

WJEC Level 3 Certificate and Diploma in Health and Social Care: Principles and Contexts

Approved by Qualifications Wales

This qualification forms part of the new suite of Health and Social Care, and Childcare qualifications in Wales provided by City & Guilds/WJEC.

This Qualifications Wales regulated qualification is not available to centres in England.

Specification



Contents

Qualifications at a glance	3
1. Introduction	4
The aims and objectives of the qualifications	6
Structure	6
Guided Learning Hours (GLH), Total Qualification Time (TQT) and Credit	7
2. Summary of Assessment	9
Assessment objectives	12
3. Units	14
Unit format	14
Unit 1: Principles of care and safe practice within outcome focused person-centred care	15
Unit 2: Factors affecting individuals' growth and development across the lifespan and how this impacts on outcomes, care and support needs	21
Unit 3: Promoting the rights of individuals in across the lifespan	26
Unit 4: Understanding how the human body is affected by common conditions	32
Unit 5: Supporting individuals at risk to achieve their desired outcomes	36
Unit 6: Working in the health and social care sector	40
4. Centre Requirements	49
5. Delivering, assessing and quality assuring the qualification	50
Appendix 1: Command Words	64

Qualifications at a glance

Subject area	Health and Social Care
WJEC number	
QiW number	C00/1253/2
Age group approved	16+
Assessment	Certificate: Internal: 2 non-examination assessments (NEA) External: 1 external examination assessment Diploma: Internal: 4 non-examination assessments External: 2 external examination assessments
Approvals	Centre and qualification approval is required
Related documents	Sample Assessment Materials Guidance for Teaching Centre Administration Handbook Good practice guide to work placement
Registration and certification	Consult the Consortium website for details www.healthandcarelearning.wales

1 Introduction

About the qualifications

Area	Description
Who are the qualifications for?	<p>The Level 3 Certificate and Diploma in Health and Social Care: Principles and Contexts qualifications are designed for post-16 learners who are interested in learning more about the health and social care sectors.</p> <p>The qualifications provide a suitable progression route for learners who have studied Level 2 qualifications within the health and social care, and childcare suite including:</p> <ul style="list-style-type: none">• Level 2 Health and Social Care: Principles and Contexts• GCSE Health and Social Care, and Childcare• Level 2 Health and Social Care: Core, or• Level 2 Children's Care, Play Learning and Development: Core. <p>They are also suitable for learners who have not previously studied Health and Social Care but who are capable of Level 3 study.</p>
What do the qualifications cover?	<p>The qualifications enable learners to develop and demonstrate knowledge, skills and understanding within the context of health and social care services.</p> <p>The knowledge, understanding and skills a learner is required to achieve within these qualifications build on the content of the Health and Social Care: Core qualification. It is strongly recommended that a learner undertaking either of these qualifications has completed or is currently undertaking the Health and Social Care: Core qualification. Please note that learners need to be in employment if undertaking level 2 and 3 Practice qualifications. It is also a requirement of Social Care Wales that an individual working within the health and social care sector will need the Health and Social Care: Core qualification and a relevant Practice qualification to work within specific job roles. For more information on requirements to work within the Health and Social sector, please refer to Social Care Wales' website: https://socialcare.wales/resources/qualification-framework-for-the-social-care-sector-in-wales</p> <p>Completion of the Diploma qualification requires learners to undertake a minimum of 100 hours of sector engagement, of which 60 hours must be spent undertaking a work placement.</p> <p>Centres are encouraged to ensure that, where possible, learners experience a minimum of two settings during the sector engagement.</p>

What opportunities for progression are there?	<p>This specification provides a suitable foundation for the study of health and social care through a range of higher education courses, or apprenticeships. Learners may also progress to other qualifications within the health and social care, and childcare suite, for example the Level 2 and Level 3 Health and Social Care Practice qualifications.</p> <p>In addition, the specification provides a coherent, satisfying and worthwhile course of study for learners who do not progress to further study in this subject.</p>
Who did we develop the qualifications with?	<p>These qualifications have been developed by the Consortium in conjunction with stakeholders from the health and social care sectors. These included Social Care Wales, NHS Health Education and Improvement Wales, tutors, teachers and work place assessors.</p>

The aims and objectives of the qualifications

The Level 3 Certificate and Diploma in Health and Social Care: Principles and Contexts qualifications enable learners to develop and demonstrate their knowledge, skills and understanding within the context of health and social care services. In particular learners will be able to demonstrate that they:

- understand the principles and values which underpin health and social care practice and apply them to a range of health and social care contexts
- understand and reflect on the ways in which individuals' unique needs can be identified and responded to
- understand ways in which effective, person-centred practice and well-being within health and social care can be promoted and supported
- analyse, interpret and evaluate theories in health and social care and reflect on how they could influence practice
- are aware of changing sector policy and how these changes affect service development and delivery
- use literacy, numeracy, research and digital competency skills as appropriate within their study.

Structure

The Level 3 Certificate in Health and Social Care: Principles and Contexts qualification is a unitised qualification made up of three mandatory units:

Unit number	Unit title	GLH
001	Principles of care and safe practice within outcome focused person-centred care	90
002	Factors affecting individuals' growth and development across the lifespan and how this impacts on outcomes, care and support needs	180
003	Promoting the rights of individuals across the lifespan	90
	Total GLH	360

The Level 3 Diploma in Health and Social Care: Principles and Contexts qualification is a unitised qualification made up of six mandatory units:

Unit number	Unit title	GLH
001	Principles of care and safe practice within outcome focused person-centred care	90
002	Factors affecting individuals' growth and development across the lifespan and how this impacts on outcomes, care and support needs	180
003	Promoting the rights of individuals across the lifespan	90
004	Understanding how the human body is affected by common conditions	80
005	Supporting individuals at risk to achieve their desired outcomes	180
006	Working in the health and social care sector	100
	GLH	720

Guided Learning Hours (GLH) and Total Qualification Time (TQT)

Guided learning means activities such as classroom-based learning, tutorials and online learning, which is directly supervised by a teacher, tutor or invigilator. It also includes all forms of assessment which take place under the immediate guidance or supervision of a teacher, supervisor or invigilator.

The Guided Learning Hours (GLH) assigned to Level 3 Certificate in Health and Social Care: Principles and Contexts is 360 hours.

The Guided Learning Hours (GLH) assigned to Level 3 Diploma in Health and Social Care: Principles and Contexts is 720 hours.

GLH is allocated per unit to support delivery. It is acceptable for centres to deliver this qualification holistically and, therefore, hours per unit are a recommendation only.

Total Qualification Time (TQT) is the total amount of time, in hours, expected to be spent by a learner to achieve a qualification. It includes both the Guided Learning Hours (GLH) and additional time spent in preparation, study and some formative assessment activities.

The Total Qualification Time (TQT) for the certificate has been calculated as 540 hours. This includes:

- 360 hours of guided learning
- 180 hours of self-directed study which may include:
 - additional assignments and tasks set by the tutor (homework)
 - independent use of online learning resources
 - completion of independent research including reading of publications and reports relating to the sector.

The Total Qualification Time (TQT) for the diploma has been calculated as 1080 hours. This includes:

- 720 hours of guided learning
- 100 hours of sector engagement
- and an additional 260 hours of self-directed study which may include:
 - additional assignments and tasks set by the tutor (homework)
 - independent use of online learning resources
 - completion of independent research including reading of publications and reports relating to the sector.

The GLH and TQT assigned to these qualifications are as follows:

Qualifications	GLH	TQT
Level 3 Certificate in Health and Social Care: Principles and Contexts	360	540
Level 3 Diploma in Health and Social Care: Principles and Contexts	720	1080

2 Summary of assessment

Certificate

Unit 1: Principles of care and safe practice within outcome focused person-centred care.

Non-examination assessment

25% of qualification

20 hours

100 marks

This non-exam assessment (NEA) is made up of two tasks both of which relate to a chosen case study. An Assessment Pack will be released to centres from the WJEC secure website on the first Monday in March each year from 2021 onwards. The Assessment Pack will include two case studies from which candidates will select one to use as the stimulus for completing both tasks at the start of the assessment. The tasks for this non-examination assessment will stay the same each year.

Both tasks require learners to draw on their knowledge and understanding of principles of care and safe practice and how this is applied to outcome focused care.

Unit 2: Factors affecting individuals' growth and development across the lifespan, and how this impacts on outcomes, care and support needs.

External assessment

50% of qualification

1 hour and 45 minutes

100 marks

An examination (either taken on screen or as a written paper) comprising of a range of question types to assess all unit content related to factors affecting individuals' growth and development across the lifespan and how these impact on outcomes, care and support needs.

All questions are compulsory.

Unit 3: Promoting the rights of individuals across the lifespan.

Non-examination assessment

25% of qualification

20 hours

80 marks

This non-examination assessment (NEA) is an assignment containing tasks set by WJEC. The assignment requires learners to choose a group of individuals on which to base the tasks.

The assignment requires learners to produce evidence as either a podcast, a presentation or a video, to demonstrate their knowledge and understanding of promoting the rights of individuals in supporting their health and well-being.

The task for this non-examination assessment will remain the same for the lifetime of the specification and are as published in the Assessment Pack available from the www.healthandcarelearning.wales website.

Diploma

Unit 1: Principles of care and safe practice within outcome focused person-centred care.

Non-examination assessment

12.5% of qualification

20 hours

100 marks

This non-exam assessment (NEA) is made up of two tasks both of which relate to a chosen case study. An Assessment Pack will be released to centres from the WJEC secure website on the first Monday in March each year from 2021 onwards. The Assessment Pack will include two case studies from which candidates will select one to use as the stimulus for completing both tasks at the start of the assessment. The tasks for this non-examination assessment will stay the same each year.

Both tasks require learners to draw on their knowledge and understanding of principles of care and safe practice and how this is applied to outcome focused care.

Unit 2: Factors affecting individuals' growth and development across the lifespan, and how this impacts on outcomes, care and support needs.

