

Level 3 Advanced Technical Diploma in Health and Care (540)

(3625-30)

Version 2.0

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This assignment is also presented as a sample of the synoptic approach for Level 3 Advanced Technical Extended Diploma in Health and Care (1080)

Introduction

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Candidate guidance

General guidance

This is a formal assessment that you will be marked and graded on for your qualification. You will be marked on the quality and accuracy of any written work you produce. It is therefore important that you carry your work out to the highest standard you can. You should show how well you know and understand the subject and how you are able to use your knowledge and skills together to complete the tasks.

Plagiarism

Plagiarism is the failure to acknowledge sources properly and/or the submission of another person's work as if it were the candidate's own. Plagiarism is not allowed in this assignment. This is an assessment of your abilities, so the work must be all your own work and carried out under the conditions stated. You will be asked to sign a declaration that you have not had any outside help with the assessment.

Your tutor is allowed to give you some help understanding the assignment instructions if necessary, but they will record any other guidance you need and this will be taken into account during marking.

Where research is allowed, your tutor must be able to identify which work you have done yourself, and what you have found from other sources. It is therefore important to make sure you acknowledge all sources and clearly reference any information taken from them.

Timings and planning

You should take care when planning your work to make sure you have divided the time available between tasks appropriately. You should check your plans are appropriate with your tutor.

If you have a good reason for needing more time, you will need to explain the reasons to your tutor and agree a new deadline date. Changes to dates will be at the discretion of the tutor, and they will not mark work that is handed in after the agreed deadlines.

Presentation of work

Presentation of work must be neat and appropriate to the task.

You should make sure that each piece of work is clearly labelled with your name and the assignment reference.

All electronic files must be given a clear file name that allows your tutor to identify it as your work. Written work e.g. reports may be word processed but this is not a requirement.

Assignment

Task A - Case study: Health and Safety

Part 1 – Mobility assessment

Maria is 82 years and lives in a care home in your local area. She has recently been discharged from hospital having received treatment to stabilise her heart condition and is currently unable to walk more than five steps. As a result of her obesity and heart condition her mobility continues to decline. Maria and the care home staff are concerned that the mobility aids Maria had been using previously are no longer appropriate. The care home manager has asked for holistic risk assessment to include a mobility assessment with the consideration of the use of a hoist for transfers from the bed to the chair until Maria's mobility improves.

Produce a written account of approximately 1500 words that includes:

- an explanation of the relationship between relevant aspects of health and safety legislation and undertaking a risk assessment for Maria
- the regulations and guidance that need to be considered when implementing the use of a manual hoist as part of Maria's care plan for both the care receiver and care providers
- an analysis of risks that need to be considered when using a hoist
- consideration of the impact of Maria's current mobility on fire evacuation plans within the home environment
- an explanation of how you would ensure Maria was treated with dignity and respect throughout the hoisting process.

Part 2 – Quality measures in care

To learn more about current quality measures in care you have been asked to carry out a review of inspection reports of two different local residential care providers of health and/or care (e.g. CQC reports)

Write a report of approximately 500 words comparing aspects of best practice and recommendations for improvements of the two providers. Evaluate how the outcomes of the reports might impact on the quality of care provided.

Conditions of assessment

You may carry out research and collect the information you want to use in your written report and written account under unsupervised conditions. Your final written report and written account must be completed working alone under supervised conditions.

It is expected this task will take approximately 10 hours in total – 7 hours unsupervised research time and 3 hours supervised writing up time.

What must be presented for marking

You must submit:

- one written account
- one written report.

Work may be written or word processed.

Task B - Case study: Individual care needs

Zafia is 30 years of age and lives with the condition Type 1 diabetes and a learning difference. She lives in a supported housing environment. As a result of her diabetes Zafia has developed a leg ulcer which significantly impacts on her quality of life.

The associated pain interrupts her sleep making her tired. It also makes personal care difficult and Zafia is very aware of the smell associated with her leg ulcer. As a consequence she has stopped seeing her friends as she is embarrassed.

The leg ulcer requires redressing twice a week and regular re-assessment by the specialist community team. The treatment of the leg ulcer is painful and Zafia does not always give consent to the treatment. Concerns that Zafia does not fully understand the result of non-treatment of the condition have been raised by the team. The team have referred Zafia to her GP for a capacity assessment.

You will be working closely with Zafia as part of your new role supporting care receivers with learning differences in the community. You have been asked to write a report of approximately 2000 words that considers how the behaviours of the care professionals support Zafia to be at the heart of her care. Your report will need to include the sections below:

Part 1 – Principle and behaviours (approximately 250 words)

From your perspective write an account explaining what constitutes good care practice for Zafia and her related needs in respect of:

- compassion
- communication.

Part 2 – Capacity and cognitive impairment (approximately 750 words)

Zafia's family are worried that the outcome of the capacity assessment may impact on her ability to live more independently. The capacity assessment also indicates that Zafia does not have capacity to make decisions about the treatment of her leg ulcer.

Write an account explaining how does the result of this assessment impact on the following:

- Zafia's health and wellbeing
- Zafia's family
- the care and support Zafia receives
- the support that Zafia may receive from professionals and charities with regards to cognitive impairment and independent living.

Part 3 – Individual care needs (approximately 750 words)

Write an account describing Zafia's individual care needs associated with the following:

- supporting health and wellbeing including Zafia's wishes, feelings, hopes and aspirations
- social needs
- personal care needs.

Explain how these care needs impact on the following:

- Zafia's current package of care and care plan.

Part 4 – Care planning (approximately 250 words)

Write an account explaining the care planning process from initial assessment to review and an evaluation to include the roles of professionals and others.

Conditions of assessment

You may carry out research and collect the information you want to use in your written accounts under unsupervised conditions. Your final written accounts must be completed working alone under supervised conditions.

It is expected this task will take approximately 10 hours in total – 7 hours unsupervised research time and 3 hours supervised writing up time.

What must be presented for marking

You must submit:

- four written accounts.

