

Qualifi Level 3 Diploma in Health and Social Care

Specification (For Centres)
January 2020

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About QUALIFI

QUALIFI provides academic and vocational qualifications that are globally recognised. QUALIFI's commitment to the creation and awarding of respected qualifications has a rigorous focus on high standards and consistency, beginning with recognition as an Awarding Organisation (AO) in the UK. QUALIFI is approved and regulated by Ofqual (in full). Our Ofqual reference number is RN5160.

Ofqual is responsible for maintaining standards and confidence in a wide range of vocational qualifications. QUALIFI is also a signatory to BIS international commitments of quality.

As an Ofqual recognised Awarding Organisation, QUALIFI has a duty of care to implement quality assurance processes. This is to ensure that centres approved for the delivery and assessment of QUALIFI's qualifications and awards meet the required standards. This also safeguards the outcome of assessments and meets national regulatory requirements.

QUALIFI's qualifications are developed to be accessible to all learners in that they are available to anyone who is capable of attaining the required standard. QUALIFI promotes equality and diversity across aspects of the qualification process and centres are required to implement the same standards of equal opportunities and ensure learners are free from any barriers that may restrict access and progression.

QUALIFI's policy document for learners with specific requirements or who need special consideration is available for centre reference. Centres are responsible for reviewing the applicant's ability to complete the training programme successfully and ultimately achieve a qualification. The initial assessment by the centre, will need to take into account the support that is readily available or can be made available to meet individual needs as appropriate. The centre must also consider prior learning and qualifications and they must be in a position to make a judgement on the learner's entry requirements.

Supporting Diversity

QUALIFI and its partners recognise and value individual difference and have a public duty to promote equality and remove discrimination in relation to race, gender, disability, religion or belief, sexual orientation and age.

Learner Voice

Learners can play an important part in improving the quality of this course through the feedback they give. In addition to the ongoing discussion with the course team throughout the year, there are a range of mechanisms for learners to feed back about their experience of teaching and learning. This can include questionnaires and surveys to allow both centres and QUALIFI to understand how we can improve the learner experience.

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1 Introduction

1.1 Why Choose QUALIFI Qualifications?

QUALIFI qualifications look to provide a realistic and broad opportunity for learners seeking career and professional development. They will support learners in realising their potential and provide clear objectives.

These objectives are to:

- provide career path support to learners who wish to develop their management skills, enterprise capabilities and opportunities in their chosen sector
- improve learner understanding of any given business environments and organisations and how they are managed and developed
- develop skills and abilities in learners to support their professional development.

Our qualifications provide a rich mix of disciplines and skills development opportunities. Learners will gain insight into the functioning, objectives and processes of organisations, appreciating their diversity and the influences and impact of external forces on them. The fast-changing and complex business environment and different organisational ability to stay resilient and respond positively to change and opportunities will be explored.

Our qualifications will develop learner ability to:

- apply analytical and evaluative techniques and to enhance those skills
- investigate issues and opportunities
- develop their awareness and appreciation of managerial, organisational and environmental issues
- use management techniques and practices in imaginative ways
- make use of relevant information from different sources
- develop and encourage problem solving and creativity to tackle problems and challenges
- exercise judgement and take responsibility for decisions and actions
- develop the ability to recognise and reflect on personal learning and improve their personal, social and other transferable skills.

1.2 Employer Support for the Qualification Development

The development of these qualifications has been initiated and guided by discussions and idea sharing with a range of employers, providers and existing centres demonstrating the rigor, validity and demand for the qualification.

Discussions and feedback have been taken throughout the development of the qualifications on content, the potential learner audience for the qualification and assessment methods, ensuring a valuable experience and a recognised set of skills, knowledge and understanding is realised.

1.3 Qualification Title and Code

This qualification has been accredited to the Regulated Qualification Framework (RQF) and has its own unique Qualification Accreditation Number (QAN). This number will appear on the learner's final certification document. Each unit with the qualification has its own RQF code. The QAN for this qualification is as follows:

Qualifi Level 3 Diploma in Health and Social Care (603/0819/9)

1.4 Awarding Organisation

QUALIFI LTD

2 Programme Purpose

2.1 Reasons for the Qualification

The qualification has been created to develop and reward the health and social care workers of today and the future, and to continue to bring recognition and professionalism to the health and social care sector.

We hope that centres and learners take the opportunity to learn a great deal from this programme that will provide relevant new skills and qualities.

It is envisaged that this programme will encourage both academic and professional development so that your learners move forward to realise not just their own potential but also that of organisations across a broad range of sectors.

The Diploma is accredited at Level 3 with a total equivalence of 60 credits. It is envisaged that learners completing the Level 3 Diploma will progress to the QUALIFI Level 4 Diploma in Health and Social Care.

2.2 Rationale for the Diploma

The rationale of the programme is to provide a career path for learners who wish to develop their knowledge and understanding of care within the health and social care sector. The outcome of the Diploma, which is a recognised UK Qualification, is for learners to develop the skills required by organisations globally.

All QUALIFI programmes create learning that advances the thought leadership of organisations, offering conceptual and practical insights that are applicable in the companies of today and tomorrow.

Furthermore, we look to develop the team leaders, managers and leaders of the future through the creation and delivery of learning appropriate for industry.

The qualification will:

- prepare learners for employment; and
- support a range of roles in the workplace.

The qualification provides a specialist work-related programme of study that provides breadth and depth of knowledge and understanding, along with practical skills required in the health and social care sector. It also allows specialist development through the optional units.

The qualification will help to prepare care professionals with a greater understanding of the health and social care sector. The qualification provides a generic core of mandatory units that apply to all health and social care contexts; and allows learners to select specialisms in the Optional units.

The qualification is suitable for part-time learners in the workplace but equally appropriate for full-time learners who can also participate in formal work placements or part-time employment. Learners can progress into or within employment in the health and social care sector, either directly on achievement of the awards or following further study to QUALIFI Level 4 Diploma in Health and Social Care degree level.

2.3 Aims of the Diploma

The programme provides the opportunity for individuals to forge a career in health and social care by seeking a greater knowledge and understanding of the sector, and to support the individual's development into senior positions. The course aims for the following:

- To equip individuals with the knowledge, understanding and skills required for success in employment in the health and social care sector
- To enable progression to the first year of a degree or related professional qualification

- To provide specialist study relevant to individual vocations and environments in which learners are currently working, or to which learners are aiming to work, within the health and/or social care sector
- To develop learners' ability to contribute positively to good practice in the health and social care environment through effective use and combination of the knowledge and skills gained in the qualifications
- To develop skills and techniques, personal qualities and attributes essential for successful performance in working life and thereby enabling learners to make an immediate contribution to employment.