External assessment

25% of qualification

1 hour and 45 minutes

100 marks

An examination (either taken on screen or as a written paper) comprising of a range of question types to assess all unit content related to factors affecting individuals' growth and development across the lifespan and how this impacts on outcomes, care and support needs.

All questions are compulsory.

Unit 3: Promoting the rights of individuals across the lifespan.

Non-examination assessment

12.5% of qualification

20 hours

80 marks

This non-examination assessment (NEA) is an assignment containing tasks set by WJEC. The assignment requires learners to choose a group of individuals on which to base the tasks.

The assignment requires learners to produce evidence as either a podcast, a presentation or a video, to demonstrate their knowledge and understanding of promoting the rights of individuals in supporting their health and well-being.

The tasks for this non-examination assessment will remain the same for the lifetime of the specification and are as published in the Assessment Pack available from the www.healthandcarelearning.wales website.

Unit 4: Understanding how the human body is affected by common conditions.

Non-examination assessment

10% of qualification

15 hours

60 marks

This non-exam assessment (NEA) is an assignment containing tasks set by WJEC and requires learners to draw on their knowledge and understanding of how the human body is affected by common conditions. The task is based on stimuli which will be available to centres from the WJEC secure website on the first Monday in March each year (from 2022 onwards). The Assessment Pack will include two pieces of stimuli from which candidates will select one to use as the stimulus for completing the assessment. The task for this non-examination assessment will remain the same for the lifetime of the specification and are as published in the Sample Assessment Pack available from the www.healthandcarelearning.wales website.

Unit 5: Supporting individuals at risk to achieve their desired outcomes.

External assessment

25% of qualification

1 hour and 45 minutes

100 marks

An examination (either taken on screen or as a written paper) comprising of a range of question types to assess all unit content related to Supporting individuals at risk to achieve their desired outcomes.

All questions are compulsory.

Unit 6: Working in the health and social care sector.

Non-examination assessment

15% of qualification

18 hours

120 marks

This non-exam assessment (NEA) is an assignment containing tasks set by WJEC and based on the learners' sector engagement and work placement.

The task for this non-examination assessment will remain the same for the lifetime of the specification and is as published in the Assessment Pack available from the www.healthandcarelearning.wales website.

Assessment objectives

Assessment Objectives (AOs) refer to the skills that learners need to demonstrate in their responses to questions in an external assessment or non-examination assessment. The Level 3 Certificate and Diploma in Health and Social Care: Principles and Contexts qualifications have three assessment objectives.

Both the internal and the external assessments will target these assessment objectives in line with the following weightings:

Objective	Requirements	Weightings
AO1	Demonstrate knowledge and understanding of a range of key concepts, values and issues that are relevant to health and social care.	30-34%
AO2	Apply knowledge and understanding of health and social care principles and contexts.	33-37%
AO3	Analyse and evaluate health and social care theories and practice to demonstrate understanding, reflect on how they can influence practice, making reasoned judgements and drawing conclusions.	30-35%

Breakdown of unit assessments – Certificate

Unit	Time	Qualification weighting	Raw marks	AO mark		AO weighting	
1	20 hours	25%	100	AO1	40	AO1	40%
				AO2	36	AO2	36%
				AO3	24	AO3	24%
2	1 hour 45 minutes	50%	100	AO1	30-34	AO1	30-34%
				AO2	33-37	AO2	33-37%
				AO3	31-35	AO3	31-35%
3	20 hours	25%	80	AO1	24	AO1	30%
				AO2	16	AO2	20%
				AO3	40	AO3	50%

Breakdown of unit assessments – Diploma

Unit	Time	Qualification weighting	Raw marks	AO mark		AO weighting	
1	20 hours	12.5%	100	AO1	40	AO1	40%
				AO2	36	AO2	36%
				AO3	24	AO3	26%
2	1 hour 45 minutes	25%	100	AO1	30-34	AO1	30-34%
				AO2	33-37	AO2	33-37%
				AO3	31-35	AO3	31-35%
3	20 hours	12.5%	80	AO1	24	AO1	30%
				AO2	16	AO2	20%
				AO3	40	AO3	50%
4	15 hours	10%	60	AO1	20	AO1	33%
				AO2	22	AO2	37%
				AO3	18	AO3	30%
5	1 hour 45 minutes	25%	100	AO1	30-34	AO1	30-34%
				AO2	33-37	AO2	33-37%
				AO3	31-35	AO3	31-35%
6	24 hours	15%	120	AO1	36	AO1	30%
				AO2	44	AO2	37%
				AO3	40	AO3	33%

3 Units

Unit format

Unit title:	Summarises, in a concise manner, the content of the unit.
Guided learning hours (GLH):	<p>Guided learning means activities such as classroom-based learning, tutorials and online learning, which is directly supervised by a teacher, tutor or invigilator. It also includes all forms of assessment which take place under the immediate guidance or supervision of a teacher, supervisor or invigilator.</p> <p>GLH has been allocated per unit to support delivery. It is acceptable for centres to deliver this qualification holistically and, therefore, hours per unit are a recommendation only.</p>
Areas of content:	Includes the list of topics covered by the unit.
Overview of unit:	Provides a summary of the unit content. It sets the context of the unit and highlights the purpose of the learning in the unit.
Assessment:	Summarises the assessment method for the unit.
Skills Development:	Identifies opportunities for the development of skills.

Unit 1: Certificate and Diploma

Unit title:	Principles of care and safe practice within outcome focused person-centred care.
GLH:	90
Areas of content:	<p>1.1 Professional responsibilities, roles and accountabilities of health and social care workers.</p> <p>1.2 Legislation, national policies, codes of conduct and professional practice and how these impact on outcome focused provision in Wales and the UK.</p> <p>1.3 Ethical issues and approaches when providing outcome focused care.</p> <p>1.4 The importance of developing positive relationships, trust and effective communication with individuals.</p> <p>1.5 How to promote quality care that is outcome focused.</p> <p>It is strongly recommended that teachers teach topic areas 1.1 and 1.2 holistically.</p>
Overview of unit:	<p>In this unit learners will gain knowledge and understanding of professional responsibilities, roles and accountabilities of health and social care workers within the sector. They will learn about legislation, national policies, codes of conduct and professional practice that support health and social care workers in their roles. Learners will also gain knowledge of ethical issues and approaches when providing outcome focused care. They will also understand the importance of positive relationships, trust, effective communication and promoting quality care that is outcome focused.</p>

Assessment:	<p>This unit is internally assessed through a set assignment that consists of two tasks. These include writing a report and producing an information pack</p> <p>Learners will spend 20 hours in total producing the evidence for this assessment, completing the work under supervised conditions within the centre.</p> <p>The Assessment Pack will be available to centres from the first Monday in March each year. The Assessment Pack will include two case studies and learners can select which one to use when responding to the tasks at the start of the assessment. Each case study provides learners with an insight into the principles of care and safe practice within outcome focused person-centred care.</p> <p>The case studies will change each year. Both tasks will remain static.</p> <p>This assessment contributes 25% to the overall qualification grade for the certificate and 12.5% to the overall qualification grade for the diploma. All content may be assessed through any of the three assessment objectives.</p>
Skills development:	<p>It is envisaged that the study of this unit will generate opportunities for the development of skills. Examples of such opportunities are noted below:</p> <ul style="list-style-type: none">• communication and literacy: through all written work and assessment• digital competence: through individual online research into the key concepts of the unit• planning and organising: in planning their report• critical thinking and problem solving: in investigating legislation, national policies, codes of conduct and professional practice• creativity and innovation: in evidence produced for the tasks• personal effectiveness: in preparation for assessment.

Unit 1: Principles of care and safe practice within outcome focused person-centred care.	
Content	Amplification
1.1 Professional responsibilities, roles and accountabilities of health and social care workers.	<p>Learners should know and understand the roles of health and social care workers in providing quality care, support for individuals and essential services that promote health and well-being.</p> <p>To include:</p> <ul style="list-style-type: none"> • roles in frontline care • roles in support functions • core values and principles of care, why these are important and how they benefit the individual receiving care and support. <p>Learners should know and understand professional responsibilities of health and social care workers.</p> <p>To include:</p> <ul style="list-style-type: none"> • complying with codes of conduct/practice, policies and guidelines for care workers in health and social care • ensure the safety and well-being of others • understanding the responsibility of a registered professional worker • regulatory requirements – fitness to practice and why this is important in professional practice • the importance of being registered as a professional with a regulatory body. <p>Learners should know and understand accountabilities of health and social care workers in taking responsibility for their actions, ensuring they are competent to do the activity they have been asked to perform. They should know and understand that failure to do so can result in disciplinary and/or legal action.</p> <p>Learners should know and understand how codes of practice/conduct support professional practice of health and social care workers.</p> <p>To include:</p> <ul style="list-style-type: none"> • Code of Professional Practice for Social Care • Practice guidance for registered workers • Non-regulatory, e.g. NHS Wales Code of Conduct for Healthcare Support Workers in Wales, Code of Practice for NHS Wales Employers. <p>Learners should be encouraged to access codes of practice/conduct.</p> <p>Learners should know and understand that regulatory bodies set the requirements for professional development.</p> <p>To include:</p> <ul style="list-style-type: none"> • registration • requiring workers to follow professional codes of conduct/practice • undertaking fitness to practice investigations and imposing sanctions as required • building the public's trust and confidence in the profession, valuing care workers, ensuring public safety and encouraging and supporting CPD • whistle blowing/voicing concerns.