Work may be written or word processed.

SAMPLE

Task C - Case Study: Safeguarding

Part 1 – Background

Artem is a 79 year old man living alone in his own home in a local town. He has been in receipt of care for a number of years and you and your supervisor have been assisting him with his morning routine as part of your work placement with a domiciliary care organisation. Artem is a widower with one daughter who lives locally.

Recently both you and your supervisor have noticed that Artem has been increasingly withdrawn and he is no longer engaging in conversation as willingly as previously. It has also been noticed that some of Artem's personal possessions appear to be missing, such as a clock he received when he retired and his wife's favourite vase. When you asked as to their whereabouts Artem became upset and told you to "mind your own business".

You have seen final demands for payments for essential utilities on the table which seems out of character as Artem has in the past always been organised and taken care with his bills, on occasion asking if you would assist posting payments at the local post office. You have also noticed two occurrences of facial bruising which Artem explained were caused 'by falls'.

You and your supervisor discussed the situation, recorded these in your daily log, and your supervisor has said they will inform the care manager of these circumstances.

Produce a written account of approximately 750 words that includes the following:

- what do the terms professional responsibility, duty of care, suspected abuse and confidentiality mean and how does this apply to this situation
- what types, signs and symptoms of abuse are associated with adults
- which types of abuse are indicated with regard to Artem's situation and why you should be concerned.

Part 2 – Incident of disclosure

Artem used to talk to you about his daughter all the time as he was very proud of her. Artem had shared with you previously that his daughter's husband had died and she has also lost her job through ill health. Recently however, Artem has not mentioned his daughter at all and has always changed the subject if you have asked.

This morning whilst you and your supervisor were assisting with his daily care Artem's daughter entered the property. Artem's daughter was rude and aggressive and demanded that he gave her 20 pounds from his wallet and that she wanted his bank card. You noticed that Artem raised his arms above his face as his daughter approached and that once Artem's daughter had left he was shaking physically and obviously distressed. You and your supervisor stayed longer than usual ensuring that Artem had breakfasted and became more settled. During this time Artem disclosed to you both that his daughter often took money from him and when he objected she had hit him on two previous occasions.

Write a 500 word account including the following:

- the next steps with regard to reporting and recording this incident - include details of how this would be reported and which policies and practices support this course of action
- how disclosure, risk assessments and other safe working practices will help keep Artem safe from further suspected abuse
- which of the six principles of safeguarding, identified in The Care Act (2014), will apply in this situation and why
- an explanation of factors that may have caused Artem's daughter to behave in the way she did.

Part 3 – Serious case review

To learn more about the processes and regulatory requirements surrounding safeguarding (children, young people or adults), you have been asked to carry out an investigation of a serious national or local case review that has taken place within the last ten years.

Write an informative report of approximately 500 words, outlining the serious case review that you have investigated. Ensure your report includes the following:

- perpetrator(s) involved and their associated behaviour(s)
- an explanation of why the abuse and/or neglect was missed in this case
- how this serious case review has highlighted specific recommendations/changes required to either practice or policy
- the impact of this serious case review on the provision of care and/or care practice.

Conditions of assessment

You may carry out research and collect the information you want to use in your written accounts and written report under unsupervised conditions. Your final written accounts and written report must be completed working alone under supervised conditions.

It is expected this task will take approximately 10 hours in total – 7 hours unsupervised research time and 3 hours supervised writing up time.

What must be presented for marking

You must submit:

- two written accounts
- one written report.

Work may be written or word processed.

Professional discussion

Your tutor will conduct a professional discussion with you, lasting 45 minutes. The purpose of this discussion is to assess your knowledge and to confirm your understanding of principles supporting your care practice.

This method of assessment will provide you with an opportunity to show the depth and breadth of your knowledge and you should refer to your experience during your work placement as much as possible. You will need to plan for your professional discussion and bring your reflective workbook with you as you will be referring to examples of your practice and your development plan.

A professional discussion is not a question and answer session and it is important that you prepare yourself well in advance so that you are ready to fully participate in and lead discussions with your tutor. During the discussion your tutor may ask you to clarify or expand on different topics to ensure that you are showing sufficient understanding and knowledge.

The areas that will be covered in your professional discussion are listed below. You should spend time with your tutor discussing the preparation you need to undertake on these areas and the types of examples that you may produce. To help plan the discussion you must identify suitable examples from your work placement(s), supported by the content of your reflective workbook and learning through year one of your qualification and bring these for discussion. You should bring your reflective workbook and plans you have made to support your discussion with you to your professional discussion.

You must ensure you cover all eleven areas listed below, so planning your timings to cover these during the discussion is important. Your planning documents must be submitted for assessment following the professional discussion and will contribute towards marking.

Confidentiality of information

You must ensure that no reference is made to your work placement name, care receivers names or names of care providers throughout your discussion.

The areas are as follows:

- 1. Preparing for work placement - how you prepared yourself**
 - Opportunities for work practice
- 2. Factors which influenced interpersonal communication and interaction within your work practice**
 - Dealing with potential barriers to communication
- 3. Communication skills and strategies for interpersonal care in work practice**
 - Interpersonal communication and person centred care – highlighting your own best practice and areas for further development
- 4. What constitutes good practice in delivering personal care**
 - Reflecting on good practice in delivering personal care – that you may have seen or were directly involved with
- 5. Ways in which care practitioners promote the personal needs of individuals in respect of their care – to include your own practice**
 - Principles and values of person-centred care
- 6. Strategies that promote equality in health and care settings**
 - Strategies to promote equality in care – what examples can you give
- 7. Challenging discriminatory practice**

- Individually challenging discrimination within the care setting to encourage positive change – how would you do this if the situation presented itself
- 8. Values, principles and behaviours in care practice**
- Values and ethics underpinning excellence in care practice – to include evidence of good practice demonstrated through work practice placement
- 9. Quality measures in health and care**
- Reporting poor quality measures – explore how you would you do this in the event you encountered it
- 10. Reflecting on and reviewing practice**
- Understanding reflective practice (to include reference to your reflective logs)
- 11. Planning and reviewing personal and professional development**
- Personal development – areas for further development in respect of your care practice and career development

Your tutor will use a pro-forma to record the professional discussion. The discussion may be written up or an audio recording could be used. The discussion will be referenced to the qualification unit requirements and you should receive feedback from your tutor on the outcome.

