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Level 3 Health and Social Care (Adults) - Practice

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NB - Units marked with an asterisk * are still being reviewed as part of the development and editing process and are not contained within this unit pack.
Unit 300 Application of principles underpinning Health and Social Care - Adults

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<tr>
<td>Unit Summary:</td>
<td>The contents of this unit reflects the practice elements of the Level 2 Core. This content reflects the underpinning values, behaviours and principles that should be observed and reflected in practice in all work displayed by learners.</td>
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</table>

**Outcome 1: Principles and values**

### 1.1 Legislation, national policies, guidance and frameworks

You are able to work and support others to work in ways that:

- Uphold and promote the Codes of Conduct and Professional Practice in your work
- Embed the principles of the Social Services and Well-Being (Wales) Act 2014 and the Codes of Conduct and Professional practice into your day to day work

### 1.2 Rights based approaches

You are able to work and support others to work in ways that:

- Embed a rights based approach in practice
- Support individuals to balance their rights and responsibilities whilst ensuring a duty of care

### 1.3 Person centred approaches

You are able to work and support others to work in ways that:

- Embed person centred approaches in practice
- Support individuals to maximise their decision making and control over their lives and achieve what matters to them
- Embed the principles of co-production in your practice
- Support individuals to engage in activities that are meaningful to them
- Support individuals to develop and maintain skills that support active participation in activities and daily tasks that promote independence
- Embed a co-productive approach when working with individuals and others in the planning process for participation in activities, experiences and daily tasks that promote independence

You are able to work in ways that:

- Take account of the importance of knowing an individual’s preferences and background and embed this in the way that you practice
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<tr>
<th><strong>1.4 Equality, diversity and inclusion</strong></th>
<th>You are able to work and support others to work in ways that:</th>
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<tr>
<td></td>
<td>• Respect and promote equality, diversity and inclusion and challenge discriminatory practices</td>
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<th><strong>1.5 Positive risk taking</strong></th>
<th>You are able to work and support others to work in ways that:</th>
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<tr>
<td></td>
<td>• Follow and promote work place policies and procedures for the use of risk assessments to support individuals to take positive risks</td>
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<td></td>
<td>• Working in co-production to undertake risk assessments</td>
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<td></td>
<td>• Working in co-production to monitor, evaluate and review risk assessments</td>
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<td></td>
<td>• Working in co-production to manage issues related to dilemmas that arise between the right to take risks and safety and well-being</td>
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<th><strong>1.6 Positive relationships and professional boundaries</strong></th>
<th>You are able to work and support others to work in ways that:</th>
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<td></td>
<td>• Develop positive relationships with individuals, their families and carers whilst maintaining clear professional boundaries.</td>
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<th><strong>1.7 Communication</strong></th>
<th>You are able to work and support others to work in ways that:</th>
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<tr>
<td></td>
<td>• Identify, use and promote a range of communication methods to meet the needs and preferences of the individual/s that you support</td>
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<td></td>
<td>• Adapt methods of communication to meet the needs and preferences of the individual/s that you support</td>
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<th><strong>1.8 Welsh language and culture</strong></th>
<th>You are able to work and support others to work in ways that:</th>
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<td></td>
<td>• Implement and promote the principles of Mwy na Geiriau/More than Just Words in your workplace</td>
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<tr>
<th><strong>1.9 Positive approaches to reduce restrictive practices in health and social care</strong></th>
<th>You are able to work in ways and support others to work in ways that:</th>
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<tr>
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<td>• Embed the use of positive approaches in your practice</td>
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<td>• Follow and promote workplace policies and procedures that are in place for behaviour support</td>
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<th><strong>1.10 Reflection</strong></th>
<th>You are able to work in ways that:</th>
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<tr>
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<td>• Reflect on how your attitude and behaviour impact on the individual/s that you support</td>
</tr>
<tr>
<td></td>
<td>• Reflect on the impact of the attitude and behaviour of others on the individual/s that you support</td>
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</table>
- Use reflection to improve your practice

**Outcome 2: Health and Well-being**

**2.1 Well-being**
You are able to work in ways that:
- Take account of the importance of families, friends and community networks and work in a way that supports, develops and promotes these relationships
- Recognise and take account of what matters to individuals
- Take account where what matters to individuals conflicts with personal plans and/or any risk assessments
- Support and promote the well-being of individuals

**2.2 Factors that impact upon health and well-being**
You are able to work in ways and support others to work in ways that:
- Embed and promote a co-productive approach that supports the health and well-being of individuals
- Embed and promote a co-productive approach that promotes the sense of self-esteem, self-worth and sense of security of belonging of individuals
- Embed and promote a co-productive approach that maximises that **active participation** of individuals

You are able to work in ways that:
- You know how and where to access and signpost others to further information or support related to the health and well-being of the individuals that you support
- Take account of any specific factors that impact upon health and well-being of the individuals that you work with
- Support health promotion

**2.3 Support for personal care and continence**
You are able to work in ways and support others to work in ways that:
- Support and promote personal care routines that meet the needs of individuals and take account of agreed practice for infection prevention and control

**2.4 Nutrition and hydration**
You are able to work in ways that:
- Take account of any specific nutrition and hydration requirements for the individuals that you support
- Promote a balanced diet and good hydration for the individual/s you support
- Provide support for a balanced diet and good hydration

**Outcome 3: Professional Practice as a health and social care worker**

**3.1 Roles and responsibilities of the early years and childcare worker**
You are able to work in ways that:
- Meet your professional responsibilities and accountability
- Embed the ethos of your organisation in the workplace
- Help others understand the ethos and structure of your organisation
- Take account of the ethos and structure of other organisations you work with and the links with role and workplace
- Uphold and promote good practice by reporting matters that affect the welfare and safety of individuals or practices that are unsafe or conflict with the ethos, policies and procedures of the workplace
- Implement strategies to deal with challenges encountered in your practice
- Follow and promote **workplace** policies and procedures

You are able to work in ways and support others to work in ways that:
- Embed confidentiality in your day to day work
- Uphold the Codes of Conduct of Professional Practice relevant to your role

### 3.2 Partnership working

You are able to work in ways and support others to work in ways that:

- Take account of the range of other agencies that you may come into contact with and the roles of other workers in your organisation
- Embed the principles of partnership working and co-production in your work with others
- Embed the principles of confidentiality in all communication with others
- Develop and promote good working relationships with other workers and professionals whilst maintaining professional boundaries

### 3.3 Team working

You are able to work in ways that:

- Agree shared actions

### 3.4 Handling information

You are able to work in ways that:

- Follow organisation/setting policies, procedures and processes on the handling of information including: storing, recording, confidentiality and sharing
- Record written information with accuracy, clarity, relevance and an appropriate level of detail in a timely manner.

### 3.5 Personal conduct of health and social care workers

You are able to work in ways and support others to work in ways that:

- Uphold and promote the profession of health and social care workers and role model best practice

### 3.6 Continuing professional development
You are able to work in ways that:

- Meet your workplace requirements regarding learning and development in your role
- Actively identify your own learning and support needs and work with your manager to develop and follow a personal development plan to meet these, including literacy, numeracy and digital competency
- Actively prepare for and contribute to supervision and appraisal
- Actively identify and work towards goals and targets that meet your role and responsibilities
- Evaluate your practice with individuals and others and reflect on feedback to identify ways that your practice can be improved
- Evaluate and show the ways that feedback has improved your practice
- Evaluate how learning activities have improved your practice

**Outcome 4: Safeguarding children**

**4.1 Legislative frameworks for Safeguarding**

You are able to work and support others to work in ways that:

- Follow and promote your local and workplace policies and procedures for safeguarding individuals

**4.2 Safeguarding individuals from harm, abuse and neglect**

You are able to work and support others to work in ways that:

- Promote and support safeguarding of individuals
- Establish, develop and maintain relationships that support trust and rapport with individuals
- Support individuals to stay safe
- Keep yourself safe from allegations from harm or abuse

**4.3 Factors, situations and actions that could lead or contribute to harm, abuse or neglect**

You are able to work and support others to work in ways that:

- Identify factors, situations or behaviours that could lead to harm, abuse or neglect
- Promote safe practices and minimise risks to individuals of harm, abuse or neglect
- Follow and promote workplace policies and procedures for reporting concerns about factors, situations or behaviours that could lead to harm, abuse or neglect

**Outcome 5: Health and safety in health and social care**

**5.1 Health and safety in the workplace**

You are able to work and support others to work in ways that:

- Meet responsibilities in line with health and safety legislation
- Support others to meet their responsibilities in line with health and safety legislation
- Adhere to workplace policies and procedures for health and safety
- Follow and promote workplace processes for the recording and reporting of any concerns or incidents related to health and safety
### 5.2 Risk assessments for health and safety
You are able to work and support others to work in ways that:
- Ensure safe practice by routinely carrying out risk assessments in your day to day work
You are able to work in ways that:
- Are compliant with health and safety risk assessments for your workplace and procedures for reporting concerns or incidents

### 5.3 Fire safety
You are able to work and support others to work in ways that:
- Adhere to the procedures of your work setting that must be followed in the event of a fire

### 5.4 Infection prevention and control
You are able to work and support others to work in ways that:
- Follow and promote good hygiene practice
- Implement your workplace policies and procedures for infection prevention and control
- Follow and promote hand washing technique that is used to prevent the spread of infection

### 5.5 Food safety
You are able to work and support others to work in ways that:
- Follow and promote your workplace policies and procedures in relation to food safety

### 5.6 Hazardous substances
You are able to work and support others to work in ways that:
- Follow and promote your workplace policies and procedures for the storage, use and disposal of hazardous substances

### 5.7 Security in the work setting
You are able to work and support others to work in ways that:
- Adhere to arrangements that are in place to ensure that you, individuals and others are safe in the work setting
- Adhere to work place policies and procedures for lone working, advising of whereabouts and access to the work setting

### 5.8 Managing stress
You are able to work and support others to work in ways that:
- Manages well-being through a range of support mechanisms.
Unit 207  Promoting arts and well-being in health and care

Level: 2
Unit Summary: This unit will enable learners to develop an understanding of the beneficial role arts and creative expression can have on the promotion and development of well-being for those in health and care settings. Learner will consider the impacts of creative activities across different types of groups and life stages and will practically support the delivery of a creative expression or arts programme.

Learning outcome:
1. Understand principles of art and well-being in relation to health and care

Assessment criteria
1.1 Define key terms relating to arts and well-being
1.2 Describe ways in which creative expression can impact on health and well-being
1.3 Describe the relationship between creativity and culture change
1.4 Explain the importance of creativity as a ‘process’
1.5 Identify current developments in policy and practice relating to arts and well-being
1.6 Describe benefits of creativity and creative expression at different stages of life
1.7 Explain the importance of creative expression in the prevention of ill health
1.8 Describe positive impacts creative expression can have in health and care contexts

Range
Key terms – creative expression, art, creativity
Different stages - the early years, middle childhood, adolescence and early adulthood, adults, older adulthood, end of life

Learning outcome:
2. Understand ways creative expression can be used within health and care settings

Assessment criteria
2.1 Describe ways in which creative expression can be used to develop relationships
2.2 Describe impacts of creative expression in health and care organisations/settings
2.3 Explain the importance of creativity in the job role of health and care workers
2.4 Explain how creative expression can be incorporated into care and support delivery to achieve positive psychological outcomes
2.5 Describe methods for overcoming potential barriers to creative expression
2.6 Explain the importance of effective support provision for individuals engaged in the delivery of creative expression activities.
2.7 Identify potential sources of funding for creative programmes in health and care.
2.8 Describe ways of increasing access to creative programmes.
2.9 Describe the roles of external agencies in the provision of creative programs and the importance of collaborative working between agencies.

Range

**Develop relationships** – establishing and maintaining relationships, promoting effective relationships, promoting authenticity in exchanges, supporting and promoting reflective practice, supporting collaborative working, managing actual and perceived power.

**Impacts** - supporting well-being of health and care workers, enriching job roles, improving leadership and collaborative working, cultural change.

**Psychological outcomes** - improved self-confidence, increased self-esteem, improved self-awareness.

**Potential barriers** - personal, social, organisational, financial.

**Individuals engaged in the delivery** – health and care staff, commissioned artists, supervisors/programme managers.

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**Learning outcome:**
3. Support the delivery of arts and creative expression activities in health and care settings.

**Assessment criteria**

3.1 Follow agreed risk assessments and health and safety procedures in accordance with work and legal requirements.
3.2 Set out equipment and materials suitable for agreed activities.
3.3 Check the environment supports the needs and preferences of individuals within the organisation/setting.
3.4 Support individuals to participate fully in activities.
3.5 Monitor the engagement of individuals, making adjustments to ensure potential barriers to engagement are minimised.
3.6 Report health and safety concerns in-line with organisation/setting requirements.
3.7 Review and document outcomes of activity in line with objectives.
Unit 207  Promoting arts and well-being in health and care

Supporting Information

Evidence requirements
- Observe the learner supporting the delivery of arts/creative expression activities on a minimum of three occasions.
- Documentation and records must be completed clearly, accurately and legibly.

Glossary
Creative expression – definition to be agreed and added
Art – expression or application of creative skill and imagination, for example in a visual form through painting or sculpture.
Creativity – Use of the imagination and original ideas to make something new or reinvent something existing.

Related NOS
- SFHCHS153 Enable individual expression using creative arts therapies
- SCDHSC 0331 Support individuals to develop and maintain social networks and relationships
- SCDHSC3101 Support the development of community networks and partnerships
- SCDHSC3102 Work with community networks and partnerships
- SCDHSC0429 Work with groups to promote individual growth, development and independence
- SCDHSC3104 Support the development of networks to achieve planned outcomes
- SCDLMCD1 Lead and manage work with networks, communities, other professionals and organisations for care service provision
- SCDHSC0350 Support the spiritual well-being of individuals
- SCDHSC0332 Promote individuals’ positive self-esteem and sense of identity

Related legislation and guidance
- The Well-being of Future Generations (Wales) Act 2015
- Age Friendly Communities Resource Hub
- Andrews, Baroness K. (2014) Culture and Poverty: harnessing the power of the arts, culture and heritage to promote social justice in Wales
- Arts Council of Wales - Arts and the Well-being of Future Generations
  https://www.google.com/url?q=http://www.arts.wales/arts-in-wales/future-generations&sa=U&ved=0ahUKEwi1_bKanZ_VAhXLL8AKeMQA2QQFggJMAE&client=internal-uds-cse&usg=AFQjCNEcgPrJRjTP8S8XCC5NzzACI7qogA
- Arts Council of Wales - Creative learning through the arts -
  http://www.arts.wales/arts-in-wales/creative-learning
- Art Works Cymru  http://artworks.cymru/
- Art Works Cymru - Artworks Quality Principles  http://artworks.cymru/quality-principles
- Art Works Cymru – commissioner checklist
- Cutler, D (2017) Welsh magic: what’s behind the magnificent work taking place in arts with older people in Wales? Baring Foundation
- Owen, J W (2017) Arts for Health and Well-being of Wales
- Public Health England (2016) Arts for Health and Well-being; an evaluation framework
- Social Care Wales (2016) Integrated Approaches to Promote Well-being
- Social Pedagogy UK  http://www.socialpedagogyuk.com/
  http://www.arts.wales/3105.file.dld
Unit 215  Providing individuals with care and support at home

Level: 2

Unit Summary: This unit provides learners with knowledge, understanding and skills to provide care and support for individuals at home. It covers rights, use of communication, and aspects of health & well-being that underpin the care and support an individual needs.

Learning outcome:
1. Understand the role of care and support at home services in the health and care sector

Assessment criteria
1.1 Identify the different types of care and support at home services available
1.2 Identify the reasons that individuals choose care and support at home
1.3 Describe the range of alternative care options available for individuals

Learning outcome:
2. Understand the Rights-based approaches used within the care and support of individuals at home

Assessment criteria
2.1 Identify different types of advocacy used by individuals accessing care and support at home
2.2 Explain how advocacy is used by individuals accessing care and support at home
2.3 Identify legislation, national and local policies and procedures that relate to the support of carers

Learning outcome:
3. Know how to use communication when supporting the care of individuals at home

Assessment criteria
3.1 Identify factors that can impact on communication for individuals living at home
3.2 Describe methods and approaches that can be used to support effective communication
3.3 Describe how behaviour may be used as a form of communication
3.4 List the range of professionals who can help with communication

Range
Methods and approaches – Verbal, Written, Meetings, Body Language, Active participation, Sufficient time, Active listening.

Learning outcome:
4. Understand the aspects of health and well-being that underpin the care and support of individuals at home

Assessment criteria
4.1 Explain the different well-being outcomes that relate to own work with individuals
4.2 Explain the importance of therapeutic/meaningful activities, and informal support networks, in promoting an individual’s well-being
4.3 Describe the potential impact of loneliness and isolation
4.4 Explain how an individual’s cultural needs and/or beliefs may impact on how care and support is provided
4.5 Explain why your own personal views should not impact on an individual’s choices

Range
Outcomes - physical and mental health and emotional well-being; protection from abuse and neglect; education, training and recreation; domestic, family and personal relationships; ability to participate and contribute to society; respecting and securing rights and entitlements; achieving social and economic well-being; having suitable living accommodation’ control over day-to-day life and participating in work.

Learning outcome:
5. Use health and well-being outcomes to underpin the care and support of individuals at home

Assessment criteria
5.1 Support the well-being and resilience of individuals and carers
5.2 Work in collaboration with other professionals, family members and friends to support the health and well-being of individuals
5.3 Work in ways that support individuals and carers to retain, make and develop positive relationships
5.4 Encourage individuals to access services to promote health and well-being

Services: health services/community services and support activities

Learning outcome:
6. Understand the changes and transitions that impact the support and care of individuals at home

Assessment criteria
6.1 Identify the types of changes and transitions that can occur in an individual’s life
6.2 Describe the impact these changes may have on the individual
Learning outcome:
7. Support individuals at home through transition and change

Assessment criteria
7.1 Support individuals and carers with change and transition using methods appropriate to their needs

Range
Methods - introductions, budgeting, settling, risks, emotional support, managing tensions and dilemmas, active participation, communication

Learning outcome:
8. Understand security in an individual’s home

Assessment criteria
8.1 Identify general requirements for entering and leaving individual’s homes
8.2 Identify the specific challenges and risks that arise in relation to security
8.3 Explain the importance of recording and reporting any concerns regarding security

Learning outcome:
9. Maintain security when working in an individual’s home

Assessment criteria
9.1 Be able to gain access to individual’s homes
9.2 Identify yourself on arrival by using agreed means
9.3 Ensure security on leaving individual’s homes
Unit 215 Providing individuals with care and support at home

Supporting Information

Evidence requirements
- tbc

Glossary
- Lone working
- Resilience
Unit 221  Supporting continence care in adults

Level: 2

Unit Summary: This unit develops and enables learners to support individuals to manage their continence in ways that promotes their dignity and self-esteem. Learners will develop skills to support individuals to reduce discomfort and other complications.

Learning outcome:
1. Understand continence

Assessment criteria
1.1 Identify what is meant by ‘continence’ and ‘incontinence’
1.2 Describe the anatomy and physiology of the urinary system
1.3 Describe the anatomy and physiology of the culmentary canal
1.4 Identify factors that impact on continence in adults
1.5 Describe the importance of maintaining cleanliness and hygiene, of self and others, when supporting with continence management

Learning outcome:
2. Understand causes and impacts of urinary incontinence

Assessment criteria
2.1 Identify types of urinary incontinence
2.2 Describe symptoms of urinary incontinence
2.3 Identify causes of and conditions associated with urinary incontinence
2.4 Describe treatments and interventions for urinary incontinence
2.5 Identify equipment that may be used to support urinary incontinence

Range

Symptoms – leakage of urine, frequency of urination, reluctance to drink fluids.

Causes of bladder incontinence - nonorganic factors (e.g. developmental issues, overproduction of urine); voluntary holding of urine; constipation; urinary tract infections, other underlying medical problems; giggle incontinence, stress incontinence

Treatments and interventions - lifestyle, physical and behavioural therapies (e.g. bladder retraining); Review of eating habits and fluid intake; Medication (e.g. anticholinergics), surgical approaches, neuro-stimulation, invasive procedures, conservative management options (e.g. catheters

Equipment – catheters, urinary drainage bags, link systems, catheter valves, support garments, straps and stands
Learning outcome:
3. Support individuals to manage continence

Assessment criteria

3.1 Support individuals to make regular use of toilet facilities to enable them to achieve a pattern of elimination in line with their individual plan of care
3.2 Maintain accurate records of the individual's patterns of elimination if required
3.3 Report changes in individuals patterns of elimination, in accordance with organisation/setting requirements
3.4 Support individuals to select food and drink that will support continence
3.5 Encourage individuals to use recommended clothing, continence equipment and management techniques to support continence
3.6 Support individuals to use continence equipment and management techniques in ways that maximise their self-respect, dignity and privacy
3.7 Provide continence equipment in line with individuals circumstances and preferences with consideration of the convenience of time and place
3.8 Record and report when continence equipment and management techniques being used appear to be unsuitable

Learning outcome:
4. Provide care to individuals with urinary incontinence

Assessment criteria

4.1 Maintain equipment and materials correctly in accordance with guidelines and protocols
4.2 Support individuals to maintain their personal hygiene whilst managing urinary continence
4.3 Use appropriate PPE in line with organisation/setting policy
4.4 Dispose of equipment and soiled materials safely and in ways which minimise the risk of cross-infection

Learning outcome:
5. Understand causes and impacts of faecal incontinence

Assessment criteria

5.1 Identify causes of faecal incontinence in adults
5.2 Describe symptoms of faecal incontinence and associated conditions
5.3 Identify tests for causes of faecal incontinence
5.4 Identify treatments and interventions for faecal incontinence

Range
Causes of faecal incontinence - constipation with overflow soiling; neurological damage
Learning outcome:
6. Provide care to individuals with faecal incontinence

Assessment criteria
6.1 Maintain equipment and materials correctly in accordance with guidelines and protocols
6.2 Support individuals to maintain their personal hygiene whilst managing faecal incontinence
6.3 Dispose of equipment and soiled materials safely and in ways which minimise the risk of cross-infection
Unit 221  Supporting continence care in adults
Supporting Information

**Evidence requirements**
- Observe the learner supporting individuals with continence care on a minimum of three occasions.
- Supporting individuals to manage incontinence can be assessed via discussion of what the learner has done, and why, as opposed to actual observation (for the benefit of respecting the dignity of the individual).

**Guidance for delivery**
- Learners should be aware that faecal incontinence is a symptom, often with multiple contributory factors and should therefore avoid making simplistic assumptions that causation is related to a single primary diagnosis.
- Providing individuals with support charts would form part of the support of individuals to maintain their continence.

**Glossary**
*Anticholinergics* - Can control overactive bladder (OAB) by relaxing bladder muscles. OAB drugs, which are most common in tablet form, also help prevent urine leaks by controlling bladder spasms.