<p>1.2 Legislation, national policies, codes of conduct and professional practice and how these impact on outcome focused provision in Wales and the UK.</p>	<p>Learners should know and understand the impact of current:</p> <ul style="list-style-type: none"> • legislation: including devolved matters, secondary legislation and regulation • national policies • codes of conduct and professional practice. <p>To include:</p> <ul style="list-style-type: none"> • More than just words: Follow on Strategic Framework for Welsh Language Services in Health, Social Services and Social Care 2016-2019 • The Regulation and Inspection of Social Care (Wales) Act 2016. • Well-being of Future Generations Act (Wales) 2015 • Declaration of Rights for Older People in Wales (2014) • Social Services and Well-being (Wales) Act 2014 • Equality Act 2010 • The Mental Capacity Act 2005 and associated Code of Practice, Deprivation of Liberty Safeguards • Children Act 2004 • Human Rights Act 1998 and associated Conventions and Protocols such as UN Convention on the Rights of the Child 1990, UN Convention on the Rights of Person with Disabilities and UN Principles for Older Persons 1991. <p>Further details on the latest Welsh Government legislation and policies are available from: https://socialcare.wales/</p> <p>Learners should know and understand:</p> <ul style="list-style-type: none"> • how legislation links to national frameworks, guidance and practice, policy development implementation and its impact on outcome focused provision in Wales and the UK • strategic priorities for health and well-being in Wales compared to England, Scotland and Northern Ireland • similarities and differences in legislation across different UK nations.
<p>1.3 Ethical issues and approaches when providing outcome focused care.</p>	<p>Learners should know and understand a range of ethical issues and approaches when providing outcome focused care.</p> <p>To include:</p> <ul style="list-style-type: none"> • duty of care • duty of candour • ethical frameworks for decision making and principles to include respect for autonomy, beneficence, non-maleficence and justice • best interest decision making for those who lack capacity • managing confidentiality when sharing information, e.g. General Data Protection Regulation (GDPR), Welsh Accord for Sharing Personal information (WASPI) – when information can be shared, why and with whom • why confidentiality is important and how this relates to the common law and legislative framework • respecting diversity and equality • managing services and resource allocation • supporting mental and emotional well-being.

<p>1.4 The importance of developing positive relationships, trust and effective communication with individuals.</p>	<p>Learners should know and understand the methods and skills required to develop positive relationships, trust and effective communication and understand the importance of this.</p> <p>To include:</p> <p>Positive relationships and trust:</p> <ul style="list-style-type: none"> • building trust • establishing positive relationships with colleagues and management, when providing and requesting information • establishing positive relationships with individuals, families and carers, and respecting their values and beliefs • providing person-centred care to individuals through ensuring the opportunities, knowledge, skills and confidence they need to effectively manage, and make informed decisions about, their own health and well-being • valuing individuals and giving them choices • communicating effectively using questioning, paraphrasing, reflecting, achieving change, empowering individuals and may include challenging (where necessary). <p>Effective communication –</p> <ul style="list-style-type: none"> • how to engage individuals in conversations – ‘What Matters Conversations’ • initiatives such as ‘Hello my name is’ adopted by the NHS • language preferences: ‘More than just words’ – the Active offer, Cymraeg 2050 • practical application of communication and interpersonal skills, speaking clearly using simple sentences and avoiding jargon • understand different types of communication: body language, gestures, facial expressions, written communication including images, pictures and symbols, verbal, non-verbal, digital, British Sign Language, Makaton, Braille • understanding the environment when communicating with individuals. <p>Strategies and initiatives listed above are time sensitive. A list of the latest strategies and initiatives for promoting the rights of individuals to improve health and well-being is available at: https://www.healthandcarelearning.wales/.</p>
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<p>1.5 How to promote quality care that is outcome focused.</p>	<p>Learners should know and understand that quality of care means, assisting an individual to achieve their personal outcomes by providing the care and support they need, when and where they need it, in an affordable, safe and effective manner.</p> <p>Learners should know and understand the role care workers have in delivering quality care and support that is outcome focused.</p> <p>To include:</p> <p>Outcome focused care ensures:</p> <ul style="list-style-type: none"> • strengths based approach to care and support and inclusion • person-centred care and support • what individuals can do with their own skills, strengths, abilities and network • individuals' voices are heard, listened to and acted upon in providing care and support; they are equal partners in the decisions • empowerment of individuals including self-awareness, self-care and advocacy services • service provision in health and social care which is seamless, meets the needs of individuals and is delivered as close to home as possible • safeguarding is everyone's responsibility, with each professional individual and organisation required to do everything they can to ensure that the well-being of children and adults at risk are protected from abuse, improper treatment, neglect or harm. <p>Current challenges and benefits are addressed through:</p> <ul style="list-style-type: none"> • engagement strategies to involve individuals to improve their own health and well-being: Individual participation and active involvement in caring for themselves e.g. using social media and digital platforms to promote healthy behaviours • use of personal, family and community resources: supporting prevention and early intervention • government changes: how this leads to a change in initiatives and priorities, e.g. Social Services and Well-being (Wales) Act 2014 • health and social care economics: funding, staffing, reducing waiting lists, integration of services in health and social care • new technologies and digital approaches that: <ul style="list-style-type: none"> • provide a single record that will enable health and social care providers to ensure joined up care and support • will provide early intervention to avoid the need for more formal and managed care and support services for longer • are personalised and help individuals to remain independent for longer, supporting them and keeping them safe through care and support at home using assistive technology systems that can monitor and respond as required, e.g. Telehealth and Telecare • help detect cancer much earlier from a simple blood test. • role of mixed economy of care: statutory, independent and third sector, flexibility and providing a better choice • additional treatments: GP surgeries are increasingly becoming hubs to deliver a wide range of health and well-being services • joint information, advice and assistance services: single point of contact for individuals in need of care and support e.g. Care at home, courses or support in managing long term conditions • seasonal priorities: seasonal changes, e.g. incidences of flu, winter fuel payments, increased demand and pressure on health and social care services.
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Unit 2: Certificate and Diploma

Unit title:	Factors affecting individuals' growth and development across the lifespan and how this impacts on outcomes, care and support needs.
GLH:	180
Areas of content:	<p>2.1 Factors affecting human growth and development across the lifespan.</p> <p>2.2 Models that relate to factors that affect growth and development across the lifespan.</p> <p>2.3 Health and social care provision for individuals in Wales to support growth and development.</p> <p>2.4 Comparing how individuals and the nation monitor health and well-being.</p> <p>2.5 Approaches to promoting and protecting health, well-being and resilience.</p>
Overview of unit:	In this unit, learners will gain knowledge and understanding of the factors that affect an individuals' growth and development across the lifespan and the effects this can have on their personal well-being outcomes and care and support needs.
Assessment	<p>This unit is externally assessed through a written or on-screen examination which contributes 50% to the overall qualification grade of the certificate and 25% to the overall qualification grade of the diploma.</p> <p>All content may be assessed through any of the three assessment objectives.</p>
Skills development:	<p>It is envisaged that the study of this unit will generate opportunities for the development of skills.</p> <p>Examples of such opportunities are noted below:</p> <ul style="list-style-type: none"> • communication and literacy: in preparation for assessment • digital competence: through individual online research into the key concepts of the unit • planning and organising: in preparation for assessment • critical thinking and problem solving: when linking models and theories in relation to human growth and development • personal effectiveness: in preparation for assessment.

Unit 2: Factors affecting individuals across the lifespan, and how these impact on outcomes, care and support needs.

Content	Amplification
2.1 Factors affecting human growth and development across the lifespan.	<p>Learners should know and understand factors that affect human growth and development across the lifespan.</p> <p>To include:</p> <p>Life stages within in the lifespan are defined as:</p> <ul style="list-style-type: none"> • Infancy: 0-2 years • Childhood: 3-12 years • Adolescence: 13-19 years • Adulthood: 20-64 years • Later adulthood: 65+ years. <p>Key factors:</p> <ul style="list-style-type: none"> • Adverse Childhood Experiences (ACE): traumatic events that children can be exposed to whilst growing up but that are remembered throughout adulthood. They may increase the chances of individuals developing diseases and adopting health harming behaviours • behaviour that challenges: attention deficit hyperactivity (ADHD), Tourette's syndrome, autistic spectrum disorders • economic factors: economic status, home environment • educational experiences: support and guidance through education, level of education • lifestyle choices: use of technology, smoking, substance misuse, involvement in crime, influence of others e.g. role models • life events: predictable and unpredictable; positive and negative experiences • mental health: mental illness, eating disorders, depression, anxiety • physical factors: physical activity, physical health, nutrition and hydration, conditions prevalent in Wales, accidents, physical disabilities, long-term and life-limiting conditions • social factors: family structure, culture, religion, social networks and support. <p>Long term impact of factors affecting human growth and development across the lifespan:</p> <ul style="list-style-type: none"> • anxiety • attachment • broadening of experiences • depression • more able and talented – exceeding milestones • non-achievement of expected milestones • stigma • transition • trauma. <p>Addressing the long-term impact of factors affecting human growth and development across the lifespan:</p> <ul style="list-style-type: none"> • modelling, social skills training and activities that help individuals achieve greater independence, resilience or rehabilitation (social learning) • reassurance, encouragement, validation and links to attachments and developments • self-confidence, self-reliance, self-esteem, self-concept and resilience building, to provide strength and capacity to meet own needs or seek support from community resources and person-centred ideas.