Your tutor will also inform you of the venue, date and time of the discussion and will also ensure there is a quiet area which will allow for confidentiality.

On the day of the assessment you should arrive early and be prepared. You should prepare any questions that you may wish to ask your tutor before the assessment starts.

Your tutor will give you any required or additional information ahead of the assessment to allow you enough time to prepare.

Conditions of assessment

It is expected this task including preparation time will take approximately 10 hours in total.

Tutor guidance

This synoptic assessment is designed to require the candidate to make use of their knowledge, understanding and skills that they have built up over the course of their learning to tackle problems/tasks/challenges.

This approach to assessment emphasises to candidates the importance and applicability of the full range of their learning to practice in their industry area, and supports them in learning to take responsibility for transferring their knowledge, understanding and skills to the practical situation, fostering independence, autonomy and confidence.

Candidates are provided with a set of tasks. They then have to draw on the knowledge and skills and independently select the correct processes, skills, materials, and approaches to take.

During the learning programme, it is expected that tutors will have taken the opportunity to set shorter, formative tasks that allow candidates to be supported to independently use the learning they have so far covered, drawing this together in a similar way, so they are familiar with the format, conditions and expectations of the synoptic assessment.

You should explain to candidates what the Assessment Objectives are and how they are implemented in marking the assignment, so they will understand the level of performance that will achieve them high marks.

The candidate should not be entered for the assessment until the end of the course of learning for the qualification so they are in a position to complete the assignment successfully.

Guidance on case studies

Timings

The recommended time to be allocated for the completion of the case study tasks that comprise this assessment is 10 hours per task - **30** hours total.

Of the 10 hours per task, 7 are dedicated to research and information gathering, which can be carried out under unsupervised conditions. The remaining 3 hours per task are dedicated to writing up, which must be completed under supervised conditions in a 3 hour block.

Candidates work can be written or word processed. Where work is word processed consideration should be given to the security and regular back up of work.

Work must be retained by the centre between supervised write up sessions e.g. in cases where work is word processed, students could be issued a named memory stick at the start of each write up session which they save their work on to. The memory stick would then be handed in and stored securely by the centre, before reissuing the same named memory stick to candidates at the start of the next write up session.

Candidates should be required to plan their work and have their plans confirmed for appropriateness in relation to the time allocated for each task.

It is recommended that candidates are given the case study task content approximately **three weeks prior** to the start of the planned assessment process.

Preparation

Candidates should be encouraged to do the best they can, and should be made aware of the difference between this summative assessment and any formative assessments they may have done previously. **They should not be given access to the specific marking grids.**

Tutors must ensure that the work produced is that of the candidate in question and that candidate alone. Candidates may bring pre prepared notes and research materials to the supervised write up session. However they are **not** allowed to bring previously transcribed, fully completed, pre prepared versions of written accounts or reports into this session.

Guidance on professional discussion

This assessment will take 45 minutes per candidate and will be completed, on a one to one basis at the end of the first year of the qualification and after the candidate has completed their Work Practice Reflective Workbook and their work placement(s).

Professional discussion is a useful assessment method to assess the knowledge of the candidate and to be certain that they have a firm understanding of principles underpinning their practice. A professional discussion is a planned event and should be structured so that the specific areas to be explored during the discussion are clearly identified and agreed, as must the methods by which the discussion will be conducted.

The professional discussion is

- part of the planned summative assessment strategy and timings are agreed in advance with the candidate
- a structured opportunity which explores key aspects of the candidate's understanding of practice and/or procedures
- not intended to be a question and answer session led by the tutor (although it is acknowledged that some candidates may need prompting during the discussion).

Recording of the professional discussion

The outcomes of the professional discussion will be recorded and captured by either:

- a detailed written account by the tutor of the discussion using a proforma (See appendix 1)
- an audio/video recording- this must be of good quality so that the discussion can be heard throughout accompanied by an audio recording proforma (See appendix 1).

Both methods should be referenced clearly to the assessment criteria, and for an audio recording, timings should be given so that it can be effectively quality assured.

All completed records of candidates' responses should be securely stored by the centre for verification by City & Guilds.

Confidentiality of information

Tutors must ensure that candidates are informed prior to the professional discussion that no reference must be made to placement name, care receivers or care providers names. In all recording tutors are required to guarantee no breach of Data Protection regulations has occurred.

Tutor requirements / employer support

Professional discussions must be carried out by a vocationally competent tutor who is current in their understanding of expected behaviours and values in the delivery of health and/or care. Alternatively a health or care employer who has supervisory responsibility over the practice of employees within their respective settings could undertake this summative assessment role. If the latter is being considered by providers it is expected that centre records will show that they have had their CVs checked and suitable induction into the role expected within the assessment process.

Planning a professional discussion.

Thorough planning with the candidate is essential and should include the following:

- topics for discussion
- types of evidence that can be referred to within the discussion
- candidate preferences on how the discussion is to be recorded
- venue, date, and time.

Centres are required to provide auditable written evidence of the above for verification purposes. Candidates planning documents must be submitted as part of the assessed professional discussions and will contribute towards marking.

It is good practice for the tutor to remind the candidate prior to the discussion of the agreements made during the planning.

Day of the professional discussion

The tutor should:

- ensure they have all the relevant assessment records, copies of the unit criteria as required, and working recording equipment
- arrive early and prepare a quiet, confidential area and that equipment is available
- ensure the candidate is prepared for the assessment and remind them of the centres appeals procedure
- (if using recording equipment) at the start of the assessment introduce the people present, date and time and venue and the units , outcomes and criteria to be discussed.