2.4 Learning Outcomes of the Diploma

Learners studying for the Diploma in Health and Social Care will be expected to develop the following skills during the programme of study:

- 1. The ability to read and use appropriate literature with a full and critical understanding the ability to think independently and solve problems
- 2. Apply subject knowledge and understanding to address familiar and unfamiliar problems
- 3. Recognise the moral and ethical issues of health and social care practice and research; appreciating the need for ethical standards and professional codes of conduct
- 4. An appreciation of the interdisciplinary nature of health and social care service provision
- 5. Capacity to give a clear and accurate account of a subject, in a mature way and engage in debate and dialogue both with specialists and non-specialists
- 6. Transferable skills and knowledge that will enable individuals to meet changing
- 7. To motivate individuals to progress to further professional development through future study or as part of their chosen career.

These are the overall learning outcomes in line with a Level 3 qualification. The learning outcomes for each of the units are identified in Appendix 1 within the descriptors.

3. Delivering the Qualification

3.1 Quality Assurance Arrangements

All centres go through an approval process to be recognised as an approved centre. Centres must have in place qualified and experienced tutors. The experience of tutors and their ability to support learners will be important. Centres must commit to working with QUALIFI and its team of Quality Reviewers/External Verifiers. Continuing professional development (CPD) for tutors is also required.

Approved centres will be monitored by QUALIFI External Quality Reviewers (EQAs) to ensure that learners are provided with appropriate learning opportunities and guidance. EQAs will ask to see and discuss a centre's formative assessment plans. The suitability of these plans will be agreed with the centre.

QUALIFI's guidance on invigilation, preventing plagiarism and collusion will apply to centres. QUALIFI Quality Reviewers/External Verifiers will monitor centre compliance. For assessment purposes, unless otherwise agreed, QUALIFI:

- appoints assignment setters, markers and moderators
- sets and agrees assignments
- marks and moderates' assignments
- agrees the final mark and issues certificates.

QUALIFI's 'Handbook on Guidance and Requirements for Assessment and Marking' will apply to its assignment setters, markers and moderators.

3.2 Access to Study

All learners should be invited to an induction event to be introduced to the programme in detail through presentations and discussions with tutors and the centre support team.

All learners should be issued with the Diploma handbook, a timetable and meet with their personal tutor and fellow learners. Centres should assess learners carefully to ensure that they take the right qualification and the right pathways or optional units, to allow them to progress to the next stage.

Centres should check the qualification structures and unit combinations carefully when advising learners. Centres will need to ensure that learners have access to a full range of information, advice and guidance in order to support them in making the necessary qualification and unit choices. When learners are recruited, centres need to give them accurate information on the title and focus of the qualification for which they are studying.

All learners must be registered with QUALIFI within 30 days of centre registration.

3.3 Entry Criteria

QUALIFI Level 3 Diploma in Health and Social Care:

The qualifications has been designed to be accessible without artificial barriers that restrict access and progression. Entry to the qualification will be through centre interview and learners will be expected to hold the following:

- qualifications at Level 2 and/or;
- work experience in the health and social care sector and demonstrate ambition with clear career goals;
- a Level 3 qualification in another discipline and want to develop their careers in health and social care.

In certain circumstances, learners with considerable experience but no formal qualifications may be considered, subject to interview and being able to demonstrate their ability to cope with the demands of the programme.

In the case of applicants whose first language is not English, then IELTS 5 (or equivalent) is required. International Qualifications will be checked for appropriate matriculation to UK Higher Education post-graduate programmes. The applicants are normally required to produce two supporting references, at least one of which should preferably be academic.

4 Structure of the Qualification

4.1 Units, Credits and Total Qualification Time (TQT)

The QUALIFI Diploma in Health and Social Care is a Level 3 qualification made up of 60 credits.

All units are 10 credits in value. These units have been designed from a learning time perspective and are expressed in terms of **Total Qualification Time (TQT)**. TQT is an estimate of the total amount of time that could reasonably be expected to be required for a learner to achieve and demonstrate the achievement of the level of attainment necessary for the award of a Qualification. TQT includes undertaking each of the activities of Guided Learning, Directed Learning and Invigilated Assessment. Each 10-credit unit approximates to a TQT of 100 hours incorporating 50 hours of GLH.

Examples of activities which can contribute to Total Qualification Time include:

- guided learning
- independent and unsupervised research/learning
- unsupervised compilation of a portfolio of work experience
- · unsupervised e-learning
- unsupervised e-assessment
- unsupervised coursework
- watching a pre-recorded podcast or webinar
- · unsupervised work-based learning.

Guided Learning Hours (GLH) are defined as the time when a tutor is present to give specific guidance towards the learning aim being studied on a programme. This definition includes lectures, tutorials and supervised study in, for example, open learning centres and learning workshops. Guided Learning includes any supervised assessment activity; this includes invigilated examination and observed assessment and observed work-based practice.

Some examples of activities which can contribute to Guided Learning include:

- classroom-based learning supervised by a tutor
- work-based learning supervised by a tutor
- live webinar or telephone tutorial with a tutor in real time
- e-learning supervised by a tutor in real time

All forms of assessment which take place under the immediate guidance or supervision of a tutor or other appropriate provider of education or training, including where the assessment is competence-based and may be turned into a learning opportunity.

4.2 Qualification Structure

There are mandatory and optional units for this qualification. All units cover a number of topics relating to learning outcomes. Each unit has the equivalency of 10 credits.

Learners are required to complete six units to achieve the 60 credits required to gain the Level 3 Diploma in Health and Social Care. Learners will be expected to attend lectures and workshops that will introduce the subject matter. Formative assessments (weighted at 0%) may be used in lectures or tutorials to check knowledge and understanding of specific topics and subject areas. Units require reflective exam sets and/or summative assessments for marking.

QUALIFI Level 3 Diploma in Health and Social Care comprises seven units in total.

The Diploma requires four mandatory units and a minimum of two optional units.

Unit Reference	Mandatory Units	Level	TQT	Credits
L3HSC01	An Introduction to Health and Social Care	3	100	10
L3HSC02	Communication for Health and Social Care	3	100	10
L3HSC03	Promoting Health in the Population	3	100	10
L3HSC04	Person Centred Care	3	100	10
Unit Reference	Optional Units	Level	TQT	Credits
L3HSC05	Understanding Diabetes Care	3	100	10
L3HSC06	Understanding Stroke care	3	100	10
L3HSC07	Understanding Dementia care	3	100	10

4.3 Progression and Links to other QUALIFI Programmes

Learners completing the QUALIFI Level 3 Diploma in Health and Social Care can progress to:

- the QUALIFI Level 4 Diploma in Health and Social Care, or
- the first year of undergraduate study in health and social care; or
- directly into employment in an associated profession.

