health who are agitated and confused
- People who are distressed or grieving
- People who exhibit anger, aggression and violence
- Other childhood behaviours – e.g. biting, hitting, 'terrible 2s', tantrums, aggression, self-harm
- Other childcare situations suspected and/or confirmed – abuse, loss/abduction, SEND
- Managing appropriate relationships with those in receipt of care and their families.

#### **Topic 2.3**

Caring for individuals who have complex needs, are critically ill or at end of life:

- Individuals whose physical health deteriorates suddenly
- Individuals requiring acute care in hospital (A&E, intensive care, specialist units)
- Individuals who require palliative care
- Individuals who require end of life care
- Providing intimate personal care.
- Emotional and psychological support for individuals and their families, including bereavement.

**Learning outcome:**

3. Understand potential challenges when working with colleagues and teams

**Topics**

3.1 Aspects of working life that can present challenges

3.2 Stressful situations with colleagues

**Topic 3.1**

Aspects of working life that can present challenges:

- Challenging working routines – including shift work, unsociable hours, emergencies, length and amount of hours, additional duties;
- Terms of work – including conditions and pay, policies
- Working under pressure – including staff shortages, increase in demand, equipment failure, resource shortages, special situations – e.g. Covid-19 impact on work routines and ongoing restrictions.

**Topic 3.2**

Factors that can contribute to stressful situations with colleagues within the work team:

- Building working relationships - including starting a work placement, a new apprenticeship or direct employment
- Unhealthy power dynamics within a team - including bullying and harassment, coercion
- Sexual attraction between team members
- Witnessing poor practice and concern about whistleblowing
- Bribery within the team
- Noisy, busy and pressurised environments
- Lack of support and assistance
- Unprofessional behaviour
- Unexpected health emergencies affecting setting – e.g. Covid-19 pandemic.

**Learning outcome:**

4. Know strategies to develop resilience for working in healthcare, care and childcare

**Topics**

4.1 Boundaries of responsibility in healthcare, care and childcare

4.2 Support systems and strategies in healthcare, care and childcare

4.3 Personal strategies to develop resilience

**Topic 4.1**

Impacts on boundaries of responsibility:

- Working within limits of own role
- Lines of reporting and chain of responsibilities, up and down
- Challenges when boundaries blur.

**Topic 4.2**

Support systems and strategies for working in healthcare, care and childcare:

- Communicating with manager/supervisor/other team members when concerns arise or when feeling stressed
- Raising concerns with others – e.g. peers, tutors, available support services
- Identifying own difficulties – i.e. reporting and recording, undertaking certain tasks in care practice which may cause nervousness and/or distress.

**Topic 4.3**

Personal strategies to develop practitioner resilience:

- Recognising stress using self-reflection
- Methods of working to reverse stress and develop resilience:
  - keeping a stress diary
  - self-referral to GP, welfare or counselling services
  - maintaining a good work/life balance
  - taking regular exercise
  - making time for relaxation – e.g. with friends and family, pursuing hobbies
  - practicing relaxation techniques
  - practicing positive imaging and reinforcement techniques
  - maintaining a healthy diet
  - establishing and maintaining healthy rest and sleep routines
  - positively engage with professional supervision opportunities.

## **Guidance for delivery**

It is advised that the delivery of this unit is started early in the teaching programme as it will help learners to understand their own feelings when starting placements and also prepare them for possible stressful situations in the work experience settings. The accompanying placement workbook could also be used to support the learner as they can record challenging events that arise and stressful situations may be identified by tutors and issues picked up for further support.

It is appreciated that centres will adopt different ways of providing placements for learners. It is also understood that some learners will have a range of different placement experiences whilst others may be limited to only one.

It is recommended that employers/ mentors carry out supervisions with learners in the workplace and as the learner identifies stressful situations they should be encouraged to discuss them.

The work placement workbook will provide opportunities for reflective diary entries.

Tutors may wish to refer to the Department for Education's work placement guidance documentation - Post-16 work experience as a part of 16 to 19 study programmes and traineeships referenced in suggested learning resources.

This unit lends itself to inviting guest speakers who work in healthcare, care and/or childcare to discuss how and why it is important to develop stress management strategies and ensure a healthy work-life balance within their roles. Additionally, these guest speakers may want to include the realities of working with 'body fluids' from a health and safety and practical perspective when working with those who are in need of care and support to include some of the possible 'unpleasantnesses' and how this is managed with dignity and respect.