Managing the process

The tutor should encourage the candidate to keep the discussion focused and to the time span agreed thus ensuring that all learning outcomes can be covered.

It is good practice for the professional discussion to be led by the candidate. However it is recognised that initially candidates can be nervous. With encouragement from the tutor, the candidate should be prepared to discuss their understanding of the agreed areas and once they start to relate their understanding to their practice they will gain more confidence and the discussion should start to flow. When the discussion is going well the tutor will often just need to interject to recap or reword a question to draw more information or examples from the candidate about the criteria/topics being covered.

Discussion prompts only need to be used if a learner is not able to lead the discussion themselves and this could impact on their mark.

Feedback

The tutor should encourage and praise the candidate appropriately and inform them when to expect feedback and a provisional grade.

Completed proformas should be signed and dated; the written record should be completed sufficiently to support referencing and quality assurance of any electronic record.

Professional discussion exemplar answers

Topics to be covered within the professional discussion with candidates are provided below in more detail. **These exemplar answers are not to be shared with candidates.**

In some instances examples provided by candidates may provide sufficient evidence to cover more than one criteria, for example examples of person centred care may overlap with use of communication aids and promotion of equality. The tutor management of the professional discussion is therefore crucial.

Should the candidate not be able to lead the discussion, the prompts identified can be used in the professional discussion process. Tutors must support candidates in planning the discussion so that there is a natural, holistic flow through the topic areas. Candidates should be encouraged to refer to examples from their work placement. Candidates have been advised to bring their reflective workbook into the discussion to refer to.

Unit & Learning outcome	Assessment Criteria and suggested questions and content for candidate responses during the discussion
<p>302 Personal and professional development in health and care</p> <p>3. Prepare for work placement</p>	<p>3.1: Opportunities for work practice</p> <p>The candidate should know the different types of care settings available for work practice and the types of support and services provided for individuals receiving care. The candidate should reflect on how they were supported to prepare for their work practice and how this experience might inform their future career interests; what they did not expect about the importance of preparation and how the preparatory period could be improved for a new candidate.</p> <p><i>Discussion prompt</i> Can you explain different types of care services and explain how you were supported to prepare for your placement? Reflecting on this process would you suggest any improvements that could be used for other candidates preparing for their first placement?</p>
<p>304 Effective communication in health and care settings</p> <p>2. Know factors which influence interpersonal communication and interaction</p>	<p>2.3: Dealing with potential barriers to communication</p> <p>The candidate should identify the factors affecting and influencing communication. They should describe different barriers to effective communication and how these can be overcome in practice. They may refer to examples from their work placement</p> <p><i>Discussion prompt</i> Can you identify some barriers to effective communication and how can these be overcome - Can you give some examples?</p>
<p>304 Effective communication in health and care settings</p> <p>3. Apply communication skills and strategies to interpersonal care in work practice.</p>	<p>3.1: Interpersonal communication and person centred care</p> <p>The candidate should refer to their work placement to provide examples of skills and/or strategies they have developed/observed of effective interpersonal communication to support person centred care.</p> <p><i>Discussion prompt</i> Can you provide examples of how skills and strategies for effective interpersonal communication apply in health and care settings?</p>
<p>308 Understanding individual care needs</p> <p>4. Reflect on what constitutes good practice in delivering personal care.</p>	<p>4.1: Reflecting on good practice in delivering personal care</p> <p>Candidates will reflect on their learning and describe good practice in the delivery of personal care. The candidate could refer to either classroom based study or workplace examples.</p> <p><i>Discussion prompt</i> Can you give examples of good practice in the delivery of personal care?</p>

Unit & Learning outcome	Assessment Criteria and suggested questions and content for candidate responses during the discussion
<p>308 Understanding individual care needs</p> <p>3. Know ways in which care practitioners promote the personal needs of individuals in respect of their care</p>	<p>3:1: Principles and values of person-centred Care</p> <p>Candidates should explain what is meant by the term person-centred care and seeing people as unique individuals. They should understand how person-centred care approaches promote choice and self empowerment whilst respecting dignity and privacy.</p> <p><i>Discussion prompt</i> Can you describe what is meant by person-centred approaches to care?</p>
<p>303 Equality and diversity in health and care</p> <p>5. Know strategies to promote equality in a health and care setting.</p>	<p>5.3: Strategies to promote equality in care.</p> <p>The candidate should be able to describe the importance of courage and commitment needed to promote policies and procedures in the work setting in respect of equality.</p> <p><i>Discussion prompt</i> What are the key strategies which underpin the promotion of equality within a care setting?</p>
<p>303 Equality and diversity in health and care</p> <p>4. Challenge discriminatory practice</p>	<p>4.1: Individually challenging discrimination within the care setting to encourage positive change</p> <p>The candidate may be able to refer to a real example they have seen within their placement. The candidate should identify the different types of discrimination that may take place in a care setting and the skills needed to challenge discrimination from staff members; individuals being cared for; other visitors. The candidate should be able to describe the importance of a positive approach to change when challenging discrimination.</p> <p><i>Discussion prompt</i> Can you identify the different types of discrimination that may take place in a care setting? Can you give me an example of the way you would challenge discrimination to ensure that a positive approach to change is fostered?</p>
<p>302 Personal and professional development in health and care</p> <p>2. Know values, principles and behaviours in care practice</p>	<p>2.1: Values and ethics underpinning excellence in care practice</p> <p>The candidate should explicitly refer to the core care values and behaviours in care practice and how they have developed their understanding of these from their learning and from their work practice. They should be encouraged to give examples of the application of these from their reflective workbook.</p> <p><i>Discussion prompt</i> Can you describe the different core values and behaviours expected from a care worker? Please give examples from your experience of what each mean in practice?</p>

