Qualification Specification:

OCN NI Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland)

- Qualification No: 610/8008/1

Version: 1.0

1. Specification Updates

Key changes have been listed below:

Section	Detail of change	Version and date of Issue
Specification	1. Northern Ireland Social Care Council approved qualification to replace existing Level 5 Diploma in Leadership and Management in Health Social Care (NI) – Adult Management	V1.0 - March 2026
Specification	2. Northern Ireland Social Care Council approved qualification to replace existing Level 5 Diploma in Leadership and Management in Health Social Care (NI) – Adult Residential Management	V1.0 - March 2026

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3. Introduction to Open College Network Northern Ireland (OCN NI)

The Open College Network Northern Ireland (OCN NI) is a UK recognised awarding organisation based in Northern Ireland. We are regulated by CCEA Regulation to develop and award regulated professional and technical (vocational) qualifications from Entry Level up to and including Level 5 across all sector areas. In addition, OCN NI is also regulated by Ofqual to award qualifications in England.

OCN NI is also an educational charity that advances education by developing nationally recognised qualifications and recognising the achievements of learners. We work with centres such as Further Education Colleges, Private Training Organisations, Voluntary and Community Organisations, Schools, SME's and Public Sector bodies to provide learners with opportunities to progress into further learning and/or employment. OCN NI's Strategic Plan can be found on the OCN NI website www.ocnni.org.uk.

For further information on OCN NI qualifications or to contact us, you can visit our website at www.ocnni.org.uk. The website should provide you with details about our qualifications, courses, contact information, and any other relevant information you may need.

OCN NI Contact Details

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4. About this Specification

This specification details OCN NI's specific requirements for the delivery and assessment of the **OCN NI Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland).**

This specification will provide guidelines for centres to ensure the effective and correct delivery of this qualification. OCN NI qualification specifications are based on research and engagement with the practitioner community to ensure they provide appropriate skills and knowledge for learners.

The qualification specification will detail the following aspects of the **OCN NI Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland).**

- **Qualification Features**: this includes the key characteristics and features of this qualification, such as its intended audience, purpose, and credit value.

- **Centre Requirements:** this details the prerequisites and obligations that centres must fulfil to be eligible to deliver and assess this qualification. These includes guidelines on staff qualifications, resources, and required procedures.

- **Structure and Content:** this details the structure and content of the qualification including units, and any specific content that learners will be required to study.

- **Assessment Requirements:** this details assessment criteria and assessment methods for this qualification, ensuring that summative assessment approaches are clear.

- **Quality Assurance:** the quality and consistency of delivery and assessment of this qualification are of paramount importance to OCN NI. The mandatory quality assurance arrangements including processes for internal and external verification that all centres offering this qualification must adhere to are detailed.

- **Administration:** guidance on the administrative aspects of delivering this qualification, including registration, certification, and record-keeping.

- Reference to other handbooks and policies as appropriate to the qualification.

It is important to note that OCN NI will communicate any significant updates or changes to this specification in writing to our centres. Additionally, we will make these changes available on our official website at www.ocnni.org.uk.

To stay current, please refer to the online version of this specification as it is the most authoritative and up-to-date publication. Be aware that downloaded and printed copies may not reflect the latest revisions.

4.1 Additional Support

OCN NI offers a comprehensive range of support services designed to assist in meeting the delivery and quality assurance requirements of OCN NI qualifications. These services include:

- **Learner Assessment Booklets**: These booklets are created to assist learners in demonstrating the fulfilment of assessment criteria and organising the quality assurance prerequisites for each individual unit.

- **Qualification Support Pack**: A support pack has been developed to support centres in the delivery of this qualification. The pack includes planning and assessment templates, guides to best practice, etc.

- **Professional Development for Educators**: OCN NI provides opportunities for professional development tailored to meet the various needs of practitioners and quality assurance staff. Centres can join our training sessions, available in both face-to-face and online formats, or explore a wealth of training materials by visiting www.ocnni.org.uk

- **OCN NI Subject Advisors**: Our team of subject advisors offers vital information and support to centres. They provide guidance on specification details, non-exam assessment advice, updates on resource developments, and various training opportunities. They actively engage with subject communities through an array of networks to facilitate the exchange of ideas and expertise, to support practitioners to provide quality education programs to learners.

All centres can access information, support and guidance to support the delivery and quality assurance of this qualification by contacting their designated Business Development Advisor or by contacting us on Contact Us | OCN NI

5. About this Qualification

5.1 Qualification Regulation Information

OCN NI Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland)
Qualification Number: 610/8008/1

Operational start date: 01 October 2026
Review date: 30 October 2031

The qualification's operational start and end dates define the regulated qualification's lifecycle. The operational end date is the final date for learner registration, while learners have until the certificate end date to complete the qualification and receive their certificates.

It is important to note that all OCN NI regulated qualifications are listed on the Register of Regulated Qualifications (RQF), which can be found at Ofqual Register. This register is maintained by Ofqual in England and CCEA Regulation in Northern Ireland. It contains information about qualifications that are regulated and accredited. It is a key resource for learners, employers, and educational institutions to verify the status and recognition of qualifications.

Centres must adhere to administrative guidelines diligently, with special attention to the fact that fees, registration, and certification end dates for the qualification may be subject to changes. It is a centre's responsibility to make itself aware of updates on any modifications to ensure compliance with the latest requirements. OCN NI provides centres with timely updates through various channels including website, newsletters and through this specification. Information on qualification fees can be found on the Centre Login section of the OCN NI website www.ocnni.org.uk .

5.2 Sector Subject Area

A subject sector area is a specific category used to classify academic and vocational qualifications. Subject sector areas are part of the educational and qualifications framework to organise and categorise qualifications. The sector subject for this qualification is:

1.3 Health and social care

This qualification relates to the following National Occupational Standards:

HSCCLD36 – Promote the effectiveness of teams
HSCCLD46 – Lead the effectiveness of teams
HSCCLD420 – Lead on regulatory requirements in the workplace
HSCCLD416 - Collaborate with others to support individuals
HSCCLD418 - Lead service delivery planning
HSCCLD422 - Lead the use of digital technology
HSCCLD41 – Lead effective communication
HSCCLD412 - Lead the provision of information on services and facilities
HSCCLD38 - Promote equality, diversity, inclusion and rights of individuals
HSCCLD48 - Lead practice that ensures equality, diversity, inclusion and rights of individuals
HSCCLD42 – Lead a healthy and safe workplace
HSCCLD44 - Lead the safeguarding of individuals and others
HSCCLD415 - Lead the development of risk management plans
HSCCLD414 - Lead the assessment process with individuals
HSCCLD417 - Lead partnership working arrangements
HSCCLD419 - Lead quality assurance assessments
SCDCPC302 - Contribute to the effective performance of your organisation
SCDCPC402 - Promote compliance with organisational responsibility
HSCCLD317 - Promote learning and development or employment opportunities for individuals
HSCCLD340 - Supervise and support team members
HSCCLD43 – Lead and develop reflective practice
HSCCLD341 - Provide assessment on the performance of others
HSCCLD327 - Work with individuals to develop and maintain relationships
HSCCLD49 - Advocate with and on behalf of individuals
HSCCLD339 - Promote the recruitment of team members
HSCCLD334 Promote quality systems and procedures
HSCCLD421 - Lead changes to workplace policies, procedures and practices
HSCCLD45 - Lead the care or support planning process
HSCCLD424 - Lead a research project
HSCCLD411 - Manage requests for health, social or other care services

5.3 Grading

Grading for this qualification is pass/fail.

5.4 Qualification's Aim and Objectives

Qualification's Aim

The aim of the OCN NI Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland) will provide learners with leadership and management training aligned with sectoral standards for quality service provision. It is fully endorsed by the Northern Ireland Social Care Council (NISCC).

Qualification's Objectives

The objectives of this qualification are to provide learners with a wide range of opportunities to develop and evidence their leadership and management knowledge, skills and practice within health and social care services.

5.5 Target Learners

This qualification is designed for a Social Care Manager, Deputy, or an Enhanced Social Care Practitioner who has the opportunity to develop knowledge and skills in the leadership and management of a social care services.

5.6 Entry Requirements

The entry requirements for this qualification are that learners must be at least 19 years of age and have opportunities to evidence appropriate leadership and management responsibilities in a health and social care service in Northern Ireland.

5.7 Progression

The OCN NI Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland) will support learners to engage in continuing professional development and will provide learners with career advancement opportunities in management or leadership roles within health and social care services.

5.8 Delivery Language

This qualification is exclusively available in English. If there is a desire to offer this qualification in Welsh or Irish (Gaeilge), we encourage you to get in touch with OCN NI. They will assess the demand for such provisions and, if feasible, provide the qualification in the requested language as appropriate.

6. Centre Requirements for Delivering this Qualification

6.1 Centre Recognition

New and existing OCN NI recognised centres must apply for and be granted approval to deliver this qualification prior to the commencement of delivery.

6.2 Qualification Approval

Once a centre has successfully undergone the Centre Recognition process, it becomes eligible to apply for qualification approval. The centre's capability to meet and sustain the qualification criteria will be assessed. Throughout the qualification approval process, OCN NI will aim to ensure that:

- centres possess suitable physical resources (e.g. equipment, IT, learning materials, teaching rooms) to support qualification delivery and assessment
- centre staff involved in the assessment process have relevant expertise and/or occupational experience
- robust systems are in place for ensuring ongoing professional development for staff delivering the qualification
- centres have appropriate health and safety policies concerning learner equipment use
- qualification delivery by centres complies with current equality and diversity legislation and regulations
- as a part of the assessment process for this qualification, learners will have access to a practical work setting

6.3 Centre Staffing

To offer this qualification centres are mandated to establish the following roles as a minimum, although a single staff member may serve in more than one capacity*:

- Centre contact
- Programme Co-ordinator
- Assessor
- Internal Quality Assurer

*Note: An individual cannot serve as an Internal Quality Assurer for their own assessments.

6.4 Tutor Requirements

Tutors responsible for delivering this qualification are expected to possess a high degree of occupational competency. They should meet the following criteria:

- **Occupational Competency:** Tutors should demonstrate a clear understanding of the subject matter, including up-to-date knowledge of the health and social care sector. This competence should enable them to effectively impart knowledge and practical skills to learners.

- **Qualifications:** Tutors should hold a relevant qualification at least at Level 5. This ensures that they have the necessary academic foundation to provide in-depth guidance and support to learners.

- **Relevant Industry Experience:** In addition to academic qualifications, tutors must have a minimum of three years of relevant, hands-on experience in the health and social care sector.

These requirements collectively ensure that learners receive instruction from highly qualified and experienced instructors, thereby enhancing the quality and effectiveness of their educational experience in the health and social care sector.

6.5 Assessor Requirements

The assessment of this qualification takes place within the centre and is subjected to OCN NI's rigorous quality assurance procedures. The achievement of individual units is based on the criteria defined in each unit.

Assessors play a pivotal role in ensuring the validity and fairness of assessments. They are required to meet the following criteria:

- **Occupational Competency:** Assessors should possess a high degree of occupational competency in the relevant subject matter. This expertise enables them to accurately evaluate and measure a learner's knowledge and skills. Additionally, they should hold qualifications at a level that is at least one level higher than the qualification they are assessing, ensuring their in-depth understanding of the subject matter.

- **Relevant Industry Experience:** A minimum of three years of practical experience in the health and social care sector is a prerequisite.

- **Assessment Expertise:** Assessors should have direct or related experience in the field of assessment. This includes knowledge of best practices in designing, conducting, and grading assessments. Their expertise ensures that assessments are both fair and valid.

- **Assessors' Qualifications:** *Assessors should hold a relevant qualification at least at Level 5 and hold or be currently undertaking a recognised level 3 assessor's qualification or equivalent.

- **Comprehensive Assessment Oversight:** Assessors are responsible for evaluating all assessment tasks and activities comprehensively. They must thoroughly review and assess each element to ensure a fair and accurate representation of a learner's skills and knowledge.

These rigorous requirements uphold the quality and integrity of the qualification's assessment process, ensuring that learners receive a fair and reliable evaluation of their health and social care competencies.

In accordance with the Skills for Care and Development Assessment Principles (November 2025, V1.1)

Skills-based assessment must include direct observation as the principal and most reliable assessment source of evidence, carried out by the assessor in person with the learner in their workplace. Observation must be carried out over an appropriate period of time and not be end-loaded. Evidence should be naturally occurring and minimise the impact on individuals who use care or support, their families and carers. Where a centre has valid and genuine reasons for being unable to meet the direct observation requirements, short-term flexible approaches may be permitted."

Simulation is not appropriate for any competence-based assessment within this qualification.

* Skills for Care and Development Assessment Principles

6.6 Internal Quality Assurer Requirements

The Internal Quality Assurer plays a crucial role in the centre's internal quality assurance processes. The centre must designate a skilled and trained Internal Verifier who assumes the role of an internal quality monitor responsible for verifying the delivery and assessment of the qualifications.

The Internal Quality Assurer for this qualification must meet the following criteria:

- **IQA Relevant Industry Experience:** A minimum of three years of practical experience in the health and social care sector is a prerequisite.
- **IQA Expertise:** IQAs should have direct or related experience in the field of verification. This includes knowledge of best practices in designing, conducting, and grading assessments. Their expertise ensures that assessments are both fair and valid.
- **IQA Qualification:** IQA should hold or be currently undertaking a recognised level 4 IQA qualification or equivalent.
- **Thorough Evaluation of Assessment Tasks and Activities:** IQAs are tasked with conducting in-depth reviews and assessments of all assessment tasks and activities. Their responsibility is to ensure a comprehensive and meticulous oversight of each element to guarantee a just and precise reflection of a learner's abilities and knowledge and to ensure that all assessment and quality assurance requirements are fulfilled.