<p>2.2 Models that relate to factors that affect growth and development across the lifespan.</p>	<p>Learners should know and understand the basic concepts related to well-established theories and current critiques and how they relate to each other.</p> <p>Models and Theories to include:</p> <ul style="list-style-type: none"> • Behavioural Theory: Pavlov, Skinner, Watson • Biological Theory: Gesell • Cognitive and other Development Theories: Aaron Beck, Piaget, Vygotsky, Erikson • Ecological Theory: Bronfenbrenner • Human Development Theories: Bowlby Attachment Theory, Cumming and Henry Disengagement Theory of Aging, Nature/Nurture • Humanistic Theory: Maslow, Rogers • Psychosocial Theory: Erikson • Social Learning Theory: Bandura, Vygotsky.
<p>2.3 Health and social care provision for individuals in Wales to support growth and development.</p>	<p>Learners should know and understand health and social care provision for individuals in Wales to support growth and development throughout the lifespan and be able to apply this knowledge to different scenarios/situations.</p> <p>Support for individuals to include:</p> <ul style="list-style-type: none"> • early intervention and preventative services: well-being and well-person clinics; integrated family centres; self-help groups or support groups • routine and non-routine services: care at home, residential or day services, dieticians, physiotherapy and occupational therapy treatments, health checks • statutory, independent and third sector. <p>Learners should know and understand the expectations and ambitions of any new legislation when considering:</p> <p>Ways in which an individual's needs are assessed to include:</p> <ul style="list-style-type: none"> • focussing assessments on an individual's needs and how they impact on their personal well-being outcomes • implementing strengths based approaches and encouraging individuals to build resilience • using personal plans to help individuals achieve their personal well-being outcomes • ensuring that individuals have a voice that is heard, and, choice and control over the care and support services that they may need • carrying out simpler and proportionate assessments • upholding the equal rights for carers to be assessed for support • keeping individuals safe from abuse and neglect. <p>Ways in which care, and support services are delivered to include:</p> <ul style="list-style-type: none"> • promoting services such as domiciliary care or reablement to support people to remain at home as long as possible and delay the use of managed services • providing information and advice to individuals, carers and their families about outcomes, early intervention, community support, eligibility and the use of care and support services • promoting a range of help available within the community through support and services • considering meaningful activities, support groups and complementary health models that may also contribute to helping an individual achieve their personal well-being outcomes • encouraging the use of aids and adaptations to support daily living.

	<p>Learners should know and understand that the role of Public Health Wales is to protect and improve health and well-being and reduce health inequalities for individuals in Wales.</p> <p>To include:</p> <ul style="list-style-type: none"> • campaigns and supporting individuals e.g. Change 4 life, Time to Change Wales • health promotion and prevention • immunisation and vaccines • Screening Division: national screening programmes in Wales and Antenatal Screening Wales. <p>Campaigns listed above are time sensitive. A list of campaigns is available at: https://www.healthandcarelearning.wales/</p>
<p>2.4 Comparing how individuals and the nation monitor health and well-being.</p>	<p>Learners should know and understand how individuals monitor their own health and well-being.</p> <p>To include:</p> <ul style="list-style-type: none"> • taking physical measurements: height, weight, blood pressure, temperature, peak flow • testing specimens: blood sugar levels, urine • attending screening appointments: smear tests, mammograms, dental and optical checks • using personal health monitors and devices: wearable sensors, mobile apps to monitor fitness and health indicators • using mobile phone technology: apps as a means to enhancing self-management of emotional well-being. <p>Learners should know and understand how the nation monitors health and well-being.</p> <p>To include:</p> <ul style="list-style-type: none"> • Frameworks: Well-being outcomes frameworks for individuals who need care and support • Monitoring and reporting: Health surveillance data, data analysis, microbiology services, Office for National Statistics, Welsh Government: Well-being of Wales, Health and Well-being measures for children, Strategies resulting from monitoring: NHS 1000 lives plus, Welsh Government: 'Together for Mental Health' – A Strategy for Mental Health and Well-being in Wales. <p>Strategies listed above are time sensitive. A list of the latest strategies is available at: https://www.healthandcarelearning.wales/.</p>

<p>2.5 Approaches to promoting and protecting health, well-being and resilience.</p>	<p>Learners should know and understand approaches to promoting and protecting health, well-being and resilience.</p> <p>To include:</p> <p>Approaches to promoting and protecting health and well-being:</p> <ul style="list-style-type: none"> • different methods of health promotion: e.g. 5 approaches (medical, behavioural change, educational, client-centred and societal change), mass media, apps, social media, websites, health and social care professionals, support groups, community drug and alcohol teams (CADT) • initiatives such as Five Ways to Wellbeing, (National Economics Foundation NEF): Connect, Be active, Take notice, Keep learning and Give • multi-agency and multi-disciplinary working across health and social care and the third sector • enabling individuals to take responsibility for their own health and well-being: e.g. Prudent Health Care, Social Services and Well-being (Wales) Act 2014, Well-being of Future Generations Act (Wales) 2015 • seamless local health and social care that promotes good practice • using indicators and data to inform approach <p>Approaches to promoting and protecting resilience:</p> <ul style="list-style-type: none"> • encouraging individuals to take part in therapeutic and recreational activities within the local community and to increase social networks e.g. community arts and creative activities • engaging individuals to be responsible for their own physical health and well-being by making lifestyle changes • promoting a positive, problem-solving approach and an optimistic outlook • promoting positive environments that are forward-looking and promote strengths and diversity • social and survivor models e.g. Peter Beresford Survivor model. <p>Strategies listed above are time sensitive. A list of strategies is available at: https://www.healthandcarelearning.wales/.</p>
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Unit 3: Certificate and Diploma

Unit title:	Promoting the rights of individuals across the lifespan.
GLH:	90
Areas of content:	<p>3.1 The rights of individuals.</p> <p>3.2 Strategies for promoting the rights of individuals to improve health and well-being.</p> <p>3.3 Barriers to participation, challenging inequality and promoting the rights of individuals.</p>
Overview of unit:	In this unit learners will gain knowledge and understanding of the rights of individuals and the barriers to participation they may face, how these are promoted and challenged to improve health and well-being.
Assessment:	<p>This unit is internally assessed through non-examination assessment (NEA) and is made up of an assignment which consists of one task. Learners are required to research and produce evidence on how to promote the rights of individuals from one specific group across the lifespan. Evidence can be presented as either a podcast, a presentation or a video.</p> <p>Learners may carry out their research for the tasks without direct supervision. Learners will spend 20 hours in total completing the work under supervised conditions within the centre. The task requires learners to draw on knowledge and understanding of promoting the rights of individuals in supporting their health and well-being.</p> <p>This assessment contributes 25% to the overall qualification grade for the certificate and 12.5% to the overall qualification grade for the diploma. All content may be assessed through any of the three assessment objectives.</p> <p>The task is published on www.healthandcarelearning.wales and will remain the same for the lifetime of this specification.</p>
Skills development:	<p>It is envisaged that the study of this unit will generate opportunities for the development of skills.</p> <p>Examples of such opportunities are noted below:</p> <ul style="list-style-type: none"> • communication and literacy: in presenting their evidence • numeracy: interpreting data on health and lifestyle inequalities • digital competence: through individual online research into the key concepts of the unit • planning and organising: in planning the presentation of their evidence • critical thinking and problem solving: in selecting appropriate information from their research to present as evidence • creativity and innovation: in presenting evidence as either a podcast, a presentation or a video • personal effectiveness: in preparation for assessment.

Unit 3: Promoting the rights of individuals across the lifespan.	
Content	Amplification
3.1 The rights of individuals.	<p>Learners should know and understand how the rights of individuals are promoted in the health and social care sector.</p> <p>To include:</p> <p>The right to:</p> <ul style="list-style-type: none"> • have a voice, choice and control • be communicated with in preferred method or language • be treated with dignity and respected as an individual • protection from danger and harm • have views considered • access information relevant to themselves • voluntary and informed consent • know what their rights are. <p>Learners should know and understand that legislation underpins strategies and initiatives for promoting the rights of individuals to improve health and well-being.</p> <p>To include:</p> <ul style="list-style-type: none"> • Human Rights Act 1998 (HRA): made human rights available to everyone in the UK • Children and Young Person's Rights Measure 2011: places a duty on Welsh ministers to have due regard to the UN Convention on the Rights of the Child (UNCRC) • The Social Services and Well-being (Wales) Act 2014: requires Welsh Ministers to have due regard to the UN Principles for Older Persons (OHCHR) • The Equality Act 2010: requires Welsh ministers to have due regard to the UN Convention on the Rights of Persons with Disabilities (CRPD) • Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015: Live Fear Free, Ask and Act • Well-being of Future Generations (Wales) Act 2015: public bodies setting out well-being objectives, collaborative working and accountability in line with the seven well-being goals.

3.2 Strategies for promoting the rights of individuals to improve health and well-being.

Learners should know and understand that health and well-being is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

To include:

Health and well-being is comprised of:

- rights and entitlements
- physical, mental and emotional health and well-being
- protection from abuse and neglect (safeguarding)
- education, training and recreation
- domestic, family and personal connections (community belonging, being treated with respect, equality and diversity, loneliness and social isolation)
- contribution made to society
- social and economic well-being
- suitability of living accommodation
- control by the individual of their day-to-day life, care and support and the ways in which it is provided
- personal dignity and treating individuals with respect

Approaches to promoting rights to include:

- empowering individuals to make decisions that affect their lives
- encouraging self-determination
- informed consent a process for gaining permission from an individual before receiving treatment or care and support
- reciprocal model, rights-based approach
- partnership working and governance
- policies and personal care and support plans
- complying with codes of conduct/practice
- encouraging active participation
- collaboration through co-production and community development
- developing critical consciousness
- access to education
- providing a voice through advocacy.

In relation to children health and well-being also includes:

- physical, intellectual, emotional, social and behavioural development
- welfare of the child: physical, emotional and educational needs

Factors that affect health and well-being:

- economic, physical and social environment
- an individual's characteristics and behaviours.

Learners should know and understand that the enjoyment of the highest attainable standard of health and well-being is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition and why this is important.

To include:


- **main needs of individuals:** Maslow, Erikson, Max Neef
- **fundamental rights of individuals:** adequate standard of living (including food and housing), education and health, freedom of thought, religion and expression.

Learners should know and understand that there are currently several campaigns, initiatives and strategies that promote the rights of individuals to improve health and well-being.