Unit & Learning outcome	Assessment Criteria and suggested questions and content for candidate responses during the discussion
<p>309 Quality service provision in health and care</p> <p>2. Research quality measures in health and care.</p>	<p>2.2: Reporting poor quality measures</p> <p>The candidate should explain the procedure for identifying and reporting poor quality practice both internally and externally to a care organisation.</p> <p><i>Discussion prompt</i> Can you explain the procedure for identifying and reporting poor quality practice?</p>
<p>302 Personal and professional development in health and care</p> <p>4. Reflect on and review practice</p>	<p>4.1: Understanding reflective practice</p> <p>The candidate should be able to describe what is meant by reflective practice and describe different reflective practice models. They should be able to describe the importance of reflection and review. They should recognise the importance of reflection and its relevance to evidence based practice.</p> <p><i>Discussion prompt</i> Can you explain the term reflective practice and a model you learned about and used in your workbook? Referring to your workbook take me through examples of how your care practice developed through the reflective process.</p>
<p>302 Personal and professional development in health and care</p> <p>5. Plan and review for personal and professional development.</p>	<p>5.1: Personal development</p> <p>The candidate should talk through their development plan, completed in their reflective workbook, and how they have agreed SMART targets to develop their skills and learning.</p> <p><i>Discussion prompt</i> Can you talk me through your development plan and explain how your skills and learning targets are going to be met?</p>

Guidance on assessment conditions

The assessment conditions that are in place for this synoptic assignment are to:

- ensure the rigour of the assessment process,
- provide fairness for candidates
- give confidence in the assessment outcome.

They can be thought of as the rules that ensure that all candidates who take an assessment are being treated fairly, equally and in a manner that ensures that their result reflects their true ability. The conditions outlined below relate to this summative synoptic assignment. These do not affect any formative assessment work that takes place. Formative assessment will necessarily take a significant role throughout the learning programme where support, guidance and feedback (with the opportunity to show how the feedback has been used to improve outcomes and learning) are critical.

This approach is not, however, valid for summative assessment. The purpose of summative assessment is to confirm the standard the candidate has achieved as a result of participating in the learning process.

Authentication of candidate work

Candidates are required to sign declarations of authenticity once they have completed all parts of the assignment, as is the tutor for each synoptic assessment requirement. The relevant form is included in this assignment pack.

Candidates can rework any evidence that has been produced for this synoptic assignment, during the time allowed. However, this must be as a result of their own review and identification of weaknesses, and not as a result of tutor feedback. Once the evidence has been submitted for assessment, no further amendments to evidence can be made.

Candidate evidence must be kept secure to prevent unsupervised access by the candidate or others.

Accessibility and fairness

Where the candidate has special requirements, tutors should refer to the separate 'Access Arrangements' guidance document which can be downloaded from the City & Guilds website.

Tutors can provide clarification to any candidate on the requirements of any aspect of this synoptic assignment. Tutors should not provide more guidance than the candidate needs as this may impact on the candidate's grade. Guidance must only support access to the assignment and must not provide feedback for improvement. Any clarification and guidance should be recorded fully and must be taken into account along with the candidate's final evidence during marking and must be made available for moderation. Tutors must not provide feedback on the quality of the performance or how the quality of evidence can be improved. This would be classed as tutor malpractice. Tutors should however provide general reminders to candidates throughout the assessment period that they must check their work thoroughly before submitting it to be sure that they are happy with their final evidence as it may not be worked on further after submission.

It is up to the marker during marking to decide in what area, if any, the guidance provided suggests the candidate is lacking, the severity of the issue, and how to award marks on the basis of this full range of evidence. The marker must record where and how guidance has had an impact on the marks given, so this is available should queries arise at moderation or appeal.

Example

A tutor should intervene if a candidate has taken a course of action that will result in them not being able to submit the full range of evidence for assessment. However this should only take place once the tutor has prompted the candidate to check that they have covered all the requirements. Where the tutor has to be explicit as to what the issue is, this is likely to demonstrate a lack of understanding on the part of the candidate rather than a simple error.

The tutor should do their best to refrain from providing guidance if the candidate is thought to be able to correct the issue without it, and a prompt would suffice. In other words only the minimum support the candidate actually needs should be given, since the more guidance provided, the larger the impact on the marks awarded. Both prompts and details of the nature of any further guidance must be recorded and reviewed during marking and moderation.

A tutor may not provide guidance that the candidate's work is not at the required standard or how to improve their work. In this way, candidates are given the chance to identify and correct any errors on their own, providing valid evidence of knowledge and skills that will be credited during marking.

Guidance on marking

Please see the centre guidance document ***Guidance for assessment of City & Guilds technical qualifications, including grading and use of marking grids*** for detailed guidance on using the following marking grid.

The marking grid for this synoptic assignment follows on the next page.

A form for capturing marks allocated can be found at the back of this pack.

Assessment objectives marking grid

%	Assessment Objective	Band 1 descriptor Poor to limited	Band 2 descriptor Fair to good	Band 3 descriptor Strong to excellent
20	AO1 Recall of knowledge relating to the qualification LOs <ul style="list-style-type: none"> Does the candidate seem to have the full breadth and depth of taught knowledge across the qualification to hand? How accurate is their knowledge? Are there any gaps or misunderstandings evident? 	<p align="center">(1-4 marks)</p> <p>Recall shows some weaknesses in breadth and/or accuracy. Hesitant, gaps, inaccuracy</p>	<p align="center">(5-8 marks)</p> <p>Recall is generally accurate and shows reasonable breadth. Inaccuracy and misunderstandings are infrequent and usually minor. Sound, minimal gaps</p>	<p align="center">(9-12 marks)</p> <p>Consistently strong evidence of accurate and confident recall from the breadth of knowledge. Accurate, confident, complete, fluent, slick</p>
		<p>Examples of types of knowledge expected: legislation, regulations, roles and responsibilities, use of terminology, health and safety considerations, codes of conduct, core care behaviours, local services policy, challenging discriminatory practice, care services available, wider health and care landscape, types of abuse</p>		