4.4 Recognition of Prior Learning

Recognition of Prior Learning (RPL) is a method of assessment (leading to the award of credit) that considers whether learners can demonstrate that they can meet the assessment requirements for a unit through knowledge, understanding or skills they already possess, and so do not need to develop through a course of learning.

QUALIFI encourages centres to recognise learners' previous achievements and experiences whether at work, home or at leisure, as well as in the classroom. RPL provides a route for the recognition of the achievements resulting from continuous learning. RPL enables recognition of achievement from a range of activities using any valid assessment methodology. Provided that the assessment requirements of a given unit or qualification have been met, the use of RPL is acceptable for accrediting a unit, units or a whole qualification.

Evidence of learning must be valid and reliable. For full guidance on RPL please refer to QUALIFI's policy document on RPL.

5 Guidance to Teaching and Learning

To ensure consistency and quality of delivery amongst centres, QUALIFI has outlined a number of policies and procedures required to ensure the very best standards are available to learners. These include:

- expertise of staff
- learning and teaching methods
- study skills
- learning resources
- personal development planning
- career opportunities.

The policies and procedures are available on request to all accredited centres or to those wishing to apply for accreditation to deliver QUALIFI qualifications.

6 Learner Support

Centres should continue to support learners and encourage appropriate behaviour. To ensure consistency and quality of delivery amongst centres QUALIFI, has outlined a number of policies and procedures to ensure the very best standards are available to learners. These include:

- learners with disabilities
- health and safety
- conduct
- progression
- · weekly timetable/attendance requirements.

The policies and procedures are available on request to all accredited centres or to those wishing to apply for accreditation to deliver QUALIFI qualifications.

6.1 Data Protection

All personal information obtained from learners and other sources in connection with studies will be held securely and will be used during the course and after they leave the course for a variety of purposes. These should be all explained during the enrolment process at the commencement of learner studies. If learners or centres would like a more detailed explanation of the partner and QUALIFI policies on the use and disclosure of personal information, please contact QUALIFI via email support@QUALIFI-international.com

7. Assessment

These qualifications are vocational as they can support a learner's career progression. To meet QUALIFI's aim to provide an appropriate assessment method each unit will be assessed through tasks that will be written in a way to make them realistic 'work-related' tasks wherever possible. Learners will need to demonstrate knowledge, understanding and. Original thought, problem solving and recommendations on actions will also be asked for from learners where appropriate for the unit. Intellectual rigour will be expected appropriate to the level of the qualification.

Assignments will contain a question strand for each of the given unit's learning outcomes. The assignment tasks will address the LO (learning outcome) and AC (assessment criteria) requirements. Within assignments there will always be requirements for learners to engage with important and relevant theory that underpins the subject area.

The assignment questions will require learners to draw on real organisations to illustrate their answers. To support this activity during the programme of learning, centres are required to make sure that they include case studies of relevant organisations and, wherever possible, facilitate incompany opportunities for learners to undertake research and investigation projects and/or support the organisation with various tasks. Mature and part-time learners will ideally be able to draw on their personal work experience too.

Sample assessments and marking scheme are available on request as part of the Qualification Specification supplied to centres.

QUALIFI has an assessment policy and procedure documents that are available to all centres delivering this qualification. QUALIFI's 'Handbook on Guidance and Requirements for Assessment and Marking' covers the following:

- assessment strategy
- · assessment arrangements for learners with a disability
- verification
- marking scheme/pass mark
- deferral after valid mitigating circumstances/referral after failure
- dealing with difficulties in meeting assessment deadlines
- late submissions
- assessment boards/appeals
- cheating and plagiarism
- referencing
- · confidential material
- submission.

8. Course Regulations

8.1 Course Requirements

Learners must complete all units and pass the appropriate mark to receive the full Diploma Award.

QUALIFI will issue certificates to all successful learners through the registered centres.

8.2 Classification of Awards

Where a candidate has achieved an overall average mark of at least 70% from all the units, QUALIFI may award a Distinction, although offering such a grade to individual candidates is at the discretion of QUALIFI and is not normally given after any successful referral attempts.

Decisions about the overall classification of awards are made by QUALIFI through the application of the academic and relevant course regulations. It is based on the Average Percentage Mark (APM) or, at the discretion of QUALIFI, on the basis of your overall profile and performance subject to the minimum requirements.

8.3. Learner Voice

Learners can play an important part in improving the quality of this course through the feedback they give. In addition to the ongoing discussion with the course team throughout the year, there is a range of mechanisms for learners to feed back about their experience of teaching and learning.

8.4 Complaints

QUALIFI recognises that there may be occasions when learners and centres have cause for complaint about the service received. When this happens, the complaints procedure is intended to provide an accessible, fair and straightforward system that ensures as an effective, prompt and appropriate response as possible.

For more information on our formal complaints procedure please contact in the first instance or email: support@QUALIFI-international.com

9 Equality and Diversity

QUALIFI recognises that discrimination and victimisation are unacceptable and that it is in the interests of QUALIFI employees to utilise the skills of the total workforce. It is our aim to ensure that no employee or other representative of QUALIFI receives less favourable facilities or treatment (either directly or indirectly) in recruitment or employment on grounds of age, disability, gender/gender reassignment, marriage/civil partnership, pregnancy/maternity, race, religion or belief, sex, or sexual orientation (protected characteristics).

Our aim is that our workforce will be truly representative of all sections of society and each employee feels respected and able to give their best. We oppose all forms of unlawful and unfair discrimination or victimisation. To that end the purpose of this policy is to provide equality and

fairness for all.

Our staff will not discriminate directly or indirectly, or harass customers or clients because of age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, and sexual

orientation in the provision of QUALIFI's goods or services.

This policy and the associated arrangements shall operate in accordance with statutory requirements, particularly the Equality Act 2010 https://www.gov.uk/equality-act-2010-guidance. In addition, full account will be taken of any guidance or codes of practice issued by the Equality and Human Rights

Commission, any government departments, and any other statutory bodies.

The policy document will be monitored and reviewed annually and can be downloaded from our

website or by making contact with QUALIFI.

10. Further Professional Development and Training

QUALIFI supports UK and international customers with training related to our qualifications. This support is available through a choice of training options offered through publications or through customised training at your centre.

The support we offer focuses on a range of issues including:

planning for the delivery of a new programme

planning for assessment and grading

developing effective assignments

building your team and teamwork skills

developing learner-centred learning and teaching approaches

building in effective and efficient quality assurance systems.

