Qualification Specification

GA Level 2 Adult Social Care Certificate

610/7801/3

Approved by

skillsforcare

This qualification is subject to the GA Centre Assessment and Standards Scrutiny and General Moderation policy.

Contents

Section 1: Qualification Overview

1.1 Introduction: About this Qualification

Gatehouse Awards (GA) qualifications are designed to give learners the skills to be active in the modern labour market and progress in their career and/or into higher level study.

This Qualification Specification covers the GA Level 2 Adult Social Care Certificate (QAN 610/7801/3) qualification.

The GA Level 2 Adult Social Care Certificate qualification is based on the Care Certificate Standards and has been developed to enhance the knowledge, understanding and practical skills required for working in adult social care settings in England. Designed for individuals employed within the adult social care workforce, the qualification aims to raise standards across the sector by supporting access to a nationally recognised qualification and helping to address identified skills gaps. It promotes greater portability of skills and knowledge, reducing the need for learners to repeat training and assessment when moving between roles or employers.

The qualification also supports a more consistent approach to the delivery of the Care Certificate Standards across different care settings, including situations where learners are working within health environments while supporting adult social care patients. Furthermore, it seeks to ensure that members of the care workforce feel recognised, valued and supported in their roles, enabling them to provide safe, effective and person-centred care.

By establishing clear standards and progression opportunities, the qualification also contributes to the development of rewarding career pathways within the adult social care sector, both now and in the future.

This qualification is regulated by the Office of Qualifications and Examinations Regulation (Ofqual) in England and is part of the Regulated Qualifications Framework (RQF).

All versions of this qualification are listed on the Register of Regulated Qualifications which is operated by Ofqual at http://register.ofqual.gov.uk.

This qualification is not designed to replace any existing qualifications.

1.2 Qualification Titles, Qualification Numbers and Important Dates

Qualification Title and Level	Qualification Number	Operational Start Date	Operational Review Date
GA Level 2 Adult Social Care Certificate	610/7801/3	01/08/2026	August 2031

1.3 Qualification Aims and Objectives

This qualification focuses on the role of the Care Worker within Adult Social Care settings in England. It provides learners with both breadth and depth of study, incorporating a comprehensive core of knowledge alongside opportunities to develop practical and technical skills relevant to the sector.

The qualification is designed to build the knowledge, understanding and competence required to work effectively in Adult Social Care environments, while enabling learners to demonstrate the agreed standards of knowledge, skills and behaviours expected within specific health and social care roles. Through successful completion, learners will be able to evidence their understanding and application of effective practice in line with sector requirements and professional expectations.

1.4 Qualification Structure and Overview: Units, GLH, TQT and Credit Value

The structure of this qualification is as follows:

Mandatory Units	Unit Reference	Level	Credits	GLH*	Study Time
1. Understand Own Role	J/652/3112	2	2	16	4
2. Personal Development	K/652/3113	2	3	20	10
3. Duty of Care	L/652/3114	2	2	16	4
4. Equality, Diversity, Inclusion and Human Rights	M/652/3115	2	2	16	4
5. Work in a Person-Centred Way	R/652/3116	2	3	24	6
6. Communication	T/652/3117	2	3	24	6
7. Privacy and Dignity	Y/652/3118	2	3	24	6
8. Nutrition and Hydration	A/652/3119	2	2	16	4
9. Awareness of Mental Health and Dementia	H/652/3120	2	3	24	6
10. Adult Safeguarding	K/652/3122	2	3	24	6
11. Safeguarding Children	M/652/3124	2	1	8	2

Mandatory Units	Unit Reference	Level	Credits	GLH*	Study Time
12. Health, Safety, and Principles of Basic Life Support	R/652/3125	2	3	24	6
13. Handling Information	Y/652/3127	2	1	8	2
14. Infection Prevention and Control (IPC)	A/652/3128	2	2	16	4
15. Awareness of Learning Disability and Autism	J/652/3130	2	3	24	6
Totals			36	284	360 TQT** (GLH + Study Time)

*Guided Learning Hours (GLH): Definition

The activity of a learner in being taught or instructed by - or otherwise participating in education or training under the immediate guidance or supervision of - a lecturer, supervisor, tutor or other appropriate provider of education or training.

**Total Qualification Time (TQT): Definition

The number of Guided Learning Hours assigned, plus an estimate of the number of study hours a learner will reasonably be likely to spend in preparation, study or any other form of participation in education or training, including assessment, which takes place as directed by - but, unlike Guided Learning, not under the immediate guidance or supervision of a lecturer, supervisor, tutor or other appropriate provider of education or training.

The number of study hours a learner is expected to undertake in order to complete each unit is expressed in the 'Study Time' above. This, including the GLH, provides the Total Qualification Time, or TQT, and represents an estimate of the total amount of time that could reasonably be expected to be required in order for a learner to achieve and demonstrate the achievement of the level of attainment necessary for the award of the qualification.

The estimates for Guided Learning Hours and Total Qualification Time above have been produced with due regard to information gathered from those with experience in education and training and are in line with guidance published by Ofqual on the allocation and expression of Total Qualification Time and Guided Learning Hours.

Level

The qualification within this specification is designated at Level 2 on the Regulated Qualifications Framework (RQF) according to the Level Descriptors for knowledge and understanding, which build on those used within the Qualifications and Credit Framework (QCF) and the European Qualifications Framework (EQF). This means that this qualification is considered by GA to lead to the outcome as follows:

Achievement at Level 2 reflects the ability to select and use relevant knowledge, ideas, skills and procedures to complete well-defined tasks and address straightforward problems. It includes taking responsibility for completing tasks and procedures and exercising autonomy and judgement subject to overall direction or guidance.

1.5 Rules of Combination

In order to meet the rules of combination for the GA Level 2 Adult Social Care Certificate qualification, learners must achieve all 15 mandatory units and achieve 36 credits.

Learners must successfully demonstrate their achievement of all the learning outcomes and meet all qualification requirements in order to achieve the qualification.

There are no further rules of combination.

1.6 Intended Audience

The GA Level 2 Adult Social Care Certificate is designed for learners who are new to the adult social care sector or those currently working in entry level care roles who wish to develop their knowledge, skills, and competence. It is suitable for care workers, support workers, personal assistants, and other frontline staff working in residential, domiciliary, community, or supported living settings.

Learners will work in adult social care and have responsibility for providing person- centred, values-driven care and support for those accessing the service. They will typically work under the direction of their manager or supervisor.

The qualification provides a foundation in the principles and practices of adult social care and supports learners in meeting the standards required for safe, effective, and person-centred care. It is also appropriate for individuals seeking to progress into employment within the adult social care sector or continue their professional development through further qualifications.

1.7 Age and Entry Requirements

This qualification is intended for learners aged 16 and above.

Learners are expected to be working, or preparing to work, in an adult social care role.

There are no additional formal entry requirements, prior qualifications, or minimum levels of prior attainment required to register for this qualification.

Employers would typically be expected to ensure that learners have completed their organisation-specific induction and mandatory training before commencing the qualification.

However, employers may choose to allow learners to undertake the qualification alongside their induction and mandatory training, where appropriate.

Centres should conduct an initial assessment for all learners before enrolment.

The initial assessment should confirm whether the learner is capable of meeting the qualification requirements, or identify any areas where additional support or development may be required.

Centre staff responsible for recruitment and admissions must be suitably qualified and experienced, and the rationale for each admissions decision must be documented.

1.8 Recognition of Prior Learning and Transfer of Credits

Recognition of Prior Learning (RPL) is a method of assessing whether a learner's previous experience and achievements meet the standard requirements of a GA qualification, prior to the learner taking the assessment for the qualification, or part of the qualification, they are registered for.

Any prior learning must be relevant to the knowledge, skills and understanding which will be assessed as part of that qualification, and GA will subsequently amend the requirements which a learner must have satisfied before they are assessed as eligible to be awarded the qualification.

Where there is evidence that the learner's knowledge and skills are current, valid and sufficient, the use of RPL may be acceptable for recognising achievement of assessment criteria, learning outcome or unit(s), as applicable. The requirement for RPL in such instances must also include a consideration of the currency of the knowledge gained by the learner at the time they undertook the prior learning.

RPL cannot be guaranteed in instances where industry practice or legislation has significantly changed in the time since the prior learning was undertaken / a previous award was issued.

All RPL decisions and processes are subject to External Quality Assurance (EQA) scrutiny and must be documented in line with GA's quality assurance requirements.

No transfer of credits is permitted.

1.9 Reasonable Adjustments and Special Considerations

Assessment for this qualification is designed to be accessible and inclusive. The assessment methodology is appropriate and rigorous for individuals or groups of learners.

Please refer to the GA Candidate Access Policy, available on the GA website, which contains information about Reasonable Adjustments and Special Considerations. This policy document provides centre staff with clear guidance on the reasonable adjustments and arrangements that can be made to take account of disability or learning difficulty without compromising the achievement of the qualification.

1.10 Relationship to Other Qualifications and Progression Opportunities

The GA Level 2 Adult Social Care Certificate qualification is an ideal qualification for learners who wish to progress onto further higher-level study, higher level practical occupational training, employment or self-employment.

Learners who achieve this qualification could progress to the following:

- Level 3 Diploma in Adult Care
- Level 4 Diploma in Adult Care

1.11 Language of Assessment

This qualification is offered in English.

Further information concerning the provision of qualification and assessment materials in other languages may be obtained from GA.

1.12 Qualification Availability

This qualification is available in the UK and internationally.

If you would like further information on offering this qualification, please contact us. Our contact details appear on our website, www.gatehouseawards.org

Section 2: Qualification Delivery: Assessment, Quality Assurance Model and Administration

2.1 Teaching and Learning Requirements

Centres may deliver this qualification through e-learning, classroom-based teaching, or a blended combination of both.

Regardless of delivery model, the following elements must be delivered face-to-face:

- Direct observation of the learner's practice within their normal work environment, which forms the main source of evidence for skills-based learning outcomes and must be carried out over an appropriate period of time

Centres must ensure that learners have access to suitably qualified teaching and assessment staff, appropriate technical support, high-quality learning materials, and sufficient assessment opportunities throughout the registration period.

Further details and guidance on the content of teaching and learning for each unit are available to approved GA centres.

2.2 Assessment & Quality Assurance Model

This qualification is a centre-assessed qualification. This means that it is internally assessed and internally moderated by centre staff who must clearly show where learners have achieved the learning outcomes, assessment criteria and qualification requirements.

Detailed Assessment Instructions for each component unit of this qualification are provided in Section 4 Unit Specifications below.

Assessment, internal moderation and quality assurance activities are subject to external moderation and quality assurance conducted by GA.

This qualification is subject to the GA Centre Assessment and Standards Scrutiny (CASS) and General Moderation Policy.

2.3 Assessment of Learners and Portfolio Requirements

All assessment must be carried out in line with the Skills for Care and Development Shared Assessment Principles. Centres are responsible for ensuring their practice reflects the current version of this document at all times:

- Skills for Care and Development Assessment Principles are available HERE.

The centre may determine their own delivery schedules and timelines for completing the required hours.

Learners are expected to build a portfolio of evidence, clearly demonstrating where they have met the learning outcomes and qualification requirements, typically via the successful completion of the centre-devised assessment materials.

To meet the assessment requirements, learners must:

- follow a suitable programme of learning.
- maintain and submit a portfolio of all coursework incorporating all materials related to assessment.

All evidence must be mapped against the learning outcomes and assessment criteria, reflecting the type of evidence supplied and indicating its location. Using portfolio reference numbers will enable the learner, assessor, IQA and EQA to quickly locate the evidence submitted.

Suitable sources of evidence may include the following:

- essays/assignments
- short questions and answers
- professional discussions
- workbooks
- reflective accounts
- records of questioning
- case studies

The centre must ensure that the learner's work is authentic.

Assurances that learner work is authentic can be gained via:

- oral questioning to confirm knowledge and understanding.
- written questions answered under controlled supervised conditions to compare the learner's writing style against their other work.

All knowledge and understanding evidence must be marked and assessed by centre assessors in line with the GA CRAVES requirement, clearly indicating where the learner has achieved the requisite knowledge and understanding.

Assessors are responsible for providing feedback and instructions for re-submission, where applicable.