## Appendix 1      Suggested learning resources

### Books

Diploma in Care – Level2  
The City & Guilds Textbook  
Maria Ferreiro Peteiro/ Hodder Education (2018)  
ISBN: 978 1 5104 2911 6

Promoting Health: A Practical Guide, 6<sup>th</sup> Edition  
Ewles, L. & Simnett, I.  
Published by Bailliere Tindall (2010)  
ISBN-13: 978-0702031397

Health Behaviour Change- A guide for practitioners, 2<sup>nd</sup> Edition  
Mason, P. & Butler, C.  
Published by Elsevier Ltd. (2010)  
ISBN-13: 978-0702044557

Communication Skills in Health and Social Care, 2<sup>nd</sup> Edition  
Moss, B.  
Published by Sage (2012)  
ISBN-13: 978 1 446 20819 9

The City and Guilds Pocket Guide to Personalisation and Person Centred Care in Health and Social Care, 1<sup>st</sup> Edition  
McClellan, S.  
Published by City & Guilds (2011)  
ISBN-13: 978 0 851 93229 3

The City & Guilds Pocket Guide to: Power and Empowerment in Health and Social Care, 1st edition  
Maclean, S.  
Published by City & Guilds (2012)  
ISBN-13: 978-0851932309

Child Care and Education, 5<sup>th</sup> Edition  
Bruce, T., Meggitt, T. & Grenier, J.  
Published by Holder Education (2010)  
ISBN-13: 9781444117981

Theories and Approaches to Learning in the Early Years  
Miller, L. & Pound, L.  
Published by SAGE Publications Ltd (2010)  
ISBN-13: 978-1849205788

Human Growth and Development 2<sup>nd</sup> edition  
Beckett, C. & Taylor, H.  
Published by SAGE Publications Ltd (2010)  
ISBN-13: 978-1847871794

## Websites

- Skills for Health <http://www.skillsforhealth.org.uk>
- Department of Health [www.gov.uk/government/organisations/department-of-health](http://www.gov.uk/government/organisations/department-of-health)
- NHS Careers [www.healthcareers.nhs.uk](http://www.healthcareers.nhs.uk)
- Northern Ireland Social Care Council <http://www.niscc.info>
- Regulation and Quality Improvement Authority [www.rqia.org.uk/home/index.cfm](http://www.rqia.org.uk/home/index.cfm)
- Department of Health, Social Services and Public Safety <http://www.dhsspsni.gov.uk>
- Skills for Care [www.skillsforcare.org.uk](http://www.skillsforcare.org.uk)
- NHS Five a Day [www.nhs.uk/livewell/5aday/Pages/5ADAYhome.aspx](http://www.nhs.uk/livewell/5aday/Pages/5ADAYhome.aspx)
- Self Management UK [www.selfmanagementuk.org](http://www.selfmanagementuk.org)

## Appendix 2      Legislation and regulations

The following is a list of legislation/regulations that relate to units throughout the qualification (may be subject to change):

<b>Legislation / Regulation</b>
Adoption and Children Act (2002)
All Wales Child Protection Policy and Procedures (2008)
Apprenticeships, Skills, Children and Learning Act (2009)
Borders, Citizenship and Immigration Act (2009)
Caldicott Report (1997)
Care Act (2014)
Care Certificate (England) (2015)
Care Standards Act (2000)
Carer's and Direct Payments Act (N.I) (2002)
Children (Northern Ireland) Order (1995)
Children Act (1989 and 2004)
Children and Adoption Act (2006)
Children and Families Act (2014)
Children and Young Persons Act (2008)
Chronically Sick and Disabled Person's Act (1978)
Control of Substances Hazardous to Health (COSHH) Regulations (2002)
Criminal Law Act (Northern Ireland) (1967)
Data Protection Act (1998)/GDPR
Disabled Person's (N.I) Act (1989)
Education Act (2002)
Education Act (2011)
Equality Act (2010)
Food Hygiene Regulations (2006)
Health and Personal Social Services Order (1972)
Health and Safety at Work Act (1974)
Health and Social Care (Reform) Act (N.I) (2009)
Human Rights Act (1998)
Manual Handling Operation Regulations (1992)
Mental Capacity Act 2005 and (Amendment) Act 2019
Mental Health Act (revision 2007 - existing 1983)
Northern Ireland Act (1998)



<b>Legislation / Regulation</b>
Nurses and Midwives Act (2011)
Personal Protective Equipment at Work Regulations (1992)
Privacy and the Human Rights Act (1998)
Provision and Use of Work Equipment Regulations (1998)
Race Relations (N.I) Order (1997)
Regulatory Reform (Fire Safety) Order (2005)
Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR) (2013)
Rights of Children and Young Persons (Wales) Measure (2011)
Safeguarding Board Act (Northern Ireland) (2011)
Safeguarding of Vulnerable Groups Act (2006)
Safeguarding Vulnerable Groups (Northern Ireland) Order (2007)
Social Services and Well-being (Wales) Act (2014)
United Nations Convention on the Rights of the Child (1989)
Working together to safeguard children (2018)