**Related legislation and guidance**
- Social Services and Well-being (Wales) Act 2014
- More Than Just Words and the Follow-on Strategic Framework for Welsh Language Services in Health and Social Care
- Doing Well, Doing Better: Standards for Health Services in Wales (April 2010)
- BAUS [https://www.baus.org.uk/](https://www.baus.org.uk/)
- Crohns support groups [https://www.crohnsandcolitis.org.uk/support?gclid=EAIaIQobChMIptSO37mj3AIIVTr7tCh17CgHdEAYASAAEgIDrfD_BwE](https://www.crohnsandcolitis.org.uk/support?gclid=EAIaIQobChMIptSO37mj3AIIVTr7tCh17CgHdEAYASAAEgIDrfD_BwE)
- Irritable bowel support group [https://www.theibsnetwork.org/support-groups/](https://www.theibsnetwork.org/support-groups/)
- Age UK [https://www.ageuk.org.uk/](https://www.ageuk.org.uk/)
Unit 228  Introduction to different types of care and support

Level: 2

Unit Summary: This unit aims to provide learners with an overview of the range of health and care setting and services that form the sector.

Learning outcome:
1. Know the range of settings and services within the health and social care sector

Assessment criteria
1.1 Identify the range of health and social care settings
1.2 Identify the range of health and social care services

Learning outcome:
2. Understand the role of different health and social care settings and services

Assessment criteria
2.1 Describe the types of support that different services provide
2.2 Describe the types of support that different settings provide
2.3 Identify the types of 'users' of different settings and services
2.4 Explain how health and social care settings and services can improve an individual’s quality of life

Learning outcome:
3. Understand the different roles within health and social care settings and services

Assessment criteria
3.1 Identify the different roles of individuals that work within health and social care settings and services
3.2 Identify the different skills needed to carry out each of these roles
3.3 Identify any qualifications required to work in each of these roles
Unit 228  Introduction to different types of care and support

Supporting Information

Evidence requirements
- tbc
Unit 233  Introduction to food safety

Level: 2

Unit Summary: This unit is a knowledge based unit which focuses on the principles of food safety when storing, preparing and serving food and drink to others. Learners will understand the hazards presented at different stages of the food handling process from storage to preparation, service and clearing. They will be aware of actions to take to minimise the risk of food becoming contaminated throughout the process.

Learning outcome:
1. Understand the principles and importance of food safety when providing food and drink for individuals

Assessment criteria
1.1 Describe the legislation to ensure food safety
1.2 Explain the importance of maintaining food safety measures when providing food and drink for people
1.3 Describe potential food safety hazards when handling food and drink
1.4 Explain the safety requirements when preparing and serving food and drink
1.5 Explain the importance of clearing food and drink away safely
1.6 Explain where to access information about food safety when providing food and drink

Range


Safety requirements - key food storage temperatures: -18c, 5c, 63c, 75c, prevention of pests in the kitchen, ‘danger zone’ when storing, preparing and serving food

Food safety information - websites, local EHO, local government publications, food standards agencies

Learning outcome:
2. Maintain hygiene when handling food and drink

Assessment criteria
2.1 Describe the importance of hand washing
2.2 Use effective hand washing techniques
2.3 Explain the importance of wearing personal protective equipment
2.4 Wear personal protective equipment when handling food and drink
2.5 Explain the importance of ensuring that all surfaces, equipment and utensils are clean
Range

**Hand washing techniques** - six steps of washing hands, use of hot soapy water

**Personal protective equipment including** - hairnets, disposable aprons, gloves, no perfume or jewellery

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**Learning outcome:**

3. Understand safety requirements when storing food and drink

**Assessment criteria**

3.1 Explain the importance of **storing** food and drink safely
3.2 Explain what is meant by cross contamination and how to avoid it

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Range

**Safe storage** - prevent illness, food poisoning

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**Learning outcome:**

4. Understand safety requirements when storing, preparing, serving and clearing away food and drink

**Assessment criteria**

4.1 Describe **effective controls** for storing food and drink that meet safety requirements
4.2 Identify **food safety hazards**
4.3 Explain the importance of **storing, preparing and clearing food safely**
4.4 Describe the **causes of illness and food poisoning**
4.5 Explain how to **minimise the risk** of food poisoning when serving food and drink
4.6 Describe **methods of controlling** hazards when clearing away food and drink

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Range

**Effective controls** - ambient/dry food stores, correct dates on packaging /use by date, refrigerated cold storage (5°C), hot holding food (63°C), frozen storage (-18°C), ingredients / foods that can cause food allergy

**Food safety hazards** - microbiological, chemical and physical food safety hazards

**Storing, preparing and clearing food safely** - cross contamination, causes illness/food poisoning

**Causes of illness and food poisoning** - microscopic bacteria on hands, food, surfaces and equipment

**Minimise the risk** - four C's cleaning, chilling, cooking, cross contamination

**Methods of controlling hazards** - six stages of cleaning and sanitising, correct storage for clean equipment to prevent further contamination
Unit 233  Introduction to food safety
Supporting Information

Evidence requirements
  • TBC

Related legislation and guidance
  • The Food Safety Act 1990
  • The Food Hygiene Regulations [Wales] 2006
  • www.foodsafety.gov
Unit 247 Providing support to manage pain and discomfort

Level: 2

Unit Summary: This unit provides the learner with the knowledge and skills to provide support for managing pain and discomfort. It covers approaches to pain management, assistance in minimising pain and discomfort and monitoring, recording and reporting on the management of pain and discomfort.

Learning outcome:
1. Understand approaches to managing pain and discomfort

Assessment criteria
1.1 Define the term 'pain'
1.2 Describe different approaches to alleviate pain and minimise discomfort
1.3 Explain the importance of a holistic approach to managing pain and discomfort
1.4 Outline agreed ways of working that relate to managing pain and discomfort

Range
Agreed ways of working – policies, procedures, working to ways as agreed in your job role

Learning outcome:
2. Assist in minimising individuals' pain and discomfort

Assessment criteria
2.1 Describe how pain and discomfort may affect an individual's well-being and communication
2.2 Encourage an individual to express feelings of discomfort and pain
2.3 Encourage an individual to use self-help methods of pain control
2.4 Assist an individual to be safe and comfortable
2.5 Carry out agreed measures to alleviate pain and discomfort

Learning outcome:
3. Monitor, record and report on the management of individual's pain or discomfort

Assessment criteria
3.1 Carry out required monitoring activities relating to management of an individual's pain or discomfort
3.2 Complete records in required ways

Unit 247 Providing support to manage pain and discomfort

Supporting Information

Evidence requirements

- tbc

Glossary

different approaches – meditation, alternative therapies
Unit 249a  Supporting adults with moving and positioning

Level: 2

Unit Summary: This unit develops and enables learners to support individuals with moving and positioning in health and care organisations/settings. The unit covers the principles of moving and positioning, ergonomics and posture as well as techniques for safe moving and positioning. Learners will gain the practical skills required for the safe moving of individuals as well as handling objects and loads.

Learning outcome:
1. Understand principles of moving and positioning

Assessment criteria
1.1 Describe the anatomy and physiology of the spine
1.2 Describe the importance of good posture
1.3 Identify causes and effects of musculo-skeletal disorders (MSD’s)
1.4 List methods of preventing musculo-skeletal disorders
1.5 Identify factors that can promote positive musculo-skeletal health
1.6 List key principles of moving and positioning
1.7 Define the term ‘ergonomics’
1.8 Describe the role of ergonomics and risk assessment in reducing moving and positioning injury
1.9 State factors to consider when undertaking a moving and positioning risk assessment
1.10 Describe the importance of good communication in relation to moving and positioning
1.11 Identify sources of information on moving and positioning
1.12 Describe personal responsibilities relating to moving and positioning procedures

Range
Key principles of moving and positioning – plan the lift, place the feet, adopting a good posture, get a firm and secure grip, use smooth movements, move the feet, keeping loads close, put loads down then adjust its position
Sources of information – organisation/setting policies and procedures, national guidelines

Learning outcome:
2. Applying principles of safe moving and positioning to objects and loads

Assessment criteria
2.1 Use safe handling techniques and principals to move loads
2.2 Apply ergonomic principles, appropriate to organisation/setting and activity
2.3 Carry out moving and positioning activities in line with organisation/setting procedures
2.4 Complete relevant documentation in line with organisation/setting policy and procedures

**Range**

**Moving and positioning activities** - making safety checks on equipment, pushing, pulling and turning loads, lifting and lowering loads from the floor / low level, adjusting posture whilst sitting, carrying a load across a short distance, cylinder handling, pushing loads up and down a ramp

**Learning outcome:**

3. Understand principles and techniques for safe moving and positioning of individuals

**Assessment criteria**

3.1 List reasons for maintaining personal safety and dignity of individuals being moved by others
3.2 Identify **factors** that impact on an individual’s mobility
3.3 Identify practices that may cause personal damage or injury
3.4 Identify steps included in a moving and positioning risk assessment
3.5 State the importance of checking pressure area risk assessment documentation prior to commencing positioning activities
3.6 Describe methods of checking and preparing equipment
3.7 Describe potential risks when moving and handling with others

**Range**

**Factors** - relevant medical history, physical disabilities, psychological, fully co-operative, comatose, unable to understand, aggressive, pain status, tissue viability, vertigo, low haemoglobin, spasm/epilepsy, medical history which predetermines moving and positioning problems (i.e. dizziness, fainting), culture/religious considerations, day/night variations, attachments, other considerations (e.g. social factors, age of individual etc.)

**Learning outcome:**

4. Apply principles and techniques for safe moving and positioning of individuals

**Assessment criteria**

4.1 Check risk assessment documentation prior to moving and positioning
4.2 Gain valid consent from the individual and/or their family/carer prior to moving and positioning
4.3 Assess individuals ability to assist with manoeuvres
4.4 Select appropriate methods for moving individuals with consideration of their comfort, safety and dignity
4.5 Check and prepare equipment prior to use
4.6 Use appropriate equipment safely, engaging additional staff where necessary
4.7 Undertake **moving and positioning manoeuvres** safely
4.8 Use appropriate handling aids to assist individuals with manoeuvres
4.9 Communicate and provide reassurance to individuals’ throughout moving and positioning, encouraging active participation where appropriate
4.10 Complete relevant documentation in line with organisation/setting policy and procedures
4.11 Check and clean equipment following infection prevention and control procedures
4.12 Store equipment safely, ensuring the equipment is ready for next use

Range

**Moving and positioning manoeuvres** - moving independently, walking independently from one surface to another, moving independently with instruction, being assisted by one carer, being assisted by two carers
Supporting Information

Evidence requirements

- Observe the learner carrying out the moving of loads on a minimum of three occasions.
- Observe the learner supporting individuals with moving and positioning on a minimum of three occasions.
- Documentation and records must be completed clearly, accurately and legibly.

Guidance for delivery

- Outcome 1, assessment criteria 1.1, when teaching learners to identify anatomy and physiology this could be supported in practice by the labelling of a basic diagram of the human body.

Related legislation and guidance

- Social Services and Well-being (Wales) Act
- Health & Safety at Work Act 1974
- Management of Health & Safety at Work Regulations 1999
- Provision and Use of Work Regulations 1998
- Lifting Operations and Lifting Equipment Regulations 1992
- Workplace (Health, Safety & Welfare) Regulations 1992
- Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 1995
- Health & Safety Miscellaneous Amendments Regulations 2002
- Doing Well, Doing Better: Standards for Health Services in Wales (April 2010)
Unit 249.1  

**Supporting adults with moving and positioning using mechanical aids**

**Level:** 2

**Unit Summary:** This unit provides learners with the knowledge and skills to support individuals with moving and positioning using mechanical aids, such as hoists, in health and care organisations/settings. The unit covers the principles of moving and handling for bed mobility including practices that should be avoided. Learners will gain the practical skills required for the safe moving of individuals using mechanical aids such as hoists.

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**Learning outcome**
1. Understand principles of moving and handling for bed mobility

**Assessment criteria**
1.1 Identify moving and handling considerations when working at a bed
1.2 Identify moving and handling equipment for bed mobility and their use
1.3 Describe potentially unsafe practices when moving and handling at a bed
1.4 Describe posture considerations when working with an individual in a bed

**Range**

**Equipment** – slide sheets, tubular sheet, handling sling, handling belt, one-way slide sheet, electric profiling bed, turntable, bed ladder, hand blocks, leg raiser, full-length lateral transfer board, straight and curved transfer board, stand aid, stand & turn disc; Sling lifting hoist (capable of lifting from the floor); stand-aid hoist, a selection of appropriate slings

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**Learning outcome**
2. Understand principles of safe hoist use

**Assessment criteria**
2.1 Identify types of hoists and slings available and when they would be used
2.2 Identify factors considered when assessing individuals hoisting requirements
2.3 Describe how Lifting Operations and Lifting Equipment Regulations (LOLER) relate to the safe use of hoists and accessories
2.4 Identify potentially unsafe practices when using hoists

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**Learning outcome**
3. Safely move and position individuals using mechanical aids

**Assessment criteria**
3.1 Check risk assessment documentation prior to moving and positioning
3.2 Gain valid consent from individual prior to moving and positioning
3.3 Assess individuals ability to assist with manoeuvres
3.4 Select appropriate methods for moving individuals with consideration of their comfort, safety and dignity
3.5 Check and prepare equipment and mechanical aids prior to use
3.6 Use appropriate equipment safely engaging additional staff where necessary
3.7 Undertake moving and positioning manoeuvres safely
3.8 Use hoists safely to assist individuals receiving care
3.9 Complete relevant documentation in line with setting policy and procedures
3.10 Check and clean equipment following infection prevention and control procedures
3.11 Store equipment safely following use

Range
Moving and positioning manoeuvres - the individual moving independently, the individual moving independently with instruction, the individual being assisted by one carer, the individual being assisted by two carers

- **Support to individuals in bed** - fitting and removing tubular and / or flat slide sheets, turning an individual on their side 90° with and without slide sheets, turning an individual in bed 180° with and without slide sheets, a 30° tilt, sliding a supine individual up/down the bed, sitting an individual from lying, sitting an individual up and onto edge of bed, assisting an individual to lie down from sitting on edge of bed, use of electric profiling bed

- **Transfer manoeuvres** - Lateral supine transfer from bed to trolley/trolley to bed, standing transfer from bed to chair/ chair to bed, seated transfer from bed to chair/ chair to bed, transfer from chair to chair/commode/toilet

**Use hoists** - fitting a sling with an individual in bed, Fitting a sling with an individual in bed using slide sheets, Fitting a sling with an individual in chair, Fitting a sling with an individual on the floor, Fitting sling with an individual in chair with slide sheets, Hoisting an individual from chair to bed / bed to chair, Hoisting an individual from floor, Using a stand-aid hoist
Unit 249.1  

Supporting adults with moving and positioning using mechanical aids

Supporting Information

Evidence requirements

- Observe the learner carrying out safe moving and positioning of individuals using mechanical aids on a minimum of three occasions.
- Documentation and records must be completed clearly, accurately and legibly.

Guidance for delivery

Learners must have completed the standard moving and handling unit before completion of this unit

Related legislation and guidance

- Social Services and Well-being (Wales) Act 2014 - Information and Learning Hub  
http://www.ccwales.org.uk/the-act/
- More Than Just Words and the Follow-on Strategic Framework for Welsh Language Services in Health and Social Care  
http://gov.wales/topics/health/publications/health/guidance/words/?lang=en
- Doing Well, Doing Better: Standards for Health Services in Wales (April 2010)
- All Wales NHS Manual Handling Training Passport and Information Scheme 2010  
- Get up and Go – A guide to staying steady 2016 – Saga in association with Public Health Wales and the Chartered Institute of Physiotherapy  
- Falls in older people: assessing risk and prevention NICE Clinical guideline [CG161] June 2013
- Falls Prevention Exercise – following the evidence June 2013 Age UK
- Health and Care Standards Welsh Government April 2015  
- Health & Safety at Work etc Act 1974
- Management of Health & Safety at Work Regulations 1999
- Provision and Use of Work Regulations 1998
- Lifting Operations & Lifting Equipment Regulations 1998
- Workplace (Health, Safety & Welfare) Regulations 1992
- Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 1995
- Health & Safety Miscellaneous Amendments Regulations 2002
Unit 253 Supporting individuals to maintain mobility and minimise the risk of falls

Level: 2

Unit Summary: This unit provides the learner with the knowledge and skills to support and monitor an individual's mobility. It covers principles of fall prevention, the importance of risk assessment to minimise risk of falls to maintain mobility.

Learning Outcome:
1. Understand the importance of an individual maintaining their mobility

Assessment Criteria
1.1 Define the term/concept of mobility
1.2 Identify factors that can affect an individual's mobility
1.3 Describe the benefits of an individual maintaining mobility
1.4 Explain the impact of reduced mobility on an individual’s well-being

Learning Outcome
2. Support individual's with mobility activities in line with their care plan

Assessment criteria
2.1 Agree mobility activities with the individual and others
2.2 Remove or minimise hazards before beginning a mobility activity
2.3 Check the suitability of an individual's clothing and footwear for safety and mobility
2.4 Check the safety and cleanliness of mobility equipment and appliances
2.5 Promote the active participation of an individual during a mobility activity
2.6 Assist the individual to use the appropriate equipment safely and correctly
2.7 Provide feedback and encouragement to the individual during the mobility activity

Range
Mobility equipment and appliances - walking frames, wheel chairs, sticks, custom made appliances
Active participation - a way of working that recognises an individual's right to participate in the activities and relationships of everyday life as independently as possible; the individual is regarded as an active partner in their own care or support, rather than a passive recipient
Learning outcome:
3. Understand principles of fall prevention

Assessment criteria

3.1 Identify factors that contribute to falls
3.2 Explain the importance of risk assessments to minimise falls
3.3 Explain the importance of exercise to improve strength and balance to minimise the risk of falls
3.4 Explain the use of walking aids and their role in fall prevention
3.5 Describe the process to follow if an individual has fallen

Learning outcome:
4. Record and report on an individual’s mobility

Assessment criteria

4.1 Record and report concerns about factors that may lead to falls
4.2 Monitor and support individuals to review and continually develop skills for managing their mobility and activities.
4.3 Report on progress or problems relating to mobility activities

Range

Mobility activities - Exercise, physiotherapy, occupational therapy, household activities, group activities
Unit 253
Supporting individuals to maintain mobility and minimise the risk of falls

Supporting Information

Evidence requirements
Observation that the learner has utilised the individual’s care and risk assessments.

Observation of supporting individuals to maintain their mobility during a minimum of two separate activities.

Evidence of documentation that is completed clearly, accurately and legibly showing participation in the monitoring and evaluation process on a minimum of three separate occasions:

- Individuals own home
- In a care setting
- External

Related NOS
- SCDHSC0215. Help individuals maintain mobility
- SCDHSC0235. Enable individuals to make their way around specific places.
- SCDHSC0344. Support individuals to retain, regain and develop skills to manage their daily living.
- SCDHSC0372. Develop programmes to enable individuals to find their way around environments.
- SFHGEN. Communicate effectively with individuals.
- ASTC03. Ensure that your own actions reduce risks to health and safety.
- ASTH322. Support social and personal development needs of individuals.

Related legislation and guidance
- Moving and handling in Health and Social Care.
  http://www.hse.gov.uk/healthservices/moving-handling-do.htm
- RIDDOR in Health and Social Care
  http://www.hse.gov.uk/healthservices/riddor.htm
- Health and Safety at Work Act 2015
- Dignity in Care
Unit 256a  Undertaking point of care testing

Level: 2

Unit Summary: This unit is aimed at supporting learners to provide Point of Care Testing (POCT). Learners who complete this unit will be able to perform accurate POCT testing within a range of environments to gain accurate results.

Learning outcome:
1. Know guidance, policies and protocols related to Point of Care Testing

Assessment criteria
1.1 Identify current National Point of Care Testing regulations
1.2 Describe the role of governance when conducting Point of Care Testing
1.3 Describe the importance of conducting Point of Care Testing procedures in accordance with set protocols and policies

Range
Governance - delegation, infection prevention and control, information governance - data protection, individual security, bar codes – operator ID & patient ID, confidentiality audit trails

Learning outcome:
2. Understand the theories that underpin Point of Care Testing

Assessment criteria
2.1 Identity types of Point of Care investigations and equipment required within organisation/setting
2.2 Describe risks and benefits of Point of Care Testing
2.3 Describe the role and responsibility of the Point of Care Testing operator
2.4 Describe conditions needed for storing consumables related to Point of Care Testing
2.5 Identify the internal quality measures relating to Point of Care Testing
2.6 Identify information recorded when carrying out all Point of Care Tests

Learning outcome:
3. Know how to take samples

Assessment criteria
3.1 Identify factors that can cause risk when undertaking Point of Care Testing
3.2 Identify the types of equipment and instruments that are safe to reuse, and those which must be discarded after a single use
3.3 Describe how to prepare the individual for sample collection
3.4 Describe the methods used to obtain positive identification and valid consent of the individual
3.5 Explain the importance of obtaining positive confirmation of the individual's identity prior to starting the procedure
3.6 Describe the sources of error that may be encountered during sample collection
3.7 List the **benefits** of using electronic recording and record keeping systems
3.8 Describe the procedure for reporting results

**Range**

**Factors** – cross-infection, unsafe equipment and practice

**Benefits** - reduced potential for error, live system updated with most recent results, time saving, pre-completed information on forms

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**Learning outcome:**

4. Know how to respond to problems encountered during Point of Care Testing

**Assessment criteria**

4.1 State the importance of reporting all Point of Care Testing **problems**
4.2 Describe the process for reporting **problems** encountered during Point of Care Testing

**Range**

**Problems** – misuse, malfunctioning, interference, unusual readings, individual non-compliance, insufficient sample

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**Learning outcome:**

5. Conduct Point of Care Testing

**Assessment criteria**

5.1 Apply appropriate precautions for infection prevention and control relevant to the test procedure and environment
5.2 Check that resources and equipment are of the correct type, are functional and meet expected performance measures and safety requirements
5.3 Confirm the individual's identity and that valid consent has been obtained
5.4 Take the appropriate sample with consideration of **individual's comfort** and check that it is satisfactory
5.5 Carry out tests in line with the operational procedure to ensure safety and quality of results
5.6 Record and report test results in accordance with organisational/setting procedures
5.7 Maintain documentation related to tests carried out
5.8 Manage the maintenance, cleaning, decontamination and disposal of equipment and test materials, following local policy and instructions

**Range**
**Individual's comfort** – maintaining dignity and privacy, providing relevant dressings/equipment, positioning
Evidence requirements
  - Observe the learner carrying out a minimum of three point of care testing activities for each type of sample covered.
  - Documentation and recording of results must be completed clearly, accurately and legibly.
Unit 303  Adult placement shared lives

Level: 3

Unit Summary: This unit is aimed at supporting the learner to have the knowledge and skills to work as an adult placement/shared lives carer, and to support individuals within their home environment.