You can request customised training through your registered centre in the first instance. If you need to contact QUALIFI directly:

Our customer service number: +44 (0)115 888 2323 or +44 (0)208 123 2946

Or email: support@QUALIFI-international.com

Website: www.QUALIFI.net www.QUALIFI-international.com

Appendix 1: Unit Descriptors

Unit HSC301: An introduction to Health and Social Care

Unit code: D/615/3823

RQF level: 3

Aim

Learners will develop an understanding of what it is like to work in health and social care, including the responsibilities relating to maintaining the health and safety of and safeguarding the rights of individuals in their care. They will understand the need to always be aware of issues around data protection, confidentiality and possibilities for discriminatory practice.

Learners will come to understand the role of regulatory bodies and their impact on those work in the health and social care sector as well as the monitoring processes in place to ensure the delivery of high-quality care.

Learners will begin to examine the different professionals who may be involved in the delivery of care to an individual, what their roles are and how and where these services are delivered. Learners will also examine potential barriers to inter-professional working and the sharing of information and the effect this can have on the individual receiving care.

The assessment will be a written assignment using case studies of real-life scenarios that learners may come across in health and social care. Each learning outcome will have a separate case study to allow learners to display an in-depth knowledge of each outcome.

Learning Outcomes. To achieve this unit a learner must be able to: 1.Understand the main roles and responsibilities of health and social care workers when delivering care.	Assessment Criteria: Assessment of these outcomes demonstrates a learner can: 1.1 Explain how health and social care professionals protect individuals in their care. 1.2 Discuss the mechanisms for reporting poor practice in health and social care.
2. Understand the roles of regulatory and professional bodies in relation to the delivery of high-quality care.	2.1 Explain the roles of regulatory bodies that inspect health and social care provision.2.2 Explain the roles of professional bodies in regulating professions within health and social care.
3. Evaluate the role and responsibilities of the inter-professional team in delivering health and social care.	3.1 Explain the roles and responsibilities of the inter-professional team in meeting care needs. 3.2 Assess the difference between multidisciplinary and inter-professional team working. 3.3 Assess the potential barriers to team working and how they could be overcome.

Indicative Content

Learners must cover the following topics:

1. Understand the main roles and responsibilities of health and social care workers when delivering care:

- What are their organisation's policies and procedures?
- Importance of providing dignified personal care
- · How to assess needs of individuals and joint care planning with individual and family
- How to encourage independence
- Promoting anti-discriminatory practices
- Empowering individuals
- How do we ensure safety for both clients and staff?
- Ensuring confidentiality and data protection, codes of practice and legislation.

2. Understand the roles of regulatory and professional bodies in relation to the delivery of highquality care.

- Care Quality Commission (CQC), National Institute for Health and Care Excellence (NICE) and what they do
- Professional body regulation, e.g. NMC, HCPC etc. and how they work
- The organisation's role in helping their employees meet standards, implementing codes of practice, CPD etc.

3. Evaluate the role and responsibilities of the inter-professional team in delivering health and social care:

- What is the difference between inter-professional and multidisciplinary teams?
- Why do we need inter-professional working and what are the benefits for individuals receiving care?
- Barriers to inter-professional working and how can they be overcome
- Involving everyone in care decisions, the holistic approach to care delivery
- Learners must be exposed to the relevant legislations/ resources covering these topic areas.

Delivery Guidance

The course will be delivered by a blended learning approach where learners will attend face-to-face sessions but will also be expected to work independently to research information around the topic areas. Learners will need to spend 3 hours a week in face-to-face classroom activity but an additional 6 – 7 hours per week in directed and independent study activity.

Learners can be given access to resources for each of the sessions via a Virtual Learning Environment (VLE). This means that learners can access resources to study at any time that is convenient to them. They can go back and look at resources used in the classroom and have online chats with their study groups and lecturers to enhance deep learning of the topic.

The face-to-face sessions will be interactive with group activities, peer learning and presentations. Ongoing assessment of learning via question and answer, quizzes and formative assessments will ensure that learners have understood the topic and are ready to move onto new areas.

Tutors will provide one-to-one feedback to learners on their progress towards summative assessment submission, feeding back on draft work before final submission.

Learners will be encouraged to form study groups to support each other and the VLE will facilitate this remotely.

Assessment Guidance

This unit will be assessed via a written piece of work. A workbook will be used where learners are given case studies relevant to each of the learning outcomes. Learners will be tasked with answering questions about the case study that will cover the individual assessment criteria. This means that learners will be exposed to real -life scenarios from health and social care.

The total word count will be equivalent to 2,500 words and learners will be given the marking criteria to show what needs to be achieved to receive higher grades of merit and distinction for their work, which will involve deeper analysis and evaluation of the topics covered in their answers.

Suggested Resources

www.communitycare.co.uk www.england.nhs.uk https://www.nice.org.uk/ www.cqc.org.uk/

Cribb, A. and Gerwitz, S. (2015) Professionalism- Key themes in Health and Social care, Polity Press

Glasby, J. and Dickinson, H. (2008) Partnership Working in Health and Social Care. Polity Press

Unit HSC302: Communication for Health and Social Care

Unit code: H/615/3824

RQF level: 3

Aim

Being able to communicate effectively is a prerequisite for any positive interaction within the health and social care sector, be this with a service user, carer, colleague or external agency. Within the health and social care sector there are methods of communication that learners need to be able to use correctly and effectively.

In this unit learners will look at the variety of communication methods used within health and social care practice. They will outline the principles of effective communication and how to identify and overcome common barriers to effective communication.

Learners will become familiar with the different methods of oral and written communication used, such as handing over information to colleagues face-to-face or by telephone and the benefits and potential weaknesses of each. They will also learn how to produce and present an oral presentation, which is a very useful skill within the health and social care sector. They will also cover how to present written information in a formal way via care plans, reports etc.

Finally, learners will look at the range of ICT innovations within the health and social care sector by which service user information can be communicated within the team and to external partners in the individual's care. This will include issues around data protection and confidentiality.

Learning Outcomes. To achieve this unit a learner must be able to:	Assessment Criteria: Assessment of these outcomes demonstrates the learner can:
1. Understand the role of effective	1.1 Describe the methods used to
communication in health and social care	communicate in health and social care.
practice.	 1.2 Assess the strengths and weaknesses of both formal and informal communication methods. 1.3 Explain the principles of effective communication. 1.4 Explain potential barriers to communication and how they can be overcome.
2. Communicate information in a variety of	2.1 Discuss the different methods of oral and
formats.	written communication used in health and
	social care practice.
	2.2 Produce and deliver an oral presentation
	to an audience at the appropriate level.
	2.3 Produce a written communication that
	is appropriate for your organisational role.

3. Understand the importance of ICT in communicating in health and social care practice.

3.1 Assess the benefits and potential hazards of using ICT to communicate information in health and social care practice for organisations.