* Skills for Care and Development Assessment Principles

7. Qualification Structure

7.1 Qualification Purpose

The Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland) is a unitised qualification on a scale of pass or fail. Learners are expected to demonstrate a comprehensive understanding of the subject matter, ensuring a level of proficiency. This qualification will enable learners to acquire knowledge and practical skills in the leadership and management of health and social care services.

7.2 Qualification Level

In the context of the OCN NI Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland) it is essential to understand the significance of qualification levels as they play a pivotal role in assessing the depth and complexity of knowledge and skills required for successful attainment. This qualification aligns with Level 3 which signifies a moderate level of difficulty and intricacy. It's important to note that qualification levels in the educational framework range from Level 1 to Level 8, complemented by three 'entry' levels, namely Entry 1 to Entry 3.

7.3 Qualification Size

Total Qualification Time (TQT)

This represents the total amount of time a learner is expected to spend to complete the qualification successfully. It includes both guided learning hours (GLH) and independent study or additional learning time.

Guided Learning Hours (GLH)

These are the hours of guided instruction and teaching provided to learners. This may include classroom instruction, tutorials, or other forms of structured learning.

OCN NI Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland)	
Total Qualification Time (TQT):	900 hours
Total Credits Required:	90 credits
Minimum Guided Learning Hours (GLH):	666 hours

7.4 How to Achieve the Qualification

To achieve the OCN NI Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland) learners will be required to achieve a minimum of 90 credits.

The Diploma is made up of Mandatory and Optional units – all mandatory units (14) must be achieved (75 Credits). The remaining 15 credits may be selected from Optional units that align with each learner's service setting, role and responsibilities.

A maximum of one unit may be selected from Group A Optional units, however there is no requirement to select any credits from Group A Optional units.

8. Assessment Structure

This qualification is assessed through internal assessment and each unit is accompanied by specific assessment criteria that define the requirements for achievement.

8.1 Assessment Guidance: Portfolio

The portfolio for this qualification is designed to provide a comprehensive view of a learner's skills and knowledge. It is an holistic collection of evidence that may include a single piece of evidence that satisfies multiple assessment criteria. There is no requirement for learners to maintain separate evidence for each assessment criterion.

When learners are creating their portfolio, they should refer to the assessment criteria to understand the evidence required. It is essential that the evidence in the portfolio reflects the application of skills in real-world situations. Learners should ensure that they provide multiple examples or references whenever the assessment criteria require it.

When demonstrating knowledge, learners can draw from their own organisation or another organisation they are familiar with to provide context.

8.2 Understanding the Units

The units outlined in this specification establish clear assessment expectations. They serve as a valuable guide for conducting assessments and ensuring quality assurance efficiently. Each unit within this specification follows a consistent structure. This section explains the operational framework of these units. It is imperative that all educators, assessors, Internal Verifiers, and other personnel overseeing the qualification review and familiarise themselves with this section to ensure a comprehensive understanding of how these units function.

- **Title:** The title will reflect the content of the unit and should be clear and concise.
- **Level:** A unit can have one of six RQF levels: Entry, One, Two, Three, Four or Five. All units within this qualification are level 3.
- **Credit Value:** This describes the number of credits ascribed to a unit. It identifies the number of credits a learner is awarded upon successful achievement of the unit. One credit is awarded for the learning outcomes which a learner, on average, might reasonably be expected to achieve in a notional 10 hours of learning.
- **Learning Outcome:** A coherent set of measurable achievements.
- **Assessment Criteria:** These enable a judgement to be made about whether or not, and how well, the students have achieved the learning outcomes.
- **Assessment Guidance and Methods:** These detail the different assessment methods within the unit that may be used.
- **Teaching Content:** This provides indicative content to assist in teaching and learning.

9. Qualification Summary by Unit

OCN NI Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland)

- Learners will be required to achieve a minimum of 90 Credits in order to achieve the Diploma.
- The Diploma is made up of Mandatory and Optional units – all mandatory units (14) must be achieved (75 Credits). The remaining 15 credits may be selected from Optional units that align with each learner's service setting, role and responsibilities.
- A maximum of one unit may be selected from Group A Optional units, however there is no requirement to select any credits from Group A Optional units.

Unit Reference Number	OCN NI Unit Code	Unit Title	Credit Value	GLH	Level
Mandatory units					
H/652/3671	CBH025	Understand Leadership and Management in Health and Social Care	5	38	Five
K/652/3673	CBH026	Leading and Managing Continuous Professional Development in a Health and Social Care Service	7	60	Five
L/652/3674	CBH027	Leading Operational Management in Health and Social Care	4	31	Five
M/652/3675	CBH028	Managing Effective Communication Systems and Practices in Health and Social Care	6	50	Five
R/652/3676	CBH029	Championing Equality, Diversity and Inclusion in Health and Social Care	4	30	Five
T/652/3677	CBH030	Leading and Managing a Team in Health and Social Care	6	40	Five
Y/652/3678	CBH032	Leading and Managing Health and Safety and Risk Management in Health and Social Care	4	30	Five
A/652/3679	CBH033	Leading and Managing Practice that Promotes Safeguarding in Health and Social Care	5	35	Five

Unit Reference Number	OCN NI Unit Code	Unit Title	Credit Value	GLH	Level
H/652/3680	CBH034	Understand Mental Capacity, Deprivation of Liberty and Restrictive Practice Safeguards in Health and Social Care	3	25	Five
J/652/3681	CBH035	Leading and Managing Assessment of Individuals in Health and Social Care	4	30	Five
K/652/3682	CBH036	Leading and Managing Person-Centred and Outcomes-Based Practice with Individuals and Others in Health and Social Care	9	65	Five
L/652/3683	CBH037	Leading and Managing Quality Processes in Health and Social Care	9	65	Five
R/652/3685	CBH038	Leading and Managing Supervision Practice in Health and Social Care	5	39	Five
D/652/3689	CBH040	Leading and Managing the Appraisal of Staff Performance	4	28	Five
Optional units – Group A					
K/652/3691	CBH041	Understand Independent Advocacy in Health and Social Care Services	2	12	Five
M/652/3693	CBH042	Understand Coaching and Mentoring in Health and Social Care	2	12	Five
T/652/3695	CBH043	Understand Models of Disability	2	12	Five
Optional units – Group B					
Y/652/3703	CBH044	Contribute to Recruitment and Selection Processes in Health and Social Care	4	31	Five
D/652/3705	CBH045	Leading and Managing Induction Processes in Health and Social Care	4	31	Five
J/652/3708	CBH046	Managing Finances in Health and Social Care	4	28	Five

K/652/3709	CBH047	Leading and Managing Infection Prevention and Control within Health and Social Care	5	35	Five
T/652/3702	CBH048	Emergency Planning in Health and Social Care Settings	5	35	Five
A/652/3704	CBH050	Leading a Change Management Process in Health and Social Care	6	42	Five
F/652/3706	CBH051	Leading the Management of Transitions	3	21	Five
H/652/3707	CBH052	Leading and Managing Behavioural Support Strategies for Individuals in Health and Social Care	6	50	Five
L/652/3665	CBH031	Undertaking a Research Project within Health and Social Care Services	7	45	Five
M/652/3666	CBH039	Leading and Managing the Promotion of Active Support in Health and Social Care	4	24	Five
R/652/3667	CBH049	Supporting the Use of Assistive Technology in Health and Social Care	4	28	Five
T/652/3668	CBH053	Leading and Managing Practice in Supporting Individuals to Take Positive Risks	4	28	Five
F/652/3670	CBH054	Managing Disciplinary Processes in Health and Social Care	5	39	Five
J/652/3672	CBH055	Leading and Managing a Service that provides Support for Individuals with Complex Disabilities	4	24	Five

10.Unit Content

10.1 Understand Leadership and Management in Health and Social Care

Title	Understand Leadership and Management in Health and Social Care
Level	Five
Credit Value	5
Guided Learning Hours (GLH)	38
Unit Code	CBH025
Unit Reference No.	H/652/3671
Learn Direct Code	PA1
Links to NOS	HSCCLD36 – Promote the effectiveness of teams HSCCLD46 – Lead the effectiveness of teams HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop their understanding of leadership and management in order to develop their practice.	

Learning Outcomes	Assessment Criteria
1. Understand leadership theories and management styles.	1.1. Distinguish between leadership and management and explain their interdependence. 1.2. Summarise at least two theories of leadership, including their underpinning values. 1.3. Evaluate the application of a range of management approaches and their potential impact on team performance in different situations.
2. Understand the skills of leadership and management in health and social care.	2.1. Analyse the skills required to be an: a) effective leader b) effective manager 2.2. Explain why both sets of skills are necessary in health and social care. 2.3. Describe approaches for: a) conflict management b) conflict resolution
3. Understand the context of leadership and management in health and social care.	3.1. Summarise a range of external drivers that influence the leadership and management of health and social care and evaluate their impact on service delivery. 3.2. Evaluate inspection processes, including ways in which information is collected and used to inform inspection activities. 3.3. Explain how the outcomes of inspection can be used to support service improvement.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.
Primary assessment method(s) for LO 1, LO 2 and LO 3
Written tasks
Verbal questioning, documented by the assessor.
Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Assessment Criteria 1.3 - Potential impacts may support or be counter-productive to effective team performance and may depend on situation and team member expertise, competence, etc.

Assessment Criteria 2.3 - Conflict management may focus on ongoing management, aiming to minimise the negative / destructive effects of the conflict and keep relationships functional.
Conflict resolution may focus on providing a definitive solution, aiming to eliminate the conflict and restore positive relationships.

Assessment Criteria 3.1 - External drivers may include legislation, Government policy, economic environment, technological and research developments, emerging needs / trends; workforce availability; inquiries / serious adverse incidents, media / public opinion, etc.

Assessment Criteria 3.2 - Inspection processes may include those associated with statutory and non-statutory regulators, funders, etc.

10.2 Leading and Managing Continuous Professional Development in Health and Social Care Service

Title	Leading and Managing Continuous Professional Development in a Health and Social Care Service
Level	Five
Credit Value	7
Guided Learning Hours (GLH)	60
Unit Code	CBH026
Unit Reference No.	K/652/3673
Learn Direct Code	PA1
Links to NOS	HSCCLD23 – Develop reflective practice HSCCLD43 – Lead and develop reflective practice HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to use reflective practice and continuous professional development to support their own and others' development in a health and social care service.	

Learning Outcomes	**Assessment Criteria**
1. Understand the importance of professional development in health and social care.	1.1. Analyse the importance of continually improving knowledge and practice. 1.2. Explain potential barriers to professional development and ways to overcome these barriers. 1.3. Explain factors to consider when selecting opportunities and activities for keeping knowledge and practice up to date.
2. Be able to demonstrate commitment to your own professional development.	2.1. Evaluate own knowledge and performance, using standards and benchmarks. 2.2. Identify opportunities to support your own professional development, taking account of your own development goals. 2.3. Implement an agreed professional development plan, incorporating opportunities for others to provide feedback on your performance across agreed areas of responsibility.
3. Be able to use research and study skills to support your own professional development.	3.1. Identify your own learning style using a recognised assessment tool. 3.2. Select and use suitable tools and techniques for own study. 3.3. Explain the importance of using valid and reliable data sources when researching areas of inquiry in health and social care. 3.4. Select and use appropriate sources of reference, adhering to academic protocols.
4. Be able to lead learning and professional development practices for team members in your own setting.	4.1. Explain available mechanisms and resources to support learning and professional development for team members in your own setting. 4.2. Promote a learning culture within your own team. 4.3. Support team members to plan for and review their professional development goals. 4.4. Facilitate the professional development of team members to support appropriate and effective delegation.

5. Know how to manage your own wellbeing.	5.1. Explain what is meant by: a) holistic wellbeing b) stress c) resilience 5.2. Describe factors that affect your own wellbeing. 5.3. Evaluate how your own wellbeing impacts your role performance. 5.4. Explain strategies that maintain or improve your own wellbeing.
6. Know how to support team members to maintain and improve their own wellbeing.	6.1. Describe indicators that the wellbeing of team members may be deteriorating. 6.2. Explain the potential impact of stress and low morale on team performance. 6.3. Provide information to team members on a range of wellbeing supports available and ways to access them.
7. Be able to improve your practice through self-awareness and reflective practice.	7.1. Explain the importance of reflective practice to improve performance. 7.2. Analyse the use of reflective practice in your own setting. 7.3. Analyse how your own a) values and beliefs b) experiences impact your own work practices. 7.4. Use examples from your work environment in order to reflect on how your own practice: a) has improved b) may need to improve

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1, LO 5 and LO 6

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context. Primary assessment method(s) for LO 2, LO 3, LO 4 and LO 7

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 3.2 - Tools and techniques may include the Eisenhower Matrix (prioritising); goal setting; active learning techniques, note taking, use of technology, environmental readiness, etc.
Useful Resources: Study skills: developing effective study strategies
15 Effective Study Techniques: Mastering the Art of Learning - BrainMatters

Assessment Criteria 3.4 - Academic protocols include protocols in relation to the appropriate use of material generated through Artificial Intelligence.

Assessment Criteria 4.1 - May include in-house opportunities for shadowing, 'acting up'; formal training in person or online; access to recognised qualifications; funding mechanisms available to support learning, etc. NISCC CiP Framework gives insight to this also CIP Framework

Learning Outcome 5:
Wellbeing: in this context, wellbeing refers to that of the learner. Wellbeing is a broad concept referring to a person's quality of life, considering health, happiness and comfort. It may include aspects of social, emotional, cultural, spiritual, intellectual,
economic, physical, and mental wellbeing.

Factors: these should be specific to the learner. The learner should show consideration of environmental, physical, social, and psychological factors, inside and outside the workplace.