	<p>To include:</p> <p>Strategies and initiatives e.g. Together for Mental Health – A Mental Health and Well-being Strategy for Wales, Public Health Wales: Working to Achieve a Healthier Wales</p> <p>Campaigns run by third sector organisations e.g. Mind-Time to Change Wales, Alzheimer's Society – Dementia Action Plan for Wales.</p> <p>Examples of strategies, initiatives and campaigns above are time sensitive. A list of the latest strategies, initiatives and campaigns for promoting the rights of individuals to improve health and well-being are available at https://www.healthandcarelearning.wales/.</p>
<p>3.3 Barriers to participation, challenging inequality and promoting the rights of individuals.</p>	<p>Learners should know and understand barriers to participation, challenging inequality and promoting the rights of individuals.</p> <p>To include:</p> <p>Barriers to participation:</p> <ul style="list-style-type: none"> • cultural and language barriers: language, use of inaccessible level of language, availability of interpreters, information in alternative formats e.g. audio, braille, large print • environmental barriers: appropriate building access, living in remote areas away from services, accessible transport • financial barriers: cost of accessing the service, car parking and bus fares • physical: age, disability, gender, sensory loss • psychological barriers: individuals' thoughts of a service, previous experiences may not have been good, fear of unknown. <p>Learners should know and understand why barriers still exist and that individuals, organisations and the Welsh Government all have a part to play in health and well-being.</p> <p>To include:</p> <ul style="list-style-type: none"> • access problems and a lack of integration and prevention e.g. not being able to access services close to home or in a timely manner due to long waiting lists • an understaffed workforce and insufficient training • inadequate funding for certain services, e.g. mental health services • inadequate provision of services in certain parts of Wales, postcode lottery e.g. treatment of eating disorders. <p>Challenging inequality:</p> <ul style="list-style-type: none"> • challenging discriminatory behaviour • reflecting • reporting and raising concerns, whistleblowing. <p>Promoting the rights of individuals:</p> <ul style="list-style-type: none"> • knowing what are the rights of individuals • informing individuals of their rights • actively demonstrating anti-discriminatory practice • adhering to professional standards and codes • upholding choice and well-being of individuals • upholding the principles of care.

Unit 4: Diploma only

Unit title:	Understanding how the human body is affected by common conditions.
GLH:	80
Areas of content:	<p>4.1 Types and causes of infection, ways infections are transmitted and resulting conditions.</p> <p>4.2 The causes and effects of a range of physiological conditions.</p> <p>4.3 How the human body is affected by common conditions.</p> <p>4.4 Care and support when living with physiological conditions and challenges.</p> <p>4.5 Risk reduction strategies that can be implemented to support health and well-being.</p>
Overview of unit:	<p>In this unit, learners will gain knowledge and understanding of common conditions; types and causes and will investigate how they can affect the human body, as well as examining the care and support available to individuals living with physiological conditions and the challenges they may face.</p> <p>This unit builds on knowledge and understanding gained through units 1-3.</p>
Assessment:	<p>This unit is internally assessed through one set assignment which includes writing an article and producing an infographic on a specific infectious and physiological condition for a health and social care magazine.</p> <p>Learners will spend 15 hours in total producing the evidence for this assessment, completing the work under supervised conditions within the centre.</p> <p>The assignment is based on a set task and accompanying stimuli which are available to centres from the WJEC secure website on the first Monday in March each year (from 2021 onwards).</p> <p>The stimulus for this non-examination assessment will change each year. The task will remain static.</p> <p>This assessment contributes 10% to the overall qualification grade of the diploma. All content may be assessed through any of the three assessment objectives.</p>
Skills development:	<p>It is envisaged that the study of this unit will generate opportunities for the development of skills.</p> <p>Examples of such opportunities are noted below:</p> <ul style="list-style-type: none"> • communication and literacy: when writing their assignment • numeracy: interpreting data on physiological disorders • digital competence: through individual online research into the key concepts of the unit • planning and organising: when planning their article

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- **critical thinking and problem solving:** in investigating a physiological disease
 - **creativity and innovation:** in the design and presentation of an infographic
 - **personal effectiveness:** in preparation for assessment.

Unit 4: Understanding how the human body is affected by common conditions.	
Content	Amplification
4.1 Types and causes of infection, ways infections are transmitted and resulting conditions.	<p>Learners should know and understand that an infection is an invasion of body tissues by a foreign organism and that there are several different types of infection.</p> <p>To include:</p> <ul style="list-style-type: none"> • an infectious condition: this is a condition caused by a microorganism. It may or may not be communicable • a non-communicable condition: this is a condition that is not transferable directly from one individual to another • a communicable condition: this is a condition passed from one individual to another. <p>Learners should know and understand the different types of infections and that the symptoms of an infection depend on the organism responsible as well as the site of the infection.</p> <p>To include:</p> <ul style="list-style-type: none"> • types and causes of infections: <ul style="list-style-type: none"> • bacterial e.g. Lyme disease, meningitis, pneumonia, tuberculosis (TB) • fungal e.g. ring worm, eye and nail infections • viral e.g. influenza, gastroenteritis, chicken pox, glandular fever • protozoan e.g. toxoplasmosis, malaria • parasitic e.g. worms, mites and lice • prion e.g. neurodegenerative disease • systemic infection: this is predominantly caused by virus or bacteria which spread throughout the systems of the body. Common signs and symptoms may include: fever and chills, abnormal body temperature, rapid pulse, rapid breathing. This list is not exhaustive. Systemic infections are not necessarily more severe than localised infections they just affect a larger proportion of the body. A systemic bacterial infection is sometimes called sepsis. It is not communicable but the pathogens that cause sepsis are usually communicable • localised infection: this is predominantly caused by bacteria or virus where the symptoms are localised in one area. Common signs and symptoms may include: heat, swelling, pain (in a specific part of the body), this list is not exhaustive • long-term damage can occur after contracting systemic or localised infections which may result in the need for care and support e.g. Lyme disease, meningitis, malaria. <p>Learners should know and understand the transmission cycle for infections and how they enter the body.</p> <p>To include:</p> <ul style="list-style-type: none"> • air-borne • ingestion • through body fluids • vector-borne • water-borne.

<p>4.2 The causes and effects of a range of physiological conditions.</p>	<p>Learners should know and understand the causes and effects of a range of physiological conditions.</p> <p>To include:</p> <p>A physiological condition is when the organs in the body malfunction and cause symptoms which may lead to illness.</p> <p>Examples of causes of physiological conditions:</p> <ul style="list-style-type: none">• ageing process e.g. dementia, osteoarthritis• deficiency of nutrients e.g. anaemia, rickets• environment/lifestyle choices e.g. alcohol related liver disease, type 2 diabetes• inherited e.g. muscular dystrophy, cystic fibrosis• injury at birth e.g. cerebral palsy. <p>Learners should know and understand the effects that physiological conditions may have on individuals and the impact on the activities of daily living.</p> <p>To include:</p> <ul style="list-style-type: none">• impact on mental and emotional health of the individual, their family, friends and wider circle• employment• mobility• nutritional intake• personal hygiene• psychological impact• social interaction.
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<p>4.3 How the human body is affected by common conditions.</p>	<p>Learners should know and understand the common conditions that occur in Wales and the impact these have on the human body.</p> <p>To include:</p> <p>Common conditions:</p> <ul style="list-style-type: none"> • affecting the cardiovascular system e.g. coronary heart disease, angina, arrhythmia, stroke • affecting the respiratory system e.g. asthma, chronic obstructive pulmonary disease (COPD) • allergies • cancer • diabetes • influenza • measles • meningitis • MRSA • mumps • norovirus • tuberculosis (TB) • whooping cough. <p>Impact</p> <ul style="list-style-type: none"> • signs and symptoms • short/long term effects • minor/major impact on daily living • care needs/support for the individual, family, friends and wider circle.
<p>4.4 Care and support when living with physiological conditions and challenges.</p>	<p>Learners should know and understand the care and support needs of individuals when living with physiological conditions and challenges.</p> <p>To include:</p> <ul style="list-style-type: none"> • assets and strengths • diagnosis and monitoring of the condition • assessment of care and support needs to identify personal well-being outcomes • interventions, care, support and advice to improve health and well-being • supporting individuals with routine living tasks • respite care • rehabilitation programmes. <p>Learners should know and understand the differing models of health and well-being.</p> <p>To include:</p> <ul style="list-style-type: none"> • social model: suggests that people are excluded by barriers in society, not by their health, impairment or difference. Barriers can be physical e.g. buildings not having accessible toilets, or they can be caused by individuals' attitudes to difference e.g. assuming individuals living with disabilities cannot do certain things. The social model helps us recognise the barriers that make life harder for people. Removing these barriers creates equality and offers people more independence, choice and control around their health and well-being

	<ul style="list-style-type: none"> • medical model: assumes the existence of illness or disease. It emphasises clinical diagnosis and medical intervention in the treatment of disease or its symptoms • biopsychosocial model: incorporates interactions between biological, psychological, and social factors to help determine why an individual might have a disorder.
4.5 Risk reduction strategies that can be implemented to support health and well-being.	<p>Learners should know and understand the main current initiatives and health promotion strategies that can be implemented to support health and well-being according to current legislation.</p> <p>To include:</p> <ul style="list-style-type: none"> • increasing public awareness of services, care and support available locally and nationally in Wales • knowledge of current initiatives and health promotion strategies in Wales • person-centred approach to all care and support – positive risk taking • sexual health clinics • substance misuse support • supporting individuals to overcome barriers to support health and well-being to include strength-based model and outcome focused care. <p>A list of the latest strategies and initiatives relevant to this qualification is available at https://www.healthandcarelearning.wales/.</p>

Unit 5: Diploma only

Unit title:	Supporting individuals at risk to achieve their desired outcomes.
GLH:	180
Areas of content:	<p>5.1 Factors that could contribute to individuals being at risk to abuse and neglect.</p> <p>5.2 Factors that can affect the rights of individuals at risk in health and social care.</p> <p>5.3 The requirements of legislation, regulation and codes of conduct/practice for safeguarding and protecting individuals at risk in Wales and the UK.</p> <p>5.4 Approaches to securing the rights of individuals at risk in health and social care.</p> <p>5.5 The ways in which individual workers and the services they provide can promote inclusion.</p>
Overview of unit:	<p>In this unit learners will gain knowledge and understanding of factors that could contribute to individuals being at risk to abuse and neglect, the requirements of legislation, regulation and codes of conduct and practice for safeguarding and protecting individuals at risk in health and social care and approaches to securing the rights of individuals.</p> <p>This unit builds on knowledge and understanding gained through unit 3.</p>
Assessment:	<p>This unit is externally assessed through a written or on-screen examination comprising of a range of question types to assess all unit content related to supporting individuals at risk to achieve their desired outcomes. This contributes 25% of the overall qualification grade of the diploma. All questions are compulsory. All content maybe assessed through any of the three assessment objectives.</p>
Skills development:	<p>It is envisaged that the study of this unit will generate opportunities for the development of skills.</p> <p>Examples of such opportunities are noted below:</p> <ul style="list-style-type: none"> • communication and literacy: in preparation for assessment • numeracy: through interpreting data • planning and organising: in preparation for assessment • critical thinking and problem solving: in considering approaches used in securing the rights of individuals in health and social care • personal effectiveness: in preparation for assessment.