3.2 Discuss the benefits and potential hazards of using ICT to communicate information for service users

3.3 Explain the issues around data protection and how it is implemented in health and social care practice.

Indicative Content

1: Understand the role of effective communication in health and social care practice:

- Methods of communication and an understanding of basic models of communication used in health and social care
- Non-verbal, verbal, visual, face-to-face, formal and informal, vertical and horizontal, internal and external
- When to choose different communication methods
- Differences between communication channels in large and small organisations
- The strengths and weaknesses of different communication methods
- Principles of effective communication, clarity of message, and language, choice of channel, listening to response.

2: Communicate information in a variety of formats:

- Styles and methods of oral communication, conversation, formal presentation, discussion groups, case discussions, interviews, formal and informal, adapting communication methods for the audience, the use of non-verbal cues to strengthen the message
- Producing and delivering an oral presentation, using appropriate software, producing handouts and answering questions. Show subject knowledge, adapting answers to audience
- Looking at written styles in health and social care, note writing following care intervention, care plans, report writing for case discussions. Letters and e-mails. Formal and informal written communication. Integrating images, tables and graphs into reports.

3: Understand the importance of ICT in communicating in health and social care practice

- Use of ICT in health and social care
- Use of ICT for benefits of carers and organisations, social media, email, websites, presentation software
- Use of ICT for service users with communication needs, communication aids available for various disabilities to promote communication
- The use of tele-medicine
- Issues of data protection and confidentiality.

Delivery Guidance

The course will be delivered by a blended learning approach where learners will attend face-to-face sessions but will also be expected to work independently to research information around the topic areas. Learners will need to spend 3 hours a week in face-to-face classroom activity but an additional 6 – 7 hours per week in directed and independent study activity.

Learners can be given access to resources for each of the sessions via a Virtual Learning Environment (VLE). This means that learners can access resources to study at any time that is convenient to them. They can go back and look at resources used in the classroom and have online chats with their study groups and lecturers to enhance deep learning of the topic.

The face-to-face sessions will be interactive with group activities, peer learning and presentations. Ongoing assessment of learning via question and answer, quizzes and formative assessments will ensure that learners have understood the topic and are ready to move onto new areas.

Tutors will provide one-to-one feedback to learners on their progress towards summative assessment submission, feeding back on draft work before final submission.

Learners will be encouraged to form study groups to support each other and the VLE will facilitate this remotely.

Assessment Guidance

The learners will be assessed on each of the learning outcomes in a different way, mirroring the diversity of communication methods used in health and social care.

LO1 and linked assessment criteria will be assessed by the production of a short-written assignment covering all four assessment criteria

LO2 and linked assessment criteria will be assessed by the learner producing and presenting an appropriate 10 min presentation to an audience and answering any related questions, demonstrating knowledge of the subject area. The learner will also provide a written report or care plan that has been produced in the workplace with appropriate validation from the workplace that this is the learner's work.

LO3 and linked assessment criteria will be assessed via a professional discussion with the learner carried out by an assessor from the college. Questions used will be standardised and the discussion will be recorded.

Suggested Resources

McCorry, L.K and Mason, J. (2011) Communication skills for Healthcare Professionals Moss, B. (2015) Communication Skills for Health and Social Care. Sage Publications Taylor, J. (2003) Study Skills in Healthcare. Nelson Thornes

www.RNIB.org.uk

Unit HSC303: Promoting Health in the Population

Unit code: K/615/3825

RQF level: 3

Aim

Promoting health is a responsibility of everyone who works in health and social care. It is also an important government agenda. So, how do we as individuals promote the health of our service users and the government promote health within the wider population?

In this unit learners will look at how the government, through organisations such as Public Health England, tries to improve the health of the population, including the policies and activities the government undertakes to improve the health of the nation. Learners will also look at their role in monitoring the population's health, including the factors can affect health and the government's role in trying to reduce these factors.

From an individual service user's view, learners will examine the role of health promotion and some common approaches and models used by practitioners to promote and protect the health of the communities they serve. Learners will explore how to run a small health campaign and how to overcome barriers to participation.

It is important that everyone working in health and social care sectors supports service users to maintain as healthy a lifestyle as possible to minimise the development of future health conditions., including service users with long-term conditions.

Learning Outcomes. To achieve this unit a learner must be able to:	Assessment Criteria: Assessment of these outcomes demonstrates the learner can:
1.Understand how public health policy is developed to improve the health of the population.	1.1 Discuss the process for developing a public health policy. 1.2 Describe the potential groups who can influence public health policy. 1.3 Explain how the government monitors the health of the nation.
2.Understand the factors that can affect health in the population.	2.1 Assess the factors affecting health in the population.2.2 Discuss the potential benefits of improving health in the population.
3. Understand how health promotion can influence individuals to adopt healthy lifestyles.	3.1 Evaluate two models commonly used in health promotion. 3.2 Assess approaches commonly used to increase public awareness.
4. Develop and analyse the effectiveness of a health promotion campaign.	4.1 Produce health promotion material for a target audience.4.2 Deliver a small health promotion campaign.

4.3 Analyse the effectiveness of the health		
promotion campaign.		
4.4 Explain the potential barriers to		
participation in health promotion		
campaigns.		

Indicative Content

1: Understand how public health policy is developed to improve the health of the population:

- Identifying and monitoring the health needs of the population
- Identifying and protecting individuals form communicable diseases and environmental issues that could lead to health consequences
- How do we find out the health needs of the population?
- Local and national provision of public health priorities
- Groups who influence policy, government agencies (DoH), charities and pressure groups,
 British Heart Foundation (BHF), Diabetes UK, Cancer Research UK etc. The role of the World Health Organisation
- How do we monitor the health of the nation?
- Important reports such as the Black Report (1980) and Acheson Report (1998) and their continuing impact on public health policy.

2: Understand the factors that can affect health in the population:

- Looking at socio-economic factors, environmental, lifestyle choices
- Links between the above and the prevalence of health and ill health in the population
- The positive impact of improved health in the population
- Looking at case studies of outcomes of improved public health on the nation and individuals
- Quality of life measures and life expectancy.

3: Understand how health promotion can influence individuals to adopt healthy lifestyles:

- Models of health promotion: Health belief model, theory of reasoned action, stages of change model
- Approaches to delivering health promotion messages: health education, mass media, community involvement, empowerment, role of individuals, national campaigns.

4: Develop and analyse the effectiveness of a health promotion campaign:

- Health promotion material- looking at different types
- Understanding your audience and how to reach them
- Planning a campaign, resources/ time/ publicising
- Running a campaign, gaining feedback from participants
- Follow up and how we can measure effects of the campaign.
- Potential barriers to participation.