NB Wellbeing supports - may be internal or external to the learner's organisation. Consideration should include those availed of and those currently not availed of.

Learning Outcome 7: Improved Practice - may include areas of understanding, skills or values that underpin best practice; and align with sectoral standards and agreed ways of working.

10.3 Leading Operational Management in Health and Social Care

Title	Leading Operational Management in Health and Social Care
Level	Five
Credit Value	4
Guided Learning Hours (GLH)	31
Unit Code	CBH027
Unit Reference No.	L/652/3674
Learn Direct Code	PA1
Links to NOS	HSCCLD46 – Lead the effectiveness of teams HSCCLD416 - Collaborate with others to support individuals HSCCLD418 - Lead service delivery planning HSCCLD420 – Lead on regulatory requirements in the workplace HSCCLD422 - Lead the use of digital technology
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to lead operational management in the learner's own setting, through planning, implementation and evaluation.	

Learning Outcomes	Assessment Criteria
1. Understand operational management in health and social care.	1.1. Explain the difference between strategic management and operational management. 1.2. Summarise key operational objectives within your own service. 1.3. Evaluate a manager's responsibilities in managing operational objectives in your service.
2. Be able to develop an operational plan within your own area of responsibility.	2.1. Identify key operational objective(s) as the basis for a specific operational plan. 2.2. Summarise the link between the operational plan's objective(s) and the overall service vision and governance framework within which it operates. 2.3. Identify potential risks associated with the operational plan and associated mitigation strategies. 2.4. Develop contingency arrangements as part of operational planning.
3. Be able to implement and manage an operational plan.	3.1. Manage the implementation of an operational plan within your own area of responsibility, including a) appropriate use of delegation b) effective use of resources c) appropriate engagement with team members, and others as appropriate 3.2. Manage risks and challenges that arise during the implementation of an operational plan.
4. Be able to monitor and evaluate an operational plan in your own area of responsibility.	4.1. Monitor the implementation of an operational plan within your own area of responsibility. 4.2. Evaluate, in conjunction with others, an operational plan against its identified objective(s). 4.3. Agree, with others, actions for the future as a result of the evaluation of an operational plan.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2, LO 3 and LO 4

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 1.3 - Evaluation of responsibilities may include consideration of the areas of influence and also limitations associated with your own role in relation to operational management, for example, scope and autonomy in decisions making, stakeholder engagement, budget control, quality management, etc.

Learning Outcome 2, Learning Outcome 3 and Learning Outcome 4 – An identified operational plan will be specific to each service setting and a learner's specific areas of responsibility. The operational plan should be documented, align with a strategic focus, and identify practical outworking, within an identified time scale.

Skills that may need to be applied in developing and implementing operational plans may include:
Planning, risk management, delegation, innovation, influencing and persuading, building consensus, communicating, involving others, etc.

10.4 Managing Effective Communication Systems and Practices in Health and Social Care

Title	Managing Effective Communication Systems and Practices in Health and Social Care
Level	Five
Credit Value	6
Guided Learning Hours (GLH)	50
Unit Code	CBH028
Unit Reference No.	M/652/3675
Learn Direct Code	PA1
Links to NOS	HSCCLD41 – Lead effective communication HSCCLD412 - Lead the provision of information on services and facilities HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop knowledge and skills to use and manage effective communication and information management systems in health and social care.	

Learning Outcomes	Assessment Criteria
1. Understand the importance of effective communication in managing a health and social care service.	1.1. Examine a range of communication methods used in managing a health and social care service. 1.2. Critically analyse a range of core communication skills used in managing a health and social care service. 1.3. Analyse barriers and challenges to effective communication when managing a health and social care service.
2. Understand the importance of effective use of information management in a health and social care service.	2.1. Explain the legal and policy requirements in relation to information management, including confidentiality and data protection, in a health and social care service. 2.2. Describe best practice guidance in relation to recording, storing and sharing information within and between organisations 2.3. Analyse tensions that exist in relation to accessing and sharing information in a health and social care service. 2.4. Describe consequences of poor practice in information management, for the organisation and others including potential fitness to practice processes.
3. Be able to use effective communication in managing a health and social care service.	3.1. Recognise and address barriers to effective communication within a health and social care service. 3.2. Support team members to use effective communication in order to achieve positive outcomes for individuals. 3.3. Demonstrate the effective use of a range of inter-personal communication skills with individuals, team members and others.
4. Be able to use information management systems that meet legal requirements and agreed ways of working.	4.1. Produce and maintain accurate, complete, retrievable and up to date records used in the management of a health and social care service. 4.2. Utilise records and reports to inform judgments and decisions. 4.3. Lead the sharing of information with team members and others in a timely manner in line with agreed ways of working. 4.4. Lead practice to address challenges that arise between maintaining confidentiality and sharing information.

5. Be able to manage the use of digital communication systems in a health and social care service.	5.1. Demonstrate the appropriate and safe use of digital communication systems in managing a health and social care service, in line with agreed ways of working. 5.2. Support team members to develop their competence in the use of digital communication systems. 5.3. Monitor the use of digital communication systems in line with agreed ways of working.
6. Be able to improve communication practices that support safe and effective service provision.	6.1. Evaluate the effectiveness of existing communication systems or practices. 6.2. Propose improvements to communication practices in order to enhance effectiveness. 6.3. Support the implementation of a revised communication practice.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1 and LO 2

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 3, LO 4, LO 5 and LO 6

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

10.5 Championing Equality, Diversity and Inclusion in Health and Social Care

Title	Championing Equality, Diversity and Inclusion in Health and Social Care
Level	Five
Credit Value	4
Guided Learning Hours (GLH)	30
Unit Code	CBH029
Unit Reference No.	R/652/3676
Learn Direct Code	PA1
Links to NOS	HSCCLD38 - Promote equality, diversity, inclusion and rights of individuals HSCCLD48 - Lead practice that ensures equality, diversity, inclusion and rights of individuals HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop their knowledge and skills to effectively champion equality, diversity and inclusion in a health and social care service.	

Learning Outcomes	Assessment Criteria
1. Understand equality, diversity and inclusion in health and social care.	1.1. Summarise key aspects of current legislation underpinning equality, diversity and inclusion. 1.2. Explain the impact of: a) historical influences b) current social influences c) current legislation on promoting a culture that embeds equality, diversity and inclusion in service provision. 1.3. Evaluate, using examples, challenges or conflicts that may arise when promoting equity in practice.
2. Understand cultural competence in health and social care.	2.1. Explain what is meant by cultural competence. 2.2. Analyse the importance of cultural competence when leading and managing a health and social care service. 2.3. Explain the potential impacts that: a) unconscious bias b) discriminatory behaviours may have on individuals and others.
3. Be able to lead a culture that promotes equality, diversity and inclusion in health and social care.	3.1. Use reflective practice to evaluate your own and others' practice, in relation to equality, diversity and inclusion. 3.2. Promote equality, diversity and inclusion in practice in your own setting. 3.3. Work with others to challenge discrimination and / or exclusion in ways that are likely to achieve change and promote positive outcomes. 3.4. Evaluate the effectiveness of systems and processes to promote equality, diversity and inclusion in your own setting and propose improvements to address gaps or shortfalls.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1 and LO 2

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.
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When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 3

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 1.2 - Historical influences are not confined to a specific timescale. Learners should consider significant themes from history that have influenced equality, diversity, inclusion and human rights in their region.

Assessment Criteria 1.3 - Equity recognises that to reach equal outcomes, individuals need different levels and kinds of support. It ought to be considered in relation to both workforce and individuals who access services.

Assessment Criteria 2.2 - The importance of cultural competence ought to be considered in relation to both workforce and individuals who access services.

10.6 Leading and Managing a Team in Health and Social Care

Title	Leading and Managing a Team in Health and Social Care
Level	Five
Credit Value	6
Guided Learning Hours (GLH)	40
Unit Code	CBH030
Unit Reference No.	T/652/3677
Learn Direct Code	PA1
Links to NOS	HSCCLD36 – Promote the effectiveness of teams HSCCLD46 – Lead the effectiveness of teams HSCCLD420 – Lead on regulatory requirements in the workplace

Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to effectively lead and manage a team that provides safe and effective care / support for individuals in the context of their own health and social care service.

Learning Outcomes	Assessment Criteria
1. Be able to provide leadership for a team in health and social care.	1.1. Communicate the vision and strategic direction of your service to your own team members. 1.2. Use systems and processes to build and maintain the team's commitment to your service and its values. 1.3. Encourage creative and innovative ways of working within your team. 1.4. Promote a positive values-based culture within the team through your own behaviours.
2. Be able to support effective teamwork.	2.1. Explain approaches used in your service to support effective teamwork. 2.2. Engage team members in agreeing team objectives. 2.3. Agree roles and responsibilities, taking account of team members' competence and support needs. 2.4. Support team members to work towards agreed team objectives.
3. Be able to manage team performance.	3.1. Monitor and evaluate progress towards agreed objectives. 3.2. Provide feedback on performance to the team as a whole **and** to individual team members. 3.3. Provide recognition when individual and team objectives have been achieved. 3.4. Explain how team members are managed when: a) their performance does not meet requirements; b) there are concerns about their wellbeing and / or resilience
4. Be able to manage appropriate human resource provision in a health and social care service.	4.1. Describe factors that influence staffing requirements and patterns in your own service. 4.2. Manage staffing schedules and patterns and adjust them to meet changing needs and circumstances in your own service. 4.3. Evaluate the effectiveness of the working schedules and patterns and recommend improvements as a result of evaluation. 4.4. Review the effectiveness of approaches to human resource management in maintaining a safe and effective service.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1, LO 2, LO 3 and LO 4

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.

- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

10.7 Leading and Managing Health and Safety and Risk Management in Health and Social Care

Title	Leading and Managing Health and Safety and Risk Management in Health and Social Care
Level	Five
Credit Value	4
Guided Learning Hours (GLH)	30
Unit Code	CBH032
Unit Reference No.	Y/652/3678
Learn Direct Code	PA1
Links to NOS	HSCCLD42 – Lead a healthy and safe workplace HSCCLD44 - Lead the safeguarding of individuals and others HSCCLD415 - Lead the development of risk management plans HSCCLD420 – Lead on regulatory requirements in the workplace

Unit purpose and aim(s): This unit will enable the learner to develop knowledge and skills to lead and manage health and safety and risk management in a health and social care service.

Learning Outcomes	Assessment Criteria
1. Understand the current legislative framework and organisational health and safety and risk management policies and procedures.	1.1. Summarise key aspects of the legislative framework for health and safety and risk management in health and social care. 1.2. Analyse how existing policies and procedures in your own work setting meet health and safety and risk management requirements.
2. Be able to lead compliance with health and safety requirements.	2.1. Demonstrate your own compliance with health and safety policies and procedures, in accordance with your role and responsibilities. 2.2. Support team members to comply with organisational health and safety policies and procedures relevant to their role and responsibilities. 2.3. Explain actions to take when health and safety policies and procedures are not being complied with. 2.4. Complete records and reports on health and safety, in accordance with agreed ways of working. 2.5. Evaluate the implementation of health and safety procedures in your own setting and identify actions to improve practice.
3. Be able to lead the implementation of policies and procedures to manage risks in health and social care.	3.1. Describe your own responsibilities to assess and manage risk. 3.2. Explain methods and tools available to inform and undertake risk management activities in your own setting. 3.3. Work with team members and others to a) identify and assess risks b) manage risks to mitigate their likelihood and impact on individuals and service provision. 3.4. Evaluate the use of risk management processes in your own setting and identify actions to improve practice.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2 and LO 3

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 1.1 - Legislative framework ought to include that which relates to:

a) overarching health and safety
b) fire safety
c) hazardous substances
d) moving and handling equipment or objects
e) infection prevention and control
f) risk management

Learning Outcome 2 and Learning Outcome 3: Where a service setting is required by regulation to ensure that premises and grounds are safe, well maintained and remain suitable for their stated purpose, a learner's evidence **must** relate to premises, grounds, furniture / fittings / equipment, as well as more general safe and healthy working practices.

Assessment Criteria 3.1 - Responsibilities may include infection prevention and control.

Assessment Criteria 3.3 - Risks may include those that are particular to a specific setting / service.

10.8 Leading and Managing Practice that Promotes Safeguarding in Health and Social Care

Title	Leading and Managing Practice that Promotes Safeguarding in Health and Social Care
Level	Five
Credit Value	5
Guided Learning Hours (GLH)	35
Unit Code	CBH033
Unit Reference No.	A/652/3679
Learn Direct Code	PA1
Links to NOS	HSCCLD44 - Lead the safeguarding of individuals and others HSCCLD416 - Collaborate with others to support individuals HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to lead and manage practice that promotes safeguarding in a health and social care service setting.	

Learning Outcomes	Assessment Criteria
1. Understand legislation and policies that underpin safeguarding procedures in health and social care.	1.1. Summarise the current legislative and policy frameworks that underpin the safeguarding of: a) adults b) children 1.2. Analyse how investigations into serious failures to uphold individuals' rights to live free from abuse and neglect have impacted on policy and procedures for safeguarding. 1.3. Describe the role of key agencies and associated roles of those involved in safeguarding procedures in relation to: a) adults b) children 1.4. Describe the operational management responsibilities for safeguarding, in your own service setting, in relation to: a) individuals b) team members and others
2. Be able to lead the implementation of policies, procedures and practices to support safeguarding in health and social care.	2.1. Support team members to develop the knowledge and skills they need to safeguard individuals at risk. 2.2. Ensure team members know actions to take when there are concerns that an individual has been, or is in danger of being harmed or abused, including whistleblowing. 2.3. Analyse tensions / challenges in maintaining the safety of team members and others, with duty of care to individuals who are recognised as being a potential risk to adults or children. 2.4. Monitor compliance with requirements for safeguarding and take action where these are not being adhered to. 2.5. Use management processes with team members to review compliance with safeguarding requirements and as support when engaged in safeguarding incidents or processes.
3. Be able to lead and manage practice that safeguards individuals from harm and abuse.	3.1. Promote a culture where the individual's needs and choices are balanced with expectations of safeguarding protocols. 3.2. Promote practices that encourage and empower individuals at risk, and those who are important to them, to share concerns. 3.3. Follow procedures to report suspected or disclosed incidents of harm or abuse in accordance agreed ways of working. 3.4. Ensure that records and reports meet legislative and organisational requirements. 3.5. Work collaboratively with others to achieve the best outcomes for an individual at risk.