%	Assessment Objective	Band 1 descriptor Poor to limited	Band 2 descriptor Fair to good	Band 3 descriptor Strong to excellent
	<ul style="list-style-type: none"> How confident and secure does their knowledge seem? 	<p>Bottom of band: The candidate has shown a basic knowledge of key health and care areas for example safe practice and barriers to communication.</p> <p>Top of band: The candidate has shown basic knowledge of health and care from across the qualification, with some insecurity in some areas. Examples provided cover a limited range. Some points are covered in detail but consideration of wider factors such as legislation and regulation and links to practice are limited.</p>	<p>Bottom of band: The candidate has shown a good range of knowledge from across the qualification which is sound and often detailed.</p> <p>Top of band: Candidate has shown a broad range of knowledge, making links to legislation and practice. Explanations are usually detailed.</p>	<p>Bottom of band: The candidate shows in-depth and detailed knowledge across the whole qualification range, showing a high degree of confidence and accuracy.</p> <p>Top of band: Explanation is clear and strong links have been made between legislation, regulation and links to practice. Where relevant, the care receiver is at the centre of consideration, dignity, respect and best practice is evident in responses.</p>

%	Assessment Objective	Band 1 descriptor Poor to limited	Band 2 descriptor Fair to good	Band 3 descriptor Strong to excellent
20	AO2 Understanding of concepts theories and processes relating to the LOs <ul style="list-style-type: none"> • Does the candidate make connections and show causal links and explain why? • How well theories and concepts are applied to new situations/the assignment? • How well chosen are exemplars – how well do they illustrate the concept? 	<p style="text-align: center;">(1-4 marks)</p> <p>Some evidence of being able to give explanations of concepts and theories. Explanations appear to be recalled, simplistic or incomplete.</p> <p>Misunderstanding, illogical connections, guessing,</p>	<p style="text-align: center;">(5-8 marks)</p> <p>Explanations are logical. Showing comprehension and generally free from misunderstanding, but may lack depth or connections are incompletely explored.</p> <p>Logical, slightly disjointed, plausible,</p>	<p style="text-align: center;">(9-12 marks)</p> <p>Consistently strong evidence of clear causal links in explanations generated by the candidate. Candidate uses concepts and theories confidently in explaining decisions taken and application to new situations.</p> <p>Logical reasoning, thoughtful decisions, causal links, justified</p>
		<p>Examples of understanding expected: theories and models of reflective practice, concepts of care values and behaviours, principles of person centred care, risk, application of legislation and policy to situations (e.g. safeguarding), signs and symptoms of abuse</p>		

%	Assessment Objective	Band 1 descriptor Poor to limited	Band 2 descriptor Fair to good	Band 3 descriptor Strong to excellent
		<p>Bottom of band: The candidate has shown a basic understanding of key health and care concepts and theories, for example, care behaviours and recognition and application of safeguarding policy relevant to own role.</p> <p>Top of band: The candidate has shown basic understanding of health and care concepts and theories from across the qualification, with some insecurity in some areas. Examples provided cover a limited range. Some points are covered in detail but consideration of wider factors such as theories and models of reflective practice are limited.</p>	<p>Bottom of band: The candidate has shown a good range of understanding of health and care concepts and theories from across the qualification which are sound and often detailed.</p> <p>Top of band: The candidate has shown a broad range of understanding of health and care concepts and theories, making links to practice. Explanations are usually detailed. Understanding is consistent with reasoning coherent and well explained.</p>	<p>Bottom of band: The candidate shows in-depth and detailed understanding of health and care concepts and theories across the whole qualification range, showing a high degree of confidence and accuracy.</p> <p>Top of band: Explanation is clear and strong links have been made between concepts and theories and links to practice. Where relevant, the care receiver is at the centre of consideration, dignity, respect and best practice is evident in responses. Concepts and understanding can be applied consistently and effectively in new contexts.</p>

%	Assessment Objective	Band 1 descriptor Poor to limited	Band 2 descriptor Fair to good	Band 3 descriptor Strong to excellent
10	A03 Application of practical/ technical skills <ul style="list-style-type: none"> How practiced/fluid does hand eye coordination and dexterity seem? How confidently does the candidate use the breadth of practical skills open to them? How accurately/ successfully has the candidate been able to use skills/achieve practical outcomes? 	<p align="center">(1-2 marks)</p> <p>Some evidence of familiarity with practical skills. Some awkwardness in implementation, may show frustration out of inability rather than lack of care.</p> <p>Unable to adapt, frustrated, flaws, out of tolerance, imperfect, clumsy.</p>	<p align="center">(3-4 marks)</p> <p>Generally successful application of skills, although areas of complexity may present a challenge. Skills are not yet second nature.</p> <p>Somewhat successful, some inconsistencies, fairly adept/capable.</p>	<p align="center">(5-6 marks)</p> <p>Consistently high levels of skill and/or dexterity, showing ability to successfully make adjustments to practice; able to deal successfully with complexity.</p> <p>Dextrous, fluid, comes naturally, skilled, practiced,</p>
		<p>Examples of skills expected: verbal and non verbal communication, reflection, completing documentation</p>		
		<p>Candidate shows basic communication skills to convey responses with prompting during professional discussion. Reflections show minimal depth and evaluation.</p>	<p>Demonstrates range of non verbal and verbal communication methods. Candidate demonstrates engagement and is able to widen discussions when prompted. Candidate uses reflection to evaluate situations and can discuss some potential impact.</p>	<p>Demonstrates wide range of non verbal and verbal communication methods. Candidate demonstrates total engagement and is able to extend and widen discussions. Candidate uses reflection to analyse and evaluate situations and can discuss fully the impact.</p>