## Appendix 3      Abbreviations

The following is a list of abbreviations and explanations used throughout the qualification:

Abbreviation	Explanation
ADHD	Attention Deficit Hyperactivity Disorder
A&E	Accident and Emergency
AEP	Alternative Education Program
BP	Blood Pressure
COSHH	Control of Substances Hazardous to Health
CPD	Continual Professional Development
CQC	Care Quality Commission
CYP	Children and Young People
ECG	Electrocardiogram
EHRC	Equality and Human Rights Commission
EU	European Union
EYFS	Early Years Foundation Stage
FAST	Face, Arms, Speech, Time
GP	General Practitioner
HIV	Human Immunodeficiency Virus
HR	Human Resources
HSE	Health and Safety Executive
ICT	Information and Communication Technology
MRI	Magnetic Resonance Imaging
MRSA	Meticillin-resistant Staphylococcus Aureus
NHS	National Health Service
NMC	Nursing and Midwifery Council
PPE	Personal Protective Equipment
RCN	Royal College of Nursing
RIDDOR	Reporting of Injuries Diseases and Dangerous Occurrences Regulations
SEN	Special Educational Needs
SENCO	Special Educational Needs Co-ordinator
SLCN	Speech, Language and Communication Needs
STI	Sexually Transmitted Infection
UNICEF	United Nations Children's Fund

## Appendix 4 Sources of general information

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

### *City & Guilds Centre Manual*

This document provides guidance for organisations wishing to become City & Guilds approved centres, as well as information for approved centres delivering City & Guilds qualifications. It covers the centre and qualification approval process as well as providing guidance on delivery, assessment and quality assurance for approved centres.

It also details the City & Guilds requirements for ongoing centre and qualification approval, and provides examples of best practice for centres. Specifically, the document includes sections on:

- the centre and qualification approval process
- assessment, internal quality assurance and examination roles at the centre
- registration and certification of candidates
- non-compliance and malpractice
- complaints and appeals
- equal opportunities
- data protection
- management systems
- maintaining records
- internal quality assurance
- external quality assurance.

### *Our Quality Assurance Requirements*

This document explains the requirements for the delivery, assessment and awarding of our qualifications. All centres working with City & Guilds must adopt and implement these requirements across all of their qualification provision. Specifically, this document:

- specifies the quality assurance and control requirements that apply to all centres
- sets out the basis for securing high standards, for all our qualifications and/or assessments
- details the impact on centres of non-compliance

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

- **Walled Garden:** how to register and certificate candidates online
- **Events:** dates and information on the latest Centre events
- **Online assessment:** how to register for e-assessments.

## Useful contacts

<b>UK learners</b> General qualification information	<b>E: <a href="mailto:learnersupport@cityandguilds.com">learnersupport@cityandguilds.com</a></b>
<b>International learners</b> General qualification information	<b>E: <a href="mailto:intcg@cityandguilds.com">intcg@cityandguilds.com</a></b>
<b>Centres</b> Exam entries, Certificates, Registrations/enrolment, Invoices, Missing or late exam materials, Nominal roll reports, Results	<b>E: <a href="mailto:centresupport@cityandguilds.com">centresupport@cityandguilds.com</a></b>
<b>Single subject qualifications</b> Exam entries, Results, Certification, Missing or late exam materials, Incorrect exam papers, Forms request (BB, results entry), Exam date and time change	<b>E: <a href="mailto:singlesubjects@cityandguilds.com">singlesubjects@cityandguilds.com</a></b>
<b>International awards</b> Results, Entries, Enrolments, Invoices, Missing or late exam materials, Nominal roll reports	<b>E: <a href="mailto:intops@cityandguilds.com">intops@cityandguilds.com</a></b>
<b>Walled Garden</b> Re-issue of password or username, Technical problems, Entries, Results, e-assessment, Navigation, User/menu option, Problems	<b>E: <a href="mailto:walledgarden@cityandguilds.com">walledgarden@cityandguilds.com</a></b>
<b>Employer</b> Employer solutions, Mapping, Accreditation, Development Skills, Consultancy	<b>T: +44 (0)121 503 8993</b> <b>E: <a href="mailto:business@cityandguilds.com">business@cityandguilds.com</a></b>

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As the UK's leading vocational education organisation, City & Guilds is leading the talent revolution by inspiring people to unlock their potential and develop their skills. City & Guilds is recognised and respected by employers across the world as a sign of quality and exceptional training.

## City & Guilds Group

The City & Guilds Group is a leader in global skills development. Our purpose is to help people and organisations to develop their skills for personal and economic growth. Made up of City & Guilds, City & Guilds Kineo, The Oxford Group and ILM, we work with education providers, businesses and governments in over 100 countries.

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