Unit 5: Supporting individuals at risk to achieve their desired outcomes.	
Content	Amplification
5.1 Factors that could contribute to individuals being at risk to abuse and neglect.	<p>Learners should know and understand factors that could contribute to individuals being at risk to abuse and neglect.</p> <p>To include:</p> <ul style="list-style-type: none"> • carer stress: e.g. frustration, feeling under pressure and unable to cope, lack of respite care, change in financial situation • dependency: e.g. children, older individuals, individuals living with disabilities (including learning disabilities and cognitive impairments) are often more vulnerable as they rely on or are dependent on others for care and support • family conflict: e.g. individuals who have experienced childhood abuse/ domestic violence may believe this behaviour is acceptable • isolation: e.g. social exclusion, not able to access support networks, lack of access to information, advocacy and support in relation to how they can be protected • medical/psychological conditions: e.g. mental illness, low self-confidence and self-esteem, communication difficulties • other factors could include: religious beliefs/race/sexuality orientation/differences, position in family/scapegoating, lack of awareness, training or monitoring of workers to spot or deal with safeguarding issues.
5.2 Factors that can affect the rights of individuals at risk in health and social care.	<p>Learners should know and understand factors that can affect the rights of individuals at risk in health and social care.</p> <p>To include:</p> <ul style="list-style-type: none"> • age and understanding of their rights as an individual • attitudes of individuals working in settings that promote person-centred care. • availability of resources: e.g. workers, clinics, care homes, day care centres, transport to appointments • capacity to understand information or to make a decision • communication ability • family and carers input and their awareness of the rights of the individuals • isolation • issues related to when rights of the individual and the views of the families/carers conflict • lack of advocacy • personal traits of individuals who are accessing outcome focused person-centred care and support • recognising that carers have the right to be supported • young carers support services.

<p>5.3 The requirements of legislation, regulation and codes of conduct/practice for safeguarding and protecting individuals at risk in Wales and the UK.</p>	<p>Learners should know and have a fundamental understanding of the requirements of legislation, regulation and codes of conduct/practice for safeguarding and protecting individuals at risk in Wales and the UK.</p> <p>Learners should know and understand the Social Services and Well-being (Wales) Act 2014 and relevant parts of the Children Act (2004).</p> <p>To include the role of:</p> <p>The National Independent Safeguarding Board: established following the Social Services and Well-being (Wales) Act 2014. The National Independent Safeguarding Board has three main duties:</p> <ul style="list-style-type: none"> • providing support and advice to safeguarding boards ensuring that they are effective • providing recommendations to Welsh Government as to how arrangements could be improved • reporting on the effectiveness of arrangements to safeguard children and adults in Wales. <p>Regional Safeguarding Board: have Safeguarding Children's Boards and Safeguarding Adults Boards within them.</p> <p>Safeguarding Children Board (LSCB): is a multi-agency body to promote the well-being of children and set out under Part 7 of the Social Services and Wellbeing Act (Wales) 2014.</p> <p>Objectives are to:</p> <ul style="list-style-type: none"> • protect children within its area who are experiencing, or are at risk of abuse, neglect or other types of harm • prevent children within its area from becoming at risk of abuse, neglect or other kinds of harm. <p>Safeguarding Adults Board (SAB): is a multi-agency partnership to promote the well-being of adults as set out under Part 7 of the Social Services and Wellbeing Act (Wales) 2014.</p> <p>Objectives are to:</p> <ul style="list-style-type: none"> • protect adults within its area who have care and support needs (whether or not a local authority is meeting any of those needs) who are experiencing, or are at risk of, abuse or neglect • prevent adults who have care and support needs from becoming at risk of abuse or neglect. <p>Learners should have a basic awareness of safeguarding and know what, when and how to report concerns for children and adults at risk.</p> <p>Learners should know and understand statutory documents in relation to safeguarding.</p> <p>To include:</p> <ul style="list-style-type: none"> • Working Together to Safeguard People: Volume 1 – Introduction and Overview • Working Together to Safeguard People: Volume 5 – Handling Individual Cases to Protect Children at Risk • Working Together to Safeguard People: Volume 6 – Handling Individual Cases to Protect Adults at Risk.
<p>5.4 Approaches to securing the rights of individuals at risk in health and social care.</p>	<p>Learners should know and understand practices and approaches to securing the rights of individuals at risk in health and social care.</p> <p>Practices that can safeguard individuals to include:</p> <ul style="list-style-type: none"> • developing a rapport with individuals

	<ul style="list-style-type: none"> • ensuring all individuals feel that they have a voice, choice and control • ensuring all legislation and codes of practice are put in place and adhered to and the consequences if they are not • providing a safe environment. <p>Approaches to include:</p> <ul style="list-style-type: none"> • information awareness and training on safeguarding for professionals and other people who may see evidence or get disclosures e.g. taxi drivers for special schools • active participation: a way of working that supports an individual's right to participate in the activities and relationships of everyday life as independently as possible • advocacy: advocates inform individuals of their rights, they support them in expressing their views and ensure their voice is heard • empowerment: encouraging an individual to be more active in their health and in decision making regarding care and support • principles of care: describes the way health and social care workers should behave towards individuals in their care to ensure individual right to choice, dignity and respect • legislation: ensures an individual's rights are upheld • personalised care: identifies what is most important to an individual for them to achieve a good life and ensure that the care and support they receive ensures that their outcomes are achieved • governance: this is the process by which the health and social care sector ensures good quality service delivery and promotes good outcomes for individuals who use the service. Care Inspectorate Wales and Health Inspectorate Wales monitor services to ensure that people in Wales receive good quality care.
<p>5.5 The ways in which individual workers and the services they provide can promote inclusion.</p>	<p>Learners should know and understand ways in which the individual workers and the services they provide can promote inclusion.</p> <p>To include:</p> <ul style="list-style-type: none"> • demonstrating principles of care/agreed ways of working • building on any existing good practice they may be aware of • ensuring communication is always clear and in the language and format of choice • ensuring there is no: <ul style="list-style-type: none"> • discrimination by association: i.e. an individual's association with another person belonging to a relevant protected group such as: age, disability, gender reassignment, race, religion or belief, sex and sexual orientation • discrimination by perception: i.e. discrimination against someone because he or she is wrongly perceived to have a certain protected characteristic • harassment: i.e. aggressive pressure or intimidation • challenging any discriminatory practice and promoting inclusive practice • equity of access by ensuring equal and appropriate opportunities for all/not adopting a one-size fits all attitude/making reasonable adjustments as appropriate • having a good attitude and approach to supporting individuals to ensure that they are not excluded or isolated • knowing when 'whistle blowing' is appropriate • listening to individuals so they always have a voice • supporting diversity by accepting and welcoming individual's differences by working in non-judgemental ways • treating all individuals as unique and with dignity and respect.

Unit 6: Diploma only

Unit title:	Working in the health and social care sector.
GLH:	100
Areas of content:	<p>6.1 Job roles, qualifications and skills needed by health and social care workers.</p> <p>6.2 The role of effective communication, co-production, collaboration, teamwork and professionalism in the care sector.</p> <p>6.3 How codes of conduct/practice are adhered to and applied in health and social care settings.</p> <p>6.4 Role of employers in promoting and protecting the rights of the individual.</p> <p>6.5 Safeguarding in practice.</p> <p>6.6 How approaches in settings are used to meet individuals' needs and requirements.</p> <p>6.7 How Welsh legislation impacts practice in health and social care settings</p> <p>6.8 Role of reflection in care settings.</p> <p>It is strongly recommended that teachers teach topic areas 6.3 and 6.7 holistically.</p>
Overview of unit:	<p>In this unit, learners will build on their knowledge and understanding of working in the health and social care sector through classroom teaching and through mandatory sector engagement (minimum 100 hours, which must include 60 hours work placement). Learners will need to keep a reflective diary of their experiences.</p> <p>Please note that the content in 6.1 builds on knowledge gained through unit 1.1.</p> <p>Centres are encouraged to ensure that, where possible, learners experience a minimum of two settings during the sector engagement'</p>
Assessment:	<p>This unit is assessed through a set assignment set by WJEC based on the learners' sector engagement. Learners will be required to investigate a setting/service that provides health and social care services within Wales.</p> <p>Learners will spend 18 hours in total producing the evidence for this assessment, completing the work under supervised conditions within the centre.</p> <p>The reflective diary and sector engagement record from the work placement will also need to be submitted for moderation.</p> <p>This assessment contributes 15% to the overall qualification grade for the diploma. All content may be assessed through any of the three assessment objectives.</p>
Skills development:	It is envisaged that the study of this unit will generate opportunities for the development of skills.

Examples of such opportunities are noted below:

- **communication and literacy:** in their reflective diary
- **digital competence:** through individual online research into the key concepts of the unit
- **planning and organising:** through planning their placement
- **critical thinking and problem solving:** in relating principles and concepts learnt in other units to their work placement
- **creativity and innovation:** in their reflective diary
- **personal effectiveness:** in preparation for assessment.