Learning outcome:
1. Understand the role of adult placement/shared live schemes in the health and social care sector

Assessment criteria
1.1 Identify what is meant by the terms ‘adult placement/shared lives’
1.2 Describe the types of adult placement/shared lives schemes/arrangements provided within the health and care sector
1.3 Describe the benefits of adult placement/shared live arrangements to individuals
1.4 Explain the role of the adult placement/shared lives carer

Learning outcome:
2. Use a rights-based approach to support individuals living within a shared lives arrangement

Assessment criteria
2.1 Support an individual to have choice and control over their life with the support of advocates where appropriate
2.2 Support an individual to provide feedback on the shared lives arrangement

Learning outcome:
3. Support individuals through change and transition, including introduction to the shared lives arrangement

Assessment criteria
3.1 Identify the considerations needed to support individuals to adjust to a new environment
3.2 Provide a welcoming and supportive environment
3.3 Provide opportunities for an individual to meet and get to know key people
3.4 Support an individual to settle into the home environment
3.5 Support an individual to communicate their thoughts and feelings about sharing the home environment
3.6 Establish with key people any adjustments that might need to be made to support an individual within the home
3.7 Establish strategies to deal with any conflict that may arise
3.8 Work with an individual and key people to agree 'house rules' in order to minimise any potential difficulties
3.9 Support key people to participate in the shared lives arrangement
3.10 Review with an individual and key people how well the shared lives arrangement supports the transition

Learning outcome:
4. Use person-centred approaches in a shared lives context

Assessment criteria
4.1 Explain ways that individuals can be supported to engage in the person centred planning and planning process
4.2 Support an individual and others to assess what matters to them and how their identified needs can be met within the shared lives arrangement
4.3 Support an individual to express how they feel about the shared lives arrangement
4.4 Support an individual and others to identify and make any specific changes or adaptations that may be needed to support them to achieve what matters to them within the shared lives arrangement

Learning outcome:
5. Know how to promote equality, diversity and inclusion in support of individuals in a shared lives arrangement

Assessment criteria
5.1 Describe how professional relationships differ between an individual and the shared lives carer and their families to that between individuals and care and support workers in more formal service settings
5.2 Describe how power balances can be addressed in a shared lives setting

Range

Learning outcome:
6. Promote equality, diversity and inclusion when supporting individuals living in a shared lives arrangement to develop positive relationships

Assessment criteria
6.1 Support an individual to develop new, and maintain existing, friendships and networks
6.2 Support an individual to develop relationships within your own extended family and networks
Learning outcome:
7. Understand the meaning of well-being within the context of care and support for individuals in a shared lives context

Assessment criteria
7.1 Explain how well-being can be actively promoted and supported for individuals in a shared lives context
7.2 Support an individual with aspects of well-being that are important to them

Learning outcome:
8. Factors that impact on the health and well-being of individuals

Assessment criteria
8.1 Explain the importance of using a strengths based approach to build skills, confidence and self esteem
8.2 Explain the importance of having a valued role and sense of purpose on well-being
8.3 Use a strengths based approach to build skills, confidence and self esteem
8.4 Support an individual to access healthcare
Evidence requirements

- tbc

Glossary

Active participation\(^1\) is a way of working that regards individuals as active partners in their own care or support rather than passive recipients. Active participation recognises each individual’s right to participate in the activities and relationships of everyday life as independently as possible.

Active Support Model: The Active Support Model is a person-centred model of how to interact with individuals combined with a daily planning system that promotes participation and enhances quality of life to establish the level of participation in activities and the level of support needed to develop the skills needed to engage in these as independently as possible.

To include:

- Daily plans and levels of participation
- Levels of help or support and assistance
- Positive interaction
- Positive reinforcement
- Skills teaching
- Task analysis
- Valued range of meaningful activities

Aspects of well-being identified in the Social Services and Well-being (Wales) Act to include:

- Physical and mental health and emotional well-being
- Protection from abuse and neglect
- Education, training and recreation
- Domestic, family and personal relationships
- Being able to participate and contribute to society
- Respecting and securing rights and entitlements
- Achieving social and economic well-being
- Having suitable living accommodation
- Control over day to day life and participating in work

Best interest decision occurs if someone does not have the mental capacity to make legal, healthcare, welfare or financial decisions for themselves. It is one of the principles of the Mental Capacity Act. The decision can only be made after an assessment has deemed the

\(^1\)National Occupational Standards for health and social care
individual does not have capacity. Strict principles and codes of practice should be followed to carry out the assessment as set out in the Mental Capacity Act.

The Codes of Conduct and Professional Practice should include The Code of Professional Practice for Social Care; The NHS Wales Code of Conduct for Healthcare Support Workers in Wales, and the Code of Practice for NHS Wales Employers and any additional practice guidance issued by either NHS Wales or the regulators of health or social care in Wales e.g.

Carers would include any person over 18 who provides or intends to provide care or support to another adult who needs care. This includes emotional care and support as well as physical. A person who is paid to provide care or does so as a voluntary worker is not considered a carer.

Factors that may affect the health, well-being and development of individuals may include adverse circumstances or trauma before or during birth; autistic spectrum conditions; dementia; diet and lifestyle; family circumstances; frailty; harm or abuse; injury; learning disability; medical conditions (chronic or acute); mental health; physical disability; physical ill health; poverty; profound or complex needs; sensory needs; social deprivation; substance misuse.2

Full and valued life to include:
- Choice and control over both small day to day details and life-defining matters
- Education and training
- Employment
- Social and economic well-being
- Engagement and participation in a valued range of meaningful activities
- Physical and mental health care
- Parenthood
- Sexual relationships
- Sexual orientation and gender identity
- Housing and accommodation
- Social inclusion
- Relationships and friendships

How power imbalances can be addressed in a shared lives setting to include:
- Consideration of how sharing own home may create a sense of power imbalance between an individual, the shared lives carer and key people
- How full membership of the household may promote a sense of equality and inclusion
- The inclusion of an individual in a shared lives arrangement with own extended family and networks
- Strategies that could be used to address conflicts and disagreements

Key people may include:
- Those who share the shared lives carer’s home environment
- Members of the shared lives carer’s extended family
- The shared lives carer’s social networks

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2 National Occupational Standards for health and social care
• Others who may be involved in the shared lives arrangement

**Legislation and national policies** to include;
- Social Services and Well-Being (Wales) Act 2014
- Equality Act 2010;
- Mental Capacity Act 2005 and associated Code of Practice;
- Deprivation of Liberty Safeguards;

**Personal plans** set out how the care of an individual will be provided. They are based on assessment information and care and support plans and will cover the personal wishes, aspirations and care and support needs of the individual.

Personal plans will provide:
- Information for individuals and their representatives of the agreed care and support and the manner in which this will be provided
- A clear and constructive guide for staff about the individual, their care and support needs and the outcomes they would like to achieve
- A basis for ongoing review
- A means for individuals, their representatives and staff to measure progress and whether their personal outcomes are met.

**Person centred planning process** to include:
- How they can be supported to express their opinions
- Identifying what matters to them and what they would like to achieve
- How they would like to do this
- How big or long term goals can be broken down into smaller achievable steps or goals
- How they will be able to tell whether they have achieved their goals
- How individuals can be supported to recognise and celebrate the achievement of goals
- Why it is important to use a strengths based approach with individuals to build upon what the person is able to do
- Who they would like to be involved and at what stage
- How to involve families of other key people in supporting the individual to achieve their goals
- How, where and when their person centred planning should take place

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3 Statutory guidance for service providers and responsible individuals on meeting service standard regulations (Welsh Government 2017)
• How their person centred planning should be recorded

Planning process would include identifying goals or outcomes and enabling participation in activities; monitoring, reviewing and evaluating plans.

Restrictive practices are a wide range of activities that stop individuals from doing things that they want to do or encourages them to do things that they don’t want to do. They can be very obvious or very subtle. They should be understood as part of a continuum, from limiting choice, to a reactive response to an incident or an emergency, or if a person is going to seriously harm themselves or others.

Shared lives arrangement may include:
• Long term accommodation support
• Short breaks
• Day time support
• Kinship support

Significant life events would include important changes in an individual’s life both positive and negative. For individuals with some conditions they may be changes and disruption to their routines; for others they may be the onset of a deteriorating condition such as sensory loss or dementia; for others they may be a sudden change to their lives such as stroke, accidents, loss and bereavement; and for others it may be a crisis affecting them.

Transitions could include: people moving into or out of the service provision, births, deaths, marriages, employment, redundancy, retirement, transferring between years in schools or colleges, transferring between education establishments, physical changes such as the onset of puberty, moving into adulthood, becoming a carer.

Unacceptable practices would include:
• Sexual contact with an individual using the service
• Causing physical harm or injury to individuals
• Making aggressive or insulting comments, gestures or suggestions
• Seeking information on personal history where it is neither necessary nor relevant
• Watching an individual undress where it is unnecessary
• Sharing own private or intimate information where it is unnecessary
• Inappropriate touching, hugging or caressing
• Concealing information about individuals from colleagues, for example, not completing records, colluding with criminal acts
• Acceptance of gifts and hospitality in return for better treatment
• Spreading rumours or hearsay about an individual or others close to them
• Misusing an individual’s money or property
• Encouraging individuals to become dependent or reliant for the worker’s own gain

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4 Positive Approaches: Reducing Restrictive Practices in Social Care (Social Care Wales publication)
5 National Occupational Standards for health and social care
6 National Occupational Standards for health and social care
7 Professional boundaries: A resource for managers (Social Care Wales publication)
• Giving special privileges to ‘favourite individuals’ for example spending excessive time with someone, becoming over involved, or using influence to benefit one individual more than others
• Providing forms of care that will not achieve the planned outcome
• Providing specialist advice or counselling where the worker is not qualified to do this
• Failing to provide agreed care and support for or rejecting an individual, for example, due to negative feelings about an individual
• Trying to impose own religious, moral or political beliefs on an individual
• Failing to promote dignity and respect
• Any practices specifically prohibited in relevant legislation, statutory regulations, standards and guidance.

**Underlying causes** could include:
• Chronic or acute pain
• Infection or other physical health issues
• Sensory loss
• An acquired brain injury or other neurological condition
• Communication difficulties
• Environment
• Fear and anxiety
• Unhappiness
• Boredom
• Loneliness
• Unmet needs
• Demands
• Change
• Transitions
• Recent significant events such as death of a family member
• Past events or experiences
• Abuse or trauma
• Bullying
• Over-controlling care
• Being ignored

**Valued range of meaningful activities** refers to the balance of activities that contribute to a good quality of life for individuals, incorporating vocational, domestic, personal, leisure, educational and social activities.

**What needs to be considered when supporting individuals to adjust to a new home environment** to include:
• Any adaptations or adjustments that may be needed
• What makes a welcoming and supportive environment
• An understanding of shared and personal spaces and belongings

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^ Positive Approaches: Reducing Restrictive Practices in Social Care (Social Care Wales publication)
• Working with the individual and key people to agree ‘house rules’ in order to minimise potential difficulties
• Ways to support an individual if they become distressed about the move to a shared lives arrangement

**Workplace** would be a setting in which care and support is provided e.g. residential child care, individual's own home, foster care etc.

**Related NOS**

- SCDHSC 0333: Prepare your family and networks to support individuals in your own home
- SCDHSC 0334: Provide a home and family environment for individuals requiring care and support

**Related legislation and guidance**

- Social Services and Well-Being (Wales) Act 2014
- Equality Act 2010;
- Mental Capacity Act 2005 and associated Code of Practice;
- Deprivation of Liberty Safeguards;
- ‘Professional boundaries: a resource for managers’
- Learning Hub for Social Services and Well-Being Act
- The Code of Professional Practice for Social Care and associated resources
- Positive Approaches: Reducing Restrictive Practices in Social Care
- More Than Just Words and the Follow-on Strategic Framework for Welsh Language Services in Health and Social Care
- More Than Just Words: Delivering the ‘Active offer’ information pack for social services and social care
Unit 305  Care and support planning

Level: 3

Unit Summary: This unit covers how individuals are assessed and supported to identify what is important to them and to identify help they may need to achieve their personal objectives. As part of this unit learners will work with individuals to carry out care and support assessments, reviewing their effectiveness and outcomes.

Learning outcome:
1. Understand the assessment process

Assessment criteria
1.1 Describe the key elements of assessment of need
1.2 Describe the assessment process
1.3 Describe strategies for responses to eliminate, prevent or minimise risks to safety of the individual
1.4 Explain the reasons for the National Minimum Core Data Set and describe the components
1.5 Describe when an individual may require an integrated assessment and who could be involved in this
1.6 Describe how legislation and policy underpins the assessment of need
1.7 Describe how to involve people as equal partners in assessments
1.8 Explain how relationships based on trust can be developed between individuals and health and social care professionals
1.9 Describe how assessments are used to assist people to identify their well-being outcomes

Range
How assessments are used - using their own strengths and resources, universal services, specialist health and care services (where appropriate)

Learning outcome:
2. Implement care and support assessments

Assessment Criteria
2.1 Lead a respectful conversation to identify what matters to the person and the outcomes they wish to achieve
2.2 Identify who individuals wish to involve in the assessment process
2.3 Record assessment data in accordance with organisation/setting policy in a format that is accessible to the individual being assessed
2.4 Support individuals to identify strengths, capabilities and resources that they can access to meet their desired outcomes
2.5 Use strengths and support identified with the individual to agree how desired outcomes will be achieved
2.6 Record information, advice and assistance provided to help individuals achieve their well-being outcomes
2.7 Record assessment with identified outcomes and whether the individual meets the eligibility criteria for care and support
2.8 Identify whether outcomes have been met
2.9 Review how care and support plans have helped the individual to meet their identified outcomes, making changes if the individual's needs have changed.

**Range**

*Information, advice and assistance* - information about preventative services, information about community services

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**Learning outcome:**

3. Contribute to reviewing care and support assessments

**Assessment Criteria**

3.1 Identify whether outcomes have been met
3.2 Review how care and support plans have helped the individual to meet their identified outcomes, making changes if the individual's needs have changed
Evidence requirements
The whole process should be done on a minimum of three different occasions which could include:

- One to one with an individual
- Working with a multidisciplinary team
- Developing, implementing and reviewing with an individual who first language is in the medium of Welsh

Glossary
‘What matters to you’ conversation – a conversation about how to enable and support independence by maximising an individual’s control over their day-to-day lives. [http://gov.wales/docs/dhss/publications/131217reporten.pdf](http://gov.wales/docs/dhss/publications/131217reporten.pdf)

**Care and support plan** – a care and support plan sets out how care and support needs will be met. Individuals should be involved in the preparation of their own care and support plan as much as possible.

**Care package** – a combination of services to meet a person's assessed needs as part of the care plan arising from an assessment or a review. It defines what an individual needs in the way of care, services or equipment to live their life in a dignified and comfortable manner.

Related legislation and guidance
- Social Services and Well-Being (Wales) Act 2014
- NHS (Wales) Act 2006
- Local Authority Social Services Act 1970
- Social Services and Well-being Act 2014. Part 3. Code of Practice (assessing the needs of individuals.)
- United Nations Principles for Older Persons
- United Nations Convention on the Rights of the Child
- Care and Support (Eligibility) (Wales) Regulations 2015
Unit 308  Supporting individuals with the use of Assistive Technology

**Level:** 3

**Unit Summary:** This aim of this unit is to provide learners with the knowledge, understanding and skills to provide support to individuals with the use of assistive technology. The learner will be able to plan, use and evaluate a range of assistive technologies.

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**Learning outcome:**
1. Understand the role of assistive technology in the health and social sector

**Assessment criteria**
1.1 Identify the comprehensive range of assistive technologies available
1.2 Explain a range of ways that assistive technology can enhance the quality of life, independence and well-being of individuals and carers
1.3 Explain the impact that assistive technology has on promoting dignity, privacy and confidentiality

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**Learning outcome:**
2. Understand the strengths and weaknesses of different assistive technology

**Assessment criteria**
2.1 Explain the strengths and weaknesses of the range of assistive technologies available
2.2 Explain the value of utilising a range of assistive technology options
2.3 Explain the risks attached to the use of assistive technology

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**Learning outcome:**
3. Understand the role of assessment of needs in relation to assistive technology

**Assessment criteria**
3.1 Explain the purpose of an assessment for provision of assistive technology
3.2 Explain the contribution assessment can make to positive outcomes for the individual
3.3 Explain the benefits of self-assessment by individuals
3.4 Identify the range of professionals who can help when assessing the value and procurement of assistive technology
3.5 Explain the importance of formal and informal observations in the process of assessment for assistive technology
3.6 Identify the funding and payment options available to individuals utilising assistive technology

Learning outcome:
4. Support individuals with assessment of needs in relation to assistive technology

Assessment criteria
4.1 Risk assess the benefits, merits and disadvantages of different assistive technology solutions
4.2 Make recommendations for the use of assistive technology
4.3 Support individuals and carers to complete assessment and self-assessments (to review their strengths, needs and options in relation to assistive technology)
4.4 Record assessment information in relation to assistive technology

Learning outcome:
5. Understand safe procurement and management of assistive technology

Assessment criteria
5.1 Explain how different types of technology can provide support in a range of different settings
5.2 Explain how to procure assistive technology
5.3 Explain the process of setting up and maintaining assistive technology aids
5.4 Explain the processes used to manage and minimise risks related to the chosen assistive technology

Learning outcome:
6. Support individuals with safe procurement and management of assistive technology

Assessment criteria
6.1 Develop detailed specifications for procuring assistive technology
6.2 Select appropriate aids with the individual
6.3 Identify measurable outcomes for use of the assistive technology
6.4 Demonstrate the use of the assistive technology to the individual
6.5 Safely install and implement the use of assistive technology
6.6 Manage and maintain assistive technology
6.7 Carry out the removal, cleaning, storage and/or disposal of assistive technology
6.8 Evaluate the effectiveness of the chosen assistive technology
Unit 308 Supporting individuals with the use of Assistive Technology

Supporting Information

Evidence requirements
- Observe a learner providing support to an individual with the use of assistive technology

Glossary
Assistive Technology - Assistive technology encompasses the range of aids that are available – high and low tech, human, animal and environmental.

Comprehensive - The full range of assistive technologies available to support a person with sight loss, hearing loss or a combined sight and hearing loss
Unit 311b  Taking venous blood samples from adults

Level: 3

Unit Summary: This unit covers the knowledge and skills required to take blood samples from adults. The unit also covers the processing of blood samples once they have been taken. Learners will gain the practical skills required to complete processes safely, efficiently and in ways that reduce distress as far as possible.

Learning outcome:
1. Understand the requirements for taking venous blood samples from adults

Assessment criteria
1.1 Describe health and safety considerations relating to taking blood samples
1.2 Describe potential adverse reactions and complications when taking blood samples from adults
1.3 Identify equipment and material requirements for taking blood samples from adults

Range
Health and safety considerations - blood spillage, needle stick, environmental considerations, PPE, sharps disposal
Adverse reactions and complications – bleeding, bruising, pain, fainting, failure to bleed, needle phobia, allergies, phlebitis

Learning outcome:
2. Take venous blood samples from adults

Assessment criteria
2.1 Prepare appropriate equipment for obtaining venous blood and check samples required
2.2 Follow hand hygiene processes and select appropriate PPE
2.3 Confirm identity of the individual and gain informed consent
2.4 Use effective communication techniques throughout the procedure to reassure the individual
2.5 Gain venous access using the selected blood collection system, using techniques which will cause minimum discomfort
2.6 Obtain blood from the selected site with consideration of
   o container according to investigation required
   o volume
   o order when taking multiple samples
2.7 Mix blood and anti-coagulant thoroughly in required containers
2.8 Monitor for indications of adverse reactions and complications taking appropriate action where necessary
2.9 Remove blood collection equipment and stop blood flow with sufficient pressure
2.10 Apply suitable dressings to puncture sites according to setting protocols and advise individual on how to care for the site
2.11 Complete records in line with organisation/setting procedures

Range

**Techniques** – use of tourniquet, position and support of limb, position of self in relation to individual and equipment

**Adverse reactions and complications** - bleeding, bruising, pain, fainting, failure to bleed, needle phobia, allergies, phlebitis

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**Learning outcome:**
3. Process blood samples taken from adults

**Assessment criteria**

3.1 Label blood samples clearly, accurately and legibly, using pre prepared labels where appropriate
3.2 Place samples in appropriate packaging and ensure correct request forms are attached
3.3 Place samples in nominated place for collection and transportation, ensuring blood is kept at the required temperature
3.4 Document evidence appropriate checks have been made in line with organisation/setting procedures
3.5 Ensure immediate transportation of blood to the relevant department in line with urgency of sampling investigations
Unit 311b    Taking venous blood samples from adults
Supporting Information

Evidence requirements
- Observe the learner taking blood samples from an individual on a minimum of five occasions. This could be the same individual on separate occasions or different individuals on separate occasions.
- Observe the learner preparing blood samples for processing on a minimum of five occasions.
- Documentation/records taken must be completed clearly, accurately and legibly.

Guidance for delivery
Learning outcome 2, criteria 2.3 - When confirming identity setting/organisational protocol and procedures must be followed, but this should include a minimum of three from;
- name
- date of birth
- address
- NHS number
- hospital number

Related legislation and guidance
- NICE Quality Standard for Hand hygiene
- NICE Quality Standard: Patient Experience in Adult NHS services
- WHO Guidelines on obtaining blood samples
- Infection Prevention Control and Aseptic Non Touch Technique Welsh Government Guidelines
- Royal Marsden guidelines for venepuncture
Unit 313  Providing care for adults living with cancer

Level: 3

Unit Summary: This unit covers the skills and knowledge required for providing ongoing support and care to adults living with cancer, and their wider support networks. Learners will cover knowledge of issues which impact on individuals diagnosed with and being treated for cancer and will use practical skills to support them and their families when living with cancer.

Learning outcome:
1. Understand local and national guidelines on the provision of cancer care

Assessment criteria
1.1 Describe the current cancer delivery plan for the NHS in Wales
1.2 Explain the key actions and themes of the cancer delivery plan
1.3 Define the term ‘cancer survivorship’
1.4 Describe principles and recommendations from the national cancer survivorship initiative
1.5 Explain the value of cancer research and clinical trials

Learning outcome
2. Understand the development and symptoms of cancer in adults

Assessment criteria
2.1 Define the term ‘cancer’
2.2 List the most commonly diagnosed cancers in adults
2.3 Explain why early detection of cancer is important
2.4 Define the term ‘metastasis’
2.5 Describe the impact of metastasis on individuals with cancer
2.6 Explain the term ‘palliation of symptoms’
2.7 Explain how genetics of cancer drive the symptoms and treatment of some cancers
2.8 Describe ‘red flag/alarm’ signs and symptoms that may indicate cancer
2.9 Explain why improving symptom awareness among the public is important
2.10 Identify risk factors for cancer which are common to other diseases
2.11 Describe potential physical and psychological side effects of main treatment options for cancer

Range
Cancers – breast, prostate, lung, bowel, skin, ovarian, kidney, non-Hodgkin lymphoma, leukaemia
Main treatment options - surgery, radiotherapy, chemotherapy
Learning outcome:
3. Understand care and support available for individuals experiencing cancer

Assessment criteria
3.1 Describe ways of supporting individuals through and beyond treatment
3.2 Explain the importance of the availability of equal access to cancer care services
3.3 Describe signs and symptoms of possible deterioration of an individual being treated for cancer
3.4 Describe potential complications of cancer and impacts on individuals and their families/support networks
3.5 Identify potential lifestyle changes that can improve health and well-being of individuals experiencing cancer
3.6 Describe the roles and responsibilities of different members of the multi-disciplinary team who may be involved in supporting individuals living with cancer
3.7 Identify where individuals can access financial advice and support following a cancer diagnosis
3.8 Describe positive impacts a key worker can make to an individual’s experience of cancer services

Range
Members – primary, secondary, tertiary
Cancer care services - complex and very specialist care, clinical trials and other studies, opportunities to be involved in and engaged in research activities
Impacts – fatigue, developing relationships, financial hardship of family, anxiety/depression, fear of recurrence, changes in behaviour, family dynamics, physical changes, emotional changes, socialisation issues, impact on education
Lifestyle changes - stopping smoking, reduction in alcohol intake, increased physical activity, reduction of weight/healthier diet

Learning outcome
4. Understand care and support available for individuals recovering from cancer

Assessment criteria
4.1 Describe ways of emphasising the need for individuals to develop positive approaches and take responsibility for their health and lifestyle to optimise cancer survival
4.2 Describe main elements of recovery packages and how these improve the experience of individuals affected by cancer
4.3 Identify types of interventions which can lead to improved mental, physical and social well-being for those experiencing cancer
4.4 Explain the purpose of cancer self-management programmes
4.5 Identify advice that should be provided to individuals if they have any concerns about their condition or recovery following cancer treatment

Learning outcome:
5. Provide care and support to individuals living with cancer
Assessment criteria

5.1 Adhere to organisational/setting policies that support individuals living with cancer
5.2 Follow cancer personal/care plans when supporting individuals living with cancer
5.3 Collaborate with key workers to support individuals during and after cancer treatment
5.4 Communicate relevant information and sources of advice to individuals and their families/support networks in an empathetic and sensitive manner
5.5 Work with empathy and sensitivity when providing care to individuals living with cancer, their family and support network
5.6 Document and report changes in an individual’s condition

Range

Information and sources of advice – financial, well-being, follow up support, counselling, third sector services, specialist services
Unit 313  Providing care for adults living with cancer
Supporting Information

Evidence requirements

- Observe the learner providing care and support to individuals with cancer care on a minimum of three occasions.
- Evidence of documentation completed must be recorded clearly, accurately and legibly in line with organisation/setting policies.