All assessment decisions and internal moderation are externally quality assured by GA.

2.4 Components of Assessment

Component	What it covers
Component 1 - Theory and Practice Portfolio	A portfolio of work covering all knowledge and understanding requirements of the qualification, together with the direct-observation evidence gathered for the skills-based learning outcomes. This component comprises all content across all units in the qualification.

Evidence in the portfolio can be presented in various formats, allowing flexibility while ensuring thorough knowledge and understanding.

Various types of evidence may be used, for example: essays/assignments, short questions and answers, professional discussions, workbooks, reflective accounts, records of questioning.

Skills based assessment must include direct observation as the main source of evidence, and must be carried out over an appropriate period of time. Evidence should be naturally occurring and so minimise the impact on individuals who use care and support, their families and carers.

Expert witness testimony from others can enrich assessment and make an important contribution to the evidence used in assessment decisions. See Appendix A: Expert Witnesses for the definition and eligibility criteria for use of an expert witness.

2.5 Teaching, Learning and Assessment Resources

When devising teaching, learning and assessment materials for this qualification, the centre must:

- ensure teaching, learning and assessment materials directly address the learning outcomes
- ensure the teaching and learning materials sufficiently prepare learners for assessment.
- structure all materials to be accessible and engaging.
- use clear, unambiguous language appropriate for the level.
- align materials to the specific topics and content.
- pitch the level and depth of materials accurately based on the content to be delivered.
- ensure materials can be clearly attributed back to the centre.
- offer opportunities and resources for additional research and study, where appropriate.
- offer opportunity for learners to relate teaching and learning content to their own experience.

- ensure materials provide any relevant guidance to staff on consistent delivery.

Course programmes must be designed using the unit specifications content in Section 4 below.

Teaching and learning resources must be relevant, up-to-date and of industry standard, in order to allow learners to adequately prepare for assessment. This will be considered at approval and during the on-going monitoring of the centre.

All resources should be inclusive of the principles of equality and diversity and the safeguarding of learners.

2.6 Use of Simulation

Simulation may not be used as an assessment method for skills-based learning outcomes, except where this is specifically stated within the assessment requirements for the relevant unit. Where practical competencies are assessed, learners must, wherever possible, demonstrate their skills with real individuals accessing care and support, in a real work environment.

Where simulation is specified as permissible within a unit's assessment requirements (see Section 4: Unit Specifications), its use should be restricted to obtaining evidence where the evidence cannot be generated through the learner's normal work activity.

Video or audio recording must not be used where this would compromise the privacy, dignity or confidentiality of any individual accessing care and support, or their family.

The wellbeing of individuals accessing care and support must be prioritised at all times.

2.7 Order of Delivery

Learners can complete Units 1 to 15 in any order.

2.8 CRAVES Requirements

Assessors must ensure that all evidence within the learner's portfolio is judged to meet GA's 'CRAVES' requirements:

- current: the work is relevant at the time of the assessment
- reliable: the work is consistent with that produced by other learners
- authentic: the work is the learner's own work
- valid: the work is relevant and appropriate to the subject being assessed and is at the required level

- evaluated: where the learner has not been assessed as competent, the deficiencies have been clearly and accurately identified via feedback to the learner
- sufficient: the work covers the expected learning outcomes and any range statements as specified in the criteria or requirements in the assessment strategy

2.9 Resubmissions

GA recommends that the centre operates a policy of allowing learners to resubmit assessed work a maximum of two times. However, the acceptance and management of resubmissions of assessed work is at the discretion of the centre.

The decision regarding whether to permit a learner to resubmit work and/or attempt an assessment again will be based on an evaluation of how closely their previous attempts met the passing criteria. This evaluation will consider the extent to which the learner's work demonstrated progress towards meeting the required standards.

Resubmitted work will be assessed with the same rigour and adherence to standards as the initial submission.

If a learner does not pass after three attempts at submitting assessed work, the centre must consider the following course of action:

- Additional support - consider whether the learner could benefit from additional support, remedial guidance, or additional resources to help them understand the material better. This could involve providing extra teaching sessions, study materials, or one-on-one tutoring to address specific areas of difficulty. Sometimes, extending deadlines or providing additional time can alleviate pressure and allow for better comprehension and performance.
- Review and feedback - consider whether sufficient detailed feedback, which highlights areas that need improvement and provides specific guidance on how the learner can enhance their work, has been provided after each attempt.
- Alternative assessment methods - consider whether an alternative assessment method, such as the use of professional discussion, may provide opportunities for the learner to demonstrate their understanding. The centre should refer to the GA Candidate Access Policy for further information.
- Reconsideration of participation - assess whether the learner might need to take a break from the programme or whether, despite supportive measures and multiple attempts, the learner's progress is not indicative that they will meet the qualification requirements. They may be issued with a final 'Fail' grade or withdraw from the programme.

The centre must ensure that their policies and procedures regarding learner dismissal or failure are communicated clearly to learners to maintain fairness and transparency.

2.10 Internal Moderation and Quality Assurance Arrangements

Internal Quality Assurers (IQAs, also known as Internal Moderators) ensure that assessors are assessing to the same standards, i.e., consistently and reliably, and that assessment decisions are correct. IQA activities will include:

- ensuring assessors are suitably experienced and qualified in line with the qualification requirements
- sampling assessments and assessment decisions
- ensuring that assessment decisions meet the GA 'CRAVES' requirements (Current, Reliable, Authentic, Valid, Evaluated and Sufficient)
- conducting and recording standardisation and moderation of assessment decisions
- providing assessors with clear and constructive feedback
- supporting assessors and providing training and development where appropriate
- ensuring any stimulus or materials used for the purposes of assessment are fit for purpose.

Sampling of assessment will be planned and carried out in line with a clear IQA and moderation strategy, which takes into account the number of learners, number of assessors, and the experience and competency of assessors.

Centre IQAs may wish to refer to the guidance documents provided by GA to approved centres in order to formulate an appropriate Sampling Strategy.

2.11 Grading and Recording Achievement

All learning outcomes and assessment requirements must be met before a learner can be considered as having achieved the qualification.

This qualification is not graded on a scale. Learners are assessed as Pass or Fail.

The centre must ensure that regulations relating to the resubmission of work are adhered to.

2.12 Unit and Portfolio Sign Off

Upon completion, each unit must be signed off by the assessor and IQA to confirm the learner's achievement.

The content of the portfolio that contains all units the learner has achieved is subject to final portfolio sign off by the assessor and IQA to confirm that the specific qualification requirements and rules of combination have been met.

The learner is also required to sign an authenticity declaration, stating that the work contained in their portfolio is their own.

2.13 External Moderation and Quality Assurance Arrangements

Assessment and internal moderation and quality assurance activities are subject to external moderation and wider scrutiny and centre controls as per GA's quality assurance arrangements for centre-assessed qualifications.

All GA Approved Centres are entitled to two EQA visits per year. Additional visits can be requested, for which there may be an additional charge.

EQA activities will focus on the centre's continuing adherence to and maintenance of the GA Centre Approval Criteria and the criteria and requirements for the specific qualifications for which it holds approval. This will include:

- checking that the management of the centre and the management arrangements relating to the qualification are sufficient
- checking that resources to support the delivery of the qualification, including physical resources and staffing, are in place and sufficient
- ensuring that the centre has appropriate policies and procedures in place relevant to the organisation and to the delivery and quality assurance of the qualification
- the use of assessment materials and the arrangements in place to ensure that evidence for assessment is 'CRAVES' (Current, Reliable, Authentic, Valid, Evaluated and Sufficient)
- sampling assessment decisions against the qualification requirements across the range of levels, number of assessors and assessment sites, according to the number of learners
- the internal moderation and quality assurance arrangements
- sampling internal moderation records against the qualification requirements across the range of levels, number of assessors and assessment sites, according to the number of learners
- administrative arrangements
- ensuring that any actions from moderation and wider quality assurance activities have been carried out by the centre
- confirming any claims for RPL, reasonable adjustments or special considerations

Through discussions with centre staff, examining learner work, moderation of assessment, talking to learners and reviewing documentation and systems, the GA EQA will provide the centre with full support, advice and guidance as necessary.

2.14 Registering Learners and Unique Learner Numbers (ULNs)

Learners must be registered through the Ark, the GA online Learner Management System.

Owing to the Total Qualification Time of this qualification, the validity period of registrations made will be two years. Should a learner not have achieved in the timescale, a new registration is required.

Each approved GA centre is provided with a user account to allow approved staff access to the online system.

Where the Unique Learner Number (ULN) of a learner is known, this should be provided at the point of registration in order for GA to issue updates to the Learner Record Service.

2.15 ID Requirements

It is the centre's responsibility to have systems in place to confirm each learner's identity.

Learners are required to declare that all work submitted for assessment is their own work.

2.16 Record Keeping

Records of learner details, their work and any records of Reasonable Adjustments, Special Considerations and records containing learners' personal details must be kept by the centre in line with the Data Protection Act 2018 (including GDPR and all relevant privacy regulations) for a minimum of 2 years.

The centre must operate a safe and effective system of care and comply with clinical and information governance requirements, with appropriate policies and procedures in place to maintain confidentiality, both related to patients and clients, staff and learners.

All records must be easily retrievable and made available to GA or the Regulator upon request.

Portfolios must be retained until the following External Quality Assurance visit to allow them to be sampled. Following external moderation and the award of a qualification by GA, the centre may return portfolios to learners.

Records of all internal quality assurance and moderation activity undertaken must be kept and made available to GA upon request.

2.17 Results and Certification

Centres may make claims for certification via the Ark when learners complete and the assessor and IQA have confirmed achievement. Claims for certification are subject to successful external quality assurance (EQA).

Following the EQA's confirmation of a learner's achievement, GA will authorise claims for the certification of learners, details of which will be visible to the centre in the centre's Ark

account. Certificates are usually issued within 10 working days of the award of the qualification.

The qualification certificate will indicate both the title and the level at which the qualification is achieved.

Certificates will only be issued to learners who have achieved sufficient credits and met the rules of combination for the qualification they are registered for. If a learner has not achieved sufficient credits or failed to meet the rules of combination, the qualification certificate will not be issued.

Replacement certificates are available upon request.

Amendments to certificates are available upon request but may require the centre to provide evidence of the need for any amendment (e.g., learner proof of identification) and will involve the return of the original certificate. Replacements and amendments may incur an additional charge.

2.18 Direct Claims Status (DCS)

Direct Claim Status is not available for this qualification.

2.19 Appeals and Enquiries

GA has an appeals procedure in accordance with the arrangements for regulated qualifications.

General enquiries can be made at any time and should be directed to a GA Centre Administrator.

Section 3: Staff and Resource Requirements for Centres

In order to deliver this qualification, the centre must ensure that they meet the following requirements for staff and physical resources.

GA recommends that centres have safer recruitment practices in place for all staff involved in the delivery, assessment and internal quality assurance of this qualification, including appropriate pre-employment checks such as Disclosure and Barring Service (DBS) checks. This reflects the direct and indirect contact staff may have with individuals accessing care and support during the assessment process.

3.1 General Staff Requirements

It is the centre's responsibility to ensure that all staff involved in the delivery, assessment and internal quality assurance of this qualification are suitably qualified in line with the stipulations for Teachers, Assessors and Internal Quality Assurers detailed below.

The centre must ensure that they hold up-to-date and detailed information about the staff involved with the delivery and quality assurance of this qualification and must make records available to GA upon request. The information GA expects the course provider to hold for each member of staff includes, as a minimum:

- a current up to date CV
- copies of relevant qualification certificates
- relevant and up to date CPD (Continuous Professional Development) records

Centre staff must be familiar with the qualification requirements prior to offering the qualification or unit and planning the centre's assessment and moderation strategy.

Centres must provide all staff involved in the assessment process with sufficient time and resources to carry out their roles effectively.

The centre must also ensure that they have the management and administrative staffing arrangements in place which are suitable to support the registration of learners and the receipt of results and certificates.

The knowledge and experience of all staff involved in the teaching, assessment and internal quality assurance of this qualification will be considered during the approval and re-approval process and at External Quality Assurance Visits.