Delivery Guidance

The course will be delivered by a blended learning approach where learners will attend face-to-face sessions but will also be expected to work independently to research information around the topic areas. Learners will need to spend 3 hours a week in face-to-face classroom activity but an additional 6 – 7 hours per week in directed and independent study activity.

Learners can be given access to resources for each of the sessions via a Virtual Learning Environment (VLE). This means that learners can access resources to study at any time that is convenient to them. They can go back and look at resources used in the classroom and have online chats with their study groups and lecturers to enhance deep learning of the topic.

The face-to-face sessions will be interactive with group activities, peer learning and presentations. On -going assessment of learning via question and answer, quizzes and formative assessments will ensure that learners have understood the topic and are ready to move onto new areas.

Tutors will provide one-to-one feedback to learners on their progress towards summative assessment submission, feeding back on draft work before final submission.

Learners will be encouraged to form study groups to support each other and the VLE will facilitate this remotely.

Assessment Guidance

LO1 and its linked assessment criteria will be assessed by a short-written piece of work (1000 words max) which addresses the assessment criteria.

LO2 and its linked assessment criteria will be assessed by a professional discussion held between the learner and the tutor. Standardised questions will be used. Learners can bring notes and data to the discussion, but they must be used to enhance the discussion. The discussion will be recorded.

LO3 Learners will produce a poster on which they will discuss the two health promotion models and how these models can be actioned via various approaches to get the health message across.

LO4 and its linked assessment criteria will be assessed by learners developing and running a small health promotion campaign. Materials produced, feedback gained and an analysis of the campaign's effectiveness and barriers to participation will be produced in a portfolio of evidence.

The four sections will be submitted in a portfolio format.

Suggested Resources

Naidoo, J. and Wills, J (2016) Foundations for Health promotion (4th Edition). Elsevier Wilson, F. and Mabhala, M. (2009) Key Concepts in Public Health. Sage

https://www.gov.uk/government/organisations/public-health-england

Unit HSC304: Person-Centred Care

Unit code: M/615/3826

RQF level: 3

Aim

Within this unit learners will look at the role of person-centred care in interactions with service users. They will also consider other models of care delivery and their strengths and weaknesses in delivering care to meet the needs of different populations of service users. Delivering high quality care is not always easy and learners will examine the potential ethical issues that could arise and how these could be dealt with.

Learners will develop an understanding of the difficulties of balancing individual autonomy and minimising potential risk to vulnerable service users.

Learners will consider relevant health and social care legislation that impacts on both those delivering care and individuals receiving care. The role of government departments and other agencies in producing legislation and guidance and how this affects local policies, procedures and care delivery will be covered.

Learning Outcomes. To achieve this unit a	Assessment Criteria: Assessment of these
learner must be able to:	outcomes demonstrates the learner can:
1. Understand the professional values and	1.1 Compare person-centred care with one
personal attributes needed to work in health and	other model of care delivery.
social care.	1.2 Discuss how to promote equality and
	diversity when working with service users.
	1.3 Define the personal attributes required in
	health and social care and how they inform
	practice.
	1.4 Explain the concept of empathy with links to
	current theories.
2. Understand the ethical issues involved	2.1 Discuss ethics with particular reference
when meeting the care needs of	to medical ethical principles.
individuals.	2.2 Assess the ethical issues from the case study
	and how these could be resolved.
3. Understand the legislation and guidance	3.1 Explain two pieces of legislation in relation to
that govern health and social care practice.	health and social care and how they impact on
	delivery of care.
	3.2 Analyse the roles of two agencies who provide
	guidance for safe and effective care delivery in the
	health and social care sector.

Indicative Content

1: Understand the professional values and personal attributes of health and social care workers:

- Models of care, definitions and the aims of each model. Comparing and contrasting models
- Person-centred care what does it mean in health and social care practice?
- What is equality, diversity and discrimination, definitions, prevention and the health and social care worker's role
- The 6Cs of health and social care workers, definitions
- People skills such as patience, problem-solving skills, communication skills, conflict management skills and negotiating skills.
- What is empathy and why is it important for health and social care workers to be empathetic?
- · Current theories of empathy.

2: Understand the ethical issues involved when meeting the care needs of individuals:

- Define ethics. In particular, cover the principles that relate to interaction with service users. duty of care etc.
- Common ethical issues in relation to health and social care, balancing services against resources, minimising risk whilst maintaining individual choice, the needs of one against the needs of many. Sharing of information, issues with confidentiality
- Link the examples to the ethical principles discussed
- Gain example situations from learners and discuss the ethical issues and possible positive outcomes of the situations.

3: Understand the legislation and guidance that govern health and social care practice:

- Main legislative and policy making departments and organisations that influence policies in health and social care, NHS, DH, NICE, HSE and their role in influencing health and social care delivery
- Legislation such as Equality Act 2010, Care Act 2014, Mental Health Act 2007 etc.
- Examples of NICE guidance on Care Pathways and Care Plans
- HSE guidance on risk assessments
- How these national guidelines are implemented in individual organisations.

Delivery Guidance

The course will be delivered by a blended learning approach where learners will attend face-to-face sessions but will also be expected to work independently to research information around the topic areas. Learners will need to spend 3 hours a week in face-to-face classroom activity but an additional 6 – 7 hours per week in directed and independent study activity.

Learners can be given access to resources for each of the sessions via a Virtual Learning Environment (VLE). This means that learners can access resources to study at any time that is convenient to them. They can go back and look at resources used in the classroom and have online chats with their study groups and lecturers to enhance deep learning of the topic.

The face-to-face sessions will be interactive with group activities, peer learning and presentations. On -going assessment of learning via question and answer, quizzes and formative assessments will ensure that learners have understood the topic and are ready to move onto new areas.

Tutors will provide one-to-one feedback to learners on their progress towards summative assessment submission. Feeding back on draft work before final submission.

Learners will be encouraged to form study groups to support each other and the VLE will facilitate this remotely.

Assessment Guidance

Learner will produce written piece of work covering all the assessment criteria, which is around 2000 – 2500 words long. Learners will utilise text referencing and produce a reference list utilising the Harvard Referencing style.

Learners who develop their arguments by analysing and evaluating the information used within the assignment, and therefore showing a greater in-depth knowledge of the topic area, will gain higher grades than pass.

Suggested Resources

Cuthbert, S and Quallington, L (2008) Values for Care Practice. Reflect Press Holland, K and Hogg, C (2010) Cultural awareness in Nursing and healthcare- an introductory text (2nd Ed). Hodder Arnold

Kennedy, P. (2013) Key Themes in Social Policy. Routledge.