Glossary

Cancer delivery plan - Making Every Contact Count; standards, pathway integration, early detection and person-centred care guidelines diagnostic services to cope with the expected increased demand; fast track pathways for patients with alarm symptoms; access to multi-disciplinary diagnostic centres for potentially serious, vague symptoms; direct access to certain tests for 'low-but-not-no' risk symptoms; imaging equipment; workforce shortages in pathology, radiology and oncology; reforming the way diagnostic pathways work

Key worker - the cancer pathway is complex and a named key worker is fundamental to help the individual navigate the pathway and ensure a smooth patient journey. The key worker is usually the clinical nurse specialist, who as part of a wider multi-disciplinary team coordinates treatment and care. The healthcare system, and patients, should also be clear who their responsible doctor is at all stages of the care pathway.

Impacts – Could include fatigue, intimate relationship issues, financial hardship, anxiety/depression, fear of recurrence

Cancer survivorship – Having no signs of cancer after finishing treatment. The term also refers to living with, through, and beyond cancer. According to this definition, cancer survivorship begins at diagnosis and includes people who continue to have treatment over the long term, to either reduce the risk of recurrence or to manage chronic disease.

Metastasis - the medical term for cancer that spreads to a different part of the body from where it started

Recovery packages – These elements form part of an overall support and self-management package for people affected by cancer.

Related legislation and guidance

- Cancer Delivery Plan for Wales 2016-2020 - The highest standard of care for everyone with cancer Produced by the Wales Cancer Network Nov 2016
- End of Life Care Plan and Palliative Care Implementation Board http://wales.pallcare.info/
- Social Services and Well-being (Wales) Act 2014 - Information and Learning Hub http://www.ccwales.org.uk/the-act/
- More Than Just Words and the Follow-on Strategic Framework for Welsh Language Services in Health and Social Care
  http://gov.wales/topics/health/publications/health/guidance/words/?lang=en
- Doing Well, Doing Better: Standards for Health Services in Wales (April 2010)
- Macmillan Cancer Support - https://www.macmillan.org.uk/
- Marie Curie Care and Support - https://www.mariecurie.org.uk/?gclid=EAIaIQobChMI7iIjhp9mj3AlV4ZztCh1AOGuhEAYASAAEgLs1vD_BwE&gclsrc=aw.ds
Unit 314a Providing care and support for adults with Coronary Heart Disease (CHD)

Level: 3

Unit Summary: This unit provides learners with the knowledge and practical skills required to support individuals experiencing Coronary Heart Disease (CHD) (also known as ischaemic heart disease). Learners will develop the practical skills required to provide immediate and long term support to manage their condition.

Learning outcome
1. Understand national guidelines and public health messages relating to the care of adults with coronary heart disease

Assessment criteria
1.1 Identify local and national legislation relating to coronary heart disease
1.2 Identify public health messages relating to coronary heart disease

Learning outcome
2. Understand coronary heart disease

Assessment criteria
2.1 Describe the anatomy and physiology of the heart and its associated structures
2.2 Define the term 'coronary heart disease'
2.3 Describe common coronary heart conditions and their potential causes
2.4 Explain the differences between common coronary heart conditions
2.5 Identify signs and symptoms of individuals experiencing common coronary heart conditions
2.6 Describe potential treatment options for common coronary heart conditions
2.7 Describe the long term impacts of common coronary heart conditions
2.8 Identify potential risk factors relating to coronary heart disease
2.9 Describe the impact of different factors on coronary heart disease

Range
Associated structures – veins, arteries, aorta, capillaries
Common coronary heart conditions – angina, myocardial infarction (MI)/acute coronary syndrome (ACS), heart failure
Signs and symptoms – typical, atypical

Treatment options – surgery, medication, cardiac rehab, lifestyle modification, CPR
Long term impacts – lifestyle, medication, deterioration/premature death, psychological, confidence, family/relationships
Risk factors – diet, exercise, smoking, environment, genetics, financial ability

Factors - environmental, social, lifestyle/behavioural, psychological, biological

Learning outcome

3. Understand Cardio-Pulmonary Resuscitation (CPR)

Assessment criteria

3.1 Describe national guidelines relating to the provision of CPR
3.2 Explain organisation/setting procedures for performing CPR
3.3 Describe the "cardiac chain of survival"
3.4 Describe organisation/setting procedures for alerting emergency medical help
3.5 Explain the significance of Do Not Attempt Resuscitation (DNAR) in relation to the provision of CPR

Learning outcome

4. Support individuals experiencing coronary heart conditions

Assessment criteria

4.1 Explain to the individual, their family or carer, the nature of support to be provided and gain informed consent
4.2 Monitor the condition and well-being of individuals in line with organisation/setting procedures
4.3 Provide support to individuals on managing their heart condition and its symptoms
4.4 Source and provide information to individuals, their family or carer, to manage the individuals heart condition and its symptoms
4.5 Provide evidence of organisation/setting CPR training compliance
4.6 Escalate concerns in line with organisation/setting procedures
4.7 Complete documentation of support given in line with organisation/setting procedures
Evidence requirements

- Observe the learner supporting an individual (or individuals) experiencing CHD on a minimum of three occasions.
- Documentation/records must be completed clearly, accurately and legibly.

Glossary

Angina - the most common form of coronary heart disease. It is characterised by a heaviness or tightness in the centre of the chest which may spread to the arms, neck, jaw, face, back and/or stomach. Angina occurs when the arteries of the heart become narrow and not enough oxygen-rich blood can reach the heart muscle, especially when its demands are high, such as during exercise.

Coronary heart disease (CHD) - happens when the heart’s blood supply is blocked or interrupted by a build-up of fatty substances in the coronary arteries. The two main forms of CHD are heart attack (also known as myocardial infarction) and angina. This is also referred to as ischaemic heart disease.

Heart failure - when the heart muscle is unable to pump blood as efficiently around the body. It occurs because the heart is damaged or overworked. Some people with minor heart failure may have few or no symptoms. People with moderate or severe heart failure often suffer from a number of problems, including shortness of breath, general tiredness and swelling of the feet and ankles.

Do Not Attempt Resuscitation (DNAR) – A Do Not Attempt Resuscitation form is a document issued and signed by a doctor, which tells the medical team not to attempt CPR. It is not a legally binding document. Instead, it helps to communicate to healthcare professionals involved in care that CPR shouldn't be attempted.

Related legislation and guidance

- Social Services and Well-being (Wales) Act 2014 - Information and Learning Hub http://www.ccwales.org.uk/the-act/
- Doing Well, Doing Better: Standards for Health Services in Wales (April 2010)
- NICE guidelines – Acute coronary syndrome, cardiovascular conditions
- Welsh government – Out of hospital cardiac arrest plan
- Welsh government – Heart conditions delivery plan
- Cardiac delivery plan 2015
• British Heart Foundation - https://www.bhf.org.uk/
• Welsh Hearts - http://welshhearts.org/
Unit 314b  Undertaking electrocardiography (ECG)

Level: 3

Unit Summary: This unit provides learners with the knowledge and practical skills required to take electrocardiogram recordings safely efficiently and effectively. Learners will develop the practical skills required to perform recordings to gain accurate results with minimum discomfort and anxiety to the individual being tested.

Learning outcome:
1. Understand current guidelines relating to electrocardiography (ECG)

Assessment criteria
1.1 Describe current legislation, local and national guidance and protocols which relate to ECGs
1.2 Describe standard precautions taken before ECGs and the potential consequences of poor practice
1.3 Describe additional considerations individuals may have which may affect the performance or quality of ECG recordings
1.4 Identify results disclosure considerations in respect of the procedure and own scope of practice

Range

Additional considerations - age, mobility, medical conditions (e.g. Parkinson’s disease)

Learning outcome:
2. Understand principles of ECGs

Assessment criteria
2.1 Describe the structure and function of the heart
2.2 Explain the conduction system of the heart
2.3 State the purpose of ECG procedures
2.4 Describe clinical conditions and reasons for referral for ECG examinations
2.5 Describe a normal ECG result
2.6 Describe recording devices used in ECG procedures
2.7 Identify the correct positioning for ECG procedures
2.8 Describe sources of potential electrical interference and how to recognise them

Range

Positioning – of patient, of electrode
**Sources of potential electrical interference** – moving, tremor, coughing, equipment (e.g. electric bed), vibration, pre-existing conditions, pacemaker

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**Learning outcome:**

3. Undertaking ECG procedures on individuals

**Assessment criteria**

3.1 Check equipment is fit for purpose when preparing to take ECG recordings

3.2 Explain to individual, their family or carer the nature of the procedure and gain valid consent

3.3 Work with consideration of the privacy and dignity of the individual throughout the procedure

3.4 Prepare sites and position electrodes to optimise results, taking account of **additional considerations** identified

3.5 Encourage the individual to relax and remain immobile during the procedure

3.6 Use recording equipment following standard operating procedures, checking quality of output

3.7 **Label** recordings in line with organisation/setting procedures and protocols

3.8 Monitor the condition of individuals whilst ECG is in progress, responding to, reporting and recording adverse signs/symptoms as necessary

3.9 Report results in line with agreed ways of working

3.10 Inform individuals, their family or carer on procedures for obtaining results and further referral

**Range**

**Additional considerations** - age, mobility, medical conditions (e.g. Parkinson's disease)

**Label** - individual's details, date of procedure, person performing the procedure
Evidence requirements

- Observe the learner carrying out ECG recording procedures on a minimum of three occasions.
- Documentation/records must be completed clearly, accurately and legibly.

Glossary

**Electrocardiogram** - An electrocardiogram (ECG) is a test used to check the rhythm of the heart and its electrical activity. Sensors are attached to the skin to detect the electrical signals produced by the heart each time it beats.

  - Electrocardiography – the procedure of taking ECGs
  - Electrocardiograph – the printed result of the procedure

**NB** – these terms can be used interchangeably when referring to the procedure and the outcome of the procedure

Related legislation and guidance

- More Than Just Words and the Follow-on Strategic Framework for Welsh Language Services in Health and Social Care
- Doing Well, Doing Better: Standards for Health Services in Wales (April 2010)
- NICE guidelines – Recording a standard twelve lead ECG and approved methodology
- Resuscitation council guidelines - [https://www.resus.org.uk/resuscitation-guidelines](https://www.resus.org.uk/resuscitation-guidelines)
Unit 316  Care home services for adults

Level: 3  
Unit Summary: tbc

Learning outcome:
1. Use person centred approaches with individuals living in care home services

Assessment criteria
1.1 Explain how local and national strategies can be used to support person centred approaches
1.2 Work with others on the development, review and evaluation of care and support plans in ways that reflect person centred approaches

Learning outcome:
2. Promote equality, diversity and inclusion in support of individuals in care home services

Assessment criteria
2.1 Be able to work in ways that can support individuals to continue to have valued roles
2.2 Support all individuals, including those who have very limiting physical and/or cognitive abilities, to interact and have opportunities for social participation
2.3 Support individuals living in care homes to participate and engage in activities and experiences that are meaningful and enjoyable to them and reflect their valued roles

Learning outcome:
3. Use positive risk taking to support well-being, voice, choice and control for people living in care homes

Assessment criteria
3.1 Work with others to develop and implement risk assessments to support individuals living in care homes to participate in a valued range of meaningful activities and experiences
3.2 Work with others to review and evaluate risk assessments to support individuals living in care homes to participate in a valued range of meaningful activities and experiences
3.3 Support individuals to understand the need to balance their choices with any identified risks
3.4 Support individuals to take part in meaningful activities and experiences
Learning outcome:
4. Support individuals in care home services with the use of effective communication care

Assessment criteria
4.1 Work with individuals to develop and implement communication strategies/plan
4.2 Support individuals in care home services with the use of assistive technology
4.3 Work with individuals in care home services to review and evaluate communication strategies

Learning outcome:
5. Support individuals living in care home services through change and transition

Assessment criteria
5.1 Explain the impact of individuals moving into care home services on them and their families
5.2 Explain the importance of autonomy by maintaining personal identity, the 'home' environment, personal space, personal possessions and privacy
5.3 Be able to work in ways that help individuals and their families and significant others understand what to expect, feel welcome and in control
5.4 Support individuals to manage transitions within the home and/or between the home and other places

Learning outcome:
6. Support the health and well-being of individuals living in care home services

Assessment criteria
6.1 Explain how individuals living in care homes can contribute to their communities and enrich the lives of others
6.2 Explain how partnership working can support the well-being of individuals
6.3 Support individuals to retain, make and develop positive relationships with others living in the care home, friends, families and others within the local community
6.4 Explain the meaning of the term 'learned helplessness' and the impact that this can have on well-being
6.5 Work with others to ensure that personal plans reflect the health and well-being needs of individuals
6.6 Use a strengths based approach that builds on skills, confidence and self-esteem of individuals living in care homes
6.7 Support individuals in care home services to maintain and develop their independence and mobility skills
6.8 Support individuals in care home services with their health and personal care
Learning outcome:
7. Support the health and well-being of individuals living in care home services through nutrition and hydration

Assessment criteria
7.1 Explain the importance of a positive dining experience for individuals and the impact on their well-being
7.2 Explain how personal plans reflect the nutrition and hydration needs of individuals
7.3 Support individuals to have a positive dining experience
7.4 Be able to work in ways that support and encourage individuals to eat and drink
Unit 316  
Care home services for adults
Supporting Information

Evidence requirements
• tbc
Unit 325  Dementia care

Level: 3

Unit Summary: This unit will enable the candidate to enhance their existing knowledge and demonstrate their ability to support individuals living with dementia to live a fulfilling life.

Learning outcome:
1. Understand the main types of dementia and their impact on the individual

Assessment criteria
1.1 Describe the effects of the main types of dementia on the individual
1.2 Describe how the dementia journey could affect two different individual’s abilities and needs for support
1.3 Explain how the self-perception and insight of an individual living with dementia may change over time
1.4 Explain how individuals experience of dementia can be influenced by other factors
1.5 Explain how the approach to support can impact on the well-being of the individual living with dementia

Range
Other factors: physical health, mental health, personality, life story, attitude of others, social environment

Learning outcome:
2. Work in ways that take into consideration the individual ’s experience of dementia

Assessment criteria
2.1 Work in a way that is sensitive to the individual’s experience of dementia, and the factors which may influence this including own approach
2.2 Be able to focus on the abilities of the individual living with dementia

Learning outcome:
3. Understand the impact of diagnosis

Assessment criteria
3.1 Explain the impact of the diagnosis on individuals their families and others
3.2 Explain how theories around grief and loss could relate to the adjustment process

Learning outcome:
4. Show an understanding of the impact of diagnosis
Assessment criteria

4.1 Support individuals living with dementia to adjust to their diagnosis
4.2 Engage individuals living with dementia in an empathetic and supportive manner

Learning outcome:
5. Understand prevention, early support and access to information and services

Assessment criteria

5.1 Describe ways of reducing the risk of developing dementia or delaying onset
5.2 Explain the importance of local services that support individuals living with dementia and their carers
5.3 Describe the responsibility of other professionals with regards to the care and support of individuals living with dementia

Learning outcome:
6. Facilitate early support and access to information and services

Assessment criteria

6.1 Support individuals living with dementia to access community resources, services and/or facilities that can encourage their health and well-being

Learning outcome:
7. Understand rights based approaches, equality, diversity and inclusion

Assessment criteria

7.1 Describe ways to challenge discrimination of people living with dementia in a way that promotes change
7.2 Explain the concept and benefits of Lasting Power of Attorney, advance decisions and advance statements
7.3 Explain how to balance your duty of care with upholding the rights of the individual living with dementia
7.4 Describe the process of appointing an advocate for individuals living with dementia

Learning outcome:
8. Understand the importance of assessment, personal planning and review

Assessment criteria

8.1 Explain the cycle of assessment, care and support planning and review
8.2 Explain the importance of person-centred and personal outcomes focused approaches to assessment, care and support planning and review
8.3 Explain the importance of supporting an individual to maintain independence for as long as possible
8.4 Explain how a designated lead or key person can support the assessment, care and support planning and review process
Learning outcome:
9. Understand aspects of physical and mental well-being in relation to dementia

Assessment criteria
9.1 Describe ways of supporting an individual living with dementia to maintain their physical health
9.2 Explain how the type of dementia itself can impact on physical abilities and well-being which may be transient or more permanent
9.3 Identify aspects that contribute to an individual's mental well-being
9.4 Describe the psychotic symptoms that individuals may experience as a result of dementia

Learning outcome:
10. Promote physical and mental well-being

Assessment criteria
10.1 Proactively engage individuals living with dementia in meaningful activities that support independence and promote physical and mental well-being

Learning outcome:
11. Understand the importance of medication management

Assessment criteria
11.1 Explain the principles of capacity and consent in relation to administering prescribed medications to an individual diagnosed with dementia
11.2 Explain how to support the administration of medication to individuals living with dementia

Range
Medication: prescription only, over the counter and homely remedies

Learning outcome:
12. Understand the value of meaningful living

Assessment criteria
12.1 Explain the importance of focusing on individual's strengths, abilities, interests and what matters to them when supporting them
12.2 Describe ways to support a person living with dementia to use their strengths and abilities, interests and what matters to them to lead a fulfilling life
12.3 Explain the changes that may occur in the individual's senses and the effect this could have on their well-being
12.4 Explain the benefits of undertaking meaningful life story work with individuals living with dementia
12.5 Analyse the impact of change and transition on individuals living with dementia
Learning outcome:
13. Enable meaningful living

Assessment criteria
13.1 Support individuals living with dementia to engage in a range of meaningful, creative activities that build on their strengths and interests
13.2 Use life story work to plan and support meaningful activities and engage in conversation
13.3 Use appropriate physical contact, touch and sensory-focused objects in the care and support of individuals living with dementia
13.4 Support individuals living with dementia to prepare and adjust to change and manage transitions

Learning outcome:
14. Understand the value of meaningful relationships

Assessment criteria
14.1 Explain the importance of meaningful relationships
14.2 Describe why maintaining a meaningful relationship with an individual who is not able to effectively communicate is important

Learning outcome:
15. Enable meaningful relationships

Assessment criteria
15.1 Support individuals living with dementia to maintain existing meaningful relationships
15.2 Support staff, families and others to develop an understanding of individuals living with dementia who behave in ways perceived as challenging
15.3 Use appropriate communication to form and maintain meaningful relationships with individuals living with dementia

Learning outcome:
16. Work in ways that encourage community inclusion and contribution

Assessment criteria
16.1 Identify co-productive opportunities to support individuals living with dementia
16.2 Create opportunities for individuals living with dementia to use their interests, strengths and skills to enhance the quality of their lives and the lives of others
16.3 Support individuals living with dementia and their carers to access community facilities and networks, retaining and developing their links where possible

Learning outcome:
17. Demonstrate awareness of social and economic well-being
Assessment criteria
17.1 Model ways of working that respect an individual living with dementia’s:
  • culture
  • ethnicity
  • language
  • faith
  • spirituality
  • needs and/or preferences

Learning outcome:
18. Understand the importance of utilising the physical environment

Assessment criteria
18.1 Explain the benefits of adapting and developing the physical environment to support the well-being of individuals living with dementia
18.2 Describe ways to support individuals living with dementia to access the real or virtual natural environment
18.3 Explain how technology can be used to enhance the independence, safety and well-being of individuals living with dementia
18.4 Explain the limitations of technology used to enhance the independence, safety and well-being of individuals living with dementia
18.5 Describe why the use of assistive technology needs to be outcome focused, not technology led
Unit 325 Dementia care
Supporting Information

Evidence requirements
- tbc

Related NOS
- S1 Respond to the needs of individuals with stroke or Transient Ischaemic Attack (TIA)
- S2 Assess individuals risk of stroke and Transient Ischaemic Attack (TIA)
- S3 Assess individuals with suspected stroke or Transient Ischaemic Attack (TIA)
- S4 Develop management plans for individuals with stroke or Transient Ischaemic Attack (TIA)
- S5 Implement interventions for individuals who have had a stroke or Transient Ischaemic Attack (TIA)
- S8 Monitor individuals diagnosed with stroke

Related legislation and guidance
- The Mental Capacity Act (2005)
- Doing Well, Doing Better. Standards for Health Services in Wales (April 2010)
- Governance Framework for development of the Health and Social Care Support Worker Role in Adult Services
- The All Wales Guidelines for Delegation
- Qualification Framework for the Social Care sector in Wales
- Code of Conduct for Healthcare Workers in Wales
- Code of Professional Practice for Social Care
- CSSiW Regulation and Standards in Wales
- National services framework for Older People in Wales WG 2006; http://www.wales.nhs.uk/sites3/home.cfm?OrgID=439
- Management of patients with stroke: NHS Scotland June 2010
- The Stroke Association Wales: https://www.stroke.org.uk/what-we-do/our-work-nations/wales
Unit 326a  

Diabetes in adults

**Level:** 3

**Unit Summary:** This unit will enable learners to explore the importance of well-being in the context of care and support for individuals with diabetes. They will develop a thorough understanding of factors that affect the health and well-being of individuals and their treatment and management of diabetes. Learners will carry out practice management of individuals with diabetes implementing a person-centered approach to support them to manage their diabetes.