The requirements below make use of the following key terms:

Occupationally competent: this means that each assessor must be capable of carrying out the full requirements of the area they are assessing. Occupational competence may be at unit level for specialist areas: this could mean that different assessors may be needed across a whole qualification, while the final assessment decision for a qualification remains with the

lead assessor. Being occupationally competent means also being occupationally knowledgeable. This occupational competence should be maintained annually through clearly demonstrable continuing learning and professional development.

Occupationally knowledgeable: this means that each assessor should possess knowledge and understanding relevant to the qualifications and/or units they are assessing. Occupationally knowledgeable assessors may assess at unit level for specialist areas within a qualification, while the final assessment decision for a qualification remains with the lead assessor. This occupational knowledge should be maintained annually through clearly demonstrable continuing learning and professional development.

3.2 Requirements for Teachers and Assessors

Teaching staff include those who deliver teaching and learning content for knowledge and understanding elements and those who are involved in practical teaching and learning in a work environment.

The primary responsibility of an assessor is to assess a learner's performance and ensure that the evidence submitted by the learner meets the requirements of the qualification.

It is the centre's responsibility to select and appoint suitably qualified and experienced teachers and assessors.

Centres must have a sufficient number of appropriately qualified/experienced Assessors to assess the volume of learners they intend to register.

All teachers and assessors must:

- ✓ be occupationally competent and occupationally knowledgeable

AND

- ✓ hold a relevant qualification.

Accepted qualifications are:

- Level 5 Diploma in Teaching (Further Education and Skills) (September 2024) (to be discussed with GA to ensure relevant units have been undertaken)
- Level 3 Learning and Skills Assessor Apprenticeship (March 2023)
- Level 5 Learning and Skills Teacher Apprenticeship (January 2019)
- L&D9DI - Assessing workplace competence using Direct and Indirect methods (Scotland) (2015)
- L&D9D - Assessing workplace competence using Direct methods (Scotland) (2015)
- Level 5 Diploma in Education and Training (2014)
  (Relevant assessing units:
  o Teaching, learning and assessment in education and training
  o Developing teaching, learning and assessment in education and training)

- Level 4 Certificate in Education and Training (2014)
  (Relevant assessing units:
  o Assessing learners in education and training
  o Assess occupational competence in the work environment
  o Assess vocational skills, knowledge and understanding)
- D32 Assess Candidate Performance and D33 Assess Candidate Using Differing Sources of Evidence (2012)
- Diploma in Teaching in the Lifelong Learning Sector (DTLLS) (2012)
- Teaching Certificate in Teaching in the Lifelong Learning Sector (CTLLS) (2012, 2007)
- Level 3 Award in Assessing Competence in the Work Environment (for competence/skills learning outcomes only) (2010)
- Level 3 Award in Assessing Vocationally Related Achievement (for knowledge learning outcomes only) (2010)
- Level 3 Certificate in Assessing Vocational Achievement (2010)
- A1 Assess Candidate Performance Using a Range of Methods and A2 Assessing Candidates' Performance through Observation (2002)
- HEI Certificate in Education
- Qualified Teacher Status Certificate in Education in Post Compulsory Education (PCE)
- Post Graduate Certificate in Education
- Social Work Practice Educators

    - Practice Teacher or Practice Educator Qualification based on or mapped to the current Practice Educator Professional Standards. British Association of Social Workers (BASW) are the current custodian of the Practice Educator Professional Standards. Further information can be found at the web links below:

      Practice Educator Professional Standards (PEPS) www.basw.co.uk
      www.basw.co.uk/policy-practice/standards/quality-assurance-practice-learning-qapl

- Nursing and Midwifery Approved Programmes

    - ENB 998

      Programmes mapped against the Nursing and Midwifery Council (NMC) Professional Standards below, are acceptable:
      https://www.nmc.org.uk/standards-for-education-and-training/standards-to-support-learning-and-assessment-in-practice/

      Further information can be found at the link below:
      https://www.nmc.org.uk/supporting-information-on-standards-for-student-supervision-and-assessment/

Information about Mentorship Programmes and Practice Teachers' qualifications can be found at the link below:
www.nmc.org.uk/education/approved-programmes/

Trainee teachers must demonstrate a minimum of 30 hours of teaching/assessing and update to a regulated teaching qualification within 18 months.

Assessors may be working towards a relevant equivalent qualification in assessing, under the guidance of a suitably qualified and experienced Assessor and their IQA. Trainee Assessors' decisions must be countersigned by a suitably qualified, experienced Assessor.

All teachers and assessors must also:

- be able to evidence relevant and up to date teaching/assessing experience.
- understand the qualification structure, unit learning outcomes and criteria related to the teaching and learning being delivered.
- have access to appropriate guidance and support.
- participate in continuing professional development in the specific subject they are teaching and/or assessing.

3.3 Requirements for IQAs

IQAs are responsible for internal moderation and quality assurance of the qualification to ensure standardisation, reliability, validity and sufficiency of the assessor's assessment decisions.

It is the centre's responsibility to select and appoint IQAs.

Centres must have a sufficient number of appropriately qualified/experienced IQAs to internally quality assure the anticipated volume of assessors and learners.

All IQAs must:

✓ be occupationally competent and occupationally knowledgeable

AND

✓ hold a relevant qualification.

Accepted qualifications are:

- Level 5 Diploma in Education and Training (2014)
(Relevant IQA unit:
    - Internally assure the quality of assessment)
- Level 4 Certificate in Education and Training (2014)
(Relevant IQA units:
    - Assessing learners in education and training

    - Internally assure the quality of assessment)
- Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice (2014) or Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice (2014)
- D34 Unit Internally verify the assessment process (2012)
- V1 Verifiers Award (2012)
- L&D11- Internally Monitor and Maintain the Quality of Workplace Assessment (Scotland) (2010)

Programmes based on National Occupational Standards for Learning and Development

Where alternative qualifications are considered for Internal Quality Assurers, Centres should ensure that these qualifications map to Standard L&D11 Internally Monitor and Maintain the Quality of Workplace Assessment

Learning and Development NOS | CLD Standards Council for Scotland

IQAs may be working towards a relevant equivalent quality assurance qualification, under the guidance of a suitably qualified and experienced IQA. Trainee IQAs' decisions must be countersigned by a suitably qualified, experienced IQA.

IQAs must have a thorough understanding of quality assurance and assessment practices, as well as sufficient technical understanding related to the qualifications that they are internally quality assuring.

Each assessor may have one or several appointed IQAs.

Staff may undertake more than one role within the centre, e.g., Teacher, Assessor and IQA. However, members of staff must NOT IQA their own assessment decisions.

3.4 CPD Requirements

All staff must ensure their role and subject-specific knowledge, understanding and competence is current and therefore must keep up to date with sector changes and developments.

Participation in continuing professional development in order to evidence contemporaneous proficiency must take place regularly. Centre staff in teaching, assessment or IQA roles must ensure that they complete and document their CPD hours. There are no set minimum number of hours of CPD required; however, the CPD activities must reflect contemporary standards and developments in Adult Social Care and be directly relevant to maintaining competence in their specific role.

Records of CPD activities (both planned and those that have taken place) must be made available to GA at EQA visits or upon request.

3.5 Data Protection and Confidentiality Requirements

All assessment evidence, including that gathered through the use of technology, e-portfolios or remote observation, must comply with policy and legal requirements in relation to confidentiality and data protection, including the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018.

Centres must ensure that:

- the recording, storage and accessibility of assessment evidence complies with legal requirements in relation to confidentiality and data protection.
- centre practices for using different methods of technology in assessment (for example, e-portfolios or remote observation) are supported by robust centre policies and standardised practices
- evidence gathered for assessment is traceable, auditable and authenticated, and can be made available for internal and external quality assurance purposes.

Where remote observation is used as an assessment method, the method of observation must be stated clearly in the assessment audit trail, and a rationale for its use must be documented and endorsed by the IQA.

3.6 Venue and Equipment Requirements

When training premises are used in the delivery of teaching and assessment of this qualification, centres should, wherever possible, provide suitable access in line with Disability Discrimination, Diversity & Equality law and regulations and any other regulations which apply.

Centres must ensure that all products and equipment used in the delivery and assessment of this qualification are confirmed as fit for purpose and compliant with current Health and Safety legislation and any other relevant regulations. This will be considered at approval and during the on-going monitoring of centres.

Where specific products and equipment are required for the delivery and assessment of a GA qualification, the suitability of the products and equipment at the centre will be considered during the centre and qualification approval process and at External Quality Assurance Visits.

There are no mandatory resource requirements for this qualification, but centres must ensure learners have access to suitable resources to enable them to cover all the appropriate learning outcomes.

3.7 Mandatory Reading

The following documents are mandatory reading for any centre involved in the delivery, assessment and administration of this qualification:

- Skills for Care and Development assessment principles (available HERE)

This document is also published on the GA website on the Qualification Details page.

3.8 Ongoing Support

There are a number of documents on the GA website that centres and learners may find useful: www.gatehouseawards.org. The website is updated regularly with news, information about GA qualifications, sample materials, updates on regulations and other important notices.

Within the centre, a named Examinations Officer is responsible for ensuring that all information and documents provided to centre staff and learners are correct and up to date.

GA must be kept up to date with contact details of all changes of personnel so the centre can be provided with the best level of support and guidance.

At the time of approval, the centre is assigned a designated Centre Administrator who is their primary point of contact for all aspects of service or support.

Learners should always speak to a member of staff at the centre for information relating to GA and our qualifications prior to approaching GA directly.

Contact details for GA can be found on the GA website www.gatehouseawards.org.

Section 4: Unit Specifications

4.1 Unit 1: Understand own role

Mandatory Unit		GLH	Credits	Level	Unit Reference
1	Understand own role	16	2	2	J/652/3112

This unit is designed for individuals working within adult social care settings. It equips learners with the knowledge and skills needed to understand professional working relationships, carry out their role in line with agreed ways of working and organisational requirements, and work effectively in partnership with colleagues, individuals accessing care and support, and other professionals.

Guidance notes:

Standards: May include Codes of Practice, regulations, minimum standards, national occupational standards and any other standards and good practice relevant to the setting.

Agreed ways of working: These will include policies and procedures, job descriptions and less formal agreements and expected practices.

Individuals: Individuals or the individual, will normally refer to the person or people the learner is providing care and support for.

Key people and others: In this context, this may include but not limited to:

- the friends, family and loved ones of those accessing care and support services.
- peers, team members and other colleagues
- managers and senior management
- professionals from other organisations involved in the individual's care
- paid workers and volunteers from other organisations and teams.

Criteria 1.1d: Whilst it is recognised that learners will have their own aspirations, the achievement of this criteria should enable the learner to understand that there are a wide range of development opportunities when working in adult social care and a rewarding career can be gained.

Criteria 1.2f: This should include reference to whistleblowing procedures: where a person (the whistle blower) exposes any kind of information or activity that is deemed illegal, unethical, or incorrect.

Assessment guidance:
Assessment decisions for skills-based learning outcomes must be made during the learner's normal work activity.

Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time.

Criteria 1.4d: Requires the learner to provide performance evidence, however the opportunity to do this may not arise during the period of the qualification. Other evidence to show that the learner would be able to do this if real work evidence is not available is permissible. Simulation may be used to generate this evidence in these circumstances, in line with Section 2.6 (Use of Simulation) of this specification.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
1.1 Understand own role	1.1a Describe own main duties and responsibilities
	1.1b List the standards and codes of conduct and practice that relate to own role
	1.1c Describe how own experiences, attitudes, values, and beliefs may affect the way you work
	1.1d Identify the different opportunities for professional and career development in the sector
1.2 Work in ways that have been agreed with the employer	1.2a Describe employment rights and responsibilities
	1.2b Outline the aims, objectives, and values of the service in which you work
	1.2c Explain why it is important to work in ways that are agreed with your employer

	1.2d Demonstrate how to access full and up-to-date details of agreed ways of working that are relevant to own role
	1.2e Demonstrate working in accordance with the agreed ways of working with the employer
	1.2f Describe how and when to escalate any concerns in line with organisational policy or ways of working
	1.2g Describe why it is important to be honest and identify where errors may have occurred and to tell the appropriate person
1.3 Understand working relationships in adult social care	1.3a State main responsibilities to the individuals being supported, as well as key people, advocates and others who are significant to an individual
	1.3b Explain how a working relationship is different from a personal relationship
	1.3c Identify different working relationships in adult social care settings
1.4 Work in partnership with others	1.4a Explain why it is important to work in teams and in partnership with others
	1.4b Explain why it is important to work in partnership with key people, advocates and others who are significant to individuals being supported
	1.4c Demonstrate behaviours, attitudes, and ways of working that can help improve partnership working
	1.4d Demonstrate how and when to access support and advice about: • partnership working • resolving conflicts

4.2 Unit 2: Personal development

Mandatory Unit		GLH	Credits	Level	Unit Reference
2	Personal development	20	3	2	K/652/3113

This unit enables learners to develop the knowledge, skills and understanding required for their role through effective personal and professional development. Learners will explore how to create and agree a Personal Development Plan (PDP), identify development needs, and take responsibility for their own learning. The unit also introduces the principles and benefits of reflective practice as a tool for continuous improvement and professional growth.