%	Assessment Objective	Band 1 descriptor Poor to limited	Band 2 descriptor Fair to good	Band 3 descriptor Strong to excellent
20	AO4 Bringing it all together - coherence of the whole subject <ul style="list-style-type: none"> Does the candidate draw from the breadth of their knowledge and skills? Does the candidate remember to reflect on theory when solving practical problems? How well can the candidate work out solutions to new contexts/ problems on their own? 	<p align="center">(1-4 marks)</p> <p>Some evidence of consideration of theory when attempting tasks. Tends to attend to single aspects at a time without considering implication of contextual information.</p> <p>Some random trial and error, new situations are challenging, expects guidance, narrow. Many need prompting.</p>	<p align="center">(5-8 marks)</p> <p>Shows good application of theory to practice and new context, some inconsistencies.</p> <p>Remembers to apply theory, somewhat successful at achieving fitness for purpose. Some consolidation of theory and practice</p>	<p align="center">(9-12 marks)</p> <p>Strong evidence of thorough consideration of the context and use of theory and skills to achieve fitness for purpose.</p> <p>Purposeful experimentation, plausible ideas, guided by theory and experience, fit for purpose, integrated, uses whole toolkit of theory and skills.</p>
		<p>Examples of bringing it all together: applying knowledge and understanding to a particular situation, justifying decisions/approaches taken, contingencies, reflection and evaluation in professional discussion and case studies</p>		

%	Assessment Objective	Band 1 descriptor Poor to limited	Band 2 descriptor Fair to good	Band 3 descriptor Strong to excellent
		<p>Bottom of band: There is some evidence of the candidate using their knowledge and understanding to makes straightforward links between limited topics across the qualification.</p> <p>Top of band: The candidate shows evidence of using their knowledge and understanding to makes key links between limited topics across the qualification.</p>	<p>Bottom of band: The candidate consistently brings together their knowledge, understanding and skills when analysing and solving problems and reflecting on health and care practice. Candidate makes key links between a range topics across the qualification</p> <p>Top of band: Utilises a range of knowledge from across the qualification to analyse and problem solve. Integration of knowledge, understanding and skills which informs basic appreciation of the context of health and care practice and its impact on the care receiver.</p>	<p>Bottom of band: Utilises a wide range of knowledge from across the qualification to analyse and problem solve. Integration of knowledge, understanding and skills which informs an appreciation of the wider context of health and care practice and its impact on the care receiver.</p> <p>Top of band: Utilises a wide range of knowledge from across the qualification to analyse and problem solve creatively and holistically. Integration of knowledge, understanding and skills which informs a full understanding of the wider context of health and care practice and its impact on the care receiver.</p>

%	Assessment Objective	Band 1 descriptor Poor to limited	Band 2 descriptor Fair to good	Band 3 descriptor Strong to excellent
10	AO5 Attending to detail/ perfecting <ul style="list-style-type: none"> Does the candidate routinely check on quality, finish etc. and attend to imperfections/ omissions How much is accuracy a result of persistent care and attention (e.g. measure twice cut once)? Would you describe the candidate as a perfectionist and wholly engaged in the subject? 	<p align="center">(1-2 marks)</p> <p>Easily distracted or lack of checking. Insufficiently concerned by poor result; little attempt to improve. Gives up too early; focus may be on completion rather than quality of outcome.</p> <p>Careless, imprecise, flawed, uncaring, unfocussed, unobservant, unmotivated.</p>	<p align="center">(3-4 marks)</p> <p>Aims for satisfactory result but may not persist beyond this. Uses feedback methods but perhaps not fully or consistently.</p> <p>Variable/intermittent attention, reasonably conscientious, some imperfections, unremarkable.</p>	<p align="center">(5-6 marks)</p> <p>Alert, focussed on task. Attentive and persistently pursuing excellence. Using feedback to identify problems for correction.</p> <p>Noticing, checking, persistent, perfecting, refining, accurate, focus on quality, precision, refinement, faultless, meticulous.</p>
<p>Examples of attending to detail: meeting specific requirements of the task, attention to detail in case study and discussion, professional discussion plans</p>				
		<p>There is limited attention to detail. Evidence provided shows inaccuracies or gaps in assessment tasks. Candidate evidences limited planning of professional discussion and does not cover all tasks.</p>	<p>There is consistent attention to detail. Evidence provided is generally accurate and related to specific tasks. Candidate evidences planning of professional discussion to cover most elements of the task.</p>	<p>The candidate has been highly focused on the task showing care and attention to detail. Minimal errors are evident. Candidate evidences detailed planning of professional discussion to cover all required elements of the task.</p>

%	Assessment Objective	Band 1 descriptor Poor to limited	Band 2 descriptor Fair to good	Band 3 descriptor Strong to excellent
10	AO6 Identify and use knowledge from other sources – research <ul style="list-style-type: none"> Does the candidate identify and use a wide range of appropriate sources effectively? How critically is information appraised, for plausibility, suitability and relevance? How purposefully is information used? 	<p align="center">(1-2 marks)</p> <p>Uncritical use of a few basic sources. Referencing lacking or inappropriate. Lack of interpretation/ consideration in use, referencing minimal.</p> <p>Limited, uncritical, unfocussed, no clear purpose, cut and paste.</p>	<p align="center">(3-4 marks)</p> <p>Use of sources is generally good, possibly inconsistent or critical appraisal is somewhat under-developed. Evidence of generally consistent referencing.</p> <p>Fitful, unexceptional, partially considered, reasonably reliable, sometimes straying from the aim.</p>	<p align="center">(5-6 marks)</p> <p>Broad and appropriate use of sources. Clear referencing and acknowledgement where appropriate. Information gathered is appropriate and used effectively.</p> <p>Broad/deep, relevant, considered, well chosen, purposeful, interpreted.</p>
		<p>Examples of research: using a range of sources (e.g. internet, books, journals, relevant non-confidential workplace policies and procedures), reference list, standard referencing framework, selection of research material and sources</p>		
		<p>There is little evidence of background reading with some basic referencing to sources. Limited range of sources used e.g. candidate has used only internet. Referenced sources are not always evidenced in assignment work but there is an attempt to use standard referencing framework.</p>	<p>Good evidence of background reading with considered and relevant referencing. Referencing is clear and provides a range of sources. Use of a standard referencing framework is generally accurate.</p>	<p>Strong and consistent evidence of background reading with well considered referencing. Referencing demonstrates depth and breadth of research sources including books, web based research, journals and more. Use of a standard referencing framework is accurate.</p>