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**Learning outcome:**

1. Understand legislation and national guidelines that support individuals with diabetes

**Assessment criteria**

1.1 Explain how the aspects of well-being identified in the Social Services and Well-being (Wales) Act apply to individuals with diabetes

1.2 Describe what is meant by ‘rights based approaches’ in practice when supporting individuals with diabetes

1.3 Describe the importance of a ‘person-centred’ approach when working with individuals with diabetes

1.4 Describe policies and processes relating to diabetes

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**Learning outcome:**

2. Understand diabetes and its management

**Assessment criteria**

2.1 Describe different types of diabetes

2.2 State the normal blood glucose range

2.3 Describe signs and symptoms of unstable diabetes

2.4 Describe why ketonuria is detrimental to health

2.5 Describe action to take if an individual with diabetes is unresponsive

2.6 Describe risk factors that may lead to development of Type 2 diabetes

2.7 Explain the importance of preventing/delaying the development of Type 2 diabetes in individuals at risk

2.8 Describe potential long term complications of unstable diabetes

2.9 List reviews and checks to screen for long term complications

2.10 Describe links between diabetes and other conditions

2.11 Describe the impact of other illnesses and their management on glycaemic control

2.12 Describe ways in which diabetes can be managed

2.13 Explain the effect of insulin on blood glucose levels
2.14 Describe the effect and side effects of common oral anti-hyperglycaemic agents

Range
**Types of diabetes** - type 1, type 2
**Unstable** – hypoglycaemia, hyperglycaemia, ketosis, ketoacidosis, ketonuria
**Other conditions** - dementia, depression, pregnancy, retinopathy, kidney disease (nephropathy), peripheral neuropathy, vascular and neurological problems in feet and lower legs, cardiovascular risk, cystic fibrosis, depression

**Ways in which diabetes can be managed** - non-pharmacological (lifestyle advice) and pharmacological (oral and injectable)

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**Learning outcome:**

3. Understand well-being in the context of care and support for individuals with diabetes

**Assessment criteria**

3.1 Describe the challenges faced by individuals diagnosed with diabetes
3.2 Describe the impact of different types of transitions on individuals with diabetes
3.3 Describe positive risk taking approaches that may be adopted to reduce restrictive practices within diabetes care
3.4 Explain the effects of glycaemic control in relation to
   - lifestyle choices
   - eating patterns
   - attitudes to food
   - physical activity
3.5 Explain the importance of setting targets and producing plans to achieve a balance between
   - achieving lower HbA1c
   - minimising and managing the risk of hypoglycaemia/hyperglycaemia
   - the individual's lifestyle choices
3.6 Explain the importance of recording and reporting the care and support provided for individuals with diabetes

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**Learning outcome:**

4. Understand the importance of communication with individuals and other agencies

**Assessment criteria**

4.1 Explain how to clearly communicate information to individuals with diabetes relating to
   - their condition and treatment
   - their lifestyle
   - their personal care
4.2 Explain the importance of supporting communication between agencies
4.3 Describe 'review and referral' procedures when communicating with other agencies about individual's treatment
4.4 Explain the roles of
   - Multi-disciplinary teams
Diabetic specialist nurses

**Range**

**Communicate** - sensitivity to age, level of understanding, individual’s preferences

**Agencies** - care workers, colleagues, managers, diabetic specialist nurse, multi-disciplinary teams and other agencies

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**Learning outcome:**

5. Implement person-centred approaches when supporting individuals with diabetes

**Assessment criteria**

5.1 Encourage individuals to engage in **active participation** to develop their own personal plan

5.2 Support individuals to develop **self-care skills**

5.3 Encourage individuals to use their agreed personal plans

5.4 Provide reassurance to individuals with diabetes and their carers

5.5 Record and report concerns that might affect the ability of an individual with diabetes to self-care

**Range**

**Self-care skills** - take their own glucose measurements, follow a well-balanced diet

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**Learning outcome:**

6. Understand factors that impact on the health and well-being of individuals with diabetes

**Assessment criteria**

6.1 Describe the nutritional needs and importance of a balanced diet for individuals with diabetes

6.2 Explain the effect of different carbohydrates and refined sugars on blood glucose level

6.3 Describe the **factors** that can affect nutrition and hydration

6.4 Explain the importance of maintaining good personal hygiene procedures

6.5 Explain how diabetes can affect foot health

**Range**

**Factors** - culture and religion, Individual preferences and habits, physical factors – positioning, oral hygiene, psychological factors – depression, eating disorders, income, lifestyle and social convention, exercise and physical activity, advertising and fads, family and peer group influences, ethics, morals and political beliefs, neglect
Unit 326a  Diabetes in adults
Supporting Information

Evidence requirements
- Observe the learner communicating/supporting individual a minimum of three times
- Evidence of documentation that is completed clearly, accurately, legibly

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

HbA1C Glucose sticks to the haemoglobin to make a 'glycosylated haemoglobin' molecule, called haemoglobin A1C or HbA1C. The more glucose in the blood, the more haemoglobin A1C or HbA1C will be present in the blood. The HbA1C test is currently one of the best ways to check diabetes is under control but HbA1C is not the same as the glucose level.

Transitions - moving between settings and treatments, developing diabetes and living with the risk of other associated conditions, moving between child and adult services

Related NOS
- Diab HA7 Develop, agree and review a dietary plan for an individual with diabetes
- Diab HA9 Help an individual with diabetes to improve blood glucose control
- Diab HA5 Help an individual understand the effects of food, drink and exercise on their diabetes
- Diab HA3 Examine the feet of an individual with diabetes and advise on care
- DIB 201 Diabetes Awareness
- Diab HD2 Assist an individual to sustain oral medication to improve their condition
- Diab HA13 Provide information and advice to enable an individual with diabetes to minimise the risks of hypoglycaemia
- Diab HA12 Enable an individual with Type 2 diabetes to start insulin therapy

Related legislation and guidance
- Social Services and Well-being (Wales) Act 2014
- Mental Capacity Act 2013
- Lone Workers Policy & Guidelines  2010
- Code of conduct for NHS Wales 2011
- CIW ‘Above and Beyond’ National review of domiciliary care in Wales 2016
- The Code of Professional Practice for Social Care Workers
- CC Wales – Care at Home - Challenges, Possibilities and Implications for the Workforce in Wales  Final Report  May 2010
• Declaration of rights for older people in Wales (2012)
• The Regulation and Inspection of Social Care (Wales) Act 2016
• Welsh Language Act 1993 and Welsh Language Standards Regulations 2015
• Diabetes UK website – https://www.diabetes.org.uk/home
• www.nice.org.uk/guidance
• Diabetes Delivery Plan for Wales 2016-2020 The best standard of care for everyone with diabetes December 2016
• The Code of Professional Practice for Social Care and associated resources
• Positive Approaches: Reducing Restrictive Practices in Social Care
• Human Rights Act 1998
• More than Just Words and the Follow-on Strategic Framework for Welsh Language Services in Health and Social Care
• “Think Glucose”
Unit 329  Personal assistants and direct payments

Level: 3

Unit Summary  tbc

Learning outcome:
1. Understand the role of direct payments

Assessment criteria
1.1 Explain the purpose of direct payments
1.2 Identify legislation and policies relating to direct payments for providing care and support
1.3 Describe ways in which individuals can use direct payments to arrange support to live the life they choose
1.4 Explain the difference between the terms 'capability' and 'capacity' in relation to direct payments
1.5 Describe eligibility criteria for direct payments
1.6 Explain strategies used to resolve or minimise difficulties, dilemmas and conflicts that may arise between duty of care and an individual's rights in the context of direct payments
1.7 Explain the concept of 'the individual as the employer'

Learning outcome:
2. Understand the role of personal assistants

Assessment criteria
2.1 Explain the role, responsibilities and professional boundaries of personal assistants
2.2 Identify legislation relating to personal assistants
2.3 Explain the importance of flexible approaches to employing, and reviewing, personal assistants
2.4 Describe how citizen-directed approaches can be incorporated in relation to personal assistants

Learning outcome:
3. Support individuals to access direct payments

Assessment criteria
3.1 Provide accessible sources of information about direct payments and services to individuals
3.2 Access specialist guidance about using direct payments
3.3 Work with the individual and others to assess suitability of direct payments and support needed to manage the payments
3.4 Support individuals to check and understand payments documents
3.5 Contribute to completing paperwork for further direct payments
3.6 Support the individual to make payments for services purchased
3.7 Contribute to submitting claims and monitoring documents for direct payments
3.8 Promote active participation throughout the process of supporting individuals with direct payments
Unit 329    Personal assistants and direct payments
Supporting Information

Evidence requirements

- Observe the learner supporting individuals to access direct payments on a minimum of three occasions.
- Documentation/records must be completed clearly, accurately and legibly.

Glossary

Use of direct payments - Direct payments recipients can use payments to employ someone direct (private), use payments to pay via an agency, utilise Social Services personnel. However, the on-costs facing agencies may be much higher than for a Direct Payments recipient and a commercial agency will want to make a profit; local authority staff on-costs will also be higher. Therefore the most cost-effective solution is for DP recipients to directly employ their staff. If this is necessary, as opposed to a matter of choice, then the local authority will need to make up the difference between the hourly rate at which the Direct Payment is made and the hourly rate of the agency. For example a person may need to find support staff through an agency who specialise in a particular type or level of support if that expertise cannot be found otherwise. While employing support staff may be by far the most common use of Direct Payments the legislation has always promoted innovation and imagination, so practitioners should encourage individual DP recipients to think about and identify the barriers that prevent them achieving their personal well-being outcomes and what the Direct Payments might be used for other than employing PAs to overcome these barriers.

Citizen-directed approaches – social support must address "who the people are" and should fit in with usual habits and choices based on their lifestyle, faith, culture, beliefs etc. E.g. I would prefer to wash my body myself so just need help getting in and out of the bath, even though assistance with bathing may be on the support plan. Personal assistants are on the ‘front line’ of social support, so need to have knowledge of multi-cultural issues not just welsh language awareness. The 2014 Act asks individuals to take control, insofar as they are capable, of choosing the nature of the support they require as well as when, where and from whom they receive that support. The Act requires practitioners to hand over power to DP recipients and encourage them to take control.

Related legislation and guidance

- Social Services and Well-being (Wales) Act 2014
- SCW Hub [https://socialcare.wales/hub/resources]

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9 On-costs are the costs that need to be built in to an hourly overall cost to take account of the extra costs of employing someone over and above their hourly wage: such as tax & NI, training, insurance, essential equipment or clothing etc.
Unit 330  Palliative and end of life care for adults

Level: 3

Unit Summary
This unit provides learners with the knowledge and skills required to support individuals receiving palliative care and support at the end of life. It includes the principles of rights based approaches, person-centred approaches and the importance of building relationships with individuals, their key supporters/carers and other agencies and services. The learner will understand the range of specialist services available to provide support and the referral processes required.

Learning outcome:
1. Understand policies and processes that underpin the provision of end of life care

Assessment criteria
1.1 Define key terms relating to end of life care
1.2 Describe the impact of national guidance on current approaches to end of life care
1.3 Explain how the ‘All Wales Standards for Palliative Care’ underpin end of life care
1.4 Describe what is meant by ‘rights based approaches’ when caring for individuals approaching end of life
1.5 Identify the ways that power and influence may be used and/or abused when supporting individuals approaching end of life
1.6 Describe conflicts and legal or ethical issues that may arise in relation to death, dying or end of life care
1.7 Describe the roles of power of attorney and next of kin in relation to end of life care
1.8 Explain the purpose of advanced care planning

Range
Key terms - palliative care, end of life care, terminal care, last days of life care

Learning outcome:
2. Understand a person-centred approach relating to end of life care

Assessment criteria
2.1 Explain the meaning of informed consent and advance planning
2.2 Describe methods of empowering the individual to retain control
2.3 State the importance of always acting in the person’s best interest
2.4 Explain the concept of holistic care at the end of life
2.5 Explain the role of key people and support services who may be involved in end of life care
2.6 Describe the benefit of caring networks and local schemes
2.7 Identify local organisations that support individuals with end of life care
Range

Key people may include family members, friends, others who are important to the well-being of the individual, multi-disciplinary teams

Support services: Statutory bodies, voluntary bodies, health and social care

Learning outcome:
3. Understand the importance of effective communication and developing positive relationships during end of life care

Assessment criteria
3.1 Explain the importance of relationships to an individual as they near end of life
3.2 Explain how different customs and preferences influence end of life care
3.3 Describe the challenges that may occur in developing positive relationships with individuals
3.4 Explain the importance and impact of first language on communication
3.5 Explain the impacts of sensory impairment on end of life care
3.6 Explain the importance of checking that communication has been understood
3.7 Describe considerations in relation to young carers involved in end of life care

Range

Customs and preferences - beliefs, religion, culture of individuals and key people
Understood - by the individual at end of life, their carers/family and those involved in their care and support

Learning outcome:
4. Develop positive relationships and effective communication with individuals, teams and other agencies

Assessment criteria
4.1 Direct individuals and key people to sources of information about the individuals illness and the support available
4.2 Describe the benefits to an individual of having some control over their end of life care
4.3 Actively listen to individuals and key people in relation to end of life care
4.4 Communicate an individual’s care requirements to others
4.5 Provide information of appropriate support to carers and families

Range

Key people - family members, friends, others who are important to the well-being of the individual
Information - prognosis, treatment, support available
Others - care workers, different agencies
Support to carers and families – referral to support services, third sector services, bereavement support, emotional and practical support
Learning outcome:
5. Understand the meaning of well-being in the context of end of life care

Assessment criteria
5.1 Explain the challenges for individuals at the end of their lives in dealing with change and transitions
5.2 Describe how to support individuals, and their families/carers, to manage change and transitions
5.3 Describe coping strategies adopted by individuals when facing death and dying
5.4 Outline models of loss and grief
5.5 Describe the importance of supporting the well-being of individuals and their families/carers
5.6 Describe ways in which an individual's well-being may be enhanced
5.7 Describe ethical considerations in relation to nutrition and hydration
5.8 Describe possible conflicts that might arise during end of life care and what action to take
5.9 Explain the importance of working in partnership with key people to support the individual's well-being

Range
Transitions - individuals moving into or out of the service provision, transferring between establishments, physical changes caused by their deteriorating condition, anticipating death
Models – Kübler-Ross grief cycle, Worden’s theory, Stroebe & Schutte
Well-being - aspects that are social, emotional, cultural, spiritual, intellectual, economic, physical and psychological
Ways to enhance well-being - environmental factors, non-medical interventions, use of equipment and aids, alternative/complementary therapies

Learning outcome:
6. Provide end of life care and ongoing support to individuals through the process of dying

Assessment criteria
6.1 Identify and report psychological effects on the individual when approaching end of life
6.2 Record and report the deteriorating condition of an individual
6.3 Support individuals physical needs and contribute to addressing any distress experienced by the individual promptly and in agreed ways
6.4 Carry out actions immediately following a death that respect the individual’s wishes and follow agreed ways of working
6.5 Establish with an individual and key others any wishes they may have with regards to their death
6.6 Support key people immediately following an individual's death

Range
Physical needs – oral care, continence care, constipation, personal care, mobility
Death – expected or sudden
Unit 330 Palliative and end of life care for adults
Supporting Information

Evidence requirements
- Evidence of documentation that is completed clearly, accurately, legibly

Glossary
End of life - The last 12 months that a person is expected to live
Assessment - Information about a person’s needs and how an illness is affecting their ability to live their normal lives
Best interest decision - This occurs if someone does not have the mental capacity to make a legal, healthcare, welfare or financial decision for himself/herself. This is one of the principles of the Mental Capacity Act. The decision can only be made after an assessment has deemed the individual does not have capacity. Strict principles and codes of practice should be followed to carry out the assessment as set out in the Mental Capacity Act
Core elements of palliative care - Timely and open communication and information; Choices/Options in all aspects of care, including complementary therapies; Death in the place of choice; Co-ordination of services at home, where this is the chosen place of care; Expert symptom management; Access to 24-hour specialist advice and expertise; Emotional and practical support for all family members; Respite care, with medical and nursing input, when required.
Informed consent - When an individual gives permission to have an assessment, treatment or procedure with full knowledge of the risks involved, probable consequences and the alternatives
Last offices - “Last Offices is the care given to a deceased patient which is focused on fulfilling religious and cultural beliefs as well as health and safety and legal requirements.” Mallett, J & Dougherty, L (eds) (2000) (5th ed) Manual of Clinical Nursing Procedures Royal Marsden Hospital, Blackwell Science
Mental capacity - The cognitive ability of an individual to make decisions that may have legal consequences for themselves and/or for others affected by the decision. In particular, these decisions involve their health care, welfare and finances. An assessment must be carried out to determine mental capacity
National end of life care programme - Programme funded by the NHS which works across health and social care to improve end of life care and support people to live and die well
Transitions – include individuals approaching end of life moving into or out of the service provision, transferring between establishments, physical changes caused by their deteriorating condition, anticipating death
Related NOS

- SCDHSC0385 Support individuals at the end of life
- SCDHSC0384 Support individuals through bereavement
- SCDHSC0239 Contribute to the care of a deceased person
- SCDHSC0224 Monitor the condition of individuals
- SCDHSC0216 Help address the physical comfort needs of individuals
- EOL 201 Understand How to Work in End of Life Care
- T/601/9495 Support individuals at end of life

Related legislation and guidance

- The Mental Capacity Act 2005 (amended 2013)
- Social Services and Well Being (Wales) Act 2014
- The Code of Professional Practice for Social Care Workers
- NHS Wales Code of Conduct for HCSW's 2011
- CC Wales – Care at Home - Challenges, Possibilities and Implications for the Workforce in Wales Final Report May 2010
- Declaration of rights for older people in Wales (2012)
- The Regulation and Inspection of Social Care (Wales) Act 2016
- Lifting Operations and Lifting Equipment Regulations (1992)
- www.nice.org.uk/guidance
- Lone Workers Policy & Guidelines 2010
- Welsh Government Palliative and End of Life Delivery Plan 2017 link to website
- All Wales Standards for Palliative Care
- More Than Just Words and the Follow-on Strategic Framework for Welsh Language Services in Health and Social Care
- McCulloch & Lane (2010) Supporting the Bereaved: An introductory workbook for health & social care staff involved in End of Life Care Pub NHS Gloucestershire
- The best practice guide to end-of-life care for people with a learning disability http://www.mencap.org.uk
- Faith perspective: supporting Jewish people with life limiting conditions, and at the end of life 2015
- MUST - [http://www.bapen.org.uk/pdfs/must/must_full.pdf](http://www.bapen.org.uk/pdfs/must/must_full.pdf)
- [http://www.nhs.uk/conditions/Euthanasiaandassistedsuicide/Pages/Introduction.aspx](http://www.nhs.uk/conditions/Euthanasiaandassistedsuicide/Pages/Introduction.aspx)
- Waterlow Score - [http://www.judy-waterlow.co.uk/waterlow_score.htm](http://www.judy-waterlow.co.uk/waterlow_score.htm)
- Hopsice UK [https://www.hospiceuk.org/?gclid=EAIaIQobChMI4Kus5Oqj3AIVR_IRCh1fcQnIEAAYBCAAEglnafD_BwE](https://www.hospiceuk.org/?gclid=EAIaIQobChMI4Kus5Oqj3AIVR_IRCh1fcQnIEAAYBCAAEglnafD_BwE)
Unit 333a  Facilitate training of individuals/groups

Level: 3

Unit Summary: The unit provides learners with the ability to plan, prepare, deliver, monitor and evaluate learning and development for individuals and groups through training.

Learning outcome:
1. Know how to deliver training to individuals and groups

Assessment criteria
1.1 Identify the stages of the training cycle
1.2 Describe the importance of identifying the target audience prior to developing training sessions
1.3 Explain the difference between teaching and facilitating
1.4 Describe the types of learning style that are adopted by different learners
1.5 Describe the range of different learning methods to support training
1.6 Explain potential barriers to learning, and approaches to overcome barriers

Range
Stages: identify training need, design training, deliver training, evaluate outcomes.

Learning outcome:
2. Plan and prepare learning and development sessions

Assessment criteria
2.1 Identify the different types of stakeholders involved in the learning and development process
2.2 Identify collective learning and development needs
2.3 Identify options for meeting learning objectives
2.4 Develop and prepare a range of resources including technology for learning and development
2.5 Plan and prepare learning and development schemes of work and lesson plans according to the learning cycle

Learning outcome:
3. Facilitate learning and development with individuals and groups

Assessment criteria
3.1 Plan, prepare and facilitate community learning and development, individual and group work
3.2 Identify learner needs and planned outcomes relevant to their areas of work
3.3 Utilise a range of learning resources, delivery methods and theoretical models for effective individual and group work
3.4 Manage training sessions that support a range of different learning styles ensuring inclusion of participants in group and individual work
3.5 Manage aspects of equality, diversity and bilingualism when facilitating groups and individuals
3.6 Utilise a range of different forms of communication, preventing barriers to learning and development
3.7 Explain methods used to support conflict that may arise within a group situation

Learning outcome:
4. Evaluate learning and development sessions

Assessment criteria
4.1 Monitor and evaluate the quality of learning and development outcomes using industry recognised standards
4.2 Use feedback from stakeholders to improve learning outcomes for those who use the service
4.3 Manage contribution to self and learner assessment to improve learning and development provision
4.4 Manage the confidentiality and data protection legislation relevant to collection and storage of information
4.5 Use technology to analyse data to improve learning and development
4.6 Maintain records of learning and development delivery undertaken
Unit 333a Facilitate training of individuals/groups

Supporting Information

**Evidence requirements**

- Evidence of lesson plans and a scheme of work for individual and group learning.
- Observe the full delivery of the learning and development process against lesson plans for groups on a minimum of three separate occasions.
- Observe the full delivery of the learning and development process against lesson plans for individuals on a minimum of three separate occasions.
- Evidence of learner feedback utilised to monitor, evaluate and improve learning and development sessions.

**Glossary**

**Stakeholders** - individuals, groups or organisations involved with an interest in the care of the adult

**Scheme of work** - usually an interpretation of a specification or syllabus and can be used as a guide throughout the course to monitor progress against the original lesson plan.

**Lesson Plan** – this should enable all relevant people to deliver the session and ensure standardisation, accurate timings and required resources.

**The Learning Cycle** - a concept of how people learn from experience. It will have several steps or phases, the last of which can be followed by the first. Examples could be:

- Kolb Learning Cycle
- Honey and Mumford Learning Cycle.

**Learning styles** - refer to a range of theories that aim to account for differences in individuals learning. These theories propose that all people can be classified according to their style of learning. A common concept is that individuals differ in how they learn.