Guidance notes:

Personal development plan: May be known by different names but will record information such as agreed objectives for personal and professional development, proposed activities to meet objectives and timescales for review.

Others: In this context, could refer to others the learner has contact with:

- the individual accessing care and support
- the friends, family and loved ones of those accessing care and support services
- peers, team members and senior colleagues
- managers and senior management
- professionals from other organisations involved in the individual's care.

Sources of support: May include:

- formal or informal support
- support mechanisms provided throughout induction period
- supervision
- appraisal
- peer support
- from within and outside the organisation.

Literacy, numeracy, digital and communication skills: Will be appropriate to the learners individual learning and development needs. This could include exploring different options available to develop such skills. On-going development of all these skills will support all aspects of the learners practice and could reference to an appropriate functional skill level needed where applicable.

Reflecting: Involves thinking about what needs to be changed to improve future practice.

Standards: May include Codes of Practice, regulations, minimum standards and any other standards and good practice relevant to the service.

Continuing professional development: Refers to the process of monitoring and documenting the skills, knowledge and experience gained both formally and informally, beyond initial training.

Assessment guidance:
Assessment decisions for skill-based learning outcomes must be made during the learner's normal work activity.

Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
2.1 Agree a personal development plan (PDP)	2.1a Describe the processes for: • identifying own learning needs • agreeing a personal development plan (PDP) and who should be involved
	2.1b Explain why feedback from others is important in helping to develop and improve approaches to own work
	2.1c Contribute to and agree own PDP
2.2 Develop own knowledge, skills and understanding	2.2a Identify sources of support for own learning and development
	2.2b Explain how learning activities have improved own knowledge, skills and understanding
	2.2c State the level of literacy, numeracy, digital and communication skills needed to carry out own role

	2.2d Identify where to find information and support on how to check and develop own current level of: • literacy skills • numeracy skills • digital skills • communication skills
	2.2e Describe how reflecting on a situation has improved own knowledge, skills and understanding
	2.2f Explain how feedback from others has developed own knowledge, skills and understanding
	2.2g Demonstrate how to measure own knowledge, performance and understanding against relevant standards
	2.2h Describe the learning opportunities available and how they can be used to improve ways of working.
	2.2i Demonstrate how to record progress in relation to own personal development

4.3 Unit 3: Duty of care

Mandatory Unit		GLH	Credits	Level	Unit Reference
3	Duty of care	16	2	2	L/652/3114

This unit enables learners to understand the principles of duty of care and duty of candour within adult social care settings. Learners will explore individual rights, recognise situations where ethical dilemmas may arise, and identify sources of support for addressing these challenges. The unit also develops learners' understanding of how to respond appropriately to adverse events, including complaints, conflicts and errors, and how to use these experiences as opportunities for learning, reflection and continuous improvement in practice.

Guidance notes:

Dilemmas: A situation in which a difficult choice has to be made.

Individuals: A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Agreed ways of working: These will include policies and procedures, job descriptions and less formal agreements and expected practices.

Criteria 3.3a: Responding should incorporate the formal reporting procedures in the workplace.

Comments and complaints: Both should be included as per agreed ways of working in the setting.

Reporting: in line with agreed ways of working within the setting and may include manual and electronic records.

Communication: In this context a range of communication methods could be considered with the individual and appropriate others.

Conflict: In this context a conflict could be a disagreement, clash of opinions which could upset or harm the individual.

Assessment guidance:

Assessment decisions for skills-based learning outcomes must be made during the learner's normal work activity.

Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time.

3.3a and 3.5d requires the learner to provide performance evidence, however the opportunity to do this may not arise during the period of the qualification. Other evidence to show that the learner would be able to do this if real work evidence is not available is permissible. Simulation may be used to generate this evidence in these circumstances, in line with Section 2.6 (Use of Simulation) of this specification.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
3.1 Understand duty of care and duty of candour	3.1a Define: • duty of care • duty of candour
	3.1b Describe how duty of care and duty of candour affect own work role
3.2 Understand the support available for addressing dilemmas that may arise about duty of care	3.2a Discuss dilemmas that may arise between the duty of care and an individual's rights
	3.2b Describe what you must and must not do within own role in managing conflicts and dilemmas
	3.2c Identify where to get additional support and advice about how to resolve such dilemmas
3.3 Deal with comments and complaints	3.3a Demonstrate how to respond to comments and complaints in line with agreed ways of working and legislation
	3.3b Identify who to ask for advice and support in handling comments and complaints

	3.3c Describe the importance of learning from comments and complaints to improve the quality of service
3.4 Know how to respond to incidents, errors and near misses	3.4a Explain how to recognise: • adverse events • incidents • errors and near misses
	3.4b Describe what you must and must not do in relation to adverse events, incidents, errors and near misses
	3.4c Explain agreed ways of working in relation to reporting any adverse events, incidents, errors and near misses
3.5 Deal with confrontation and difficult situations	3.5a State factors and difficult situations that may cause confrontation
	3.5b Explain how communication can be used to solve problems and reduce the likelihood or impact of confrontation
	3.5c Describe how to assess and reduce risks in confrontational situations
	3.5d Demonstrate how and when to access support and advice about resolving conflicts
	3.5e Explain agreed ways of working for reporting any confrontations

4.4 Unit 4: Equality, diversity, inclusion and human rights

Mandatory Unit		GLH	Credits	Level	Unit Reference
4	Equality, diversity, inclusion and human rights	16	2	2	M/652/3115

This unit will enable learners to develop an understanding of equality, diversity, inclusion, and human rights. They will learn how to work in an inclusive and person-centred way, promoting fairness and respect for others. Learners will also gain the knowledge and skills needed to access relevant information, advice, and support relating to equality, diversity, inclusion, and human rights in practice.

Guidance notes:

Protected characteristics: As defined by the Equality Act 2010.

Effects: Could also include assumptions and may include effects on the individual, their loved ones, those who inflict discrimination and the wider community and society

Individuals: A person accessing care and support. The individuals, or individual will normally refer to the person or people that the learner is providing care and support for.

Others: In this context, can refer to everyone a learner is likely to come in to contact with, including: carers, loved ones, family, friends of those accessing care and support services colleagues and peers, managers, and supervisors, professionals from other services volunteers, visitors to the work setting and members of the community.

Mate crime: Mate crime is someone says they are your friend, but they do things that take advantage of you, such as asking for money a lot. Please see a definition provided by Mencap here: https://www.mencap.org.uk/advice-and-support/bullying-and-discrimination/mate-and-hate-crime.

Legislation: These must relate to equality, diversity, inclusion, discrimination, and human rights and will include Equality Act 2010, Human Rights Act 1998, Health and Social Care Act 2012.

Culturally appropriate care: The Care Quality Commission describes this as being sensitive to people's cultural identity or heritage. It means being alert and responsive to beliefs or conventions that might be determined by cultural heritage. It can cover a range of things

e.g., ethnicity, nationality, religion or it might be to do with the individual's sexuality or gender identity.

Sources: Should include those available within the work setting and external. External sources could include:

https://www.equalityhumanrights.com/en/equality-and-diversity
https://www.equalityhumanrights.com/en/human-rights/human-rights-act
https://www.equalityhumanrights.com/en/equality-act/equality-act-2010

Assessment guidance:
Assessment decisions for skills-based learning outcomes must be made during the learner's normal work activity.

Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
4.1 Understand the importance of equality, diversity, inclusion, and human rights	4.1a Define what is meant by: • human rights • protected characteristics
	4.1b Explain what is meant by discrimination and the potential effects on individuals and others
	4.1c Explain how practices that support equality, diversity, inclusion, and human rights reduce the likelihood of discrimination
	4.1d Explain what is meant by disability hate crime, mate crime and bullying
	4.1e Describe how to recognise, challenge and report discrimination in line with your employer's policies and procedures, in a way that encourages positive change

4.2 Work in an inclusive way	4.2a Describe the key concepts of the legislation and codes of practice relating to equality, diversity, inclusion, and human rights and how these apply to own role and practice
	4.2b State approaches and practices which support culturally appropriate care
	4.2c Interact with individuals and others in a way that respects their lifestyle, beliefs, culture, values, and preferences
4.3 Access information, advice and support about equality, diversity, inclusion, and human rights	4.3a Identify a range of sources, including those made available by your employer, with information, advice and support about equality, diversity, inclusion, and human rights
	4.3b Explain how and when to access information, advice and support about equality, diversity, inclusion, and human rights

4.5 Unit 5: Work in a person-centred way

Mandatory Unit		GLH	Credits	Level	Unit Reference
5	Work in a person-centred way	24	3	2	R/652/3116

This unit enables learners to understand the principles of person-centred care and the importance of placing the individual at the centre of all care and support activities. Learners will explore person-centred values, how to work in ways that respect individual preferences, choices and rights, and the concept of mental capacity within the context of person-centred practice. The unit also develops learners' ability to support an individual's comfort, wellbeing and independence while promoting dignity, respect and person-centred values in everyday care.

Guidance notes:

Person Centred Values:

- individuality
- independence
- privacy
- partnership
- choice
- dignity
- respect
- rights.

Individual and Individuals: A person accessing care and support. The individual, or individuals, will normally refer to the person or people the learner is providing care and support for.

Relationships: Learners should consider the range of relationships important to individuals they are supporting. Consideration should go beyond immediate family and next of kin, and may include partners/spouses, extended family, friends, pets, neighbours, people in the community and other professionals. Learners should consider intimacy, sexuality, and sexual relationships.

Wellbeing: Is a broad concept referring to the person's quality of life. It considers health, happiness, and comfort. It may include aspects of social, emotional, cultural, mental, intellectual, economic, physical, and spiritual well-being.

Legislation and codes of practice: As a minimum:

- Mental Capacity Act 2005/Liberty Protection Safeguards.

Capacity: Means the ability to use and understand information to make a decision, at the time a decision needs to be made.

Advance statements: As per the individuals Advance Care Plan if they have chosen to have one in place.

Signs: Could include but is not limited to: verbal reporting from the individual, non-verbal communication and changes in behaviour.

Emotional distress: Could include a range of negative feelings being displayed by the individual such as sadness, anxiety, fear anger or despair.

Take appropriate steps: Could include but is not limited to removing, or minimising any environmental factors causing the pain, discomfort, or emotional distress such as:

- following the plan of care e.g., Re-positioning or giving prescribed pain relief medication
- reporting to a more senior member of staff
- ensuring equipment or medical devices are working or in the correct position e.g., wheelchairs, prosthetics, catheter tubes
- seeking additional advice when needed
- providing emotional support and reassurance to the individual
- adjusting lighting, volume/noise and temperature
- removing unpleasant odours
- minimising disruption by others
- providing a private/quiet space and other reasonable adjustment.

Others: In this context others mean the person who may be causing discomfort or distress to the individual.

Report: This could include appropriate reporting systems such as written/electronic records and opportunities to share information appropriately such as within handover and team meetings. This may include reporting to a senior member of staff or family member/carer.

Agreed ways of working: These will include policies and procedures, job descriptions and less formal agreements and expected practices.