Unit 6: Working in the health and social care sector.	
Content	Amplification
6.1 Job roles, qualifications and skills needed by health and social care workers.	<p>Learners should know and understand a wide range of job roles within health care and social care.</p> <p>To include:</p> <p>Roles in frontline care: ambulance teams, healthcare support workers, care workers, social workers, medicine, nursing, Allied Health Professionals, activities worker, personal assistant, rehabilitation worker</p> <p>Roles in support functions: estates and facilities, health informatics, managerial, administrator, finance, HR and marketing, cook or kitchen assistant, housekeeper/domestic, driver or transport manager, information advice and assistance worker.</p> <p>Learners should know and understand that some professional roles are regulated and that to be able to practice the worker must:</p> <ul style="list-style-type: none"> • be registered with a regulated body • hold relevant qualifications which might include an undergraduate degree or diploma. <p>Learners should know and understand:</p> <ul style="list-style-type: none"> • that job specific skills are those abilities that allow an individual to competently perform a particular job • the skills required for a minimum of two job roles within the health and social care sector. <p>Resources/sources of information to include:</p> <ul style="list-style-type: none"> • Careers Wales www.careerswales.com • NHS Wales website http://www.weds.wales.nhs.uk/nhs-wales-careers • Social Care Wales Qualification Framework www.socialcare.wales/careers.

<p>6.2 The role of effective communication, co-production, collaboration, teamwork and professionalism in the care sector.</p>	<p>Learners should know and understand the role of effective communication, co-production, collaboration, teamwork and professionalism in the care sector, and be able to give examples of how this has been demonstrated within their sector engagement.</p> <p>To include:</p> <ul style="list-style-type: none"> • effective communication and its role in providing quality care and support to improve well-being outcomes for individuals. Care workers are expected to effectively communicate with individuals to determine their care and support needs and solve any problems in a proactive manner • co-production is one of the main principles of the Social Services and Well-being (Wales) Act 2014. It means working with and involving individuals, their family, friends and carers to make sure their care and support is the best it can be • collaboration is the basis of success in any team. When health and social care providers work in collaboration, individual outcomes and quality of care tend to improve • teamwork in health and social care brings together people with different skills, abilities and talents to provide the best possible care and treatment for individuals • professionalism in the health and social care sector is expected by individuals receiving care and support. <p>Learners should know and understand that effective communication, co-production, collaboration, teamwork and professionalism supports:</p> <ul style="list-style-type: none"> • a high standard of outcome focused care and support • a seamless service between all forms of outcome focused care and support • better working environments for staff and individuals accessing care and support, including the co-production model • improved experience for the individual's carers and families of any individuals accessing person-centred care and support • personal safety of individuals and prevents errors occurring • successful and efficient teamwork.
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<p>6.3 How codes of conduct/practice are adhered to and applied in health and social care settings.</p>	<p>Learners should know and understand why and how workforce regulation and the codes of conduct and practice are adhered to and applied in health and social care settings.</p> <p>To include:</p> <p>Codes of conduct and professional practice:</p> <ul style="list-style-type: none"> • The Code of Professional Practice for Social Care • The Residential Child Care Worker: practice guidance for residential child care workers registered with the Social Care Wales • The Health and Care Professions Council Standards • The Social Care Code of Practice for Employers • NHS Wales Code of Conduct for Healthcare Support Workers in Wales, (currently non-regulatory) • The Code of Practice for NHS Wales Employers (currently non-regulatory) • Practice guidance for social care workers registered with Social Care Wales <p>How codes of conduct/practice are adhered to and applied through:</p> <ul style="list-style-type: none"> • communication to all staff • training to ensure the code is understood • practice and promotion by management • supervision and performance management • complaints and complement services • registration and workforce regulation: fitness to practice investigations and proceedings • regulation and inspection services in inspecting codes of practice/conduct. <p>Learners should know and understand the role and purpose of professional bodies and the benefits of membership to care professionals.</p> <p>To include:</p> <ul style="list-style-type: none"> • professional bodies e.g. British Medical Association(BMA), Royal College of Nursing(RCN), British Association of Social Workers(BASW) • promoting professional standards of practice and ethics • providing information and advice • protecting and supporting workers • providing opportunities for members to network • publishing professional journals • providing career development. <p>Learners should know and understand the purpose of trade unions and the benefits of membership to care workers.</p> <p>To include:</p> <ul style="list-style-type: none"> • why they exist e.g. to provide better working conditions for its members • what they aim to do e.g. to protect and improve employees' pay and conditions of employment.
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<p>6.4 Role of employers in promoting and protecting the rights of the employee.</p>	<p>Learners should know and understand the role of employers in promoting and protecting the rights of employees working within health and social care.</p> <p>To include:</p> <p>How the requirements of the legislation are met through policies, procedures and strategies with reference to:</p> <ul style="list-style-type: none"> • basic employment rights: minimum pay/living wage, sick leave and pay, holiday leave and pay, part time worker's rights • discrimination issues: understanding how to identify and challenge discrimination and harassment (Equality Act 2010) • health and safety: basic principles (Health and Safety at Work Act 2005) • policies, procedures, initiatives and strategies affecting health and well-being, including confidentiality and social media policies (Well-being of Future Generations (Wales) Act 2015, General Data Protection Regulations GDPR). <p>Learners should know and understand that organisations have a duty of care towards their employees with a focus on health and well-being.</p> <p>To include:</p> <ul style="list-style-type: none"> • building a supportive culture which is holistic and comprehensive • tackling the stigma around accessing support services.
<p>6.5 Safeguarding in practice.</p>	<p>Learners should know and understand how safeguarding in practice can be achieved in different settings.</p> <p>To include:</p> <ul style="list-style-type: none"> • ensuring that safeguarding is at the centre of all practice • the importance of value based recruitment and sound induction training of staff • regular reviewing and updating of processes and procedures • making full use of Disclosure and Barring Service (DBS) checks in settings • how feedback from individuals is used in a range of settings in line with Welsh Government policies • how individuals accessing outcome focused provision can live free from harm, abuse and neglect which is paramount to high quality care and support • ensuring an effective complaints systems • through duty to report (whistle blowing). <p>Learners should know and understand that breaching safeguarding procedures and policies could lead to:</p> <ul style="list-style-type: none"> • abuse and neglect for the individuals accessing the care and support • prosecution for the individual who is in breach and/or the organisation/care setting.

<p>6.6 How approaches in settings are used to meet individuals' needs and requirements.</p>	<p>Learners should know and understand how different approaches may be used in care settings to meet individuals' needs and requirements.</p> <p>To include:</p> <ul style="list-style-type: none">• activity based approaches: life story and reminiscence work used with individuals who are living with memory loss or dementia• cognitive behaviour therapy (CBT): talking therapy used to treat individuals with anxiety, depression and grief• behaviour therapy: looks at specific learned behaviours and how the environment influences those behaviours. May help in treating conditions such as eating disorders, self-harm and substance misuse• positive behavioural support: may be used when individuals demonstrate behaviours that challenge.
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<p>6.7 How Welsh legislation impacts practice in health and social care settings</p>	<p>Learners should know and understand how Welsh legislation, regulations and frameworks impacts practice in health and social care settings to achieve desired outcomes.</p> <p>To include:</p> <ul style="list-style-type: none"> • Regulation and Inspection of Social Care (Wales) Act 2016 • Social Services and Well-Being (Wales) Act 2014 (SSWA) • Welsh Language (Wales) Measure 2011 • Mental Capacity Act 2005. <p>Learners should know and understand how health and social care providers in Wales are inspected and regulated to ensure professional standards and guidance are adhered to.</p> <p>Inspectorates and regulators:</p> <ul style="list-style-type: none"> • Care Inspectorate Wales (CIW): register, inspect and act to improve the quality and safety of services • Health Inspectorate Wales (HIW): regulate and inspect NHS services and independent healthcare providers in Wales against a range of standards, policies, guidance and regulations • Social Care Wales (SCW): registration of workers. <p>Learners should know and understand inspection frameworks and what is expected of settings to show positive achievements of well-being goals and outcomes.</p> <p>To include:</p> <ul style="list-style-type: none"> • Care Inspectorate Wales inspection framework • Health Inspectorate Wales inspection framework. <p>Learners should be encouraged to access service inspection reports as these are public documents.</p>
<p>6.8 Role of reflection in care settings.</p>	<p>Learners should know and understand the role of regular reflection/reflective practice in care settings.</p> <p>Reflection on processes, policies and procedures improves practice by ensuring:</p> <ul style="list-style-type: none"> • all individual needs are personalised and met • care workers can build on and improve their practice and contribute to their ongoing learning and professional development • policies, procedures and documentation are updated as required. <p>Learners should know and understand different ways in which reflective practice takes place in care settings.</p> <p>To include:</p> <ul style="list-style-type: none"> • individuals producing a reflective diary • regular team meetings and discussions • observations by senior colleagues • appraisals, supervisions and performance management reviews • awareness, self-reflection and the impact on self. <p>Learners should know and understand models and theories of reflective practice.</p>

	<p>To include:</p> <ul style="list-style-type: none">• Honey and Mumford-first learner is the reflector• Kolb-reflective cycle• Schon – reflection model.
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4 Centre Requirements

Centre and qualification approval

To offer the qualification, centres will need both centre and qualification approval. Please refer to the Consortium website (www.healthandcarelearning.wales) for further information. Centre staff should familiarise themselves with the structure, content and assessment requirements of the qualification before designing a course programme of learning.

Centre staffing

Staff delivering this qualification and marking the internal assessment must be able to demonstrate that they meet the following occupational expertise requirements. They should:

- be occupationally competent or technically knowledgeable in the area for which they are delivering training, and this knowledge must be at least to the same level as the training being delivered
- have recent relevant experience in the specific area they will be assessing
- have credible experience of providing training.

The Consortium will provide training and CPD for delivery staff and centre managers to ensure that training and guidance is standardised across the sector. It is the centre's responsibility that delivery staff attend these events, as appropriate.

5 Delivering, assessing and quality assuring the qualifications

Learner entry requirements

There are no entry requirements for these qualifications. However, centres must ensure that learners have the potential and opportunity to gain the qualifications successfully.

Age restrictions

These qualifications are approved for learners aged 16+. The Consortium cannot accept any registrations for learners under the age of 16.