**Forms of Communication** - can be categorized into three basic types:

- Verbal communication, in which you listen to a person to understand their meaning
- Written communication, in which you read their meaning
- Non-verbal communication, in which you observe a person and infer meaning
Unit 335a Supporting adults with nutrition and hydration

**Learning outcome:**
1. Understand the principles of a healthy balanced diet for adults

**Assessment criteria**
1.1 Identify current nutritional guidelines for balanced diets for adults
1.2 Explain the role of essential nutrients for health
1.3 Describe potential impacts of poor diet on health and well-being
1.4 Explain the importance of maintaining a balanced diet for different groups
1.5 Explain how to access additional support and information relating to nutrition and hydration

**Range**
**Different groups** – those requiring a special diet, those from different cultures or religions, those with health problems, those with allergies, those with disabilities, those with learning difficulties, pregnant or breastfeeding mothers, vegans and vegetarians

**Learning outcome:**
2. Understand the importance of promoting balanced nutrition and hydration

**Assessment criteria**
2.1 Describe factors that may affect nutritional intake
2.2 Describe the purpose of monitoring nutrition and hydration
2.3 Explain ways in which nutrition and hydration can be monitored
2.4 Identify potential impacts of an unhealthy diet
2.5 Explain the referral process when there are concerns about the nutrition and hydration of adults

**Range**
**Factors** – social, financial, physical, lack of knowledge, neglect, transport, behavioural
**Monitored** – BMI, weight charts, food diaries

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**Unit Summary:**
This unit covers the principles of what make up a healthy diet and factors which may require adaptations to it. The unit also covers the role of those working in health and care organisations/settings in contributing to healthy eating for example the preparation of meal plans and promotion of healthy eating campaigns.
Learning outcome

3. Understand the importance of special dietary requirements in health and care organisations/settings

Assessment criteria

3.1 Describe factors that may promote or create barriers to healthy eating in different groups
3.2 Describe special dietary requirements individuals may have

Range

Different groups – those requiring a special diet, those from different cultures or religions, those with health problems, those with allergies, those with disabilities, those with learning difficulties, pregnant or breastfeeding mothers, vegans and vegetarians

Special dietary requirements – diabetes, potential for anaphylaxis, PKU, cystic fibrosis, food intolerances, allergies, physical impairments

Learning outcome

4. Support the use of diet plans and promote balanced diets for individuals in health and care organisations/settings

Assessment criteria

4.1 Promote appropriate balanced diets and hydration to individuals and their support network
4.2 Implement actions identified by nutritional monitoring
4.3 Review the impact of dietary and hydration plans devised using monitoring processes
4.4 Record and report actions taken following nutritional monitoring
Unit 335a  Supporting adults with nutrition and hydration

Supporting Information

Evidence requirements
- Observe the learner planning and promoting balanced nutritional diets on a minimum of three occasions.
- Planning formats could include weekly diet plans including both food and drinks.
- Observe the learner planning and promoting balanced nutritional diets on a minimum of three occasions.
- Documentation/records must be completed clearly, accurately and legibly.

Guidance for delivery
- There will be synergy and crossover with the nutrition and hydration content in the children and young people qualifications, where content has been contextualised further to age groups.
- Learning outcome 2, assessment criteria 2.4, as part of delivery the potential links between hydration and toileting/constipation should be highlighted and discussed.

Glossary
Health - refers to general physical health and healthy weight
Balanced diet - one containing a variety of foods to ensure adequate intake of all nutrients that are essential for health. A healthy balanced diet is one based on a wide variety of foods from the 5 different food groups
- Fruit and vegetables
- Dairy and alternatives
- Potatoes, bread, rice, pasta and other starchy carbohydrates
- Beans, pulses, fish, eggs, meat and other proteins
- Oil and spreads
A healthy diet includes adequate low sugar drinks.
Nutritional guidelines - the latest national guidance for different groups
Factors that may affect nutritional intake can include:
- Low income and food poverty
- Psychological factors e.g. anxiety, eating disorders
- Skills and knowledge
- Food provision in organisation/setting
- Following a special diet
- Physical factors e.g. positioning, swallowing difficulties, oral health
- Health problems e.g. constipation, anaemia
- Media and advertising
- Family and peer influences
- Ethics, morals and beliefs
- The eating/meal-time environment
- Neglect and abuse
- Culture and religion
- Individual preferences and habit
- Community food initiatives

**Barriers to healthy eating** - may include:

- Certain disabilities or sensory issues e.g. restricted food intake in Autism.
- Physical problems that make swallowing or eating difficult.
- Health problems that reduce appetite, affect digestion, cause pain on eating or cause the body to need more energy than usual e.g. heart problems
- Effects of medication

**Related legislation and guidance**

- Food Standards Agency - [https://www.food.gov.uk](https://www.food.gov.uk)
- British Dietetic Association Food Fact Sheets [https://www.bda.uk.com/foodfacts/home](https://www.bda.uk.com/foodfacts/home)
- The Caroline Walker Trust [https://www.cwt.org.uk/](https://www.cwt.org.uk/)
- NHS Choices [http://www.nhs.uk/livewell/healthy-eating/Pages/Healthyeating.aspx](http://www.nhs.uk/livewell/healthy-eating/Pages/Healthyeating.aspx)
- NICE guidelines for constipation – [https://www.nice.org.uk/guidance/cg99](https://www.nice.org.uk/guidance/cg99)
- Anaphylaxis campaign - [https://www.anaphylaxis.org.uk/](https://www.anaphylaxis.org.uk/)
- BAPEN [https://www.bapen.org.uk/](https://www.bapen.org.uk/)
- Trussel Trust [https://www.trusselltrust.org/what-we-do/](https://www.trusselltrust.org/what-we-do/)
Unit 336  
Health promotion

Level: 3  
Unit Summary: This unit covers communication with individuals and groups in relation to health promotion activities and models designed to effect behaviour change. Learners will work with individuals to develop Personal Improvement Plans and support and encourage them to achieve targets.

Learning outcome:
1. Understand legislation, policies and guidelines relating to health promotion

Assessment criteria
1.1 Describe national health policies, local initiatives and current legislation in relation to health promotion
1.2 Explain the relationship between current legislation, national guidelines, policies, protocols and the following
   - personal responsibility
   - accountability
   - collection and provision of information
1.3 Describe key features of Public Health Wales campaigns in relation to health promotion
1.4 Describe key features of NICE guidelines in relation to health promotion
1.5 Explain where current health promotion information, advice and support can be accessed

Range

Key features – communication method/form, target audience, scale (regional/national/local)

Learning outcome:
2. Understand factors that impact on health and well-being

Assessment criteria
2.1 Describe factors that impact on health and well-being
2.2 Explain potential influences on people’s behaviour in relation to health and well-being
2.3 Explain the strengths and weaknesses of models of behaviour change
2.4 Explain the link between models of behaviour change and different approaches to health improvements
2.5 Explain how own health behaviours may influence others
2.6 Describe benefits and impacts of individuals making lifestyle changes

Range
Factors - social class, housing, employment, culture, attitudes, values and beliefs, inequality, discrimination and abuse, non-communicable diseases, chronic ill health
Influences – peer pressure, learned behaviour, lifestyle, advertising, trends, financial
Models - Nuffield centre for bioethics ladder of interventions, Beattie's model, Ottawa charter for health promotion
Different approaches - health promotion, community development, prevention
Benefits and impacts – to the individual, to family, to wider community/society

Learning outcome:
3. Communicate health information

Assessment criteria
3.1 Engage effectively with individuals and their support networks about health and well-being
3.2 Implement specific activities within health improvement projects
3.3 Support individuals to communicate their views and concerns about health and well-being
3.4 Provide positive health promotion messages through everyday conversations

Range
Support networks – families, communities, groups, carers

Learning outcome:
4. Work with individuals to facilitate behaviour change

Assessment criteria
4.1 Establish a working relationship with individuals
4.2 Provide access to up to date health information relevant to individuals
4.3 Support individuals to make decisions for their own health and well-being
4.4 Take the individual's perspective into consideration
4.5 Explain the importance of developing a Personal Improvement Plan (PIP)
4.6 Support individuals to develop a personal health improvement plan
4.7 Engage relevant professionals in the PIP
4.8 Offer appropriate encouragement to achieve goals
4.9 Support the individual to monitor progress making changes to the plan if necessary
4.10 Monitor and record the progress of the individual towards their goals
4.11 Update records in line with policies and protocols

Range
Working relationship - may be one to one, openness and a frank exchange of views consistent with an individual's culture, establish a suitable working environment, provide information clarifying that the individual has understood, consider implication of changes to the plan and targets
Individuals - format that is consistent with the individual's level of understanding, culture, background and preferred ways of communicating

Individual's perspective - what the individual would like to see improved, how s/he thinks it could be improved, and how ready s/he is to make the changes
Evidence requirements

- Observe the learner carrying out a minimum of three health promotion activities.
  These may include
  - Health promotion events
  - Prevention tasks
- Evidence of documentation/records that are completed clearly, accurately and legibly.

Related legislation and guidance

- Social Services and Well-being (Wales) Act 2014 - Information and Learning Hub
  http://www.ccwales.org.uk/the-act/
- Public Health (Wales) Act 2017
- Well-being of Future Generations (Wales) Act 2017
- Mental Capacity Act
- Human Rights Act
- Donald Acheson Report 1998
- Prosperity for All 2017 (Welsh Gov strategy)
- NHS planning framework for Wales 2017/18
- Health and Care Standards (2015)
- Chief Medical Officer for Wales annual report
- Public Health Wales 10-year strategy and Integrated Medium Term Plan
- Primary Care Strategy for Wales
- Healthy Child Wales Programme
- Midwifery 2020
- More Than Just Words and the Follow-on Strategic Framework for Welsh Language Services in Health and Social Care
  http://gov.wales/topics/health/publications/health/guidance/words/?lang=en
- Health and Sustainable Preschool Scheme
Unit 345  Supporting individuals with a learning disability

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Unit Summary: This unit covers an understanding of learning disability, the different range of impacts of a learning disability on an individual's life and the role played by society. It develops the practical skills needed to support and provide care for individuals with learning disabilities in a person-centred and inclusive way.

Learning outcome:

1. Understand the concept of supporting individuals with a learning disability

Assessment criteria

1.1 Explain what is meant by 'learning disability'
1.2 Identify causes of learning disability
1.3 Describe the medical and social models of disability
1.4 Describe the possible impact on a family of having a member with a learning disability

Learning outcome:

2. Understand how views and attitudes impact individuals with a learning disability

Assessment criteria

2.1 Describe the impacts (positive and negative) of being labelled as having a learning disability
2.2 Explain steps that can be taken to promote positive attitudes towards individuals with learning disabilities and their families and carers
2.3 Explain the effects a learning disability can have on an individual's life choices
2.4 Explain the role of external agencies and others in changing attitudes, policies and practice

Range

Learning outcome:

3. Understand how to promote communication with individuals with learning disabilities
Assessment criteria

3.1 Identify ways of adapting the following when communication with an individual with learning disabilities
   - Verbal communication
   - Non-verbal communication
   - Alternative communication

3.2 Explain why it is important to use language that is both age and ability appropriate when communicating with individuals with learning disabilities

Learning outcome:

4. Support individuals with a learning disability to achieve outcomes that are important to them

Assessment criteria

4.1 Engage individuals in meaningful conversations about issues that are important to them
4.2 Support individuals with a learning disability to participate and engage in activities that are meaningful and enjoyable to them
4.3 Describe ways to support individuals with a learning disability to manage change and transitions
4.4 Use risk assessments to support individuals with a learning disability to achieve their goals and what matters to them

Range

Learning outcome:

5. Provide health and personal care support for individuals with a learning disability

Assessment criteria

5.1 Explain what needs to be considered when individuals with a learning disability need to undertake health care or medical treatment
5.2 Explain the importance of personal hygiene on the health and well-being of an individual with a learning disability
5.3 Explain the action to be taken to address any outcomes of health checks
5.4 Follow an individual’s personal care plan to ensure the level of support provided maximises their independence
5.5 Support individuals to access a range of health checks
5.6 Support health promotion and early intervention to reduce the risk of ill health
5.7 Support the use of assistive technology for individuals with learning disability
5.8 Access, review and evaluate information about resources, services and facilities relevant to the needs and preferences of individuals with learning disability
Unit 345 Supporting individuals with a learning disability
Supporting Information

Evidence requirements
- tbc
Unit 348  
**Supporting individuals to manage dysphagia**

**Level:** 3

**Unit Summary:** This unit will enable learners to support individuals with dysphagia, following an assessment by a speech and language therapist. Learners will consider the national guidelines that relate to dysphagia and ways of supporting individuals to maintain health and well-being.

**Learning outcome:**
1. Understand dysphagia and its impact on individuals

**Assessment criteria**
1.1 Define the term ‘dysphagia’
1.2 Describe anatomy and physiology related to swallowing
1.3 Identify underlying causes and contributory factors of abnormal swallowing
1.4 Describe signs and symptoms of dysphagia
1.5 Explain the importance of maintaining good oral health in individuals with dysphagia
1.6 Identify factors that impact on the ability to swallow
1.7 Describe issues and risks that can arise with dysphagia
1.8 Explain the implications of dysphagia on individuals’ well-being
1.9 Describe psychological and emotional impacts of swallowing difficulties on individuals and their families/carers
1.10 Identify potential barriers to successful management of dysphagia

**Range**

**Factors** - individual’s medical and physical state (including sensory impairment, loss of bodily function, loss of cognition), presentation, pacing, consistency and taste of food and drink

**Learning outcome:**
2. Understand guidelines relating to the care of individuals experiencing dysphagia

**Assessment criteria**
2.1 Identify local and national guidelines related to supporting individuals with dysphagia
2.2 Identify roles of professionals in contributing to assessment, treatment and care of individuals with dysphagia
2.3 Explain personal role within scope of practice, in relation to the care of individuals with dysphagia
2.4 Describe tools used in the assessment of dysphagia
2.5 Explain own organisation/setting position on supporting individuals with dysphagia at mealtimes

Learning outcome:
3. Understand how to support individuals to manage dysphagia

Assessment criteria
3.1 Identify management options for individuals with dysphagia
3.2 Describe support needed to maintain good nutritional health of individuals with dysphagia
3.3 Describe support needed to promote well-being for individuals with dysphagia
3.4 Describe specific interventions required for individuals who require artificial nutritional support
3.5 Explain the process for responding to difficulties relating to dysphagia
3.6 Explain the potential risks of families/carers or others non-compliance with management plans
3.7 Describe activities that can be carried out with individuals in order to help them develop and maintain swallowing skills
3.8 Identify triggers for re-assessment of swallow function

Range
Support – use of eating and drinking aids (including utensils, cutlery), sensory aids (i.e. glasses, dentures, hearing aids), verbal and physical prompts, rate of presentation of oral intake, verbal and non-verbal cues from the individual, ease of access, modified diet and fluids, positioning

Artificial nutritional support - enteral routes, parenteral routes

Difficulties – aspiration, coughing, choking, malnutrition, dehydration, respiratory compromise,

Learning outcome:
4. Support individuals to manage dysphagia

Assessment criteria
4.1 Check individuals care plan for details of support required to manage their dysphagia
4.2 Confirm individuals identify and gain valid consent prior to providing support
4.3 Support individuals with dysphagia to maintain good nutrition and hydration
4.4 Encourage and support individuals to maintain good oral health
4.5 Provide the individual, their family/carer with information and advice, in line with care plan
4.6 Record and report care provided in line with organisation/setting procedures, escalating concerns as necessary
Unit 348 Supporting individuals to manage dysphagia

Supporting Information

Evidence requirements

- Observe the learner supporting an individual (or individuals) with dysphagia on a minimum of three occasions.
- Documentation/records must be completed clearly, accurately and legibly.

Glossary

Dysphagia - the medical term for swallowing difficulties. Some individuals with dysphagia have problems swallowing certain foods or liquids, while others can't swallow at all. Over time, dysphagia can also cause symptoms such as weight loss and repeated chest infections.

Related legislation and guidance

- Social Services and Well-being (Wales) Act 2014 - Information and Learning Hub http://www.ccwales.org.uk/the-act/
- Doing Well, Doing Better: Standards for Health Services in Wales (April 2010)
- Mental Capacity Act
- Guideline for the identification and management of swallowing difficulties in adults with learning difficulties
- NOS CHS159 (Skills for Health) - Provide support for individuals to develop their skills in managing dysphagia
Unit 352 Providing support to individuals with a mental health diagnosis

Level: 3

Unit Summary: The unit covers the knowledge, understanding and practical skills required to support an individual with a mental health diagnosis.

Learning outcome:
1. Understand how to promote well-being in mental health services

Assessment criteria
1.1 Explain what is meant by the term 'mental ill-health'
1.2 Explain the impact of early diagnosis on individuals with mental health diagnoses
1.3 Explain the process of 'recovery'
1.4 Explain the benefits of social prescribing
1.5 Describe factors that impact on mental well-being
1.6 Describe the impact of mental well-being on individuals and their families/cares

Learning outcome:
2. Know how Legislation and National policies underpin support for individuals with mental health diagnoses

Assessment criteria
2.1 Describe key legislation and national policies that underpin the provision of mental healthcare and support
2.2 Explain how key mental health legislation and national policies relate to own job role
2.3 Explain the importance of working in ways that encompass key legislation and national policies
2.4 Research prevalence rates and demographic factors of mental ill health in Wales
2.5 Explain the importance of advocacy when supporting individuals with mental health diagnoses

Learning outcome:
3. Apply Legislation and National policies that support individuals with mental health diagnoses

Assessment criteria
3.1 Work in ways that follow legislation and national policies relating to the care and support of individuals with mental health diagnoses
3.2 Promote and support others to follow legislation and national policies when supporting individuals with mental health diagnoses
3.3 Promote and uphold the codes of professional practice when supporting individuals with mental health diagnoses

Learning outcome:
4. Apply rights based approaches to support individuals with mental health diagnoses

Assessment criteria
4.1 Support individuals' rights when delivering care and support
4.2 Work with others to support individuals with mental health diagnoses in ways that promote their human rights
4.3 Support and encourage individuals to make choices and decisions relating to their care plans

Learning outcome:
5. Know how to encourage positive risk taking in individuals with mental health diagnoses

Assessment criteria
5.1 Explain the importance of risk assessments for individuals with mental health diagnoses
5.2 Explain the potential impacts of risk taking on individuals with mental health diagnoses

Range:
Risk assessments – social, emotional, environmental, psychological

Learning outcome:
6. Encourage positive risk taking in individuals with mental health diagnoses

Assessment criteria
6.1 Support individuals with mental health diagnoses to plan meaningful activities
6.2 Support individuals with mental health diagnoses to assess risks of activities
6.3 Support individuals with a mental health diagnoses to carry out activities with minimum risk to themselves and others
6.4 Support individuals with a mental health diagnoses to evaluate and reflect on activities
6.5 Encourage individuals with mental health diagnoses to plan further activities, taking into account the evaluation of previous activities

Learning outcome:
7. Know how to encourage positive approaches to reduce restrictive practice when working in mental health services
Assessment criteria

7.1 Describe types of restrictive practice and when they might be used
7.2 Explain the impact of restrictive practice on individuals with mental health diagnoses
7.3 Explain the benefits of alternatives to restrictive practice

Learning outcome:
8. Use positive approaches to reduce restrictive practice in mental health services

Assessment criteria

8.1 Encourage individuals with mental health diagnoses and others to prioritise their key needs
8.2 Support individuals with mental health diagnoses and others to recognise triggers to challenging behaviour and develop strategies to manage these
8.3 Review strategies with individuals with mental health diagnoses and others to minimise future episodes of challenging behaviour

Learning outcome:
9. Know how to support change and transitions in mental health services

Assessment criteria

9.1 Describe the impact of change on individuals' mental health
9.2 Explain organisational policies and procedures that relate to the transition of individuals in mental health care
9.3 Know how to utilise local support in relation to Welsh Language and culture relating to mental health
9.4 Identify local organisations that support individuals with a mental health diagnosis

Learning outcome:
10. Support individuals to manage change and transition in mental health services

Assessment criteria

10.1 Support individuals to transition from one care service to another
10.2 Contribute to the planning and transition of individuals from one care service to another

Learning outcome:
11. Promote well-being in mental health services

Assessment criteria

11.1 Support individuals with mental health diagnoses to research ways of improving mental well-being
11.2 Support individuals with mental health diagnoses to engage in meaningful activities that promote well-being
11.3 Support individuals with mental health diagnoses to reflect on their recovery
Unit 352 Providing support to individuals with a mental health diagnosis diagnosis

Supporting Information

Evidence requirements

- tbc

Related legislation and guidance

- Mental Health in Wales Fundamental Facts 2016 [https://www.mentalhealth.org.uk/sites/default/files/FF16%20Wales.pdf](https://www.mentalhealth.org.uk/sites/default/files/FF16%20Wales.pdf)
- [https://www.mentalhealth.org.uk/sites/default/files/FF16%20Wales.pdf](https://www.mentalhealth.org.uk/sites/default/files/FF16%20Wales.pdf)
Unit 354 Providing support to individuals with a physical disability

Level: 3

Unit Summary: This unit covers an understanding of physical disability, the different range of impacts of a physical disability on an individual’s life and the role played by society. It develops the practical skills needed to support and provide care for individuals with physical disabilities in a person-centred and inclusive way.

Learning outcome
1. Understand the concept of physical disability

Assessment criteria
1.1 Define the term physical disability
1.2 Describe the terms congenital, acquired, neurological and progressive when used in relation to physical disability
1.3 Compare the different impacts on individuals of physical disabilities that are congenital, acquired, neurological and progressive
1.4 Describe the medical and social models of disability
1.5 Describe the possible impact on a family of having a member with a physical disability

Range
Different impacts – include emotional.

Learning outcome
2. Understand the role of society on individuals living with a physical disability

Assessment criteria
2.1 Describe the effect of environmental and social barriers on an individual with a physical disability
2.2 Describe the socio-economic effects of physical disability on an individual
2.3 Explain the effects a physical disability can have on an individual’s
2.4 Explain how attitudes either promote a positive or negative perception of disability
2.5 Explain the impact of legislation on positively promoting the rights of individuals with physical disability

Range
Effects: physical health, education, housing, employment, access to cultural/leisure activities, mobility, sexuality, life choices, financial, mental health

Environmental and social barriers - include people’s attitudes to disability, physical and organisational barriers; negative language etc.

Learning outcome

3. Understand the importance of promoting inclusion and independence for individuals with a physical disability

Assessment criteria

3.1 Explain the importance of recognising the centrality of the individual rather than the disability
3.2 Describe the impacts (positive and negative) of being labelled as having a physical disability
3.3 Compare the difference in outcomes that may occur between focusing on an individual’s strengths and aspirations rather than their needs only
3.4 Explain the importance of individuals with physical disability to have valued and meaningful roles
3.5 Describe the difference between physical presence and participation
3.6 Explain the importance of the individual having control of their own choices and decisions

Learning outcome

4. Support individuals with a physical disability to achieve outcomes that are important to them

Assessment criteria

4.1 Engage individuals in meaningful conversations about issues that are important to them
4.2 Support individuals with physical disability to participate and engage in activities that are meaningful and enjoyable to them
4.3 Use risk assessments to support individuals with physical disability to safely achieve goals and what matters to them
4.4 Describe ways to support individuals with physical disability to manage through change and transitions

Learning outcome

5. Provide health and care support for individuals with a physical disability

Assessment criteria

5.1 Explain the importance of good personal hygiene on the health and well-being of individuals with a physical disability
5.2 Support individuals to access training, aids, equipment and resources to achieve agreed outcomes
5.3 Use approaches which benefit assessment of individuals functional ability to undertake a range of everyday activities
5.4 Promote independence in individuals with a physical disability
5.5 Identify when it is appropriate to initiate offers of help
5.6 Support individuals to achieve **social and economic well-being** and employment
5.7 Support individuals to maintain mobility
5.8 Support the use of assistive technology for individuals with physical disability
5.9 Explain the contribution that assistive technology can make to the lives of individuals with physical disability
5.10 Review and evaluate information about resources, services and facilities relevant to the needs and preferences of individuals with physical disability

**Range**

**Social and economic well-being** – mental health, employment, financial, housing
Supporting Information

**Evidence requirements**
- tbc

**Guidance for delivery**
It would be beneficial for learners taking this unit to also undertake the Assessment unit to support with decision making on how best to support an individual with a physical disability to balance the risks to meet their aspirations.