Cranmer, P. and Nhemachena, J. (2013) Ethics for Nurses: Theory and Practice. Open University

https://www.nice.org.uk/

www.hse.gov.uk/

Unit HSC305: Understanding Diabetes Care

Unit code: T/615/3827

RQF level: 3

Aim

Diabetes, especially type 2 diabetes, is a growing healthcare issue in the UK. Many service users will have diabetes and the associated complications associated with it. This can seriously affect quality of life and, in some cases, can lead to the need for limb amputation causing enormous physical and psychological challenges for the service user.

In this unit learners will develop an understanding of the physiology behind the condition, associated complications and associated treatment and care needs.

Assessment Criteria: Assessment of these outcomes demonstrates the learner can:
 1.1 Assess the reasons for an increase in type 2 diabetes in the population. 1.2 Explain the signs and symptoms of type 2 diabetes. 1.3 Discuss the effects of type 2 diabetes or individuals.
2.1 Compare the clinical investigations associated with diagnosis of type 2 diabetes.2.2 Assess the strengths and weakness of these clinical investigations.
 3.1 Explain the treatment and support available for service users when initially diagnosed with type 2 diabetes. 3.2 Discuss the common complications associated with type 2 diabetes. 3.2 Explain the treatment and support available for service users with long-term complications relating to type 2 diabetes.

Indicative Content

1. Understand the causes and effects of Type 2 diabetes:

- What is diabetes?
- Difference between type 1 and Type 2 diabetes
- Causes of Type 2 diabetes
- Prevalence in population/ potential costs to health and social care sector
- Signs and symptoms of type 2 diabetes.
- Link signs and symptoms to body physiology.
- Effects of type 2 diabetes.

2: Examine the clinical investigations associated with diagnosis of type 2 diabetes:

- Common investigations associated with diabetes
- Accuracy of tests.
- Strengths and weaknesses

3: Understand the treatment and support available for service users with type 2 diabetes:

- Support available on initial diagnosis, support groups, medical and nursing support, health education
- Treatment regimens available, lifestyle issues, medication, diet
- The diabetes 'team', vascular surgeon, G.P., diabetes nurse specialist, chiropodist etc.
- Complications of poorly controlled type 2 diabetes, ulcers, gangrene, limb amputation, sight loss, neuropathy, kidney problems, heart disease etc.
- Treatment options for complications associated with type 2 diabetes especially surgical interventions for ischaemic limbs and implications for care
- Rehabilitation options post -surgery, the role of the rehabilitation team.

Delivery Guidance

The course will be delivered by a blended learning approach where learners will attend face- to-face sessions but will also be expected to work independently to research information around the topic areas. Learners will need to spend 3 hours a week in face-to-face classroom activity but an additional 6 – 7 hours per week in directed and independent study activity.

Learners can be given access to resources for each of the sessions via a Virtual Learning Environment (VLE). This means that learners can access resources to study at any time that is convenient to them. They can go back and look at resources used in the classroom and have online chats with their study groups and lecturers to enhance deep learning of the topic.

The face-to-face sessions will be interactive with group activities, peer learning and presentations. Ongoing assessment of learning via question and answer, quizzes and formative assessments will ensure that learners have understood the topic and are ready to move onto new areas.

Tutors will provide one-to-one feedback to learners on their progress towards summative assessment submission, feeding back on draft work before final submission.

Learners will be encouraged to form study groups to support each other and the VLE will facilitate this remotely.

Assessment Guidance

The learning outcomes and associated assessment criteria will be assessed by use of a workbook produced by the college, which gives the learner the opportunity to answer sections as they are covered in the course.

Learners will be encouraged to use information gained in class activities as well as resources from their own investigations to enhance their assignment submission. Learners will be expected to reference their work.

Learners will be given the marking criteria for the assessment, which will show them what is required to gain the higher grades.

Suggested Resources

Whettem, E. (2012) Diabetes (nursing and Health survival guides) Routledge NICE

(2011) Diabetes in Adults quality standards. NICE, London

https://www.diabetes.org.uk/

Unit HSC306: Understanding Stroke Care

Unit code: A/615/3828

RQF level: 3

Aim

Many service users that health and social care workers care for may have had a stroke – or more correctly a cerebrovascular accident. It is important to know the causes and effects of the condition to provide quality care.

In this unit, learners will examine the types of cerebrovascular accident (CVA) and the symptoms displayed, including mobility and speech and swallowing problems. They will also cover the diagnostic tools utilised when identifying the cause of the CVA.

Learners will look at the role of acute care in maximising a positive outcome and the longer-term treatment supplied by the rehabilitation team. They will examine the measures that could reduce the incidence of CVA, as well as looking at support available for both those following a CVA and their family. This will include aids to communication and the benefit of specialised stroke units in achieving positive outcomes.

Learning Outcomes. To achieve this unit a	Assessment Criteria: Assessment of
learner must be able to:	these outcomes demonstrates the
	learner can:
1.Understand the causes and effects of	1.1 Explain the different types of CVA.
cerebrovascular accident (CVA).	1.2 Explain the signs and symptoms of
	left sided and right sided CVA.
	1.3 Analyse the reasons for different
	presentations of signs and symptoms
	with regard to the physiology of brain.
	1.4 Discuss the effects of a CVA on
	individuals.
2. Examine the risk factors associated with a	2.1 Discuss the risk factors associated with
cerebrovascular accident (CVA) and common	a CVA and preventative health measures.
investigations associated with diagnosis.	2.2 Compare the available investigations
	associated with diagnosis of CVA.
	2.3 Assess the strengths and weakness of
	these investigations.
3 Understand the treatment and support	3.1 Describe the acute and long-term care
available for service users following a CVA and	post CVA.
their families.	3.2 Discuss the roles and interventions of
	the rehabilitation team.
	3.3 Evaluate the effectiveness of care
	in a specialised stroke unit in achieving
	positive outcomes.

Indicative Content

1. Understand the causes and effects of cerebrovascular accident (CVA):

- Overview of cerebrovascular accidents, definition, prevalence etc.
- Types of CVA (Haemorrhagic and Ischaemic)
- Basic physiology associated with the two types of CVA
- Signs and symptoms of CVA left sided versus right sided
- Mobility problems, paralysis, speech problems (dysphasia/ Aphasia), swallowing problems.
- Health education in terms of recognising a stroke, F.A.S.T.
- Effects of a CVA on individuals.

2. Examine the risk factors associated with a cerebrovascular accident (CVA) and common investigations associated with diagnosis:

- Risk factors (diabetes, hypertension, atrial fibrillation etc.) and reducing prevalence, health education messages (normalising BP, reducing cholesterol, healthy diet, exercise, stopping smoking, drinking in moderation) and links to risk factors
- Role of medication
- Diagnostic tools used in suspected CVA (blood tests, carotid ultrasound, CT scan, ECG etc.).
- · Strengths and weaknesses.