%	Assessment Objective	Band 1 descriptor Poor to limited	Band 2 descriptor Fair to good	Band 3 descriptor Strong to excellent
0	AO7 Originality and creativity <ul style="list-style-type: none"> Does the candidate respond to the brief in an original way? Are ideas/ materials etc. used in a creative novel, experimental way? Are creative, unconventional approaches taken in applying skills/ processes to meet a challenge? 	<p align="center">(0 marks)</p> <p>Designs and solutions to problems follow conventional routes. Some evidence of experimentation or novel thought.</p> <p>Unimaginative, uses existing/ conventional ideas, safe.</p>	<p align="center">(0 marks)</p> <p>Evidence of creativity/ originality/ experimentation, but may be incompletely developed or lacking in clear intention.</p> <p>Somewhat original, beginnings of an idea, partially developed, lacking in confidence; avoiding risk, falling back on convention.</p>	<p align="center">(0 marks)</p> <p>Opportunities for creativity are identified and tackled with originality and imagination. Takes risks/ experimental</p> <p>Original, creative, unique, unconventional, risky, fully developed, inspired.</p>
		Examples of creativity: N/A		
		N/A	N/A	N/A
10	AO8 Communication/ Presentation/ Documentation <ul style="list-style-type: none"> How well are formally produced pieces of work (writing, drawings, posters etc.) structured, laid out, presented, communicated? Does the candidate use logical and well structured writing that is coherent and easy to follow? How appropriate and well presented are the chosen 	<p align="center">(1-2 marks)</p> <p>Format choices are limited to a basic 'tool kit' and sometimes inappropriate. Some evidence of attempts to use structure and layout to aid communication.</p> <p>Somewhat disorganised/ unstructured, informal, basic.</p>	<p align="center">(3-4 marks)</p> <p>Some successful use of conventional formats, but some content may be lacking, e.g. in logical/coherent approach.</p> <p>Reasonably successful, conveys message quite well.</p>	<p align="center">(5-6 marks)</p> <p>Appropriate choice of methods, layout, styles and conventions maximise communication. Written style and structure/composition is coherent and logical.</p> <p>Professional, organised, well structured, easy to follow, even complex ideas.</p>
		Examples of communication: use of accurate presentation, assignment and report writing skills, layout and presentation aid effective communication of information, coherence of arguments, well expressed sentence structure (syntax) and grammar		

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	communication methods and formats?	<p>Candidate provides basic responses to assessment tasks. Work contains grammatical and spelling errors. Written and verbal explanation sometimes enables the candidate to address discussion topics.</p> <p>Responses to assessment tasks lack structure. Communication methods, language and terminology are generally appropriate to assessment task.</p>	<p>Candidate provides generally consistent responses to assessment tasks. Some grammatical and spelling errors. Written and verbal explanation generally enables the candidate to address discussion topics.</p> <p>Responses to assessment tasks are structured. Communication methods, language and terminology are consistently appropriate to assessment task.</p>	<p>Candidate provides clear and consistent responses to assessment tasks. Few grammatical and spelling errors. Written and verbal explanation enables the candidate to show depth and breadth of discussion topics.</p> <p>Responses to assessment tasks have clear and cohesive structure. Communication methods, language and terminology are always appropriate to assessment task.</p>

For any category, 0 marks may be awarded where there is no evidence of achievement

Declaration of authenticity

Candidate name

Candidate number

Centre name

Centre number

Candidate:

I confirm that all work submitted for this synoptic assignment is my own, and that I have acknowledged all sources I have used and I have not included any reference to confidential information relating to my work placement.

Candidate signature

Date

Tutor:

I confirm that all work was conducted under conditions designed to assure the authenticity of the candidate's work, and am satisfied that, to the best of my knowledge, the work produced is solely that of the candidate.

Tutor signature

Date

Candidate assessment feedback form

Candidate name

Candidate number

Tutor name

Date of assessment

Task / AO	Feedback
A01 Recall of knowledge	
A02 Understanding	
A03 Practical/ technical skills	

Task / AO	Feedback
A04 Bringing it all together	
A05 Attention to detail	
A06 Research	
A08 Communication	

Tutor signature and date:

Appendix 1 Proformas

SAMPLE

Professional discussion recording form

Candidate name

Candidate number

Tutor name

Date of assessment

Unit & Learning outcome	Tutor notes	Time on Audio / Video (where applicable)
302 Personal and professional development in health and care 3. Prepare for work placement		
304 Effective communication in health and care settings 2. Know factors which influence interpersonal communication and interaction		
304 Effective communication in health and care settings 3. Apply communication skills and strategies to interpersonal care in work practice.		

Unit & Learning outcome	Tutor notes	Time on Audio / Video (where applicable)
<p>308 Understanding individual care needs</p> <p>4. Reflect on what constitutes good practice in delivering personal care.</p>		
<p>308 Understanding individual care needs</p> <p>3. Know ways in which care practitioners promote the personal needs of individuals in respect of their care</p>		
<p>303 Equality and diversity in health and care</p> <p>5. Know strategies to promote equality in a health and care setting.</p>		
<p>303 Equality and diversity in health and care</p> <p>4. Challenge discriminatory practice</p>		

Unit & Learning outcome	Tutor notes	Time on Audio / Video (where applicable)
<p>302 Personal and professional development in health and care</p> <p>2. Know values, principles and behaviours in care practice</p>		
<p>309 Quality service provision in health and care</p> <p>2. Research quality measures in health and care.</p>		
<p>302 Personal and professional development in health and care</p> <p>4. Reflect on and review practice</p>		
<p>302 Personal and professional development in health and care</p> <p>5. Plan and review for personal and professional development.</p>		