	3.6. Monitor the effectiveness of systems to safeguard individuals and take action to improve practice in your own service setting. 3.7. Reflect on how to adapt your own approach to safeguarding, in order to improve your own practice.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational

context. Primary assessment method(s) for LO 2 and LO 3

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 2.5 - Management processes may include debriefs, team meetings, supervisions, informal discussions, shared learning, etc.

10.9 Understand Mental Capacity, Deprivation of Liberty and Restrictive Practice Safeguards in Health and Social Care

Title	Understand Mental Capacity, Deprivation of Liberty and Restrictive Practice Safeguards in Health and Social Care
Level	Five
Credit Value	3
Guided Learning Hours (GLH)	25
Unit Code	CBH034
Unit Reference No.	H/652/3680
Learn Direct Code	PA1
Links to NOS	HSCCLD38 - Promote equality, diversity, inclusion and rights of individuals HSCCLD44 - Lead the safeguarding of individuals and others HSCCLD48 - Lead practice that ensures equality, diversity, inclusion and rights of individuals HSCCLD416 - Collaborate with others to support individuals HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to understand legislation and practice requirements in relation to mental capacity and deprivation of liberty. It will also enable the learner to understand their role in upholding the rights of individuals and the appropriate use of restrictive practices in health and social care.	

Learning Outcomes	Assessment Criteria
1. Understand mental capacity and consent in health and social care.	1.1. Summarise current legislation relating to an individual's capacity. 1.2. Explain how codes of practice specific to mental capacity: a) protect individuals who may lack capacity b) provide safeguards around decisions in relation to deprivation of liberty for individuals who lack the capacity to make those decisions for themselves. 1.3. Outline the support available when an individual's mental capacity needs to be assessed. 1.4. Describe ways of working in your service area, which support individuals' ability to provide valid consent.
2. Understand the use of restrictive practice in health and social care.	2.1. Explain what is meant by the term restrictive practice. 2.2. Summarise key aspects of the legal and policy frameworks and their implications for the use of restrictive practice. 2.3. Analyse situations where restrictive practices might be appropriate and proportionate responses, in accordance with agreed ways of working. 2.4. Describe operational management responsibilities in relation to restrictive practices in your service area.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1 and LO 2

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Assessment Criteria 2.3 - Analysis ought to consider the potential positive and / or negative impact for individuals who access services and others (such as team members, carers / families, other professionals, etc.).

Assessment Criteria 2.4 - Operational management responsibilities may include maintenance and review of DoLs and restrictive practices registers; care / support plan reviews; risk management processes; reporting procedures for unauthorised implementation of restrictive practices. Some circumstances may require a renegotiation of service suitability for an individual.

10.10 Leading and Managing Assessment of Individuals in Health and Social Care

Title	Leading and Managing Assessment of Individuals in Health and Social Care
Level	Five
Credit Value	4
Guided Learning Hours (GLH)	30
Unit Code	CBH035
Unit Reference No.	J/652/3681
Learn Direct Code	PA1
Links to NOS	HSCCLD414 - Lead the assessment process with individuals HSCCLD416 - Collaborate with others to support individuals HSCCLD418 - Lead service delivery planning HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to lead and manage assessment of individuals in the context of their own health and social care service.	

Learning Outcomes	Assessment Criteria
1. Understand assessment processes in health and social care.	1.1. Explain processes used for initial assessment in your service, including: a) criteria b) timescales c) roles and responsibilities 1.2. Describe the range and purpose of different types of assessment used within your service. 1.3. Explain how collaborative working can positively support the assessment process.
2. Be able to lead and manage assessment processes in health and social care.	2.1. Ensure that team members are appropriately trained and competent to carry out assessment, as appropriate, and within the boundaries of their roles. 2.2. Manage assessment processes to ensure: a) timeliness and compliance with operational requirements b) active participation of the individual, and others as appropriate, so that the needs and preferences of the individual are accurately reflected in the assessment 2.3. Monitor assessment processes and outcomes against agreed quality indicators.
3. Be able to manage the outcomes of assessment.	3.1. Demonstrate the use of recording and information management processes to support assessment. 3.2. Use evidence benchmarked against identified criteria, to support an assessment decision. 3.3. Communicate assessment decisions in a timely manner. 3.4. Describe challenges or conflicts that may arise during the assessment process; and approaches to resolve these. 3.5. Implement interventions and / or referrals which will contribute to positive outcomes for the individual.
4. Be able to review the effectiveness of assessment processes in health and social care.	4.1. Use reflective practice to evaluate the assessment processes used in your service. 4.2. Outline actions to address and improve assessment processes.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2, LO 3 and LO 4

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

10.11 Leading and Managing Person-Centred and Outcomes-Based Practice with Individuals and Others in Health and Social Care

Title	Leading and Managing Person-Centred and Outcomes-Based Practice with Individuals and Others in Health and Social Care
Level	Five
Credit Value	9
Guided Learning Hours (GLH)	65
Unit Code	CBH036
Unit Reference No.	K/652/3682
Learn Direct Code	PA1
Links to NOS	HSCCLD415 - Lead the development of risk management plans HSCCLD414 - Lead the assessment process with individuals HSCCLD416 - Collaborate with others to support individuals HSCCLD417 - Lead partnership working arrangements HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to lead and manage person-centred and outcomes-based practice with individuals and others in the context of their own health and social care service.	

Learning Outcomes	Assessment Criteria
1. Understand person-centred and outcomes-based practice in health and social care.	1.1. Summarise the nature of: a) person-centred practice b) active participation 1.2. Explain the nature of outcomes-based practice and how it can: a) be supported by a strengths-based approach b) positively impact individuals
2. Understand the importance of collaborative working and co-production to support person-centred and outcomes-based practice.	2.1. Explain the importance of a) co-production b) collaboration with individuals and others in enabling individuals to achieve their desired outcomes. 2.2. Analyse potential barriers or conflicts that may arise when working collaboratively with other professionals and agencies. 2.3. Evaluate the use of a range of communication methods to support collaborative working with other professionals and agencies.
3. Be able to support effective relationships with individuals, and carers / families as appropriate.	3.1. Model open, respectful and supportive relationships with individuals, and carers / families as appropriate. 3.2. Support the integration of co-production processes within your own setting. 3.3. Implement measures to ensure that individuals, and carers / families as appropriate, are aware of their rights in relation to service provision. 3.4. Use appropriate approaches to address conflicts / dilemmas that may arise between individuals and a) team members or b) others
4. Be able to work collaboratively with professionals and other agencies to support person-centred and outcomes-based practice.	4.1. Explain own role and responsibilities in working with professionals and other agencies. 4.2. Implement agreed procedures to build effective working relationships with professionals and other agencies. 4.3. Agree common objectives when working with professionals and other agencies within the boundaries of your own role and responsibilities. 4.4. Address conflicts / challenges that may arise with professionals or other agencies, ensuring the best interests of individuals remain central.

5. Be able to lead practice that promotes person-centred practice and positive outcomes for individuals.	5.1. Facilitate the development of group activity plans and / or individual care / support plans, ensuring they reflect: a) the active participation of individuals, and others as appropriate b) Individuals' preferences, wishes, strengths and needs 5.2. Promote a culture among team members of adopting a holistic approach to well-being, in day to day practice with groups and / or individuals, as appropriate. 5.3. Support individuals and others to adopt a balanced approach to risk taking, that reflects: a) the potential benefits to individuals of positive risk taking b) individuals' rights c) the views and concerns of others 5.4. Manage resources to support person-centred practice and positive outcomes for groups and / or individuals, as appropriate. 5.5. Monitor and review progress towards the achievement of identified outcomes.
6. Be able to review person-centred practice and positive outcomes for individuals.	6.1. Use reflective practice to evaluate the extent to which systems and processes promote person-centred practice and positive outcomes for individuals in your service. 6.2. Outline improvements to enhance person-centred and outcomes-based practice in your service.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1 and LO 2

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.
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When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 3, LO 4, LO 5 and LO 6

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 1.2 - A strengths-based approach values the capacity, skills, knowledge, connections and potential in individuals and communities. It is holistic, however, its focus on strengths does not mean ignoring challenges. Practitioners working in this way have to work in collaboration - supporting people to do things for themselves, thereby becoming co-producers of support, rather than passive consumers of support.

Assessment Criteria 2.1 - Collaboration may include ways in which integrated services and local community provision may cross traditional boundaries to achieve better outcomes for individuals.

Learning Outcome 5 - Where a learner's service setting is required by regulation to offer a structured programme of varied activities and events, LO5 **must** be evidenced in relation to both groups and individuals.

Assessment Criteria 5.2 - Practice that supports a holistic approach to well-being may include support to maintain or develop physical, mental health or relationships through social inclusion; support to engage in activities that are safe, enjoyable, purposeful, age and culturally appropriate and responsive to changing needs and preferences, etc.

10.12 Leading and Managing Quality Processes in Health and Social Care

Title	Leading and Managing Quality Processes in Health and Social Care
Level	Five
Credit Value	9
Guided Learning Hours (GLH)	65
Unit Code	CBH037
Unit Reference No.	L/652/3683
Learn Direct Code	PA1
Links to NOS	HSCCLD418 - Lead service delivery planning HSCCLD419 - Lead quality assurance assessments HSCCLD420 – Lead on regulatory requirements in the workplace SCDCPC302 - Contribute to the effective performance of your organisation SCDCPC402 - Promote compliance with organisational responsibility
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to lead and manage the implementation of a range of quality processes in the context of their own health and social care setting.	

Learning Outcomes	Assessment Criteria
1. Understand the context of leading and managing quality processes in health and social care.	1.1. Explain the concepts of: a) quality assurance b) quality improvement 1.2. Analyse how legislative and regulatory frameworks inform quality management, including the roles and Standards associated with Regulatory Bodies applicable to you and your service. 1.3. Analyse ways in which relevant reports have informed quality management in health and social care. 1.4. Describe three methods that can be used to measure the achievement of quality standards. 1.5. Explain how quality standards relate to performance management of team members.
2. Be able to lead and manage the implementation of quality assurance processes in order to improve service provision.	2.1. Provide information to team members and others to develop their knowledge of quality standards. 2.2. Support team members to carry out their roles and responsibilities in implementing quality standards. 2.3. Implement systems and processes to monitor and measure the progress of the service against agreed quality indicators. 2.4. Record and report on findings in relation to the quality of service provision, benchmarked against the agreed quality indicators. 2.5. Agree with others plans to improve the quality of service provision in identified areas, in order to meet performance indicators.
3. Be able to lead practice that responds to compliments, concerns and complaints, in order to improve service provision.	3.1. Promote a culture where compliments, concerns and complaints are recognised as a tool to improve service provision. 3.2. Ensure accessible information and support is in place to enable and encourage individuals and others to raise compliments, concerns and complaints. 3.3. Support team members to understand procedures and their responsibilities to ensure compliments, concerns and complaints are recorded and actioned appropriately. 3.4. Undertake routine reviews of compliments, concerns and complaints to identify trends, areas of good practice and areas for improvement within the service provision. 3.5. Implement procedures to record and respond to concerns or complaints within agreed time frames. 3.6. Work with others to implement learning derived from compliments, concerns or complaints, to improve the quality of service provision.

4. Be able to lead the delivery of a quality improvement plan in order to improve service provision.	4.1. Work with team members and others to identify an area of service provision for quality improvement. 4.2. Produce a quality improvement plan outlining the necessary steps to achieve the identified quality improvement outcomes. 4.3. Implement the quality improvement plan in collaboration with team members and others and in line with agreed ways of working. 4.4. Monitor the implementation of the quality improvement plan. 4.5. Evaluate the impact of the quality improvement plan on the service provision.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2, LO 3 and LO 4

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 1.3 - Relevant Reports may include research evidence, inquiries, serious case reviews, learning from adverse incidents, investigations, fitness to practice reports, etc.

Learning Outcome 4 - A quality improvement plan may derive from internal or external reviews of service provision.

10.13 Leading and Managing Supervision Practice in Health and Social Care

Title	Leading and Managing Supervision Practice in Health and Social Care
Level	Five
Credit Value	5
Guided Learning Hours (GLH)	39
Unit Code	CBH038
Unit Reference No.	R/652/3685
Learn Direct Code	PA1
Links to NOS	HSCCLD317 - Promote learning and development or employment opportunities for individuals HSCCLD340 - Supervise and support team members HSCCLD36 – Promote the effectiveness of teams HSCCLD43 – Lead and develop reflective practice HSCCLD46 – Lead the effectiveness of teams HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to lead and manage supervision practice in the context of their own health and social care service.	