3. Understand the treatment and support available for service users following a CVA and their families:

- Acute care what does research and clinical guidelines say about best practice?
- Long-term rehabilitation, roles of rehabilitation team, treatment interventions, aids and adaptations
- Role of specialised stroke units, evidence of impact on outcomes
- Support available for those post CVA and their families
- Quality of life issues.

Delivery Guidance.

The course will be delivered by a blended learning approach where learners will attend face-to-face sessions but will also be expected to work independently to research information around the topic areas. Learners will need to spend 3 hours a week in face-to-face classroom activity but an additional 6 – 7 hours per week in directed and independent study activity.

Learners can be given access to resources for each of the sessions via a Virtual Learning Environment (VLE). This means that learners can access resources to study at any time that is convenient to them. They can go back and look at resources used in the classroom and have online chats with their study groups and lecturers to enhance deep learning of the topic.

The face-to-face sessions will be interactive with group activities, peer learning and presentations. Ongoing assessment of learning via question and answer, quizzes and formative assessments will ensure that learners have understood the topic and are ready to move onto new areas.

Tutors will provide one-to-one feedback to learners on their progress towards summative assessment submission, feeding back on draft work before final submission.

Learners will be encouraged to form study groups to support each other and the VLE will facilitate this remotely.

Assessment Guidance

The learning outcomes and associated assessment criteria will be assessed by use of a workbook produced by the college, which gives the learner the opportunity to answer sections as they are covered in the course.

Learners will be encouraged to use information gained in class activities as well as resources from their own investigations to enhance their assignment submission. Learners will be expected to reference their work.

Learners will be given the marking criteria for the assessment, which will show them what is required to gain the higher grades.

Suggested Resources

Riske, J. and Culver, K. (2016) Stroke: A Nurse Guide to caring for the patient. Nurse ology Consultants, LLC.

https://www.nice.org.uk/guidance/cg162/evidence/full-guideline-190076509

https://www.stroke.org.uk/

Unit HSC307: Understanding Dementia Care

Unit code: F/615/3829

RQF level: 3

Aim

Dementia is a growing healthcare issue in the UK. Many service users will have dementia and the associated complications associated with it. This can seriously affect quality of life not only for the service user but for their family and friends. The psychological and physical burden of caring for someone with dementia is huge.

In this unit, learners will develop an understanding of the physiology behind the condition, associated complications and associated treatment and care needs of these service users.

Learning Outcomes. To achieve this unit a	Assessment Criteria: Assessment of
learner must be able to:	these outcomes demonstrates the
	learner can:
1 Understand the causes and effects	1.1 Discuss the reasons for an
of dementia.	increase in dementia in the
	population.
	1.2 Explain the signs and symptoms
	of dementia.
	1.3 Discuss the effects of a dementia on
	individuals.
2. Examine the investigations associated with	2.1 Compare the available investigations
the diagnosis of dementia.	associated with diagnosis of dementia.
	2.2 Assess the strengths and weakness of
	these investigations.
3Understand the treatment and support	3.1 Explain the treatment and support
available for service users with dementia and	available for service users when initially
their families.	diagnosed with dementia.
	3.2 Discuss the long-term
	complications associated with
	dementia.
	3.3 Explain the treatment and support available for service users at the end stages of
	dementia 3.4 Explain the support available
	for families with relatives with end stage
	dementia.

1: Understand the causes and effects of dementia:

- What is dementia?
- Different types of dementia and their causes (Alzheimer's disease degenerative changes, vascular dementia, atherosclerosis (links to stroke) Lewy's body dementia and links to Parkinson's disease etc.
- Prevalence in population/ potential costs to health and social care sector.
- Signs and symptoms of dementia- reduced reasoning and communication ability, behaviour changes, difficulty in processing information and altered sleep patterns, reduced mobility and signs of anxiety and depression
- Look at symptoms common to all dementias (confusion and forgetfulness, behaviour changes and mood swings, anxiety, loss of control of bowel and bladder, communication issues)
- Discuss particular additional symptoms which may be present in the distinct types of dementia
- Make links between signs and symptoms and brain anatomy/ physiology.
- Effects of dementia.

2: Examine the investigations associated with the diagnosis of dementia:

- · Common investigations associated with dementia
- Accuracy of tests.
- Strengths and weaknesses

3: Understand the treatment and support available for service users with dementia and their families:

- Look at the effects of quality of life issues for both service user and carers
- Support available on initial diagnosis, support groups, medical and nursing support, support available for families
- Potential treatment, regimes available, lifestyle issues, medication, diet, exercise and sensory stimulation, aids and assistive technology
- The dementia 'team', geriatrician, G.P., dementia nurse specialist, occupational therapist, family, charities
- Safeguarding issues with people who have dementia, dignity/ privacy /safety/ ethical issues around autonomy versus safety
- The course of the disease process, milestones
- End of life care
- Bereavement counselling.

Delivery Guidance

The course will be delivered by a blended learning approach where learners will attend face-to-face sessions but will also be expected to work independently to research information around the topic areas. Learners will need to spend 3 hours a week in face-to-face classroom activity but an additional 6 – 7 hours per week in directed and independent study activity.

Learners can be given access to resources for each of the sessions via a Virtual Learning Environment (VLE). This means that learners can access resources to study at any time that is convenient to them. They can go back and look at resources used in the classroom and have online chats with their study groups and lecturers to enhance deep learning of the topic.

The face-to-face sessions will be interactive with group activities, peer learning and presentations. Ongoing assessment of learning via question and answer, quizzes and formative assessments will ensure that learners have understood the topic and are ready to move onto new areas.

Tutors will provide one-to-one feedback to learners on their progress towards summative assessment submission, feeding back on draft work before final submission. Learners will be encouraged to form study groups to support each other and the VLE will facilitate this remotely.

Assessment Guidance

The learning outcomes and associated assessment criteria will be assessed by use of a workbook produced by the college, which gives the learner the opportunity to answer sections as they are covered in the course.

Learners will be encouraged to use information gained in class activities as well as resources from their own investigations to enhance their assignment submission. Learners will be expected to reference their work.

Learners will be given the marking criteria for the assessment, which will show them what is required to gain the higher grades.

Suggested Resources

Earlstein, F. (2016) Dementia, types, diagnosis, symptoms, treatment, causes, neurocognitive disorders, prognosis, research, history, myths and more. NRB Publishing

Andrews, J. (2015) Dementia: The one-stop guide: practical advice for families, professionals and people living with dementia and Alzheimer's disease. Profile Books Ltd

https://www.alzheimers.org.uk