Criteria 5.2c: In reference to planning for End of Life Care, everyone should have the opportunity to develop an Advance Care Plan, this helps people to have a good end of life experience by ensuring their wishes and respecting the person's treatment and support

preferences are known and can be supported. The Advance Care Plan should be reviewed regularly. The plan may include a Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) decision which means the person does not want cardiopulmonary resuscitation (CPR) if their heart or breathing stops. This does not mean the withdrawal of all treatment. Part of this plan may also include a Recommended Summary Plan for Emergency Care and Treatment (ReSPECT) form which records an individual's wishes about a range of health care and treatments.

Assessment guidance:
Assessment decisions for skills-based learning outcomes must be made during the learner's normal work activity.

Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time.

Criteria 5.4a, b, c and d require the learner to provide performance evidence however the opportunity to do this may not arise during the period of the qualification. Direct observation is the preferred main source of evidence, however other evidence to show that the learner would be able to do this if real work evidence is not available is permissible. Simulation may be used to generate this evidence in these circumstances, in line with Section 2.6 (Use of Simulation) of this specification.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
5.1 Understand person-centred values	5.1a Identify person-centred values
	5.1b Describe how to put person-centred values into practice in your day to-day work
	5.1c Explain why it is important to work in a way that promotes person-centred values when providing support to individuals
	5.1d State ways to promote dignity in your day-to-day work

	5.1e Describe the importance of relationships significant to the individual being supported when working in a person-centred way
5.2 Understand working in a person-centred way	5.2a State the importance of finding out the history, preferences, wishes and needs of the individual
	5.2b Explain why the changing needs of an individual must be reflected in their care and/or support plan
	5.2c Describe the importance of supporting individuals to plan for their future wellbeing and fulfilment, including end of life care
5.3 Understand the meaning of mental capacity when providing person-centred care	5.3a Identify relevant legislation and codes of practice relating to mental capacity
	5.3b Define what is meant by the term 'capacity'
	5.3c Explain why it is important to assume that an individual has capacity, unless there is evidence that they do not
	5.3d Describe what is meant by 'consent' and factors that influence an individual's mental capacity and ability to express consent
	5.3e Describe situations where an assessment of capacity might need to be undertaken and the meaning and significance of best interest decisions or advance statements regarding future care, which the individual has already made
5.4 Support the individual to be comfortable and make changes to address factors that may be causing pain, discomfort, or emotional distress	5.4a Ensure that where individuals have restricted movement or mobility that they are comfortable
	5.4b Recognise the signs that an individual is in pain, discomfort, or emotional distress
	5.4c Take appropriate steps to remove or minimise factors which may be causing pain, discomfort, or emotional distress to the individual
	5.4d Raise any concerns directly and appropriately with others concerned and report any concerns you have following agreed ways of working

5.5 Support the individual to maintain their identity, self-esteem, spiritual and overall wellbeing	5.5a Explain how individual identity and self-esteem are linked to emotional, spiritual, and overall wellbeing
	5.5b Demonstrate that own attitudes and behaviours promote emotional, spiritual, and overall wellbeing of the individual
	5.5c Demonstrate how to support and encourage individual's own sense of identity and self-esteem
	5.5d Demonstrate how to report any concerns about the individual's emotional, spiritual and overall wellbeing to the appropriate person
5.6 Support the individual using person-centred values	5.6a Demonstrate a range of actions which promote person-centred values

4.6 Unit 6: Communication

Mandatory Unit		GLH	Credits	Level	Unit Reference
6	Communication	24	3	2	T/652/3117

This unit will help learners understand the importance of effective workplace communication, including how to identify and respond to individuals' communication and language needs, preferences, and wishes. Learners will explore ways to promote positive and effective communication, understand the principles and practices of confidentiality, and develop the skills to use a range of communication methods. They will also learn how to support the appropriate, safe, and effective use of communication aids and technologies.

Guidance notes:

Different ways: Should also include digital communication methods which are used within the workplace.

Workplace and work: In this context may include one specific location or a range of locations depending on the context of the learner's role and should encompass everyone the learner communicates with, but not limited to:

- individuals accessing care and support services
- peers, team members, other colleagues, managers, and senior management
- the friends, family and loved ones of those accessing care and support services
- paid workers and volunteers from other organisations and teams.

Individuals: A person accessing care and support. The individuals, or individual, will normally refer to the people or persons the learner is providing care and support for.

Needs, wishes and preferences: these may be based on experiences, desires, values, beliefs, or culture and may change over time.

Communication aids: Aids which can support individuals to communicate in a way they understand. This could include but is not limited to signs, symbols and pictures, objects of reference, communication boards, Makaton, British Sign Language, hearing aids, glasses, and braille.

Assistive technologies: Technologies which support, assist, and enable the individual to communicate using alternative means and could include a range of software such as: light writers, eye gaze devices, voice recognition, speech synthesizers, symbol making software. Other technologies which could also support the individual and others could be considered

here, for example alerting devices, virtual assistants, sensors, hearing loops and Artificial Intelligence.

Digital communication tools: Could include use of virtual communications platforms e.g., a PC, tablet, telephone/text, smart phone/watch and encompass a range of technical platforms such as using online services, monitoring platforms, forums, video calling, email, social media and chatbots.

Connections: Could include family, friends, loved ones and their community

Barriers: May include, but are not limited to:

- environment
- time
- own physical, emotional, or psychological state
- own skills, abilities, or confidence to use communication aids, assistive technologies, and digital communication tools
- own or others prejudices
- conflict.

Support or services: In this context may include:

- translation services
- interpretation services
- speech and language services
- advocacy services
- occupational therapy services.

Appropriate and safe: Could include but not limited to, ensuring that any aids and technologies used are:

- available
- clean
- working properly and software is updated where needed
- in good repair
- fitted appropriately where applicable.
- used safely and securely when online.

Relevant Legislation: The learner should consider how different legislation relates to and influence practice. This may include, but is not limited to:

- Human Rights Act 1998
- Data Protection Act 2018
- The General Data Protection Regulation (GDPR) 2016
- Care Act 2014

- Health and Social Care Act 2012.

Agreed ways of working: These will include policies and procedures, job descriptions and less formal agreements and expected practices.

Criteria 6.4a Requires the learner to demonstrate appropriate use of verbal and non-verbal communication with individuals. This would include consideration and appropriate use of:

- language
- words
- tone, pitch
- volume
- position/proximity
- eye contact
- touch
- gestures
- body language
- active listening skills
- interpretation of non-verbal communication.

Criteria 6.4b Will be relevant to the learners role and ideally should relate to the support the learner is providing to the individual. If this is not achievable then as a minimum this can be evidenced within daily practices and use of digital tools in the workplace.

Criteria 6.4e Could include reporting using recommended and agreed ways of working and systems, such as:

- senior member of staff
- family member/Carer
- professional responsible for the communication aid
- the appropriate technical support.

Assessment guidance:
Assessment decisions for skills-based learning outcomes must be made during the learner's normal work activity.

Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time.

Criteria 6.4e requires the learner to provide performance evidence, however the opportunity to do this may not arise during the period of the qualification. Other evidence to show that the learner would be able to do this if real work evidence is not available is permissible. Simulation may be used to generate this evidence in these circumstances, in line with Section 2.6 (Use of Simulation) of this specification.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
6.1 Understand the importance of effective communication in the workplace	6.1a Identify the different ways that people communicate in the workplace
	6.1b Explain how communication affects relationships in the workplace
6.2 Understand how to meet the communication and language needs, wishes and preferences of individuals	6.2a Explain how to establish an individual's communication and language needs, wishes and preferences
	6.2b Identify a range of methods, styles, communication aids and assistive technologies that could help meet an individual's communication needs, wishes and preferences
	6.2c Identify a range of digital communication tools that can be used to support and enhance the individual's communication needs, wishes, preferences and connections
6.3 Understand how to promote effective communication with individuals	6.3a Describe barriers to effective communication with individuals and how they can be reduced
	6.3b Explain how an individual's behaviour may be a form of communication
	6.3c State where to find information and support or services, to help individuals communicate more effectively
6.4 Use appropriate communication with individuals and support the safe use of communication aids and	6.4a Demonstrate the use of appropriate verbal and non-verbal communication when communicating with individuals
	6.4b Demonstrate the appropriate and safe use of communication aids, assistive technologies, and digital tools

technologies	6.4c Check whether you have been understood when communicating with individuals
	6.4d Explain why it is important to observe and be receptive to an individual's reactions when communicating with them
	6.4e Report any concerns about communication aids or technologies to the appropriate person
6.5 Understand the principles and practices relating to confidentiality	6.5a Describe what confidentiality means in relation to your own role
	6.5b Identify legislation and agreed ways of working, which maintain confidentiality across all types of communication
	6.5c Describe situations where information, normally considered to be confidential, might need to be passed on
	6.5d Identify who you should ask for advice and support about confidentiality

4.7 Unit 7: Privacy and dignity

Mandatory Unit		GLH	Credits	Level	Unit Reference
7	Privacy and dignity	24	3	2	Y/652/3118

In this unit, the learner will understand the principles that underpin privacy and dignity in care and how to support active participation and an individual's right to make choices. They will be able to maintain the privacy and dignity of individuals and support them in making choices about their care.

Guidance notes:

Individual and Individuals: A person accessing care and support. The individual, or individuals will normally refer to the person or people that the learner is providing care and support for.

Private: Could include but not limited to: health condition, sexual orientation, personal history and social circumstances.

Others: In this context, may include but is not limited to:

- carers, loved ones, family, and friends
- colleagues in the setting
- professionals from other services.

Risk Assessment Processes: Should include being able to use the risk assessment process positively to enable individuals to take risks they choose (positive risk taking).

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.

Connections: Could include family, friends, loved ones and their community

Criteria 7.1c and 7.2a Could include but not limited to:

- using appropriate volume to discuss the care and support of an individual
- discussing care and support activities in a place where others cannot overhear
- using the individual's preferred form of address/name
- making sure doors, screens, or curtains are in the correct position
- getting permission before entering someone's personal space
- knocking before entering the room

- ensuring any clothing is positioned correctly
- ensuring the individual is positioned appropriately, and the individual is protected from unnecessary exposure of any part of their body they would not want others to be able to see
- supporting the individual with their identity e.g., personal appearance
- providing consideration of the individuals preferred routine and personal space.

Assessment guidance:
Assessment decisions for skills-based learning outcomes must be made during the learner's normal work activity.

Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
7.1 Understand the principles that underpin privacy and dignity in care	7.1a Describe what is meant by privacy and dignity
	7.1b Describe situations where an individual's privacy and dignity could be compromised
	7.1c Describe different ways to maintain the privacy and dignity of individuals in your care and support
7.2 Maintain the privacy and dignity of the individuals in their care	7.2a Demonstrate that your actions promote and maintain the privacy and dignity of individuals
	7.2b Explain why it is important not to disclose anything about the individual that they may wish to be kept private, unless it is appropriate to do so
7.3 Understand how to support an individual's right to make choices	7.3a Describe ways of supporting individuals to make informed choices
	7.3b Explain how risk assessment processes can be used to support the rights of individuals to make their own decisions

	7.3c Explain why your own personal views must not influence an individual's own choices or decisions
	7.3d Explain why there may be times when you need to support an individual to question or challenge decisions made about them by others
7.4 Support individuals in making choices about their care	7.4a Demonstrate how to support individuals to make informed choices
	7.4b Demonstrate how to use risk assessment processes to support the rights of individuals to make their own decisions
	7.4c Ensure your own personal views do not influence an individual's own choices or decisions
7.5 Understand how to support active participation	7.5a Describe how valuing individuals contributes to active participation
	7.5b Explain how to enable individuals to make informed choices about their lives
	7.5c Outline a range of ways you can support active participation with individuals
	7.5d Describe the importance of enabling individuals to be as independent as possible and to maintain their own network of relationships and connections with their community
7.6 Support individuals in active participation of their own care	7.6a Demonstrate how to support the active participation of individuals
	7.6b Explain how your own personal views could restrict the individual's ability to actively participate

4.8 Unit 8: Nutrition and hydration

Mandatory Unit		GLH	Credits	Level	Unit Reference
8	Nutrition and hydration	16	2	2	A/652/3119

This unit aims to provide learners with the knowledge, understanding, and practical skills needed to support individuals in meeting their nutritional and hydration needs. Learners will develop an understanding of the importance of good nutrition and hydration for health and wellbeing, and learn how to support individuals to make informed choices that meet their personal needs and preferences.