Learning Outcomes	Assessment Criteria
1. Understand the purpose of supervision in health and social care.	1.1. Analyse the principles, scope and purpose of supervision. 1.2. Outline two theories and/or models of supervision. 1.3. Explain how the requirements of legislation, Standards, policies and procedures influence supervision. 1.4. Explain how findings from relevant reports can be used within supervision to promote improved practice. 1.5. Explain how supervision can protect the: a) individual b) supervisor c) supervisee
2. Understand how supervision can inform performance management.	2.1. Analyse how supervision supports effective performance through review of key performance indicators. 2.2. Explain why the wellbeing of the supervisee should be included within supervision.
3. Be able to undertake preparation for supervision with supervisees.	3.1. Agree with at least two supervisees confidentiality, boundaries, roles and accountability within the professional supervision process. 3.2. Agree with at least two supervisees the frequency and location of supervision. 3.3. Agree with at least two supervisees sources of evidence that can be used to inform supervision. 3.4. Agree with at least two supervisees actions to be taken in preparation for supervision.

4. Be able to provide effective supervision.	4.1. Explain factors which may result in a power imbalance during supervision and ways to address these. 4.2. Support at least two supervisees to reflect on their own practice. 4.3. Provide positive feedback about the achievements of the supervisees. 4.4. Provide constructive feedback that can be used to improve performance. 4.5. Support the supervisees to identify their own development needs. 4.6. Review and revise supervision targets to meet the identified objectives of the work setting. 4.7. Support the supervisees to explore different methods of addressing challenging situations. 4.8. Record agreed supervision decisions / outcomes.
5. Be able to manage conflict situations during supervision.	5.1. Summarise two examples from own practice of managing conflict situations within supervision. 5.2. Reflect on your own practice in managing conflict situations experienced during supervision process.
6. Be able to review supervision practice in your own service.	6.1. Use examples in order to reflect on how supervision practice is planned and implemented in your setting; and ways in which it could be improved. 6.2. Reflect on how to adapt your own approach to supervision, in order to improve your own practice.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1 and LO 2

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 3, LO 4, LO 5 and LO 6

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 1.4 - Relevant Reports may include research evidence, inquiries, serious case reviews, learning from adverse incidents, investigations, fitness to practice reports, etc.

10.14 Leading and Managing the Appraisal of Staff Performance

Title	Leading and Managing the Appraisal of Staff Performance
Level	Five
Credit Value	4
Guided Learning Hours (GLH)	28
Unit Code	CBH040
Unit Reference No.	D/652/3689
Learn Direct Code	PA1
Links to NOS	HSCCLD317 - Promote learning and development or employment opportunities for individuals HSCCLD341 - Provide assessment on the performance of others HSCCLD36 – Promote the effectiveness of teams HSCCLD43 – Lead and develop reflective practice HSCCLD46 – Lead the effectiveness of teams HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to effectively lead and manage the appraisal of staff performance in a health and social care setting.	

Learning Outcomes	Assessment Criteria
1. Understand the nature of and policies that underpin the appraisal of staff performance.	1.1. Research and evaluate two models of staff appraisal, exploring their potential effectiveness and application in a health and social care setting. 1.2. Distinguish between the purposes of appraisal and disciplinary processes. 1.3. Summarise agreed ways of working for the appraisal of staff performance in your service setting and how they are used to inform each of the following: a) achievement of objectives b) overall performance c) future objectives 1.4. Explain how to minimise power imbalances within the appraisal process.
2. Be able to lead preparation for appraisals.	2.1. Confirm with at least two appraisees the objectives against which performance will be appraised. 2.2. Identify with the appraisees the actions they need to take to prepare for their appraisal. 2.3. Gather evidence from a range of sources in relation to the appraisees' achievement of objectives. 2.4. Prepare documentation for appraisals in line with agreed ways of working.
3. Be able to lead and facilitate appraisal meetings.	3.1. Demonstrate how to prepare the environment for appraisal meetings. 3.2. Support at least two appraisees to engage in an evaluation of their performance over the past year to include: a) areas of practice which have met or exceeded standards b) areas for development 3.3. Provide feedback to appraisees on their performance over the past year to include: a) areas of practice which have met or exceeded standards b) areas for development 3.4. Identify and agree with appraisees work objectives for the forthcoming year. 3.5. Identify and agree with appraisees professional development plans for the forthcoming year. 3.6. Record the appraisals in line with agreed ways of working.

4. Be able to review appraisal processes and practice in your own service.	4.1. Use examples in order to reflect on how appraisal practice is planned and implemented in your setting; and ways in which it could be improved. 4.2. Reflect on how to adapt your own approach to appraisal, in order to improve your own practice.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2, LO 3 and LO 4

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Learning Outcome 1 - Appraisal usually occurs on a yearly basis, involving a meeting between a staff member and a more senior member of staff. It usually entails a reflection on the past year, a recognition of the staff member's contribution to the team
/ service and setting objectives for the following year. Objectives are likely to include both personal objectives and organisational objectives.

Appraisals ought to be participative, fair and evidence-based, as well as constructive, supportive and developmental in focus.

10.15 Understand Independent Advocacy in Health and Social Care Services

Title	Understand Independent Advocacy in Health and Social Care Services
Level	Five
Credit Value	2
Guided Learning Hours (GLH)	12
Unit Code	CBH041
Unit Reference No.	K/652/3691
Learn Direct Code	PA1
Links to NOS	HSCCLD327 - Work with individuals to develop and maintain relationships HSCCLD49 - Advocate with and on behalf of individuals
Unit purpose and aim(s): This unit will enable the learner to develop their knowledge and understanding of independent advocacy within health and social care services.	

Learning Outcomes	Assessment Criteria
1. Understand Advocacy in health and social care.	1.1. Define what is meant by advocacy. 1.2. Explain key principles underpinning independent advocacy.
2. Understand the role of Independent Advocacy in health and social care.	2.1. Summarise the regulatory requirements associated with independent advocacy in health and social care. 2.2. Analyse examples where independent advocacy may be appropriate and beneficial for individuals in your own service setting. 2.3. Evaluate managerial responsibilities in your own service setting in relation to the role of independent advocates.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1 and LO 2

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Learning Outcome 1 - Independent Advocacy - Advocacy is taking action to help people say what they want, secure their rights, represent their interests and obtain services they need. Advocates and advocacy schemes work in partnership with the people they support and take their side. Advocacy promotes social inclusion, equality and justice. Independent advocacy is used when the advocate is operationally independent from the service provider. (Advocacy Charter produced by Action for Advocacy) **https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/care-standards-nursing-homes.pdf**

Assessment Criteria 2.1 - Regulatory requirements include those related to Minimum Standard requirements associated with specific service areas.

10.16 Understand Coaching and Mentoring in Health and Social Care

Title	Understand Coaching and Mentoring in Health and Social Care
Level	Five
Credit Value	2
Guided Learning Hours (GLH)	12
Unit Code	CBH042
Unit Reference No.	M/652/3693
Learn Direct Code	PA1
Links to NOS	HSCCLD317 - Promote learning and development or employment opportunities for individuals HSCCLD36 – Promote the effectiveness of teams HSCCLD43 – Lead and develop reflective practice
Unit purpose and aim(s): This unit will enable the learner to develop their understanding of coaching and mentoring in health and social care.	

Learning Outcomes	Assessment Criteria
1. Understand coaching and mentoring in health and social care settings.	1.1. Distinguish between coaching and mentoring, including their similarities and differences. 1.2. Analyse how coaching and mentoring can contribute to creating a positive learning culture. 1.3. Justify the importance of reflective practice and supervision to support the effectiveness of coaching or mentoring.
2. Know how coaching and mentoring may be applied when leading and managing in health and social care.	2.1. Describe examples where: a) coaching b) mentoring may be the best or most suitable intervention to support a team member in your service setting. 2.2. Evaluate the potential management implications of supporting coaching and mentoring within your service setting.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1 and LO 2

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Assessment Criteria 1.1 - Similarities and differences may include consideration of specific models; purposes, contracting, time scales, areas of focus, levels of expertise and direction, skills usage, structure etc. It may also consider use of external / internal personnel, use of AI, etc.

Assessment Criteria 1.2 - A learning culture is one that embeds learning into how things are done and requires organisational systems, values and resources to be aligned with continual learning at individual, team and organisational levels. Potential barriers may include time, resources, attitudes, values, lack of training as a coach or mentor, ownership. Barriers may be individual or organisational.

Assessment Criteria 2.1 - Examples may relate to improving individual or organisational performance, personal effectiveness, motivation and confidence, succession planning, etc.

Individual development needs ought to be clearly stated for each example, as well as the desired outcomes.

Assessment Criteria 2.2 - Management implications may include strategies necessary to address barriers identified in AC1.2.

10.17 Understand Models of Disability

Title	Understand Models of Disability
Level	Five
Credit Value	2
Guided Learning Hours (GLH)	12
Unit Code	CBH043
Unit Reference No.	T/652/3695
Learn Direct Code	PA1
Links to NOS	HSCCLD317 - Promote learning and development or employment opportunities for individuals HSCCLD43 – Lead and develop reflective practice HSCCLD46 – Lead the effectiveness of teams

Unit purpose and aim(s): This unit will enable the learner to develop their understanding of models of disability and ways to promote best practice.

Learning Outcomes	Assessment Criteria
1. Understand theoretical models of disability.	1.1. Summarise at least two theoretical models of disability, including their underlying assumptions and principles. 1.2. Compare and contrast the strengths and limitations of the selected models of disability.
2. Know how models of disability may be applied in health and social care.	2.1. Analyse ways in which at least two models of disability may influence service delivery in a health and social care setting. 2.2. Describe and justify ways to raise awareness of a model of disability applicable to your own service setting, including how to address its: a) alignment with organisational values b) potential impact on individuals

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1 and LO 2

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Assessment Criteria 1.1 - Models of disability may include the medical, social, biopsychosocial, economic, social identity, charity models, etc.

Assessment Criteria 2.1 - Influence on service delivery may include
- agreed ways of working that promote or minimise active participation, empowerment, advocacy;
- working practices and 'culture', etc.

Assessment Criteria 2.2 - Ways to raise awareness may include bespoke training, supervision, team meetings, policy review, shared reflective learning from incidents, reports, etc.

Awareness may focus on deepening understanding, challenging assumptions, embedding reflective practice, promoting a rights-based and anti-discriminatory approach in practice, etc.

10.18 Contribute to Recruitment and Selection Processes in Health and Social Care

Title	Contribute to Recruitment and Selection Processes in Health and Social Care
Level	Five
Credit Value	4
Guided Learning Hours (GLH)	31
Unit Code	CBH044
Unit Reference No.	Y/652/3703
Learn Direct Code	PA1
Links to NOS	HSCCLD339 - Promote the recruitment of team members HSCCLD46 – Lead the effectiveness of teams
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to recruit and select staff within a health and social care setting.	

Learning Outcomes	Assessment Criteria
1. Understand recruitment and selection in health and social care.	1.1. Analyse current workforce challenges in recruiting staff in health and social care. 1.2. Describe strategies to promote health and social care as an attractive career choice, including the roles of Government and Regulators. 1.3. Explain the impact of legislation and regulation on the recruitment and selection of staff in health and social care. 1.4. Summarise key principles underpinning recruitment and selection in health and social care. 1.5. Describe circumstances when it may be necessary to seek specialist expertise in relation to recruitment and selection.
2. Be able to contribute to a recruitment process in your own service setting.	2.1. Review a job description and personnel specification in order to meet organisational requirements. 2.2. Work with others to agree the criteria and methods that will be used in a recruitment and selection process. 2.3. Explain the role of individuals and / or others, as appropriate, in a recruitment process in your own service setting.
3. Be able to participate in a selection process in your own service setting.	3.1. Use agreed processes and criteria to assess candidates. 3.2. Record the selection process in accordance with agreed ways of working.
4. Be able to review the recruitment and selection process in your own service setting.	4.1. Use examples in order to reflect on how recruitment and selection processes are implemented and ways in which they could be improved. 4.2. Reflect on how to develop your own practice in relation to recruitment and selection in your own service setting.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2, LO 3 and LO 4

- Direct Observation of the learner in their work setting; review of work products and associated 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
are in receipt of care / support, their families and carers.

- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 1.4 - Principles may include merit (based on the candidate's knowledge, skills, abilities, competencies and qualifications); fairness (processes are robust and auditable); equity (free from discrimination, prejudice or bias); consistency (compliant with legislation and regulation); transparency (use of clear criteria in the personnel specification and job description). In addition, selection ought to ensure the values of the candidate align with the values of the organisation.

Assessment Criteria 2.3 - Others may include service user representatives, advocates, carers, trade union personnel, specialist professional personnel etc.

10.19 Leading and Managing Induction Processes in Health and Social Care

Title	Leading and Managing Induction Processes in Health and Social Care
Level	Five
Credit Value	4
Guided Learning Hours (GLH)	31
Unit Code	CBH045
Unit Reference No.	D/652/3705
Learn Direct Code	PA1
Links to NOS	HSCCLD43 – Lead and develop reflective practice HSCCLD46 – Lead the effectiveness of teams HSCCLD412 - Lead the provision of information on services and facilities HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop their knowledge and skills to lead and manage induction processes in their own health and social care setting.	

Learning Outcomes	Assessment Criteria
1. Understand the purpose of staff induction for health and social care settings.	1.1. Explain why a planned and structured induction process is important for the following: a) practitioners b) individuals c) organisations 1.2. Summarise information and resources available to support effective induction. 1.3. Analyse the role of the induction process in supporting practitioners to understand the values and agreed ways of working within a work setting.
2. Be able to plan and develop the induction process in your own health and social care setting.	2.1. Summarise factors that may influence the induction process for practitioners. 2.2. Describe at least three different methods that can be used to support the induction process for practitioners. 2.3. Plan an induction process in collaboration with others.
3. Be able to implement and manage the induction process in your own health and social care setting.	3.1. Manage the implementation of an induction process within your own area of responsibility, including a) appropriate use of delegation b) effective use of resources c) appropriate engagement with team members, and others as appropriate. 3.2. Manage risks and challenges that arise during the implementation of an induction process.
4. Be able to monitor and evaluate an induction process in your own health and social care setting.	4.1. Monitor the implementation of an induction process within your own area of responsibility. 4.2. Provide feedback to a practitioner on their achievement of induction requirements. 4.3. Support development planning for a practitioner on completion of induction.
5. Be able to evaluate an induction process in your own health and social care setting.	5.1. Explain the importance of continuous organisational improvement in the provision of induction. 5.2. Evaluate the effectiveness of an induction process, in conjunction with others. 5.3. Identify actions for improvement of induction, as a result of the evaluation of an induction process.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2, LO 3, LO 4 and LO 5

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Learning Outcome 1 and Learning Outcome 2 - Practitioners may include team members, agency staff, volunteers, placement students, etc.