Areas of the core, including references to working in partnership should be embedded as part of the delivery of this unit.
Unit 355  
Undertaking physiological measurements

Level: 3

Unit Summary:
This unit will enable learners to develop the knowledge and skills required to undertake physiological measurements in a range of health, care and childcare organisations/settings. Physiological Measurement is a major area of the diagnostic service portfolio. It provides a wide range of investigations and elements in the care pathway that are essential in diagnosis, recognise changes in conditions and identify the need for appropriate therapeutic interventions.

Learning outcome:
1. Understand agreed ways of working relating to physiological measurements

Assessment criteria
1.1 Describe agreed ways of working that affect own work practice when undertaking physiological measurements
1.2 Explain own role and responsibilities for obtaining valid consent and the importance of doing this
1.3 Describe the standard checks that should be made on the equipment used to take physiological measurements

Range
Agreed ways of working - national guidelines, policies, protocols and good practice

Physiological measurements - blood pressure, pulse, temperature, Oxygen saturation, respiration, body mass index (BMI)

Consent – informed, assumed, implied, verbal,

Equipment - sphygmomanometer, oxygen saturation machine, stethoscope, thermometer, weighing scales, height measure

Learning outcome:
2. Understand the different physiological states that can be measured and how they are maintained by the body

Assessment criteria
2.1 Explain the importance of baseline measurements
2.2 Describe the anatomy and physiology of the circulatory system
2.3 Explain what blood pressure is and its normal ranges
2.4 Explain systolic and diastolic blood pressure
2.5 Define the terms ‘hypertension’ and ‘hypotension’
2.6 Identify the main pulse points in the body
2.7 Describe key features of a pulse and its normal ranges
2.8 Identify factors that affect pulse rates
2.9 Explain pulse oximetry and what might affect accuracy of reading
2.10 Identify normal body temperature ranges and explain how the body maintains them
2.11 Identify factors that impact on body temperature
2.12 Explain how and why respiration are measured, and the normal respiration ranges
2.13 Identify features of breathing that would be observed in addition to rate
2.14 Explain the principles of body mass index (BMI) in relation to weight/dietary control
2.15 Describe the actions to be taken if complications occur during the measurement
2.16 Explain responsibilities for action if physiological measurements fall outside normal ranges

Range

Key features of a pulse – rate, rhythm, quality
Features of breathing – depth of breath, quality of breath, chest symmetry, noises, use of accessory muscles

Learning outcome:
3 Undertake physiological measurements

Assessment criteria
3.1 Check equipment is fit for purpose when preparing to take physiological measurements
3.2 Check the documentation for which physiological measurements need to be taken and the prescribed frequency
3.3 Explain to the individual, their family or carer what physiological measurements will be undertaken and gain valid consent
3.4 Take in to account the individual’s, families or carers preferences when undertaking physiological measurements
3.5 Take physiological measurements accurately
3.6 Monitor the condition of the individual when taking physiological measurements
3.7 Record physiological measurements in line with agreed ways of working
3.8 Analyse the results of physiological measurements taken in accordance with own role requirements
3.9 Report results in line with agreed ways of working
3.10 Clean and decontaminate equipment used and dispose of waste
3.11 Restock and store equipment securely following the procedure

Range
**Preferences** - respecting their personal and cultural preferences, maintaining dignity and respect

**Condition** - level of consciousness and response, confusion, skin state
Unit 355  Undertaking physiological measurements
Supporting Information

Evidence requirements
- Observe the learner carrying out a minimum of three physiological measurement activities.
- Evidence of documentation/records that are completed clearly, accurately and legibly.

Guidance for delivery
Criteria 2.8 - Learners must be able to identify a minimum of five factors affecting pulse
Criteria 2.11 - Learners must identify factors that cause both hypothermia and pyrexia

Glossary
Standard Operating Procedure (SOP) - a set of fixed instructions or steps for carrying out routine testing procedures
Oximetry - A pulse oximeter is a medical device that indirectly monitors the oxygen saturation of a patient's blood
Sphygmomanometer: an instrument for measuring blood pressure, typically consisting of an inflatable rubber cuff which is applied to the arm and connected to a graduated scale, enabling the determination of systolic and diastolic blood pressure by increasing and gradually releasing the pressure in the cuff
Relevant: baseline observations and physiological measurements relating to an area e.g. blood pressure, pulse / temperature, oximetry, respiratory rate, height, weight etc.
Unit 358a Positive approaches to behaviour support

Level: 3

Unit Summary: The purpose of this unit is to develop the knowledge, understanding and skills of the learner to support individuals to develop positive behavior and reduce the use of restrictive practice.

Learning outcome:
1. Understand the concept of positive behaviour support and how it is used to reduce restrictive practices

Assessment criteria
1.1 Describe the term Positive support
1.2 Describe the term challenging behavior
1.3 Describe the core values and principles used in practice when supporting an individual who challenges the service
1.4 Explain what is meant by restrictive practices and restrictive interventions
1.5 Explain how restrictive interventions can be used
1.6 Describe the importance of using the least restrictive approach
1.7 Identify safeguards that need to be in place for the use of restrictive interventions

Range
Positive Support - positive behaviour support, active support, restorative approaches

Restrictive interventions - physical restraint, mechanical restraint, use of medication, psychological restraint, seclusion, Time out or time away, environmental interventions

Learning outcome:
2. Understand how legislation, national policies, codes of conduct and practice underpin positive approaches to reduce restrictive practices and support positive behaviour

Assessment criteria
2.1 Identify specific legislation, national policies and guidance for the use of restrictive interventions
2.2 Explain how the key principles of the Social Services and well-being (Wales) Act help to underpin positive approaches to reducing restrictive practices
Learning outcome:

3. Follow legislation, national policies, codes of conduct and practice to underpin positive approaches to reduce restrictive practices and support positive behaviour

Assessment criteria

3.1 Adhere to legislative requirements, policies and guidance for the use of restrictive interventions
3.2 Implement an ethical, values based approach in the use of restrictive practices and restrictive interventions

Learning outcome:

4. Understand how prevention and early Intervention can reduce the need for restrictive interventions and support positive behaviour

Assessment criteria - Knowledge

4.1 Describe what prevention and early intervention means in relation to using positive approaches to reduce the use of restrictive interventions
4.2 Use a range of early interventions or primary preventative strategies to support positive behaviour

Learning outcome:

5. Support individuals to achieve desired well-being outcomes

Assessment criteria

5.1 Use a holistic approach to promoting well-being to underpin positive approaches to reducing restrictive practices
5.2 Develop and monitor plans which outline an individual’s needs and desired well-being outcomes
5.3 Use positive and proactive approaches to support the well-being of individuals
5.4 Support individuals to have a voice in, and control over, reaching the outcomes that help them achieve well-being

Learning outcome:

6. Embed a co-productive approach that supports individuals to participate in and give feedback on the way that their care and support is delivered

Assessment criteria

6.1 Involve individuals in their own care planning and in the design and delivery of services, recognising their knowledge and expertise
6.2 Support individuals to maximise their participation in the development and management of their care and support plan
6.3 Develop a range of ways in which individuals can give feedback on the services and support they receive

Learning outcome:
7. Promote Multiagency collaboration and partnership working

Assessment criteria
7.1 Embed the principles of effective partnership working in your practice
7.2 Develop and share a range of plans and approaches for behaviour support in partnership with the individual and others
7.3 Share the outcomes of assessments including risk assessments

Learning outcome:
8. Support individuals and others following an incident of challenging behaviour

Assessment criteria
8.1 Support and debrief in all situations where restrictive interventions have been used
8.2 Implement techniques for debriefing and provide appropriate support following incidents of challenging behaviour
8.3 Reflect on learning from incidents of challenging behavior and implement any changes needed for approaches of practice

Learning outcome:
9. Review positive approaches and the use of restrictive practices and interventions

Assessment criteria
9.1 Use a range of methods to review positive approaches and the use of restrictive practices and interventions
9.2 Access additional support for individuals if needed following reviews
9.3 Access additional support for workers and carers following reviews
9.4 Embed a co-productive approach to review positive approaches and the use of restrictive practices and interventions and implement any changes needed
Unit 358a  Positive approaches to behaviour support
Supporting Information

Evidence requirements
- tbc

Glossary
Physical and mental health and emotional well-being
- Protection from abuse and neglect
- Education, training and recreation
- Domestic, family and personal relationships
- Being able to participate and contribute to society
- Respecting and securing rights and entitlements
- Achieving social and economic well-being
- Having suitable living accommodation
- Control over day to day life and participating in work

Challenging behaviour may include behaviour that are:
- Repetitive / obsessive
- Withdrawn
- Aggressive
- Self-injurious
- Disruptive
- Anti-social or illegal
- Verbally abusive

Different positive approaches frameworks / models to behaviour support to include:
- Active Support
- What is meant by ‘active support’
- How the Active Support model translates values into person centred practice
- The different components of Active Support including:
  - Daily plans and active participation
  - Levels of help or support and assistance
  - Positive interaction
  - Positive reinforcement
  - Skills teaching
  - Task analysis
  - Valued range of meaningful activities

Related legislation and guidance
- Social Care Wales (2016) Positive Approaches: Reducing Restrictive Practices in

- Positive Behavioural Support Academy Improving quality in the delivery of Positive Behavioural Support (PBS): the standards for accredited training
- Positive Behavioural Support Academy Improving quality in the delivery of Positive Behavioural Support (PBS): the standards for accredited service providers.
Unit 360  Providing care and support for adults with chronic respiratory conditions

Level: 3

Unit Summary: This unit provides learners with the knowledge and practical skills required to support individuals with chronic respiratory conditions. Learners will develop the practical skills required to provide immediate and long term support to manage their condition.

Learning outcome:
1. Understand national guidelines and public health messages relating to the care of adults with chronic respiratory conditions

Assessment criteria
1.1 Identify local and national legislation relating to chronic respiratory conditions
1.2 Identify public health messages relating to chronic respiratory conditions
1.3 Describe the impact of different factors on chronic respiratory conditions

Range
Factors - environmental, social, lifestyle/behavioural, psychological, biological

Learning outcome
2. Understand chronic respiratory conditions

Assessment criteria
2.1 Describe the anatomy and physiology of healthy lungs and associated structures
2.2 Describe common chronic respiratory conditions and their potential causes
2.3 Identify signs and symptoms of individuals experiencing chronic respiratory conditions
2.4 Describe potential treatment options for chronic respiratory conditions
2.5 Describe the long term impacts of chronic respiratory conditions
2.6 Identify potential risk factors relating to chronic respiratory conditions

Range
Associated structures – mouth, nose, pharynx, larynx, trachea, bronchus, diaphragm, intercostal muscles, ribs,
Common chronic respiratory conditions – Chronic Obstructive Pulmonary Disease (COPD), fibrosis, emphysema, asthma, industrial disease,
Signs and symptoms – typical, atypical
Treatment options – medication, oxygen, pulmonary rehab, lifestyle modification, surgery, CPR, C-PAP, Bi-PAP
Long term impacts – lifestyle, medication, deterioration/premature death, psychological, confidence, family/relationships
Risk factors – smoking, environment, genetics, financial ability, social influences, diet, exercise,

Learning outcome
3. Understand Cardio-Pulmonary Resuscitation (CPR)

Assessment criteria
3.1 Describe national guidelines relating to the provision of CPR
3.2 Explain organisation/setting procedures for performing CPR
3.3 Explain the differences between respiratory arrest and cardiac arrest
3.4 Describe the ‘chain of survival’
3.5 Describe organisation/setting procedures for alerting emergency medical help
3.6 Explain the significance of Do Not Attempt Resuscitation (DNAR) in relation to the provision of CPR
3.7 Explain the requirements for CPR training compliance within own organisation/setting

Learning outcome
4. Support individuals experiencing chronic respiratory conditions

Assessment criteria
4.1 Explain to the individual, their family or carer, the nature of support to be provided and gain informed consent
4.2 Maintain the health and safety of the environment when providing support for individuals experiencing chronic respiratory conditions
4.3 Identify the normal functional ability of individuals experiencing chronic respiratory conditions
4.4 Monitor the condition and well-being of individuals in line with organisation/setting procedures
4.5 Provide support to individuals on managing their respiratory condition and its symptoms
4.6 Source and provide information to individuals, their family or carer, to manage the individuals respiratory condition and its symptoms
4.7 Answer questions and concerns raised by the individual during procedures in line with role responsibility
4.8 Escalate concerns in line with organisation/setting procedures
4.9 Complete documentation of support given in line with organisation/setting procedures

Range
Normal functional ability – respiratory rate, respiratory rhythm, respiratory depth, level of independence, oxygen saturation, anxiety level
Unit 360 Providing care and support for adults with chronic respiratory conditions

Supporting Information

Evidence requirements
- Observe the learner supporting an individual (or individuals) experiencing chronic respiratory conditions on a minimum of three occasions.
- Documentation/records must be completed clearly, accurately and legibly.

Glossary
Do Not Attempt Resuscitation (DNAR) – A Do Not Attempt Resuscitation form is a document issued and signed by a doctor, which tells the medical team not to attempt CPR. It is not a legally binding document. Instead, it helps to communicate to healthcare professionals involved in care that CPR shouldn’t be attempted.

Chronic Obstructive Pulmonary Disease (COPD) - a lung disease characterized by chronic obstruction of lung airflow that interferes with normal breathing and is not fully reversible.

Related legislation and guidance
- Social Services and Well-being (Wales) Act 2014
- More Than Just Words and the Follow-on Strategic Framework for Welsh Language Services in Health and Social Care
- Doing Well, Doing Better: Standards for Health Services in Wales (April 2010)
Unit 361 Providing reablement services

Level: 3

Unit Summary: The purpose of this unit is to be able to work competently to contribute to the planning, support and delivery within reablement services.

Learning outcome:
1. Understand the person-centred care approaches used to plan and support reablement

Assessment criteria
1.1 Explain the importance of communication that ensures the individual understands the purpose of reablement
1.2 Describe the reasons why an individual may be reluctant to engage and the importance of respecting their personal choice
1.3 Explain the importance of avoiding professional jargon
1.4 Describe the methods used to encourage individuals to self-manage

Range
Reasons include embarrassment; fear of failing; unhappy with intrusion or lack of insight believing there is nothing wrong.

Importance of avoiding professional jargon to avoid making individuals feel powerless; inadequate or intimidated.

Learning outcome:
2. Use person-centred care approaches to plan, support and deliver reablement

Assessment criteria
2.1 Use recommended methods/approaches to plan and support initial engagement with individuals
2.2 Identify existing skills and develop plans to support the individual to achieve personal goals and aspirations
2.3 Support individuals by planning and delivering reablement in a person-centred way to regain and develop the skills they need to achieve what is important to them in life
2.4 Agree the level of help, support and assistance relevant to an individual's needs
2.5 Provide feedback on an individual’s progress
2.6 Encourage active participation from the individual to reflect on support received
2.7 Evaluate the impact of the enabling programme on the individual
2.8 Report and record any changes or concerns immediately according to organisational guidelines
Range

Methods/approaches to include:
- Find out about the person first
- Show interest, avoid intrusiveness
- Use the individual's preferred name or title
- Invest time to explain who you are/why you are there

Skills for managing day-to-day life include those relating to preparing food; eating and drinking; dressing; bathing and washing; mobility; getting in and out of bed; getting around the home environment; cleaning; other domestic activity.

Level of help, support and assistance refers to graduated levels of assistance, from simple verbal reminders providing the lowest level of support to actual physical guidance providing the highest level. Assistance should be given flexibly according to the individual's need for help and should be focused on encouraging as much independence as possible.

Learning outcome:
3. Use positive risk taking to support well-being, voice choice and control within the planning, support and delivery of reablement

Assessment criteria
3.1 Explain potential risks of the agreed activity to the individual and any informal carers
3.2 Support individuals to take part in agreed reablement activity whilst managing any potential risks
3.3 Continuously observe for risks and hazards; particularly related to the individual's condition, their environment and the equipment they use
3.4 Adapt support to manage change which may be encountered, according to organisational guidelines.

Range

Individuals conditions to include Management of individuals' pain or discomfort; changes in an individual's condition.

Manage change – actions to be taken in unforeseen circumstances, e.g. managing unexpected change in an individual's condition; changes in levels of co-operation/behaviour of the individual; changes in the medical status of the individual; an individual has fallen; an individual has died.
Unit 361 Providing reablement services
Supporting Information

Evidence requirements
- Observe support of the plans and delivery of those plans of the reablement process against care plan for at least one individual
- Evidence of documentation that is completed clearly, accurately, legibly
- See that the learner has utilised information in the 1 page profile (Individual profile/individual passport) – care needs to be taken to ensure that this is anonymised
- Witness testimonies to be used as supporting evidence

Glossary
Enable: – to provide someone with adequate power, means, opportunity, or authority (to do something

The individual is the person you support or care for in your work: this could be a child or an adult

Levels of help or support and assistance refers to graduated levels of assistance, from simple verbal reminders providing the lowest level of support to actual physical guidance providing the highest level. Assistance should be given flexibly according to the individual’s need for help, and should be focused on encouraging as much independence as possible

Lone working - It is the employee’s responsibility to follow the Lone Worker Policy. Lone working exposes staff to particular hazards therefore staff who are required to work alone or unsupervised for significant periods of time should be protected from risks to their health and safety. It is the employee’s responsibility to attend any training provided for them Personal Safety (on-line) every 2 years. Basic Break Away Skills available via a Risk Assessment approach.

Medication - Support the individual to understand safe practices in relation to their medication including storage and disposal and to check that medication is in date and rotate supplies where necessary

Recovery: building a meaningful and satisfying life, as defined by the person themselves, whether or not there are ongoing or recurring symptoms or problems. Recovery represents a movement away from pathology, illness and symptoms to health, strength and wellness

Manage situations – action to be taken if for example, there is an unexpected change in an individual’s condition; Changes in level of co-operation / behaviour of the individual; Changes in the medical status of the patient / an individual has fallen; an individual has died

Skills: For managing their day to day life may include those relating to preparing food; eating and drinking; dressing; bathing and washing; mobility; getting in and out of bed; getting around the home environment; cleaning; other domestic tasks
Related NOS

- FSN01 Contribute to promoting nutrition and hydration in health and social care settings
- SCDHSC0027 Support individuals in their daily living
- SCDHSC0229 Maintain safety and security when accessing individuals’ homes
- SCDHSC0343 Support individuals to live at home
- SCDHSC0370 Support the use of technological aids to promote independence
- SCDHSC0387 Work in partnership with carers to support individuals
- HSC 2028: Move and position individuals in accordance with their plan of care
- HSC 3001: Contribute to raising awareness of health issues
- SCDHSC3100 Participate in inter-disciplinary team working to support individuals
- HSC 2003: Provide support to manage pain and discomfort
- SCDLMCA4 Manage a dispersed workforce to meet the needs and preferences of individuals at home
- SS OP 3.8: Enable individuals to negotiate environments
- CH HM2 Provide a treatment and management plan to meet the needs of the client
- CM A4 Plan, implement, monitor and review therapeutic interventions with individuals who have a long term condition and their carers
- CM C2 Assess the healthcare needs of individuals with long term conditions and agree care plans
- CM C3 Enable individuals with long term conditions to make informed choices concerning their health and well-being
- PE8 Enable individuals to manage their defined health condition
- PHP07 Finalise and disseminate communications about health and well-being and/or stressors to health and well-being
- SS OP 3.3 Support individuals with multiple conditions and/or disabilities
- SCDHSC0344 Support individuals to retain, regain and develop skills to manage their daily living

Related legislation and guidance

- Social Services and Well Being (Wales) Act 2014
- CSSIW ‘Above and Beyond’ National review of domiciliary care in Wales 2016
- The Code of Professional Practice for Social Care Workers
- Well-being statement for people who need care and support and carers who need support WG 2016
- CC Wales – Care at Home - Challenges, Possibilities and Implications for the Workforce in Wales Final Report May 2010
- Declaration of rights for older people in Wales (2012)
- The Regulation and Inspection of Social Care (Wales) Act 2016
- Lifting Operations and Lifting Equipment Regulations (1992)
- www.nice.org.uk/guidance
- Lone Workers Policy & Guidelines 2010
• UK Rehabilitation Council  [www.rehabcouncil.org.uk]
• The Welsh Reablement Alliance
• The Rehabilitation Code, Rehabilitation Working Party  [www.iua.co.uk/rehabilitation]
• Back Care, charity for healthier backs  [www.backpain.org]
• Chartered Society of Physiotherapy  -  [www.csp.org.uk]
• College of Occupational Therapists -  [https://www.cot.co.uk]
• Disability Rights Commission -  [www.drc-gb.org]
• Health and Safety Executive -  [www.hse.gov.uk]
• The Code of Professional Practice for Social Care and associated resources
• Positive Approaches: Reducing Restrictive Practices in Social Care
• Manual Handling Guide -  [www.manualhandlingguide.co.uk]
• More Than Just Words and the Follow-on Strategic Framework for Welsh Language Services in Health and Social Care
• Maximising the potential of reablement  SCIE May 2013
• Allied Health Professions Stroke toolkit
• Making Every Contact Count  Public Health Wales  [http://www.wales.nhs.uk/sitesplus/888/page/65550]
• Code of Conduct for Healthcare Support Workers in Wales  NHS Wales 2011
• Falls in older people: assessing risk and prevention  NICE 2013
• Developing a Reablement Service for people with memory problems or a dementia living at home in Wales  SSIA  2017
Unit 365 Supporting individuals with sensory loss

Level: 3

Unit Summary: The unit provides learners with the knowledge, understanding and skills to provide support to individuals with sensory loss. The learner will be able to carry out assessments on individuals with sensory loss and act on the results.