Guidance notes:

Whilst supporting individuals with meeting their nutritional and hydration needs may not seem to be part of every role in adult social care, it is important to ensure the learner has good transferable competency. This will ensure wherever they are working, individuals have appropriate access to nutrition and hydration and safe care and support.

It is acknowledged that individuals have a range of care and support needs in this area of care. This unit does require the learner to provide performance evidence (8.3c and d) and this needs to reflect and be contextualised to the needs of the individuals the learner is providing care and support for. Here are some examples of how the required performance evidence might be contextualised and confirmed in the learner's practice:

- encouraging regular nutrition and hydration/fluid intake and ensuring refreshed drinks and meals/snacks are placed within reach of the individual during care visits
- providing appropriate assistance to enable the individual to eat and drink comfortably and with dignity
- supporting an individual with nutrition and hydration aspects such as healthy eating, which could include meal planning and preparation, along with budgeting and purchasing food items
- supporting an individual to access, understand and follow recommended dietary advice provided by a health professional or similar
- supporting an individual with specific nutrition support which could include the use of special nutrient-rich foods, nutritional supplements, and fortified foods, as well as enteral feeding tubes
- being able to discuss and report any changes, concerns, or dilemmas they may face with nutrition and hydration when supporting individuals
- responding to any changes in the individual's health which may impact their ability to self-manage their nutrition and hydration needs

- signposting and supporting the individual to gain and follow healthy eating advice or advice from another professional which has an impact on their nutrition and hydration needs.

The above examples are **not** exhaustive, or all required, the purpose of the examples is to show how the performance evidence required can be contextualised and reflected across a range of settings in practice.

Individuals: The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Identify: Will include being able to recognise any changes or risks to the individuals care and support needs and being able to monitor changes or risks in line with the individuals' preferences, assessed needs and care and support plan requirements.

Risks: In line with agreed ways of working within the setting and may include use of appropriate monitoring tools.

Factors: Which can affect the nutrition and hydration needs and choices of individuals may include but not limited to:

- health needs and conditions: diabetes, coeliac disease, heart disease
- dietary requirements
- physical factors: eating, drinking, or swallowing difficulties, aspiration/choking
- impact of poor oral health
- food allergies
- appetite
- moral or ethical beliefs
- religious requirement or cultural preference
- personal choice and control
- mental capacity
- mental health and wellbeing
- eating disorders
- side effects of medication.

Preferences: Will include any personal choices and any religious and cultural preferences.

Needs: These may relate to the nutritional, health, and medical needs of individuals.

Care or **Support plan:** A care plan may be known by other names e.g., support plan, individual plan. It is the document where day to day requirements and preferences for care and support are detailed.

Monitor: Within the context of the individuals care / support plan, this may include, but not limited to recording preferences and changes in needs, planning, and recording daily intake (if required), planning meals and approaches to maintaining a healthy lifestyle.

Record: Where learners are required to use both electronic and manual recording systems, assessment must include both ways of record keeping.

Additional advice and guidance: Will vary depending on the learners role, agreed ways of working and area of advice and support needed. Action may include but not limited to referring to a senior colleague, a family carer, a professional practitioner e.g., general practitioner, dietitian, speech and language therapist, occupational therapist, or other practitioner/professional/specialist service who would be able provide advice, guidance, and support to the learner, setting and individual.

Assessment guidance:
Skills-based assessment within this unit should include direct observation as the preferred main source of evidence. Assessment must be carried out over an appropriate period of time within normal work activity.

Criteria 8.3 c and d: Both criteria should be evidenced in normal work activity and assessment advice has been provided above of how this could be contextualised and achieved. It is acknowledged there may still be situations where learners may not have the opportunity to demonstrate these skills. Other sufficient appropriate evidence to show that the learner would be able to do this is permissible. An assessment method such as a Professional Discussion could be planned and used to achieve this. Justification for this must be standardised and documented by the centre delivering the qualification.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
8.1 Understand the principles of food safety	8.1a Explain the importance of food safety, including hygiene in the preparation and handling of food
8.2 Understand the principles of nutrition	8.2a Explain the importance of good nutrition and hydration in maintaining health and wellbeing

and hydration	8.2b Identify signs and symptoms of poor nutrition and hydration
	8.2c State ways to promote and support adequate nutrition and hydration
	8.2d Explain how to identify and report changes or risks relating to nutrition and hydration needs
8.3 Support individuals to meet nutrition and hydration needs	8.3a Describe how to identify the nutrition and hydration care and support needs of individuals
	8.3b State factors that can affect an individual's nutrition and hydration care and support needs
	8.3c Support individuals with their nutrition and hydration in line with their preferences, needs and care or support plan
	8.3d Monitor and record (where required) the nutrition and hydration care and support provided to individuals
	8.3e Describe when you might need to seek additional advice and guidance when supporting individuals with their nutrition and hydration needs and how to gain this

4.9 Unit 9: Awareness of mental health and dementia

Mandatory Unit		GLH	Credits	Level	Unit Reference
9	Awareness of mental health and dementia	24	3	2	H/652/3120

This unit will enable learners to develop an understanding of the needs, experiences, and challenges faced by individuals living with mental health conditions or dementia, including the importance of early identification and intervention. Learners will explore the principles of personalised care and how it can support individuals to maintain their wellbeing, independence, and quality of life. They will also gain an understanding of the reasonable adjustments that may be required to meet individual needs, as well as the legal frameworks, policies, and guidelines that protect and support people living with mental health conditions or dementia.

Guidance notes:

Criteria 9.1a: Whilst this unit is specifically around mental health conditions and dementia, the learner should acknowledge and reflect that mental health and well-being relate to every person.

Types: As a minimum, the learner's response should include psychosis, depression, and anxiety.

Meant: As a minimum, the learner's response should include key facts, causes and different types of dementia. The learner should also be able to reflect that dementia will be different for every individual that has it.

Impact: The issues may be physical, social, or psychological and impact will be different for every person.

Individual: Individual/s: in this context, 'individual' will usually mean the person supported by the learner but it may include those for whom there is no formal duty of care.

Carers: In this context means those who provide unpaid care for anyone aged 16 or over with health or social care needs.

Other services and support: Learners should consider a range of services and resources available within their organisation and external to their organisation that could support individuals, their families, and carers.

Person centred approaches: Should include the principles and values of person centred care: including individuality, rights, choice, privacy, independence, dignity, respect, and partnership.

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.

Criteria 9.3b additional information: A strength-based approach focuses on individuals' strengths, resources and what they can do themselves to keep well and maintain independence. Whilst the Level 2 learner may not yet be familiar with this term, they should be encouraged to understand how this term relates to and builds on person-centred approaches and active participation.

Reasonable adjustments: Steps, adaptions and changes which can be made to meet the needs and preferences of an individual. Including but not limited to: providing the person with more time, using easy read information, using pictures, adjusting pace of communication, using simple, easy language, and making changes to the environment.

Report: In line with agreed ways of working within the setting and could include verbal, written and electronic systems

Legislation and guidance: including but not limited to:

- Equality Act 2010
- Human Rights Act 1998
- Mental Capacity Act 2005
- Care Act 2014
- Health and Social Care Act 2012
- Mental Health Act 1983
- Accessible Information Standard.

Within criteria and response for 9.5a, the learner should be encouraged to reflect on their existing knowledge of the appropriate legislation and guidance and how this supports individuals living with a mental health condition or dementia.

Assessment guidance:
Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
9.1 Understand the needs and experiences of people living with mental health conditions or dementia	9.1a Define: • mental health • mental wellbeing
	9.1b List common types of mental health conditions
	9.1c Explain what is meant by the term dementia
	9.1d Describe how living with a mental health condition or dementia can impact an individual's: • everyday life and the lives of their families and carers • health and wellbeing • care and support needs
9.2 Understand the importance of early identification of mental health conditions and dementia	9.2a Outline how to recognise early indicators of mental health deterioration
	9.2b List early signs and symptoms of dementia
	9.2c Explain why early identification of mental health needs or dementia is important
	9.2d Describe how an individual's care and support needs may change when a mental health condition or dementia is identified or there is a decline in the individual's condition
	9.2e Describe ways to engage with and signpost individuals living with a mental health condition, or dementia and their families and carers to other services and support
9.3 Understand aspects of personalised care which support an individual living with a mental health condition or dementia	9.3a Describe how positive attitudes can support individuals living with a mental health condition or dementia
	9.3b Explain why it is important to recognise a person living with a mental health condition or dementia as a unique individual
	9.3c Explain how using person-centred approaches and encouraging active participation can enable and encourage an

	individual living with a mental health condition or dementia to keep well and maintain independence
	9.3d Describe barriers individuals living with a mental health condition or dementia can face in accessing healthcare services
9.4 Understand the reasonable adjustments which may be necessary in health and care delivery for an individual living with a mental health condition or dementia	9.4a Identify reasonable adjustments which can be made in health and care services accessed by individuals living with a mental health condition or dementia and the importance of planning these in advance
	9.4b Explain how to report concerns associated with unmet health and care needs which may arise for individuals living with a mental health condition or dementia
9.5 Understand how legal frameworks and guidelines support individuals living with a mental health condition or dementia	9.5a Explain how key pieces of legislation and guidelines support and promote human rights, inclusion, equal life chances, and citizenship of individuals living with a mental health condition or dementia

4.10 Unit 10: Adult Safeguarding

Mandatory Unit		GLH	Credits	Level	Unit Reference
10	Adult Safeguarding	24	3	2	K/652/3122

This unit will enable learners to develop an understanding of the principles of safeguarding within adult social care. They will learn how to recognise the signs and indicators of abuse, respond appropriately to disclosures, and take action in line with safeguarding responsibilities. Learners will also gain knowledge of local and national policies and procedures designed to protect individuals from harm, abuse, and neglect. In addition, they will explore the use of restrictive practices and understand the importance of promoting individuals' rights, choice, and independence by always seeking the least restrictive option.

Guidance notes:

Legal definition: According to the Care Act 2014.

Types of abuse must include:

- physical abuse
- domestic abuse
- sexual abuse
- psychological abuse
- financial/material abuse
- modern slavery
- discriminatory abuse
- organisational abuse
- neglect/acts of omission
- self-neglect.

Potential risks with using technology: Could include use of electronic communication devices, use of the internet, use of social networking sites and carrying out financial transactions online and how the individual can be supported to be kept safe.

Risk adverse: The importance of balancing safety measures with the benefits individuals can gain from accessing and using technology such as online systems, and the individual's right to make informed decisions.

Featured: This should include reference to adult safeguarding reviews and lessons learnt.

Risk: may include:

- a setting or situation

- the individuals and their care and support needs.

Person centred values: Values include individuality, rights, choices, privacy, independence, dignity, respect, care, compassion, courage, communication, competency, and partnership.

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 regarding as an active partner in their own care or support, rather than a passive recipient.

Local and National policies and frameworks: Including, but not limited to: Making Safeguarding Personal. Local systems should include the appropriate detail and reference to:

- employer/organisation policies and procedures
- multi agency adult protection arrangements for a locality.

Legislation: Learners should consider how the different legislations relate to and interact with adult safeguarding. This should include, but is not limited to:

- Mental Capacity Act 2005
- Human Rights Act 1998
- Equality Act 2010
- Mental Health Act 1983
- Health and Social Care Act 2012
- Care Act 2014.

Principles: Including, but not limited to, the 6 principles of safeguarding embedded within the Care Act 2014: Empowerment, Prevention, Proportionality, Protection, Partnership, Accountability.

Restrictive practice: Learners should consider restrictions and restraint. They should consider practices which intend to restrict and restrain individuals as well as practices that do so inadvertently. An awareness should be demonstrated of physical, mechanical, chemical, seclusion, segregation, psychological restraint, and the threat of restraint.

Policies and procedures in relation to restrictive practice: may include the reference to ensuring that any restrictive practice is legally implemented and may take into account the Mental Capacity Act 2005.

Assessment guidance:
Assessment decisions for skills-based learning outcomes must be made during the learner's normal work activity.

Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment.

The final assessment decision must show application of knowledge which relates to the work environment and the specific local authority procedures and arrangements for Safeguarding Adults.