10.20 Managing Finances in Health and Social Care

Title	Managing Finances in Health and Social Care
Level	Five
Credit Value	4
Guided Learning Hours (GLH)	28
Unit Code	CBH046
Unit Reference No.	J/652/3708
Learn Direct Code	PA1
Links to NOS	HSCCLD334 Promote quality systems and procedures HSCCLD46 – Lead the effectiveness of teams HSCCLD420 – Lead on regulatory requirements in the workplace

Unit purpose and aim(s): This unit will enable the learner to develop knowledge and skills required to manage finances, in accordance with their own responsibilities and agreed ways of working in their health and social care service setting.

Learning Outcomes	Assessment Criteria
1. Understand financial management in health and social care.	1.1. Analyse significant factors and priorities that influence funding in health and social care services. 1.2. Describe the importance of effective financial management systems in health and social care services. 1.3. Summarise relevant sources of funding that are used to develop a budget for your own service setting. 1.4. Analyse the potential impact of insufficient budget on: a) service delivery b) individuals
2. Be able to manage a budget in accordance with your own responsibilities and agreed ways of working in your own service setting.	2.1. Explain roles, responsibilities and accountabilities for financial management within your own service setting, including those associated with: a) budget setting b) recording expenditure c) budget monitoring 2.2. Accept an allocated budget, including areas of planned expenditure, for a specific financial period or project. 2.3. Record and monitor the implementation of the budget. 2.4. Analyse variances and / or discrepancies between budgeted and actual expenditure. 2.5. Implement actions to address variances and / or discrepancies, in accordance with your own responsibilities. 2.6. Record findings from budget reviews, including recommendations for adjustments to budget setting and management.
3. Be able to review the management of a budget in your own service setting.	3.1. Use examples in order to reflect on the effectiveness of budget management in your own setting and ways in which it could be enhanced. 3.2. Reflect on how to adapt your approach to managing a budget, to improve your practice.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2 and LO 3

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 1.1 - Factors and priorities may include those associated with legislation, Government policies and strategies, regulatory requirements, socio-economic and demographic changes, etc.

Assessment Criteria 2.5 - Actions may include escalation to others in accordance with legislation, regulation and / or agreed ways of working.

10.21 Leading and Managing Infection Prevention and Control in Health and Social Care

Title	Leading and Managing Infection Prevention and Control in Health and Social Care
Level	Five
Credit Value	5
Guided Learning Hours (GLH)	35
Unit Code	CBH047
Unit Reference No.	K/652/3709
Learn Direct Code	PA1
Links to NOS	HSCCLD42 – Lead a healthy and safe workplace HSCCLD44 - Lead the safeguarding of individuals and others HSCCLD415 - Lead the development of risk management plans HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to effectively lead and manage infection prevention and control within their own health and social care setting.	

Learning Outcomes	Assessment Criteria
1. Understand current infection prevention and control policies and procedures.	1.1. Summarise policies and procedures for infection prevention and control that apply to your own service setting and how they meet regulatory requirements. 1.2. Compare applying a proportionate approach to infection prevention and control in a domestic setting with that of a formal health and social care setting. 1.3. Explain factors that contribute to the spread and reduction of infection in your own service setting.
2. Be able to lead the implementation of infection prevention and control policies and procedures in your own service setting.	2.1. Model compliance with infection prevention and control policies and procedures in your own service setting. 2.2. Manage the implementation of controls identified through risk assessment processes to minimise infection in partnership with others. 2.3. Demonstrate effective communication of infection prevention and control policies and procedures to others within your own service setting. 2.4. Demonstrate how to provide access to adequate resources to support compliance with infection prevention and control policies and procedures. 2.5. Manage the learning and development needs of team members in relation to infection prevention and control. 2.6. Allocate roles and responsibilities to others in accordance with infection prevention and control procedures within your own service setting. 2.7. Monitor the implementation of infection prevention and control policies and procedures in your own service setting. 2.8. Explain actions to take when there is non-compliance with infection prevention and control policies and procedures.

3. Be able to manage processes for the exchange of information regarding infections.	3.1. Explain why it is important to share information with others, particularly during critical periods of infection prevention and / or control. 3.2. Manage systems for recording: a) suspected or actual levels of infection within your own service setting b) compliance with infection prevention and control procedures 3.3. Manage the reporting of hazards and risks relating to infection prevention and control that are outside your own area of responsibility.
4. Be able to review infection prevention and control practice in your own service.	4.1. Use examples in order to reflect on the effectiveness of infection prevention and control practice in your own service and ways in which it could be improved. 4.2. Reflect on how to adapt your approach to leading and managing infection prevention and control in your service setting, to improve your practice.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2, LO 3 and LO 4

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 2.5 - Learning and development needs may be associated with induction and / or ongoing professional development.

Assessment Criteria 3.1 - Others may include individuals who use services, carers / families, visitors to a facility, professionals, etc.

10.22 Emergency Planning in Health and Social Care Settings

Title	Emergency Planning in Health and Social Care Settings
Level	Five
Credit Value	5
Guided Learning Hours (GLH)	35
Unit Code	CBH048
Unit Reference No.	T/652/3702
Learn Direct Code	PA1
Links to NOS	HSCCLD44 - Lead the safeguarding of individuals and others HSCCLD415 - Lead the development of risk management plans HSCCLD417 - Lead partnership working arrangements HSCCLD418 - Lead service delivery planning HSCCLD420 – Lead on regulatory requirements in the workplace

Unit purpose and aim(s): This unit will enable the learner to understand the knowledge and skills required to formulate an emergency plan to ensure adequate emergency preparedness, resilience and response in health and social care settings.

Learning Outcomes	Assessment Criteria
1. Be able to ensure leadership and governance in the event of an emergency.	1.1. Explain the importance of having a policy statement which outlines organisational commitment to emergency preparedness as part of governance requirements. 1.2. Summarise the importance of leadership in the event of an emergency and identify key people who will take on leadership roles. 1.3. Summarise appropriate sources of support and training for people who take on leadership roles in the event of an emergency. 1.4. Communicate who emergency leads are to staff and others and how they can be contacted.
2. Be able to evaluate risk.	2.1. Explain the importance of regularly evaluating risk which may impact service provision, nationally, regionally and locally. 2.2. Summarise six potential risks to own service which may require an emergency response. 2.3. Carry out risk assessment on own work setting. 2.4. Maintain a comprehensive risk register.
3. Be able to plan for maintaining critical services in the event of an emergency.	3.1. Summarise the importance of working in partnership with other organisations and statutory bodies to mitigate emergency impact. 3.2. Explain the importance of having an emergency communication strategy in place to notify staff and others. 3.3. Carry out a review to confirm clear and concise action plans are in place for each of the risks identified on the service risk register including: a) availability and storage of appropriate physical resources b) alerting of appropriate emergency services c) identified evacuation/shelter area and site d) triage in evacuation site/shelter e) transport arrangements and support
4. Be able to manage staff training and awareness to enable appropriate emergency response.	4.1. Research and identify appropriate staff training to enable emergency action plans to be carried out safely and quickly. 4.2. Summarise individual staff roles and responsibilities in the event of an emergency. 4.3. Plan training evacuation plan exercises as per regulation with minimal disruption to individuals and service provision. 4.4. Review staff induction to verify inclusion of emergency response training.
5. Be able to manage information and tracking in the event of an emergency.	5.1. Explain the importance of having remote access to service user information. 5.2. Research and identify an appropriate method of tracking service users and others during an emergency evacuation.

6. Be able to evaluate emergency plans.	6.1. Work in conjunction with others to evaluate emergency plans. 6.2. Update risk register and action plans to address emerging threats as required.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1, LO 2, LO 3, LO 4, LO 5 and LO 6

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

10.23 Leading a Change Management Process in Health and Social Care

Title	Leading a Change Management Process in Health and Social Care
Level	Five
Credit Value	6
Guided Learning Hours (GLH)	42
Unit Code	CBH050
Unit Reference No.	A/652/3704
Learn Direct Code	PA1
Links to NOS	HSCCLD418 - Lead service delivery planning HSCCLD420 – Lead on regulatory requirements in the workplace HSCCLD421 - Lead changes to workplace policies, procedures and practices
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to lead a change management process within their own health and social care setting.	

Learning Outcomes	Assessment Criteria
1. Understand the principles of change management in health and social care.	1.1. Analyse significant factors that drive organisational change in health and social care. 1.2. Explain the importance of effective change management in order to maintain a quality service provision. 1.3. Summarise two underpinning theories of change management. 1.4. Describe effective approaches and techniques that support a change management process.
2. Be able to facilitate a process to develop a shared understanding of the need for change in your own health and social care setting.	2.1. Summarise methods to use with: a) staff b) service users, and / or others as appropriate to promote the rationale for and benefits of a proposed change 2.2. Create opportunities for others to express their opinions about the identified change. 2.3. Address challenges that may arise during the process of developing a shared understanding of the need for change.
3. Be able to develop a change management plan in your own health and social care setting.	3.1. Identify key objective(s) as the basis for a specific change management plan. 3.2. Undertake an impact assessment of a proposed change to a given service provision. 3.3. Produce a change management plan that addresses identified objectives and includes: a) clear timelines b) roles and responsibilities of those involved in the change process c) a communication plan d) proposed outcomes and performance criteria e) tracking processes and protocols
4. Be able to implement a change management plan in your own health and social care setting.	4.1. Agree roles and responsibilities for implementing a change management plan. 4.2. Support others to carry out their agreed roles in a change management plan. 4.3. Demonstrate how to be a positive role model when introducing change. 4.4. Explain why it is important to adapt the change management plan to address issues as they arise. 4.5. Establish strategies for ensuring that the quality of service for individuals is maintained during a change process.
5. Be able to evaluate a change management process in your own health and social care setting.	5.1. Use agreed processes to monitor the effectiveness of the change management plan. 5.2. Work with others to review the change against the identified outcomes and performance criteria.

	5.3. Evaluate the effectiveness of the change and its impact on individuals and the service provision. 5.4. Identify a strategy to sustain the change over time.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2, LO 3, LO 4 and LO 5

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 3.2 - An impact assessment includes an analysis of how the change will affect people, processes and / or systems within a health and social care setting. It supports an understanding of the potential challenges and benefits of a proposed change.

10.24 Leading the Management of Transitions

Title	Leading the Management of Transitions
Level	Five
Credit Value	3
Guided Learning Hours (GLH)	21
Unit Code	CBH051
Unit Reference No.	F/652/3706
Learn Direct Code	PA1
Links to NOS	HSCCLD45 - Lead the care or support planning process HSCCLD418 - Lead service delivery planning
Unit purpose and aim(s): This unit will enable the learner to understand the knowledge and skills required to lead and support workers engaging with individuals who are experiencing transition and change.	

Learning Outcomes	Assessment Criteria
1. Understand the impact of change and transitions on the well-being of individuals.	1.1. Explain ways in which transitions and significant life events might impact on an individual's well-being. 1.2. Critically compare two theories of change and how they might inform approaches to the management of transitions. 1.3. Explain the concept of resilience in relation to transitions and significant life events. 1.4. Analyse factors that may impact on an individual's ability to manage transition and change.
2. Be able to lead and manage provision that supports workers to manage transitions and significant life events.	2.1. Explain how a solution-focused approach can be used to support the management of transitions and significant life events. 2.2. Lead and support a culture that encourages individuals to explore challenges. 2.3. Summarise the importance of and how to lead and support workers to engage with individuals and others to develop and implement plans to build on own strengths and abilities. 2.4. Support workers to identify any additional help they may require to assist individuals through transition and change.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

10.25 Leading and Managing Behavioural Support Strategies for Individuals in Health and Social Care

Title	Leading and Managing Behavioural Support Strategies for Individuals in Health and Social Care
Level	Five
Credit Value	6
Guided Learning Hours (GLH)	50
Unit Code	CBH052
Unit Reference No.	H/652/3707
Learn Direct Code	PA1
Links to NOS	HSCCLD327 - Work with individuals to develop and maintain relationships HSCCLD415 - Lead the development of risk management plans HSCCLD418 - Lead service delivery planning HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop knowledge and skills to lead and manage behavioural support strategies for individuals who display behaviours of concern, in health and social care settings.	

Learning Outcomes	Assessment Criteria
1. Understand behaviour as a means of expression.	1.1. Analyse what is meant by behaviour as a means of expression. 1.2. Summarise a range of factors that may contribute to, or trigger behaviours of concern. 1.3. Explain key methods for analysing behaviour, including the core components of functional analysis. 1.4. Analyse the application of the Time Intensity Model in social care settings. 1.5. Evaluate the contribution of specialist professionals / agencies involved in assessing and analysing individuals' behaviours.
2. Understand strategies to support the management of behaviours of concern.	2.1. Summarise a range of approaches to support the management of behaviours of concern within an identified context, including a) primary prevention strategies b) secondary prevention strategies c) non-aversive reactive strategies 2.2. Explain the importance of daily planning and consistency in the management of behaviours of concern.
3. Be able to lead the implementation of primary prevention strategies within your own setting.	3.1. Demonstrate the use of effective communication and positive interaction with a) individuals b) others in relation to primary prevention strategies to support the management of behaviours of concern. 3.2. Support others to implement agreed person-centred primary prevention strategies, using least restrictive practices and respecting an individual's dignity, rights and choice. 3.3. Work with an individual and others to review the individual's routine and daily activities to identify areas for increased participation and choice.
4. Be able to lead the implementation of secondary prevention strategies within your own setting	4.1. Identify indicators of behavioural agitation and possible secondary prevention strategies that may be used with an individual. 4.2. Ensure that agreed secondary prevention strategies are clearly documented in an individual's care / support plan. 4.3. Support others to implement agreed person-centred secondary prevention strategies, using least restrictive practices and respecting an individual's dignity and rights.