Learning outcome:
1. Understand the main conditions and causes of sensory loss

Assessment criteria
1.1 Describe the main causes of sensory loss
1.2 Understand the prevalence of different forms of sensory loss among individuals in Wales
1.3 Identify the demographic factors that influence the incidence of sensory loss in the population

Learning outcome:
2. Assess individuals with sensory loss

Assessment criteria
2.1 Carry out assessments to identify the individual’s needs in relation to sensory loss
2.2 Review the outcomes of the assessment and take the next steps to respond to the identified need

Range
Assessment - internally with staff, externally with professionals

Learning outcome:
3. Support individuals with sensory loss to communicate

Assessment criteria
3.1 Use appropriate methods of communication with individuals with sensory loss
3.2 Support the individual to use the selected method of communication
3.3 Review the effectiveness of the selected method of communication with the individual
3.4 Adapt communication method according to the needs of the individuals

Range
**Communication - Speech**
- Sign Language
- Tactile alphabet
- Symbolic systems

**Non Formal communication**

**Learning outcome:**
4. Support individuals with sensory loss with their health and well-being

**Assessment criteria**
4.1 Support individuals with their physical health, social interaction and mental health
4.2 Provide information to individuals with sensory loss about community resources, services and support facilities that promote well-being
4.3 Promote **collaboration** with others to promote and support the health and well-being of individuals with sensory loss
4.4 Recognise and work with the individual's strengths and assets
4.5 Support individuals with sensory loss to build resilience

**Learning outcome:**
5. Understand change and transitions for individuals with sensory loss

**Assessment criteria**
5.1 Describe the possible changes and transitions for individuals with sensory loss
5.2 Understand the impact changes and transitions may have on individuals with sensory loss
5.3 Support individuals with sensory loss to navigate change and transitions

**Learning outcome:**
6. Use Aids and adaptations to support individuals with sensory loss

**Assessment criteria**
6.1 Support the use of a range of **aids and adaptations** for individuals with sensory loss
6.2 Evaluate the effectiveness of the range of aids and adaptations

**Range**
**Aids and adaptations**
- Technology based
- Personalised Communication support
- Adapations to the environment including Lighting, Contrast

**Learning outcome:**
7. Understand ways an individual with sensory loss can navigate their environment
Assessment criteria

7.1 Explain ways an individual can be supported to navigate their environment
7.2 Identify the resources available to support independent navigation
7.3 Describe the environmental barriers that could impact on an individual’s independent navigation

Learning outcome:

8. Support individuals with sensory loss to navigate their environment

Assessment criteria

8.1 Demonstrate sighted guide techniques and principles relevant to the individual’s setting
8.2 Use a range of techniques and principles to support individual’s to navigate their environment independently

Range
Setting – inside the home, outside the home
Unit 365 Supporting individuals with sensory loss
Supporting Information

Evidence requirements
- Observation of learners contributing to the support of individuals with sensory loss
- Observation of learners supporting the use of aids and adaptations, and other techniques with individuals with sensory loss
- Documentation and records must be completed clearly, accurately and legibly.
- Witness testimonies can be used to support evidence recorded by observation

Glossary
Sensory loss –
- People who are deaf
- People who are culturally deaf (British Sign language Users)
- People with hearing loss
- People with hearing loss who are losing their sight
- People who are deafened
- People with tinnitus
- People who are blind since birth
- People with sight loss at later stages
- People with sight loss who are losing their hearing
- People who are blind and partially sighted
- People who are congenitally deafblind
- People with acquired dual sensory loss
- People with loss of taste, smell and touch
- People with multi-sensory impairments

Carers – carers would include any person over 18 who provides or intends to provide care or support to another adult who needs care. This includes emotional care and support as well as physical.

Different aspects of well-being –
- Physical and mental health and emotional well-being
- Protection from abuse and neglect
- Education, training and recreation
- Domestic, family and personal relationships
- The importance of being able to participate and contribute to society
- Respecting and securing rights and entitlements
- Achieving social and economic well-being
- Having suitable living accommodation
• Control over day to day life and participating in work

**Related legislation and guidance**

- Social Services and Well Being (Wales) Act 2014
- CSSIW ‘Above and Beyond’ National review of domiciliary care in Wales 2016
- The Code of Professional Practice for Social Care Workers
- Well-being statement for people who need care and support and carers who need support WG 2016
- CC Wales – Care at Home - Challenges, Possibilities and Implications for the Workforce in Wales Final Report May 2010
- Declaration of rights for older people in Wales 2012
- The Regulation and Inspection of Social Care (Wales) Act 2016
- Health and Safety at Work Act 1974
- Lifting Operations and Lifting Equipment Regulations 1992
- Mental Capacity Act 2013
- [www.nice.org.uk/guidance](http://www.nice.org.uk/guidance)
- Lone Workers Policy & Guidelines 2010
Unit 368  

Undertaking stoma care

Level: 3

Unit Summary: This unit covers undertaking the care of a bowel/bladder stoma. This may be for individuals with new stomas or for individuals with established stomas who are unable to or need support to manage their own stoma care. Where the stoma is newly formed in the immediate post-operative period, these activities must be undertaken using aseptic techniques and following local guidelines and procedures.

Learning outcome:
1. Understand stoma care

Assessment criteria
1.1 Describe anatomy in relation to the position and function of different types of stoma
1.2 Identify sites for stomas
1.3 Describe the differences in stool consistency for different types of stoma
1.4 Describe personal responsibilities and accountability in relation to stoma care
1.5 Explain the importance of applying standard precautions for undertaking stoma care
1.6 Describe the potential consequences of poor practice when providing stoma care
1.7 Explain why an individual may have a stoma
1.8 Describe the effects of diet and mobility on stoma function

Range
Types of stoma - colostomy, ileostomy, ileal conduit, nephrostomy, urostomy

Learning outcome:
2. Understand how to maintain an individual’s dignity when providing stoma care

Assessment criteria
2.1 Describe potential concerns and worries individuals and their families/carers may have in relation to undertaking stoma care and how to overcome them
2.2 Explain the importance of exercising sensitivity to individuals perception of the situation and impact on their lives
2.3 Identify factors which may affect the level of stoma care assistance required

Range
Factors - age, medical condition, personal beliefs and preferences
Impact – diet, mental health
Learning outcome:
3. Understand factors impacting on stoma care provision

Assessment criteria
3.1 Describe potential adverse reactions which may occur during and following stoma care activities and how they should be dealt with
3.2 State the role of stoma care specialist practitioners and how they can be contacted
3.3 Explain potential consequences of contamination of stoma drainage systems
3.4 Identify equipment and materials required for undertaking stoma care
3.5 Identify types of stoma appliances available and their suitability for different types of stoma
3.6 Identify personal protective clothing and additional protective equipment which should be worn for own protection and that of the individual
3.7 Describe records required for clinical stoma care activities to be undertaken

Learning outcome:
4. Provide stoma care to individuals

Assessment criteria
4.1 Follow health and safety measures including precautions for infection prevention and control when providing stoma care
4.2 Confirm individual’s identity and obtain valid consent before carrying out stoma care activities
4.3 Provide individuals and their families/carers with relevant information, support and reassurance in a manner which is sensitive to their needs and concerns
4.4 Confirm all equipment and materials for stoma care are fit for purpose
4.5 Carry out stoma care following appropriate techniques, in line with manufacturer’s instructions
4.6 Work in a manner which optimises the patient’s comfort and dignity and minimises pain and trauma
4.7 Report conditions or behaviour which may cause adverse reactions to the activity and take the appropriate action
4.8 Dispose of equipment and soiled linen safely, hygienically and in ways which minimise the risk of cross-infection
4.9 Record outcomes of stoma care activity accurately using methods agreed in the organisation/setting
4.10 Report findings and/or issues to an appropriate member of the care team
4.11 Describe the basic clinical advice to provide to reduce the risk of post-operative hernias

Learning outcome:
5. Use person-centred care practices to support individuals in caring for their stomas

Assessment criteria
5.1 Encourage individuals to communicate any concerns about their stoma and its function
5.2 Monitor and report on individuals’ patterns of stoma function, consistency of body waste and changes that may have occurred
5.3 Encourage individuals to consume appropriate food and drink to maintain effective stoma function
5.4 Provide active support to individuals to manage their own stomas in a manner that promotes self-respect and self-esteem, maximises privacy and is consistent with care plans
5.5 Provide stoma care equipment at a time and place convenient to individuals’ needs and circumstances
5.6 Take appropriate action when stoma care equipment appears to be inappropriate or unsuitable
Unit 368  Undertaking stoma care
Supporting Information

Evidence requirements
- Learners should be able to evidence care for individuals that covers at least three different types of stoma.

Guidance for delivery
Application of learning from the core content of this qualification should be considered in the context of this topic area; in particular this should develop areas related to person-centred care.

Learners who complete this unit would benefit from having undertaken the Level 2 Continence unit prior to or alongside this unit.

Glossary
Active support - Active Support is a way for people to engage in meaningful everyday activities of their choice, with the amount of support they need.

Related legislation and guidance
- Social Services and Well-being (Wales) Act 2014 - Information and Learning Hub
  http://www.ccwales.org.uk/the-act/
- More Than Just Words and the Follow-on Strategic Framework for Welsh Language Services in Health and Social Care
  http://gov.wales/topics/health/publications/health/guidance/words/?lang=en
- Doing Well, Doing Better: Standards for Health Services in Wales (April 2010)
- Clinical Practice Guidelines for Ostomy Surgery - Samantha Hendren, M.D., M.P.H • Kerry Hammond, M.D. • Sean C. Glasgow, M.D. • W. Brian Perry, M.D. • W. Donald Buie, M.D. • Scott R. Steele, M.D. • Janice Rafferty, M.D.
- Incontinent urostomy - 06 March 2009 - Publisher: European Association of Urology Nurses (EAUN)
Unit 371  
Supporting individuals who misuse substances

Level: 3

Unit Summary: This unit aims to promote the knowledge and competence needed to support individuals who misuse substances, through the use of policies and legislation and the embedment of person-centred and rights-based approaches.

Learning outcome:
1. Understand substance misuse

Assessment criteria
1.1 Identify substance which is legal and illegal
1.2 Identify when substance use constitutes as misuse
1.3 Identify the different forms of substance individuals might use
1.4 Describe how these substances are used and their effects

Learning outcome:
2. Understand legislation and national policies relating to substance misuse

Assessment criteria
2.1 Describe policies and procedures relating to the supply and exchange of injecting equipment
2.2 Explain how legislation and local policy guidance underpin practice when working with individuals who misuse substances

Learning outcome:
3. Understand the factors that influence the support of individuals who misuse substances

Assessment criteria
3.1 Explain the effects that service providers can have over individuals who misuse substances
3.2 Explain the importance of providing choice when working with individuals who misuse substances

Learning outcome:
4. Understand how equality, diversity and inclusion impact on service provision for substance misuse
Assessment criteria
4.1 Identify potential prejudices and misconceptions in relation to individuals who misuse substances
4.2 Describe potential negative impacts prejudices and misconceptions can have on individuals who misuse substances

Learning outcome:
5. Understand person-centered approaches relating to the treatment of substance misuse

Assessment criteria
5.1 Describe how an individual's personal experiences can be used to support the development of a support plan relating to substance misuse

Range
Support plan – care plan, action plan

Learning outcome:
6. Understand impacts of substance misuse on health and well-being

Assessment criteria
6.1 Describe ways in which substance misuse can impact on aspects of well-being
6.2 Identify effects of drug and alcohol misuse within the family on individuals and significant others
6.3 List sources of support available for individuals affected by the substance misuse of others
6.4 Identify potential links between crime and antisocial behaviour and substance misuse

Learning outcome:
7. Provide substance misuse services to individuals

Assessment criteria
7.1 Apply principles of co-production when providing substance misuse services
7.2 Work in ways that promotes active participation and maintain individuals' dignity, respect, personal beliefs and preferences
7.3 Carry out substance misuse assessments for individuals
7.4 Support individuals in decision making and taking control over their lives to achieve what matters to them
7.5 Support individuals to engage in activities that are meaningful to them as identified in their substance misuse support plan
7.6 Support individuals to develop and maintain skills that promote active participation and independence
7.7 Use appropriate communication methods to support individuals who misuse substances

Range
Support plan – care plan, action plan

Learning outcome:
8. Understand how to support individuals when they have misused substances

Assessment criteria
8.1 Explain the procedures for the support of individuals who have misused substances and have become unwell and require further support
8.2 Explain how to support individuals in a manner appropriate to the substance used, the effect which the substance has had and the condition of the individual
8.3 Explain how to make the environment as safe as possible, including how and when to move individuals for their own safety
8.4 Explain how to support individuals to meet their own needs and requirements after the effects of the substance have worn off
8.5 Explain when and how to request further support and assistance
8.6 Describe how and when to report information about episodes of substance misuse to an appropriate person and record it in the required format
Unit 371  Supporting individuals who misuse substances

Supporting Information

Evidence requirements

- tbc
Unit 376a  Working with parents, families and carers

Level: 3

Unit Summary: This unit provides learners with the knowledge and practical skills required to work with families and carers. Learners will develop skills to support resilience, independence and skills to work with families with complex and multiple needs and multi-agency working

Learning outcome:
1. Promote rights and responsibilities related to working with families and carers

Assessment criteria
1.1 Describe the legislative and policy framework relating to your work
1.2 Promote practice that reflects the legislative and policy framework relating to your work

Learning outcome:
2. Understand and promote resilience when working with families and carers

Assessment criteria
2.1 Explain the term resilience
2.2 Describe the influencing factors and the impact of these on developing resilience on families and carers
2.3 Explain the importance of the interrelationship between an individual’s resilience and the resilience of their families and carers
2.4 Compare reports and research that have influenced evidence based practice/programmes that aim to promote resilience in individuals and their families and carers
2.5 Reflect on how reports and research on resilience have influenced your practice

Range
Influencing factors - positive and negative
Impact – cause and effect

Learning outcome:
3. Understand how to support families and carers with complex and multiple needs

Assessment criteria –
3.1 Describe the types of complex/and or multiple needs that some families experience
3.2 Explain organisations/settings policies and procedures to identify and assess family’s needs including escalating and de-escalating referrals
3.3 Identify the unique support needs that a family with complex/and or multiple needs might have
3.4 Explain the tools and models used to support families with complex/and or multiple needs
3.5 Identify the additional needs that young carers may have
3.6 Explain the impact that young carers may have on a child’s educational attainment and social development
3.7 Identify the additional needs families or carers who are experiencing poverty may have
3.8 Describe how to support families and carers to understand the impact of ACEs on their children
3.9 Explain the methods to use that can support families and carers living a lifestyle that is potentially harmful to them

Learning outcome:
4. Engage with families and carers to develop and maintain supportive and empowering relationships

Assessment criteria
4.1 Support and maintain engagement with families and carers according to your role and responsibilities whilst maintaining professional boundaries
4.2 Focus on individual's strengths when working with them and their families and carers
4.3 Provide an inclusive, accessible and flexible approach to your work with families and carers.

Learning outcome:
5. Support the role of families and cares as the primary carer

Assessment criteria
5.1 Use strategies to assist families and carers to overcome the challenges faced in their role as the primary carer
5.2 Interact with family and carers in a way that respects their culture, experiences and expertise
5.3 Access and share information and resources to support family and carers
5.4 Support families and carers to promote independence in the individuals in their care
5.5 Reflect on own practice in building and maintaining relationships with families and carers

Range
Resources – Training, transport, therapeutic services, financial support, equipment, support groups
Learning outcome:
6. Understand multi-agency working in relation to work with families and carers

Assessment criteria
6.1 Define the term ‘multi-agency working’
6.2 Describe the different types of multi-agency working, the roles within these agencies and identify those that work with families and carers
6.3 Identify the range of factors that influence multi-agency working
6.4 Identify the characteristics of effective multi-agency working

Learning outcome:
7. Engage in multi-agency working in relation to work with families and carers

Assessment criteria
7.1 Embed good practice recommendations from research into the impact of multi-agency working on outcomes for individuals and their families into your practice
7.2 Be able to work as part of a multi-agency team

Learning outcome:
8. Understand the support needed for young carers

Assessment criteria
8.1 Identify the additional needs a young carer may have
8.2 Explain the impact that young carers may have on a child’s educational attainment and social development
Unit 376a  Working with parents, families and carers
Supporting Information

**Evidence requirements**

- Observe the learner supporting the role of the family and carers as the primary carer
- Learners should demonstrate evidence that they have engaged in multi-agency working
- Learners should demonstrate good working relationships with at least 3 different families

**Glossary**

**Barriers** families and carers with specific needs may meet when accessing services - could include

- Physical barriers
- Social and/or emotional barriers
- Cultural barriers
- Language barriers
- Attitudes and misconceptions
- Practical barriers such as childcare

**Challenges facing families** - could include

- Social
- Emotional
- Cultural
- Financial
- Lifestyle choices

**Specific needs** - could include

- Young parents
- Non-resident parents
- Fathers including young fathers
- Adopted parents
- Foster carers including kinship carers
- Disabled parents
- Parents of disabled children
- Carers with mental health problems
- Minority ethnic parents
- Families with a parent in prison
- Families experiencing domestic abuse
Unit 392 Providing recognition, escalation and response to acute physical deterioration

Level: 3

Unit Summary: The purpose of this unit is to be able to work competently to contribute to the recognition, escalation and treatment of the individual with acutely deteriorating physical condition.

Learning outcome:
1. Demonstrate knowledge of acute deterioration, sepsis and acute kidney injury including the importance of early recognition, escalation, and treatment.

Assessment criteria
1.1 Understand the impact of sepsis, acute kidney injury (AKI) and other causes of deterioration upon the individual
1.2 Identify the importance of swift and efficient escalation of care
1.3 Explain the importance of quick and appropriate response to the acutely deteriorating patient
1.4 Understand that acute deterioration may be a natural part of the end of a person’s life.
1.5 Identify elements of and rationale for using the ‘Sepsis 6’ and ‘All Wales AKI’ care bundles and for implementation of advanced care plans.

Range

Learning outcome:
2. Use assessment skills, physical observations and basic tools to identify acute deterioration.

Assessment criteria
2.1 Demonstrate the ability to perform the sets of observations to calculate a NEWS
2.2 Calculate a National Early Warning score (NEWS) from the observations
2.3 Recognise normal and abnormal observation parameters
2.4 Calculate normal urine output and optimum level of hydration
2.5 Recognise abnormal urine output rate
2.6 Recognise cardiorespiratory arrest

Range

Observations include respiratory rate (RR), Oxygen saturations, Blood Pressure (BP), Heart Rate (HR), Level of consciousness and temperature.

NEWS is calculated from these observation parameters in a way that is standard in Wales and in much of the UK. Calculation is supported by tools such as the NEWS Card and App.
**Normal urine output rate** is calculated as approximately > 0.5 ml/kg. Calculation is supported by tools such as the Wee Wheel.

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**Learning outcome:**

3. Use basic risk stratification methods and communication tools in order to begin the escalation of care process.

**Assessment criteria**

3.1 Use standard tools to recognize abnormal physical signs and understand when specific escalation is appropriate
3.2 Demonstrate documentation of increased NEWS and associated level of risk
3.3 Use communication tools (i.e ESPAR) to escalate the appropriate level of care
3.4 Show ability to use tools to increase frequency and level of observations
3.5 Use a sepsis screening tool to identify level of risk

**Range**

**Methods/approaches/tools to include:**

- Calculation of NEWS and risk level
- Individual/carer/relative reported abnormality including ‘New confusion’
- Reduced urine output or change in urine colour.
- Sepsis screening tools and NEWS Wales App

**Escalation tools** include observation chart, standard operating procedure (SOP) and Situation, Background, Assessment, Recommendation (SBAR) forms

**Increasing level and frequency of observation** includes using fluid input/output charts

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**Learning outcome:**

4. Know how to respond or support the first responder in immediate treatment of the acutely deteriorating individual.

**Assessment criteria**

4.1 Quickly access the correct equipment for responding to sepsis and AKI.
4.2 Competently perform basic life support

**Range**

**Correct equipment** may include oxygen cylinder and mask, a sepsis response box, blood bottles, IV or SC fluids and appropriate paperwork depending upon local policies

**Advanced care planning** may include the use of End of Life pathways, DNACPR orders and ‘Goals of Care’ depending upon local policy
Unit 392  Providing recognition, escalation and response to acute physical deterioration

Supporting Information

Evidence requirements

- Observe demonstration of the skills detailed above in either simulation or workplace settings.
- Evidence of documentation that is completed clearly, accurately, legibly
- Witness testimonies to be used as supporting evidence

Related legislation and guidance

- National Institute for Health and Care Excellence. (July 2016) Sepsis: recognition, diagnosis and early management, Clinical Guidelines 51. NICE.
- http://gov.wales/about/cabinet/cabinetstatements/previous-administration/2016/mortalitydata/?lang=en
- Patient Safety Notice PSN 029 / March 2016 Standardising the early identification of acute kidney care. Welsh Government
- Public Service Ombudsman for Wales. 2016. Out of Hours: Time to Care
- Daniels R. Surviving the first hours in sepsis: getting the basics right (an intensivist’s perspective). J Antimicrob Chemother2011; 66(Suppl. 2), ii11—ii23.


Hancock, C. 2015 A national quality improvement initiative for reducing harm and death from sepsis in Wales. Intensive and Critical Care Nursing (2015) 31, 100–105

qSOFA, SIRS, and Early Warning Scores for Detecting Clinical Deterioration in Infected Patients Outside the ICU. (20 Sept 2016) Churpek et al Am J Respir Crit Care Med.


Unit 393  Providing care to adults with indwelling urinary catheters

Level: 3

Unit Summary: This unit will enable learners to develop the skills and knowledge to support individuals to safely maintain indwelling urinary catheters. Learners will consider guidelines on current best practice, personal responsibilities and accountability, anatomy and physiology as well as considerations of comfort, dignity, privacy and respect.

Learning outcome:
1. Understand current national and local guidelines in relation to caring for adults with indwelling urinary catheters

Assessment criteria
1.1 Describe current legislation, local and national guidance and protocols which relate to urinary catheter care
1.2 Identify boundaries of own role in relation to caring for adults with urinary catheters

Learning outcome
2. Understand urinary catheter care

Assessment criteria
2.1 Describe the anatomy and physiology of male and female urinary tracts
2.2 Explain differences between urethral and suprapubic catheterisation
2.3 Describe different types of urinary catheters
2.4 Describe reasons for urethral and suprapubic catheterisation for males and females
2.5 Identify equipment and materials used in urinary catheter care
2.6 Describe potential complications associated with urethral and suprapubic indwelling catheters
2.7 Describe signs and symptoms associated with complications
2.8 Describe actions that should be taken when complications associated with urethral and suprapubic indwelling catheters are identified
2.9 Explain the information that should be given to an individual about care of urinary catheters
2.10 Describe health and safety and infection control measures required when supporting an individual to care for and manage their urinary catheter
Range

**Different types of urinary catheters** – materials (e.g. rubber, plastic, silicone), frequency of change, colour

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**Learning outcome**

3. Support individuals with urinary catheter care

**Assessment criteria**

3.1 Confirm individuals identity and gain informed consent
3.2 Apply standard precautions for infection prevention and control, and health and safety measures
3.3 Prepare required equipment prior to caring for the urinary catheter
3.4 Maintain the individuals comfort, dignity and privacy throughout
3.5 Clean meatus appropriately
3.6 Encourage individuals to participate in urinary catheter care activity taking into account their abilities, personal beliefs and preferences
3.7 Use or support individuals to use catheter care equipment and/or materials in line with manufacturer’s guidelines and agreed ways of working
3.8 Observe the condition of the individual throughout the process, reporting concerns in line with organisation/setting procedures
3.9 Dispose of waste materials safely and hygienically
3.10 Encourage individuals to undertake hand hygiene practices
3.11 Record support provided in line with organisation/setting procedures
Unit 393 Providing care to adults with indwelling urinary catheters

Supporting Information

Evidence requirements
- Observe the learner carrying out catheter care on a minimum of three occasions
- Evidence of documentation completed must be recorded clearly, accurately and legibly in line with organisation/setting policies.

Glossary
Meatus – passage/opening leading to the inside of the body e.g. Urethral meatus, abdominal wound

Related legislation and guidance
- Social Services and Well-being (Wales) Act 2014
- More Than Just Words and the Follow-on Strategic Framework for Welsh Language Services in Health and Social Care
- Doing Well, Doing Better: Standards for Health Services in Wales (April 2010)