Learning Outcomes The learner will	Assessment Criteria The learner can
10.1 Understand and apply the principles of adult safeguarding	10.1a Explain the term 'adult safeguarding'
	10.1b State the legal definition of an adult at risk
	10.1c Describe own role and responsibilities in adult safeguarding
	10.1d State what constitutes harm
	10.1e Identify the main types of abuse
	10.1f Outline possible indicators of abuse
	10.1g State a range of factors which have featured in adult abuse and neglect
	10.1h Describe the range of potential risks with using technology and how to support individuals to be safe without being risk averse
	10.1i Demonstrate that individuals are treated with dignity and respect when providing care and support services
	10.1j Identify where to get information and advice about own role and responsibilities in preventing and protecting individuals from harm and abuse

10.2 Know how to reduce the likelihood of abuse	10.2a Explain why an individual may be at risk from harm or abuse
	10.2b Explain how care environments can promote or undermine people's dignity
	10.2c Describe the importance of individualised and person-centred care
	10.2d Describe how to apply basic principles of supporting individuals to keep themselves safe
	10.2e Describe how the likelihood of abuse may be reduced by: • working with person-centred values • enabling active participation • promoting choice and rights • working in partnership with others
10.3 Know how to respond to suspected or disclosed abuse	10.3a Describe what to do if abuse of an adult is suspected, including how to raise concerns within local freedom to speak up/whistleblowing policies or procedures
10.4 Understand how to protect individuals from harm and abuse - locally and nationally	10.4a Identify relevant legislation, principles, local and national policies, and procedures which relate to safeguarding adults
	10.4b State the local arrangements for the implementation of multi-agency adult safeguarding policies and procedures
	10.4c Explain the importance of sharing appropriate information with the relevant agencies
	10.4d State the actions to take if you experience barriers in alerting or referring to relevant agencies
10.5 Understand restrictive practices	10.5a Define 'restrictive practice'
	10.5b Describe organisational policies and procedures in relation to restrictive practices and own role in implementing these

	10.5c Describe the importance of seeking the least restrictive option for the individual

4.11 Unit 11: Safeguarding children

Mandatory Unit		GLH	Credits	Level	Unit Reference
11	Safeguarding children	8	1	2	M/652/3124

This unit will provide learners with an awareness of safeguarding children and young people within the context of adult social care. Learners will explore how they may come into contact with children and young people through their role, recognise the different types of abuse, and understand the factors that can increase a child or young person's vulnerability to harm. They will also develop an understanding of how to identify concerns and respond appropriately to risks, suspicions, or disclosures of abuse in line with safeguarding procedures and responsibilities.

Guidance notes:

The learners understanding for this unit should be demonstrated as an independent element and not inferred from Adult Safeguarding.

Circumstances: For example, when relatives or groups visit individuals, when providing support in the community or when providing care in an individual's own home.

The learner must show awareness:

- there may be occasions when there is contact with a child or young person when working in adult social care
- as an adult social care worker, that there is a responsibility to ensure the child or young person's wellbeing is safeguarded at all times.

Factors: May include but are not limited to:

- a setting or situation
- the child or young person and their care and support needs.

Types of abuse: could include but are not limited to:

- sexual
- physical
- neglect
- emotional
- domestic
- bullying and cyber bullying and online abuse
- exploitation
- trafficking
- female genital mutilation
- grooming.

Respond: This should include raising concerns in accordance with employer/organisational policies and procedures and local multi-agency arrangements. This should also consider any relevant legislation, such as the Mental Capacity Act 2005 which applies to people aged 16 and over.

Additional unit information:

Every adult social care worker needs to know what to do if they suspect a child or young person is being abused or neglected. As a minimum adult social care workers should be able to explain what they must do if they suspect a child, young person (met in any circumstances) is being subjected to neglect, harm, abuse, exploitation, or violence. This will include the worker knowing how to recognise such situations and how to respond.

If the adult social care worker is also in a role which involves working directly with children and young people, for example:

- in a transitional social care service i.e., supporting young people under 18 who are moving from children's service provision to adult care service provision
- in a registered adult care service i.e., a domiciliary care agency which is also registered to provide care to children and young people
- or is working in a healthcare setting

then the organisation and worker must meet the most up to date national minimum training standards for Safeguarding Children at the level appropriate to their workplace/role and duties as set out in the current guidance issued by the Intercollegiate Royal College of Paediatrics and Child Health. There will also be requirements set within the Local Authority area.

Assessment guidance:

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment.

The final assessment decision must show application of knowledge which relates to the work environment and local policies, procedures, and arrangements.

Learning Outcomes The learner will	Assessment Criteria The learner can
11.1 Know how to safeguard children	11.1a Describe circumstances where there could be contact with a child or young person in the normal course of work within adult social care
	11.1b State factors that may contribute to a child or young person being more at risk of abuse

	11.1c Outline types of abuse that a child or young person could be at risk from
	11.1d Describe how to respond to a risk, suspicion, or disclosure that a child or young person is being abused or neglected in line with relevant legislation, agreed ways of working and local procedures

4.12 Unit 12: Health, safety, and principles of basic life support

Mandatory Unit		GLH	Credits	Level	Unit Reference
12	Health, safety, and principles of basic life support	24	3	2	R/652/3125

This unit will enable learners to develop an understanding of health and safety practices within adult social care settings. Learners will explore relevant legislation, policies, and procedures, and understand the importance of risk assessments, reporting concerns, and maintaining a safe environment. They will gain knowledge of safe moving and handling practices, basic life support, and how to respond appropriately to accidents and emergencies. Learners will also develop an awareness of procedures relating to hazardous substances and fire safety, as well as the importance of promoting mental health and wellbeing, recognising potential triggers, and accessing appropriate sources of support.

Guidance notes:

Legislation: Could include

- Health and Safety at Work Act 1974 (HSWA)
- Manual Handling Operations Regulations 1992 (MHOR)
- The Management of Health and Safety at Work Regulations 1999
- Provision and Use of Work Equipment Regulations 1998 (PUWER)
- Lifting Operations and Lifting Equipment Regulations 1998 (LOLER).

Policies and procedures: May include other agreed ways of working as well as formal policies and procedures.

Others: In this context could include:

- individuals accessing care and support services
- carers, loved ones, family, friends of those accessing care and support services
- colleagues and peers
- professionals visiting the work setting
- visitors to the work setting.

Sustainable approaches: Human, social, economic and environmental considerations e.g., eco-friendly approaches, appropriate reuse of items and reduction of waste, recycling and efficient use of resources. Adherence to relevant workplace initiatives, policies and procedures where these exist and local/national priorities and also encouraging and supporting individuals who access care and support to live in a more sustainable way could also be considered by the learner.

Tasks: may include

- use of equipment
- basic life support and first aid
- medication
- healthcare procedures
- food handling and preparation.

Reporting: In line with agreed ways of working within the setting and could include verbal, written and electronic systems.

Moving and assisting: May also be known "moving and positioning" in adult social care.

Individual: A person accessing care and support. The individual, or individuals will normally refer to the person or people that the learner is providing care and support to.

Agreed ways of working: These will include policies and procedures, job descriptions and less formal agreements and expected practices.

Healthcare tasks and healthcare procedures: This may include reference to workplace guidance for carrying out delegated healthcare tasks and other clinical type procedures carried out as part of the individual's care or support plan.

Own: Relates to the learner undertaking this qualification.

Wellbeing: Is a broad concept referring to a person's quality of life. It considers health, happiness, and comfort. It may include aspects of social, emotional, cultural, mental, intellectual, economic, physical, and spiritual well-being.

Learning Outcome 12.4: Achievement of this learning outcome does not enable learner competency in being able to respond safely to basic life support or first aid situations. It is the employer's statutory responsibility to determine workplace needs and provide the appropriate level of training. When basic life support training is provided by the employer then this should meet the UK (United Kingdom) Resuscitation Council guidelines.

Criteria 12.9d should include how the learner can access the support available to them in the workplace.

Assessment guidance:
Assessment decisions for skills-based learning outcomes must be made during the learner's normal work activity.

Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time.

Criteria 12.3c: Some learners may not be employed in settings where moving and handling of individuals is required. Other evidence to show that the learner would be able to do is permissible. Simulation may be used to generate this evidence in these circumstances, in line with Section 2.6 (Use of Simulation) of this specification. The learner is expected to demonstrate safe moving and handling of objects within normal work activity.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
12.1 Understand own responsibilities, and the responsibilities of others, relating to health and safety in the work setting	12.1a Identify legislation relating to general health and safety in an adult social care work setting
	12.1b State the main points of the health and safety policies and procedures agreed with the employer
	12.1c State the main health and safety responsibilities of: • self • the employer or manager • others in the work setting
	12.1d Identify tasks relating to health and safety that should not be carried out without special training
	12.1e Identify how to access additional support and information relating to health and safety
	12.1f Identify a range of sustainable approaches which can be applied in own role
12.2 Understand risk assessment	12.2a Explain why it is important to assess the health and safety risks posed by work settings, situations or activities

	12.2b Explain how and when to report health and safety risks in the workplace
12.3 Move and assist safely	12.3a Identify key pieces of legislation that relate to moving and assisting
	12.3b Identify tasks relating to moving and assisting you are not allowed to carry out until you are competent.
	12.3c Demonstrate how to move and assist people and/or objects safely, maintaining the individual's dignity, and in line with legislation and agreed ways of working.
12.4 Understand procedures for responding to accidents, sudden illness and providing basic life support	12.4a Identify different types of accidents and sudden illness that may occur in the course of your work
	12.4b State the workplace procedures to be followed if: • an accident should occur • a sudden illness should occur • basic life support is required
	12.4c State the emergency basic life support and first aid actions you are and are not allowed to carry out in your role
12.5 Understand medication and healthcare tasks	12.5a Describe agreed ways of working in relation to: • medication in the setting • healthcare tasks
	12.5b State tasks relating to medication and healthcare procedures that you must not carry out until you are competent
12.6 Handle hazardous substances	12.6a Identify common hazardous substances in the workplace
	12.6b Demonstrate safe practices for storing, using, and disposing of hazardous substances
12.7 Understand how to promote fire safety	12.7a Explain how to prevent fires from starting or spreading
	12.7b State what to do in the event of a fire

12.8 Know how to work safely and securely	12.8a State the measures that are designed to protect your own safety and security at work, and the safety of those you support
	12.8b Describe agreed ways of working for checking the identity of anyone requesting access to premises or information
12.9 Know how to manage own mental health and personal wellbeing	12.9a State common factors that can affect own mental health and wellbeing
	12.9b Describe the circumstances that may trigger these factors in self
	12.9c Identify the resources which are available to support own mental health and wellbeing
	12.9d Describe how to access and use the available resources which are available to support own mental health and wellbeing

4.13 Unit 13: Handling information

Mandatory Unit		GLH	Credits	Level	Unit Reference
13	Handling information	8	1	2	Y/652/3127

This unit will enable learners to understand how to handle information safely and responsibly within adult social care settings. Learners will explore the importance of following agreed ways of working, maintaining confidentiality, and supporting individuals to keep their personal information secure. They will develop the skills needed to maintain accurate, up-to-date, and legible records, as well as understand how to recognise, report, and respond to data breaches and risks to information security.

Guidance notes:

Secure systems for accessing, recording, storing, and sharing of information: this includes both manual/written recording and electronic systems where learners are required to use different systems within the setting.

Agreed ways of working: how they work in accordance with their employer, these will include policies, procedures and job descriptions and will include approaches to maintaining and promoting confidentiality. This will also include the learners personal responsible for handling data safely and the importance of data and cyber security.

Legislation: the learner should consider how different legislation impacts practice. This may include, but is not limited to:

- Data Protection Act 2018
- The General Data Protection Regulation (GDPR) 2016
- Freedom of Information Act 2000
- Care Act 2014
- Health and Social Care Act 2012
- Human Rights Act 1998.

Individual: A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. This will include supporting the individual to understand their rights and choices with regards to their personal information, such as how their information is stored and used.

Report: In line with agreed ways of working within the setting and could include the use of verbal, written and electronic systems.

Data Breach: This is the accidental or unlawful destruction, loss, alternation, unauthorised disclosure of, or access to, personal or secure data.