5. Be able to lead the implementation of non-aversive reactive strategies within your own setting.	5.1. Assess risks involved in the use of non-aversive reactive strategies that may be used with an individual. 5.2. Ensure that agreed non-aversive reactive strategies are clearly documented in an individual's care / support plan. 5.3. Support others to implement an agreed non-aversive reactive strategy using least restrictive practices and respecting an individual's dignity and rights. 5.4. Manage post-incident support needs of: a) an individual b) others c) self taking account of immediate, intermediate and long-term support needs. 5.5. Demonstrate the use of agreed incident recording and reporting processes. 5.6. Evaluate the effectiveness of the implementation of the agreed non-aversive reactive strategy and identify areas for service improvement.
6. Be able to evaluate the use of behavioural support strategies for individuals in your own setting.	6.1. Evaluate your own role in leading and managing behavioural support strategies for individuals in your own setting and identify possible areas for: a) your own practice development b) service improvement

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1 and LO 2

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 3, LO 4, LO 5 and LO 6

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 1.2 – Factors may include communication difficulties, mental health issues, cognitive impairments, medical conditions / pain, medication effects; environmental influences e.g. sensory overload, unfamiliar surroundings, routine disruptions; social interactions with others, trauma etc.

Assessment Criteria 1.3 - Functional analysis refers to the process for identifying or analysing the function or purpose of an individual's behaviour, using a range of structured measures.
Resource: Functional analysis (MSc Applied Behaviour Analysis,)

Assessment Criteria 1.4 – The Time-Intensity Model refers to the cycle of behavior that show the stages of a crisis/ escalation. This model is also known as the 'Crisis Cycle', 'Assault Cycle' or 'Emotional Arousal Cycle'.

The-time-intensity-model
The-5-stages-of-the-assault-cycle/
scottishconflictresolution.org.uk

Learning Outcome 3 - Primary prevention - Proactive strategies that involve changing aspects of an individual's living, working and recreational environments so that the possibility of incidents of behaviours of concern are reduced.

Learning Outcome 4 - Secondary prevention - Strategies that apply when an individual's behaviours of concern begin to escalate, in order to prevent a significant incident.

Learning Outcome 5 - Non-aversive reactive strategies - are ways of responding safely and efficiently to behaviours of concern that have not been prevented. They can include physical interventions that do not cause pain and do minimise discomfort, and comply with care/support plans and safeguarding protocols.

Useful Resources:
003-Positive-Behaviour-Support-Planning-Part-3.pdf Positive BehaviourAL Support
Understanding the Behaviour Cycle - BeyondAutism

10.26 Undertaking a Research Project within Health and Social Care Services

Title	Undertaking a Research Project within Health and Social Care Services
Level	Five
Credit Value	7
Guided Learning Hours (GLH)	45
Unit Code	CBH031
Unit Reference No.	L/652/3665
Learn Direct Code	PA1
Links to NOS	HSCCLD424 - Lead a research project
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to undertake a research project and to consider its implications for the management of their own health and social care service.	

Learning Outcomes	Assessment Criteria
1. Be able to justify a topic for research which is relevant to your own service setting.	1.1. Identify a research topic, showing relevance to your own service setting. 1.2. Conduct a literature review using a range of sources relevant to the research topic, adhering to academic protocols. 1.3. Develop a clear aim and objectives for the research project. 1.4. Explain relevant ethical considerations and ways in which these will be addressed during the research process.
2. Be able to develop a research methodology for an identified research project.	2.1. Justify the selection of the following to be used in the research project: a) the research design b) at least two research methods 2.2. Explain the importance of validity and reliability of data used within research. 2.3. Develop research questions for use in the research project.
3. Be able to conduct a research project which is relevant to your own service setting.	3.1. Develop a research project plan. 3.2. Conduct the research using the identified research methods. 3.3. Record and collate the research data.
4. Be able to analyse research findings to inform project conclusions and application to practice.	4.1. Analyse the research data to: a) draw conclusions from the findings; b) determine correlation and / or disparity with the initial literature review 4.2. Identify implications of the research findings for the management of your own service setting. 4.3. Make recommendations to support the application of the research findings in your own service setting.

Assessment Guidance

Evidence requirements:

- The primary type of evidence is a documented Research Project Report addressing LO1 - LO4.
- Evidence may also include presentation, reflective account, professional discussion, as appropriate.
- Learners ought to select a research topic of relevance to their own service setting.
- Learners should be discouraged from choosing projects that require ethics committee approval.

Assessment Criteria 1.2 - A literature review of chosen area of research may include sources such as journals; books; internet sites; papers; presentations; the media; past/current research.

Academic protocols include protocols in relation to the appropriate use of material generated through Artificial Intelligence.

Assessment Criteria 1.4 - Ethical considerations include authorisation or permissions that may be required to undertake the identified research project. In addition, they may include consideration of confidentiality, sensitivity of data, participant engagement arrangements, etc.

Assessment Criteria 2.1 - Research designs may be qualitative, quantitative, or a mixed methods design. Each type serves different purposes and is selected based on the nature of the research objectives, and resources.

Assessment Criteria 2.1 - Research methods may include survey and questionnaire; interview; observation; case study, etc. It is expected that for ethical reasons, experiment would not be used as a research method.

Assessment Criteria 2.2 - Validity and reliability of data used within research may include consideration of currency; credibility; cogency; legitimacy; authority; authenticity, etc.

Assessment Criteria 4.1 - Conclusions may include qualitative and / or quantitative analysis.

10.27 Leading and Managing the Promotion of Active Support in Health and Social Care

Title	Leading and Managing the Promotion of Active Support in Health and Social Care
Level	Five
Credit Value	4
Guided Learning Hours (GLH)	24
Unit Code	CBH039
Unit Reference No.	M/652/3666
Learn Direct Code	PA1
Links to NOS	HSCCLD327 - Work with individuals to develop and maintain relationships HSCCLD415 - Lead the development of risk management plans HSCCLD418 - Lead service delivery planning HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills to effectively lead and manage the promotion of active support for individuals within their own health and social care setting.	

Learning Outcomes	Assessment Criteria
1. Understand the use of active support in health and social care.	1.1. Explain the nature of and principles underpinning the use of active support in health and social care. 1.2. Analyse the relevance and appropriateness of active support in your own service setting.
2. Be able to promote active support in your own service setting.	2.1. Explain how team members are supported to understand the importance of active support. 2.2. Lead a culture that values active support. 2.3. Demonstrate how individuals are involved in the development of their active support plans. 2.4. Demonstrate how team members are supported to develop active support plans.
3. Be able to manage the implementation of active support in your own service setting.	3.1. Support team members to use active support that is appropriate to individuals' needs and abilities. 3.2. Support team members to monitor the use of active support to promote individuals' independence and autonomy. 3.3. Support team members to take remedial action to ensure that structured activity steps match individuals' needs and abilities. 3.4. Monitor team members' recording of individuals' participation and the use of active support.
4. Be able to review the use of active support in your own service setting.	4.1. Use examples in order to reflect on the effectiveness of active support in your own setting and ways in which it could be enhanced. 4.2. Reflect on how to adapt your approach to leading and managing the promotion of active support, to improve your practice.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2, LO 3 and LO 4

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Learning Outcome 3 - The level of support provided ought to be matched directly to the individual's need for support in an identified activity and be person-centred in practice. While the support provided ought to be enough, the aim is always to promote the individual's independence by providing only as much support as is necessary. Assistance may gradually be reduced or altered as the individual's skills level changes.

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https://arcengland.org.uk/wp-content/uploads/2018/05/Active-Support-Handbook-updated-2019.pdf

10.28 Supporting the Use of Assistive Technology in Health and Social Care

Title	Supporting the Use of Assistive Technology in Health and Social Care
Level	Five
Credit Value	4
Guided Learning Hours (GLH)	28
Unit Code	CBH049
Unit Reference No.	R/652/3667
Learn Direct Code	PA1
Links to NOS	HSCCLD411 - Manage requests for health, social or other care services HSCCLD414 - Lead the assessment process with individuals HSCCLD416 - Collaborate with others to support individuals HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to understand, plan, provide and review assistive technologies in order to best support the individual in health and social care settings.	

Learning Outcomes	Assessment Criteria
1. Be able to research and evaluate assistive technologies.	1.1. Research and develop a report on the types, availability and the impact of assistive technologies on individuals within own area of responsibility.
2. Be able to facilitate the use of assistive technologies by the individual.	2.1. Explain how assistive technologies solutions can be adapted according to need and context. 2.2. Summarise the potential risks associated with assistive technology solutions. 2.3. Summarise assessment and referral processes which are used to secure assistive technology. 2.4. Demonstrate how to support the individual to secure and use appropriate assistive technology.
3. Be able to support others to facilitate the use of assistive technology.	3.1. Support others to facilitate the use of assistive technology by providing information and guidance.
4. Be able to review the provision of assistive technology.	4.1. Review the assessment and referral processes used to secure assistive technology. 4.2. Review the outcomes of assistive technology support to individuals against identified needs.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

LO 1 - Evidence requirements:

- The primary type of evidence for LO 1 is a documented Report on the types, availability and the impact of assistive technologies on individuals within the learner's area of responsibility.

Primary assessment method(s) for LO 2, LO 3 and LO 4

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

10.29 Leading and Managing Practice in Supporting Individuals to Take Positive Risks

Title	Leading and Managing Practice in Supporting Individuals to Take Positive Risks
Level	Five
Credit Value	4
Guided Learning Hours (GLH)	28
Unit Code	CBH053
Unit Reference No.	T/652/3668
Learn Direct Code	PA1
Links to NOS	HSCCLD44 - Lead the safeguarding of individuals and others HSCCLD414 - Lead the assessment process with individuals HSCCLD415 - Lead the development of risk management plans HSCCLD418 - Lead service delivery planning HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to understand the knowledge and skills required to lead and manage practice which supports individuals to take positive risks.	

Learning Outcomes	Assessment Criteria
1. Understand the relationship between person-centred assessment, care planning and positive risk taking for individuals.	1.1. Analyse the difficulties that may arise between positive risk-taking and person-centred planning. 1.2. Explain why positive risk taking should be considered within the context of a person-centred assessment. 1.3. Explain how models of risk management may be used in positive risk taking for individuals. 1.4. Analyse how taking positive risks may contribute to personal growth for the individual.
2. Be able to lead and promote staff understanding of the legal and policy frameworks which underpin an individual's right to make decisions and take risks.	2.1. Lead and support staff to work in line with the legal and policy frameworks for decision making which underpin an individual's right to make decisions and take risks. 2.2. Lead and support staff to integrate human rights principles in supporting individuals to make decisions and take risks.
3. Be able to lead the development of practice which includes the individual and others in positive risk assessment and planning.	3.1. Lead and manage practice which supports person-centred assessments rather than service-led assessments. 3.2. Develop assessment practice with staff which engages the individual and others in identifying activities to support the individual to achieve their personal goals. 3.3. Support staff to engage in inclusive assessment practice to identify hazards and risks associated with achieving personal goals. 3.4. Support practice which enables the individual and others to balance individual personal goals with health, safety and well-being considerations. 3.5. Lead the development of risk management strategies for engaging the individual and others to build in safeguards to mitigate against risks to the individual. 3.6. Support others to develop care plans which address positive risk-taking.

4. Be able to support others to understand an individual's personal goals, how to support them and the consent required.	4.1. Support staff to understand how their own values and belief systems may impact on supporting an individual to take positives risks. 4.2. Support others to facilitate the individual to enable them to identify and communicate their personal goals. 4.3. Support staff to develop good practice in the confirmation of consent from the individual and others prior to taking positive risks. 4.4. Support staff to use advocacy skills with families and others to gain appropriate support for individuals prior to taking positive risks. 4.5. Support staff to record how decisions about positive risk taking have been reached.
5. Be able to lead and manage systems and practice for positive risk taking.	5.1. Lead and support staff to understand the principle of duty of care while supporting the individual to take positive risks. 5.2. Manage systems to ensure staff and others understand actions required if the individual chooses to take unplanned risks. 5.3. Lead and manage practice to ensure that: a) risk taking is compliant with risk assessment b) appropriate support is in place to enable the individual to undertake identified risks c) consent is obtained from individuals and others d) outcomes for individuals are reviewed
6. Be able to evaluate the practice of positive risk taking.	6.1. Evaluate with staff and others: a) risk assessment methods b) risk management model used c) the benefits to the individual from positive risk taking 6.2. Support staff to evaluate their practice in facilitating positive risk taking by individuals.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2, LO 3, LO 4, LO 5 and LO 6

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

10.30 Managing Disciplinary Processes in Health and Social Care

Title	Managing Disciplinary Processes in Health and Social Care
Level	Five
Credit Value	5
Guided Learning Hours (GLH)	39
Unit Code	CBH054
Unit Reference No.	F/652/3670
Learn Direct Code	PA1
Links to NOS	HSCCLD36 – Promote the effectiveness of teams HSCCLD44 - Lead the safeguarding of individuals and others HSCCLD46 – Lead the effectiveness of teams HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit will enable the learner to develop the knowledge and skills required to be able to manage disciplinary processes in the context of their own health and social care service.	

Learning Outcomes	Assessment Criteria
1. Understand disciplinary processes in health and social care.	1.1. Summarise the principles that underpin disciplinary processes in health and social care. 1.2. Distinguish between the purposes of disciplinary processes and at least one other performance management process. 1.3. Use examples to explain what may be considered as: a) misconduct b) gross misconduct in health and social care 1.4. Explain the relationship between disciplinary and regulatory processes in health and social care.
2. Be able to implement disciplinary processes in a health and social care setting.	2.1. Summarise line manager responsibilities in relation to disciplinary processes, in accordance with your organisation's agreed ways of working. 2.2. Agree actions with a team member when their practice falls below agreed standards. 2.3. Initiate a disciplinary process in accordance with agreed ways of working, including the provision of information to the team member, in relation to the disciplinary process and their rights. 2.4. Work with others to implement the stages of the disciplinary process in accordance with your organisation's agreed ways of working. 2.5. Communicate effectively and in a timely manner with all parties involved, ensuring the wellbeing of the team member is considered. 2.6. Describe a range of outcomes that may arise following screening, in line with your organisation's agreed ways of working. 2.7. Use examples to summarise the use of sanctions that may be imposed as a result of a disciplinary process.
3. Be able to compile and present evidence for a disciplinary process in a health and social care setting.	3.1. Complete records in accordance with your organisation's agreed ways of working, to include: a) the nature and evidence of the complaint / incident / error / concern that has arisen in relation to the team member; b) evidence of the process undertaken with the team member; c) identification of risks and mitigating actions taken to stabilise the situation. 3.2. Present evidence as part of a disciplinary process.

4. Be able to manage the outcomes of a disciplinary process in a health and social care setting.	4.1. Implement the decisions of a disciplinary process, in accordance with your own role and responsibilities and agreed ways of working. 4.2. Manage the implications of the outcomes for individuals and others, as appropriate.
5. Be able to review disciplinary processes in a health and social care setting.	5.1. Reflect on your experience of the effectiveness of disciplinary processes in your own service. 5.2. Reflect on how to adapt your own approach to disciplinary processes in order to improve your own practice.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2, LO 3, LO 4, and LO 5

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers. Simulation is not appropriate.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

Assessment Criteria 1.1 - Principles may include fairness, confidentiality, equality, natural justice, health and social care values, etc.

Assessment Criteria 2.6 - Outcomes may include no further action; the identification of a system or process issue; a capability issue requiring training / development; the implementation of a disciplinary / informal process; instigating a fast track procedure or a formal investigation.

Assessment Criteria 2.7 - Sanctions may include formal warning, final warning, dismissal, summary dismissal, transfer or downgrading, etc.

10.31 Leading and Managing a Service that provides Support for Individuals with Complex Disabilities

Title	Leading and Managing a Service that provides Support for Individuals with Complex Disabilities
Level	Five
Credit Value	4
Guided Learning Hours (GLH)	24
Unit Code	CBH055
Unit Reference No.	J/652/3672
Learn Direct Code	PA1
Links to NOS	HSCCLD416 - Collaborate with others to support individuals HSCCLD414 - Lead the assessment process with individuals HSCCLD418 - Lead service delivery planning HSCCLD420 – Lead on regulatory requirements in the workplace
Unit purpose and aim(s): This unit enables the learner to develop the knowledge and skills required to lead and manage a service that provides support for individuals with complex disabilities.	

Learning Outcomes	Assessment Criteria
1. Understand complex disabilities for individuals in health and social care services.	1.1. Research and explain links between specific factors and a range of complex disabilities, among individuals in your service setting. 1.2. Analyse the impact of complex disabilities on individuals in your service setting. 1.3. Use practice examples to describe how service provision can be tailored to facilitate positive outcomes for individuals with complex disabilities.
2. Be able to lead support for individuals with complex disabilities.	2.1. Manage the assessment of individuals with complex disabilities. 2.2. Support team members to work collaboratively with individuals and others to provide support that is person-centred, holistic and strengths based. 2.3. Use referral processes to support the needs and preferences of individuals with complex disabilities.
3. Be able to manage the development of others in order to support individuals with complex disabilities.	3.1. Facilitate the professional development of team members to enhance their support of individuals with complex disabilities. 3.2. Demonstrate how to effectively provide information and guidance to others to support individuals with complex disabilities.
4. Be able to review service provision for individuals with complex disabilities.	4.1. Use reflective practice in order to evaluate the extent to which systems and processes: a) support positive outcomes for individuals with complex disabilities in your service setting and b) ways in which they could be improved 4.2. Reflect on how to adapt your approach to leading and managing service provision for individuals with complex disabilities.

Assessment Guidance

A range of assessment methods may be used, determined by the requirement for a learner to show understanding or to demonstrate competence.

Primary assessment method(s) for LO 1

- Written tasks
- Verbal questioning, documented by the assessor.
- Professional discussion recorded and summarised by the assessor.

When answering, learners should reflect on own service user group and organisational context.

Primary assessment method(s) for LO 2, LO 3 and LO 4

- Direct Observation of the learner in their work setting; review of work products and associated 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 are in receipt of care / support, their families and carers.
- Expert witness testimony may be permitted where observation by the assessor is inappropriate due to the work setting or a particular individual's situation; this will need to be agreed by the EQA.

In this unit, the term 'complex disabilities' refers to individuals with multiple conditions, disabilities and/or complex, interacting needs across health, communication, mobility, cognition or social engagement.

Assessment Criteria 1.1 - Factors may include genetics, age, gender, ethnicity, socio-economic status, lifestyle choices, traumatic experiences, etc.

Assessment Criteria 1.2 - Impact of complex disabilities may include physical, emotional, social, mental, economic, intellectual, spiritual, etc.

11.Quality Assurance of Centre Performance

11.1 Internal Assessment

When delivering and assessing this qualification, centres must align with stakeholders' expectations and address learners' needs by implementing a practical and applied programme. Centres have the flexibility to customise programmes to meet local requirements and establish connections with local employers and the broader vocational sector.

The Assessor should work with the Internal Verifier to ensure that the assessment is planned in line with OCN NI requirements. Assessment Plans must be developed and approved by the Internal Verifier prior to the delivery of the qualification.

All units within this qualification must undergo internal assessment. Learners must provide evidence that they have appropriately met all assessment criteria required for that grade.

The assessment format for all units involves a task conducted after the delivery of the unit's content, or part of it, if multiple tasks are used. Tasks may exhibit in various forms, encompassing practical and written types. Please refer to 'OCN NI's Assessment Definitions Guide' for additional details.

A task constitutes a distinct activity completed independently by learners, separated from teaching, practice, exploration, and other activities guided by tutors. Tasks are assigned to learners with a specified start date, completion date, and explicit requirements for the evidence to be produced. Some tasks may include observed practical components and require diverse forms of evidence.

A valid assignment will enable a clear and formal assessment outcome, which meets the requirements of the assessment criteria. Assessment decisions are based on the specific assessment criteria given in each unit and set at each grade level. The way in which individual units are written provides a balance of assessment of understanding, practical skills and vocational attributes appropriate to the purpose of qualifications.

It is the Assessor's role to ensure that learners are appropriately prepared for assessment, this begins from induction onwards. Assessors should ensure that learners understand how assessment tasks are used to determine the award of credit, the importance of meeting assessment timelines, and that all learners work must be independently created, where source documents are used this should be appropriately referenced, learners should be aware of what would constitute plagiarism and the possible consequences.

When conducting the assessment, Assessors must ensure they do not provide direct input, instructions or specific feedback which may compromise the authenticity of the work submitted.

Once the Assessor has authenticated the learners work, they must transparently demonstrate the rationale behind their assessment decisions. Once a learner completes all assigned tasks for a unit, the Assessor will allocate a grade for the unit. Refer to the 'Unit Grading Matrix' for additional information on the grading process.

Once the Assessor has completed the assessment process for the task, the assessment decision is recorded formally, and feedback is provided to the learner. The feedback should show the learner the outcome of the assessment decision, how it was determined or where the criteria has been met, it may indicate to the learner why achievement of the assessment criteria has not been met. It must be clear to the learner that this Assessment outcome is subject to verification.

For further information on assessment practice, please see the 'OCN NI Centre Handbook'. Assessment Training is also available and can be booked through the OCN NI Website.

11.2 Internal Quality Assurance

The role of the Internal Quality Assurer is to ensure appropriate internal quality assurance processes are carried out. The Internal Quality Assurer must oversee that assessments are conducted in accordance with relevant OCN NI policies, regulations, and this specification.

The Internal Quality Assurer must ensure assessments are fair, reliable, and uniform, thereby providing a consistent standard for all learners.

Internal Quality Assurers are required to provide constructive feedback to Assessors, identifying areas of strength and those that may require improvement. This feedback contributes to the ongoing professional development of Assessors.

Contributing to the standardisation of assessment practices within the centre is an important function of this role. This entails aligning assessment methods, grading criteria, and decision-making processes to maintain fairness and equity.

Internal Quality Assurers will actively engage in the sampling and monitoring of assessments to ensure the consistency and accuracy of assessment decisions. This process helps identify trends, areas for improvement, and ensures the robustness of the overall assessment system.

For further information on Internal Quality Assurance practice, please see the 'OCN NI Centre Handbook'. Internal Quality Assurance Training is also available and can be booked through the OCN NI Website.

11.3 Documentation

For internal quality assurance processes to be effective, the internal assessment and internal verification team needs to keep effective records.

- The programme must have an assessment and internal verification plan. When producing a plan, they should consider:
    - the time required for training and standardisation activities
    - the time available to undertake teaching and carry out assessment,
    - consider when learners may complete assessments and when quality assurance will take place
    - the completion dates for different assessment tasks
    - the date by which the assignment needs to be internally verified

- sampling strategies
- how to manage the assessment and verification of learners' work so that they can be given formal decisions promptly
- how resubmission opportunities can be scheduled

11.4 External Quality Assurance

All OCN NI recognised centres are subject to External Quality Assurance. External quality assurance activities will be conducted to confirm continued compliance with CCEA Regulation General Conditions of Recognition, OCN NI terms and conditions and the requirements outlined within this qualification specification.

The External Quality Assurance is assigned by OCN NI. The External Quality Assurer will review the delivery and assessment of this qualification. This will include, but is not limited to, the review of a sample of assessment evidence and evidence of the internal verification of assessment and assessment decisions. This will form the basis of the External Quality Assurance report and will help OCN NI determine the centre's risk.

The role of the External Quality Assurer serves as an external overseer of assessment quality, working to uphold consistency, compliance, and continuous improvement within the assessment process. Their role is crucial in ensuring that assessments are valid, reliable, fair, and aligned with the required standards and regulations.

For further information on OCN NI Centre Assessments Standards Scrutiny (CASS) Strategy, please see the OCN NI Centre Handbook.

11.5 Standardisation

As a process, standardisation is designed to ensure consistency and promote good practice in understanding and the application of standards. Standardisation events:

- make qualified statements about the level of consistency in assessment across centres delivering a qualification
- make statements on the standard of evidence that is required to meet the assessment criteria for units in a qualification
- make recommendations on assessment practice
- produce advice and guidance for the assessment of units
- identify good practice in assessment and internal verification

Centres offering this qualification must carry out internal standardisation activities prior to the claim for certification.

Centres offering units of an OCN NI qualification must attend and contribute assessment materials and learner evidence for standardisation events if requested.

OCN NI will notify centres of the nature of sample evidence required for standardisation events (this will include assessment materials, learner evidence and relevant Assessor and Internal Verifier documentation). OCN NI will make standardisation summary reports available and correspond directly with centres regarding event outcomes.

12.Administration

12.1 Registration

A centre must register learners for this qualification within 90 days of commencement of the delivery of the programme.

For further information on learner registration please see the OCN NI Centre Handbook and the QuartzWeb Manual, available through the Centre Login section of the OCN NI website. Administration training is also available and can be booked through www.ocnni.org.uk.

12.2 Certification

Once all internal quality assurance activities have been successfully completed, the centre can claim certification for the learner(s).

Certificates will be issued to centres within 20 working days from completion of a satisfactory external quality assurance activity, if appropriate, alternatively from the submission of an accurate and complete marksheet.

It is the responsibility of the centre to ensure that certificates received from OCN NI are held securely and distributed to learners promptly and securely.

For further information on the uploading of results please see the QuartzWeb Manual for guidance, administration training is also available and can be booked through OCN NI

12.3 Charges

OCN NI publishes all up-to-date qualification fees in its Fees and Invoicing Policy document. Further information can be found on the centre login area of the OCN NI website.

12.4 Equality, Fairness and Inclusion

OCN NI's are committed to ensuring all learners have an equal opportunity to access our qualifications and assessment, and that our qualifications are awarded in a way that is fair to every learner.

OCN NI is committed to making sure that:

- learners with a protected characteristic are not, when they are undertaking one of our qualifications, disadvantaged in comparison to learners who do not share that characteristic
- all learners achieve the recognition they deserve for undertaking a qualification and that this achievement can be compared fairly to the achievement of their peers

For information on reasonable adjustments and special considerations please see the OCN NI Centre Handbook and Reasonable Adjustments and Special Considerations Policy held in the back office of the OCN NI website.

12.5 Retention of Evidence

OCN NI has published guidance for centres on the retention of evidence. Details are provided in the OCN NI Centre Handbook and can be accessed via the OCN NI website.

OCN NI Level 5 Diploma in Leadership and Management in Health and Social Care Services (Northern Ireland)
Qualification Number: 610/8008/1

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