Criteria 13.1, a, and b achievement should reflect handling information both manual/written and electronically where learners are required to use different systems within the setting.

Criteria 13.1c: The learner should avoid the use of abbreviations and jargon and use respectful and inclusive language when contributing to records and reports.

Assessment guidance:
Assessment decisions for skills-based learning outcomes must be made during the learner's normal work activity.

Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
13.1 be able to handle information	13.1a Explain why it is important to have secure systems and follow the agreed ways of working for: • accessing information • recording information • storing information • sharing information
	13.1b Explain the support an individual may need to keep their information safe and secure
	13.1c Demonstrate how to keep records that are up to date, complete, accurate and legible
	13.1d State the process for reporting, including who to report to, if: • agreed ways of working and legislation have not been followed • there has been a data breach or risk to data security

4.14 Unit 14: Infection prevention and control (IPC)

Mandatory Unit		GLH	Credits	Level	Unit Reference
14	Infection prevention and control (IPC)	16	2	2	A/652/3128

This unit will enable learners to develop an understanding of the causes and spread of infection, and the importance of effective infection prevention and control practices. Learners will explore ways to reduce the risk of infection, including following appropriate procedures, using equipment correctly, and applying safe practices to help protect individuals, themselves, and others within care settings.

Guidance notes:

Precautions: Will relate to service type and current organisational, national, and local policy/procedure and guidance.

Hand hygiene: Refers to following recommended hand-washing techniques and the use of appropriate sanitiser.

Individuals: A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Others: In this context, this refers to everyone a learner is likely to come in to contact with, including but not limited to:

- individuals accessing care and support services
- carers, loved ones, family, friends of those accessing care and support services
- colleagues and peers
- managers and supervisors
- professionals from other services
- visitors to the work setting
- members of the community
- volunteers.

Appropriate use of Personal Protective Equipment (PPE): This should include the different equipment recommended, available and donning/doffing and disposal.

Clothing: Where appropriate to the setting this may include reference to uniform requirements.

Decontamination: After cleaning, environments and equipment may require disinfection and sterilisation.

Clinical waste: Is defined as a type of waste that has the potential to cause infection or disease and includes, "sharps," such as needles, bodily fluids, incontinence products and used dressings.

Criteria 14.1e: The learner should consider the factors which may contribute to the individual being more vulnerable to infection.

Methods, processes, and principles within criteria 14.1h, i and j should include reference to local procedures where applicable.

Assessment guidance:
Assessment decisions for skills-based learning outcomes must be made during the learner's normal work activity.

Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
14.1 Prevent the spread of infection	14.1a Describe the causes of infection, the main ways infection can get into the body and the chain of infection
	14.1b Describe the standard infection prevention and control (IPC) precautions which must be followed to protect you and others in your workplace and where to find the most up-to-date information
	14.1c State your role in preventing infection in the area you work
	14.1d Demonstrate effective hand hygiene using appropriate products

	14.1e Explain how your own health, hygiene, vaccinations status and exposure to infection at work might pose a risk to the individuals you support and others you meet.
	14.1f Identify common types of personal protective equipment (PPE) and clothing and describe how and when to use them
	14.1g Demonstrate effective use of PPE appropriate to the care activity, including putting on and taking off PPE (donning and doffing) safely
	14.1h Describe the appropriate methods for cleaning and/or decontamination of the care environment/equipment
	14.1i Describe the process for safe handling of blood/bodily fluids spills
	14.1j Outline the principles of safe handling and disposal of infected or soiled linen/equipment and clinical waste

4.15 Unit 15: Awareness of learning disability and autism

Mandatory Unit		GLH	Credits	Level	Unit Reference
15	Awareness of learning disability and autism	24	3	2	J/652/3130

This unit will enable learners to develop an understanding of the needs, experiences, and challenges faced by individuals living with a learning disability and autistic people. Learners will explore how to provide appropriate support by recognising and meeting individual communication and information needs, as well as understanding the importance of reasonable adjustments to promote inclusion, independence, and wellbeing. They will also gain knowledge of the legal frameworks and guidance that protect the rights of and support individuals with a learning disability and autistic people.

Guidance notes:

Meant: for learning disability, as a minimum, the learner's response should recognise the cause of a learning disability, that a learning disability is lifelong, there are different types, and it can be different for every person that has one. For autism, as a minimum, the learner's response should include, how common it is, that autism is neurodevelopmental and lifelong and that every autistic person has a different combination of traits and sensitivities and is unique.

Other mental or physical conditions: This could include but is not limited to physical impairments, mental health conditions, autism, learning difficulties and disabilities, intellectual disabilities, neurological conditions such as epilepsy, health related conditions, visual or hearing impairment, exceptional cognitive skills, and the impact of trauma. The learner's response should recognise that conditions and impact will be very different for a person with a learning disability and for an autistic person.

Impact: The learner's response should reflect that this will be different for every person.

Barriers accessing healthcare services: This could include but is not limited to: the associated additional health conditions a person may have, the need for reasonable adjustments which are not recognised or applied, accessibility issues inc. transport, communication and language differences, support to access health procedures, checks and screening, misuse of the Mental Capacity Act, lack of understanding of learning disability and autism and diagnostic overshadowing.

Health inequalities: Reference should be made to LeDeR reviews and findings from the 'Learning from lives and deaths – people with a learning disability and autistic people'

programme (LeDeR). This should include but is not limited to differences in life expectancy, prevalence of avoidable medical conditions, overmedication (STOMP) and issues with access to treatment and support for behaviour that challenges (STAMP).

Key differences in communication: This could include but is not limited to people: may use different methods to communicate, may interpret communication differently, may not recognise non-verbal communication, may not recognise emotional and social cues, may need longer to process communication and information, may need longer to express themselves, how communication may be displayed through behaviours, may take language literally and social interaction.

Sensory issues: This could include but is not limited to: over-sensitivity or under-sensitivity to lighting, sound, temperature, touch, smell and how anxiety and stress can contribute to sensory tolerance.

Individual's unique communication and information needs: The learner's response should recognise differences and individuality.

Ways to adapt own communication: This could include but is not limited to: adjusting pace, tone, and volume, adjusting space, provide more time when communicating, provide a quiet space, making environmental changes, active listening, use preferred methods of communication, alternative methods of communication and using simple easy language.

Carers: In this context means those who provide unpaid care for anyone aged 16 or over with health or social care needs.

Reasonable adjustments: steps, adaptations and changes which can be made to meet the needs and preferences of a person with a learning disability or autistic person. Including but not limited to: providing the person with more time, using easy read information, pictures, adjusting pace of communication, using simple, easy language and making changes to the environment, including opportunities to avoid sensory overload (e.g. turning off unnecessary lights, TV / radio, offering quiet space, enabling the use of sensory protection such as noise-cancelling headphones), and considering the use of an alternative location.

Within criteria and response for 15.3a the learner should recognise and consider not only the reasonable adjustments which may be needed in the care and support service accessed by the person, but also reflect on the adjustments which may be needed when they are supporting a person to access other care and health services.

Report: In line with agreed ways of working within the setting and could include verbal, written and electronic systems

Legislation and guidance: Including but not limited to:

- Equality Act 2010
- Human Rights Act 1998
- Mental Capacity Act 2005
- Care Act 2014
- Health and Social Care Act 2012
- Accessible Information Standard
- Autism Act 2009
- Down Syndrome Act 2022.

Within response for 15.4a, the learner should be encouraged to reflect on their current knowledge of the appropriate legislation and guidance in relation to supporting people with a learning disability and autistic people.

Supporting note:

- The Learning Outcomes for Standard 15 have been updated to be consistent with learning outcomes from the Core Capabilities Frameworks for supporting people with a learning disability and autistic people.
- These learning outcomes also reflect the minimum expected learning set out in standard 1 of The Oliver McGowan code of practice on statutory learning disability and autism training.
- They also align with the learning outcomes in tier 1 of the Oliver McGowan Mandatory Training on Learning Disability and Autism, which is the government's preferred and recommended package for all health and social care staff which meets the code of practice standards.
- Undertaking the Oliver McGowan Mandatory Training on Learning Disability and Autism to tier 1 or equivalent training which meets all the standards of the Code will support a learner to achieve Standard 15. Learners will still need to evidence their learning to an assessor.

Care providers should ensure that all staff receive training in how to interact appropriately with and care for people with a learning disability and autistic people, at a level appropriate to their role.

For service providers regulated by the Care Quality Commission, this is a legal requirement introduced by the Health and Care Act 2022. To support service providers to meet this legal requirement, standards for learning disability and autism training are set out in the Oliver McGowan code of practice on statutory learning disability and autism training. It is expected that all learners undertaking the Care Certificate who work for regulated service providers will have attended training that meets the standards in the code of practice prior to or alongside completing this qualification.

Individual staff members may have learning disability and autism training needs that go beyond the learning outcomes in this unit and therefore require further training to enable their employer to meet the legal requirement. It is the employer's responsibility to identify and address this need as appropriate. Therefore, achievement of this qualification unit does not mean that an individual has automatically met their overall learning disability and autism training needs. Care providers should assess the learning needs of each staff member with relation to learning disability and autism.

To enable learners to transfer prior learning from training they have attended, centres are encouraged to consider the appropriate use of RPL as an assessment method towards formal achievement of this qualification unit.

Assessment guidance:
Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.

Learning Outcomes The learner will	Assessment Criteria The learner can
15.1 Understand the needs and experiences of people with a learning disability and autistic people	15.1a Define what is meant by the term learning disability
	15.1b Define what is meant by the term autism
	15.1c Identify other mental or physical conditions that a person with a learning disability or autistic person is more likely to live with than the general population
	15.1d Explain how learning disability or autism can impact a person's: • everyday life • health and wellbeing • care and support needs
	15.1e Describe barriers that people with a learning disability or an autistic person can face in accessing healthcare services
	15.1f Describe the different health inequalities experienced by people with a learning disability and autistic people

15.2 Understand how to meet the communication and information needs of people with a learning disability and autistic people	15.2a Identify key differences in communication for: • a person with a learning disability • an autistic person
	15.2b Describe how sensory issues can impact autistic people
	15.2c Explain the importance of meeting a person's unique communication and information needs
	15.2d Describe ways to adapt own communication when supporting people with a learning disability and autistic people
	15.2e Identify different ways to engage with and signpost people with a learning disability, autistic people and their families and carers to information, services, and support
15.3 Understand reasonable adjustments which may be necessary in health and care delivery	15.3a Identify reasonable adjustments which can be made in health and care services accessed by people with a learning disability and autistic people and the importance of planning these in advance
	15.3b Explain how to report concerns associated with unmet health and care needs which may arise for people with a learning disability and autistic people when reasonable adjustments are not made
15.4 Understand how legislation and guidance supports people with a learning disability and autistic people	15.4a Explain how key pieces of legislation and guidance support and promote human rights, inclusion, equal life chances, and citizenship for people with a learning disability and autistic people

Appendix A: Expert Witnesses

This appendix sets out the definition and eligibility criteria for the use of an expert witness in the assessment of this qualification, in line with the Skills for Care and Development Assessment Principles.

Definition

Witness testimony is an account of practice that has been witnessed or experienced by someone other than the assessor and the learner. Witness testimony has particular value in confirming reliability and authenticity, particularly in the assessment of practice in sensitive situations, and provides supporting information for assessment decisions. It should not be used as the only evidence of skills.

An expert witness is a specific type of witness used where the assessor is not occupationally competent in a specialist area. Expert witnesses can be used for direct observation where they have occupational expertise in that specialist area.

Eligibility Criteria

An expert witness must:

- have a working knowledge of the units for which they are providing expert testimony.
- be occupationally competent in the area for which they are providing expert testimony.
- have EITHER any qualification in assessment of workplace performance OR a work role which involves evaluating the everyday practice of staff within their area of expertise.

Use of an Expert Witness

The use of an expert witness does not replace the need for direct observation by the assessor.

The use of expert witnesses should be determined and agreed by the assessor, in line with internal quality assurance arrangements and GA's requirements for assessment of units within the qualification. The assessor remains responsible for the final assessment decision.

It is the centre's responsibility to establish appropriate processes to recruit, induct, support and standardise suitable expert witnesses from within the workplace.

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