Initial assessment and induction

An initial assessment of each learner should be made before the start of their programme to identify:

- if the learner has any specific training needs
- support and guidance they may need when working towards their qualifications
- any units they have already completed, or credit they have accumulated which is relevant to the qualifications
- the appropriate type and level of qualifications.

We recommend that centres provide an induction programme so that the learners fully understand the requirements of the qualifications, their responsibilities as a learner, and the responsibilities of the centre.

Sector engagement and work placements

Whilst completing the Diploma qualification, learners are expected to undertake a minimum of **100** hours of sector engagement of which **60** hours must be spent on work-placement. Sector engagement can take place in a variety of different ways, such as guest lectures related to unit content, employer visits, visits to health and social care settings, coaching and mentoring sessions, befriending, buddy schemes, age-appropriate volunteering, etc, organised by health and social care employers. Further information on how sector engagement could be provided, including case studies of good practice, can be found in the associated guidance for teaching. A 'Good Practice Guide to work placements' is also available from the Consortium website at www.healthandcarelearning.wales.

Sector engagement/work placement record and reflective diary

Learners are required to record their sector engagement and work placement experiences in the Sector Engagement and Work Placement Record available from the qualification page of the Consortium website (www.healthandcarelearning.wales). In completing this sector engagement record, learners should concisely summarise the activity undertaken, the date the activity took place and the duration in hours. For guidance, a completed example is provided in the template. The sector engagement

record must be submitted for moderation in line with the arrangements outlined on page 51.

Learners must keep a reflective diary throughout their sector engagement and work placement experience. This should include information on:

- the types of organisations and services that the learner has engaged with and undertaken work placement with
- the types of tasks and activities that the learner has undertaken on a daily basis whilst on work placement
- any problems and obstacles that the learner has encountered and actions they take to overcome them.

Information for learners on the reflective diary, along with a template they can use can be found in the Learner Guide (www.healthandcarelearning.wales).

Learners are allowed to take up to four sides (2 pages) of A4 notes into the assessment environment for Assignment 1 Unit 6 and they may have access to their reflective diary for Assignment 2 Unit 6.

Support materials

A range of resources are available for these qualifications and can be accessed from the Consortium website at www.healthandcarelearning.wales. These include:

- Sample Assessment Materials
- Guidance for Teaching
- Learner Guide
- Centre Administration Guide.

Making entries

The Level 3 Certificate and Diploma in Health and Social Care: Principles and Contexts are unitised qualifications. The certificate is available for first certification in summer 2021. The diploma is available for first certification in summer 2022. Thereafter, the qualifications will be available for certification each summer.

For more information on the entry and certification process, please refer to the current edition of WJEC's Entry Procedures and Coding Information available from the WJEC website at www.wjec.co.uk/exam-officers.

Unit entry

Entry for individual units must be made by entering the relevant unit code. Entries must be submitted no later than 21 February each year.

Qualification entry

Learners will be entered for the qualifications when entering for aggregation (cash-in). Aggregation does not take place automatically; it is necessary to enter the relevant code for aggregation to take place.

Entry codes

	Title	Entry Codes
Unit 1	Principles of care and safe practice within outcome focused person-centred care	
Unit 2	Factors affecting individuals' growth and development across the lifespan and how this impacts on outcomes, care and support needs	Paper/on screen
Unit 3	Promoting the rights of individuals across the lifespan	
Unit 4	Understanding how the human body is affected by common conditions	
Unit 5	Supporting individuals at risk to achieve their desired outcomes	Paper/on screen
Unit 6	Working in the health and social care sector	
Cash-in	Level 3 Certificate in Health and Social Care: Principles and Contexts Level 3 Diploma in Health and Social Care: Principles and Contexts.	

Arrangements for external assessment (Units 2 and 5)

Units 2 and 5 are assessed through external examination. Unit 2 will be available for first assessment in January 2021 and each January and May/June 2021 thereafter. Unit 5 will be available for first assessment in January 2022 and May/June 2022 and each January and May/June thereafter. The external examinations are available on-paper or on-screen. Centres must ensure that they enter candidates using the correct entry code for either the paper or on-screen option.

Centres must follow the Joint Council for Qualifications (JCQ) *Instructions for Conducting Examinations*, a copy of which can be accessed from the JCQ website (www.jcq.org.uk).

Each external examination will:

- consist of a 1 hour and 45-minute paper (which can be taken on paper or on-screen)
- be set and marked by WJEC.
- assess content from each of the topic areas in the unit each series
- include a maximum of 100 marks
- include a balance of short and extended answer questions, based on stimulus material and applied contexts
- assess all three Assessment Objectives each series
- assess all sections of each key topic area over the lifespan of the specification
- align with the agreed % mark ranges for each assessment objective in each version of the examination
- only use the command verbs listed in Appendix B.
- be graded A - E for the certificate and the diploma
- be available in January and May/June series.

Arrangements for non-examination assessment (Units 1, 3, 4 and 6)

Units 1, 3, 4 and 6 are assessed through non-examination assessment (NEA) and centres must follow the Joint Council for Qualifications (JCQ) *Instructions for non-examination assessment*, a copy of which can be accessed from the JCQ website (www.jcq.org.uk). In line with these instructions, centres are required to have in place a non-examination assessment policy; this will be checked as part of the centre and qualification approval process.

There are three stages of non-examination assessment that are controlled:

- setting the assignments
- taking the assignments
- marking the assignments.

The paragraphs below provide an overview of each of these stages. The table on pages 54-56 provides a summary of the arrangements for each of the non-examination assessment.

Setting the assignments

All assignments are set by WJEC.

The assignments for Units 1, 3, 4 and 6 remain the same for the lifetime of the specification and Assessment Packs are available on the www.hclw.wales website for centres to download.

The case studies for Units 1 and the stimulus for Unit 4 will change annually. Assessment Packs will be available through the WJEC secure website from the first Monday in March each year from 2021 onwards. Learners must not have access to the case studies or the stimuli until the start of the assessment. Sample Assessment Materials are available on the www.hclw.wales website.

Taking the assignments

Centres are required to manage and conduct internal assessments in line with the principles outlined in the JCQ document: *Instructions for conducting non-examination assessments*. There are five areas of assignment taking that are controlled: time, resources, supervision, collaboration and resit arrangements.

Time

The maximum amount of time a candidate is allowed to spend on each assignment is indicated on the cover sheet for each assignment. These times refer to work completed under direct supervision in the classroom. Where an assignment includes more than one task, the assignment will also indicate the *approximate* amount of time a candidate should spend on each task. These times are provided to the candidates as guidance. Centres must ensure that candidates are given the full time allowance for the overall assignment.

Resources

Depending on the task, candidates may be allowed access to a range of resources including class notes, the internet and independent research undertaken prior to the assessment starting.

Where candidates are allowed to take notes into the assessment environment. The assignment will specify the parameters for the notes. In all cases, notes **must not** include pre-prepared answers to the tasks.

All notes used by candidate must be retained by the centre and must be submitted for review as part of the moderation process.

The teacher/assessor is responsible for reviewing notes that learners intend to take into the assessment environment and making sure that they are in line with the requirements above. If the teacher/assessor has any concerns regarding the authenticity of the notes they should stop the assessment from taking place and follow their own internal procedures for dealing with cases of suspected malpractice.

Centres should refer to the WJEC guidance *Malpractice-a guide for centres and the JCQ suspected malpractice in examinations and assessments policies and procedures* if they are unsure how to proceed.

Supervision

Candidates' work must remain within the centre at all times and must be stored securely between timetabled sessions.

Teachers may provide guidance and support to candidates to ensure that they have a clear understanding of the requirements of the NEA assignments and the associated marking criteria.

Once work is underway, feedback must be limited to general advice on what needs to be improved. Teachers must not provide specific guidance on how to make these improvements.

Once the assignment is finished and the final assessment made, no further amendments may be made. The time spent working on each NEA assignment should be recorded by the teacher as a record and this may be requested by WJEC in addition to the work submitted for moderation. The record should be monitored by the centre to ensure that candidates spend the correct number of specified hours on each assignment.

Authentication

The teacher is responsible for informing candidates of WJEC regulations concerning malpractice. Candidates must not take part in any unfair practice in the preparation of work for these qualifications.

Candidates must understand that to present material copied directly from books or other sources without acknowledgement will be regarded as deliberate deception. Centres must report suspected malpractice to WJEC if the candidate has signed the declaration of authentication form.

It is important that NEA work is rigorously monitored by centres to ensure that candidates' work is their own. Centres should monitor candidates' work by:

- keeping a careful record of progress during the timetabled sessions
- carefully considering whether the written evidence submitted is characteristic of the candidates' ability/attainment

- keeping work secure in the centre once the evidence (i.e. the report and the supportive evidence) is handed in
- ensuring work is not returned to the candidate to make changes.

All candidates are required to sign that work submitted is their own and teachers are required to confirm that the work is solely that of the candidate concerned and was conducted under the required conditions.

Collaboration

Candidates must not work together on any of their NEA assignments.

Unit 1 Principles of care and safe practice within outcome focused person-centred care (Certificate and Diploma)		
Task	Summary of task and evidence to be submitted	Controls to be applied
1	<p>Candidates are required to produce a written report (maximum 3,500 words) based on a chosen case study.</p> <p>Candidates will select the case study from a choice of two but must not access the case study until the start of the assessment.</p>	<p>Time: Approximately 14 hours</p> <p>Resources: Candidates may have access to ICT software and class notes. Candidates must not have access to the internet.</p> <p>Supervision: Candidates must be supervised throughout.</p> <p>Collaboration: This is an individual task. Group work is not allowed.</p> <p>Feedback: Candidates cannot be given feedback on the evidence produced until it has been marked.</p>
2	<p>Candidates are required to produce an information pack (maximum 1,500 words) based on the setting referred to in their chosen case study.</p>	<p>Time: Approximately 6 hours</p> <p>Resources: Candidates may have access to ICT software and class notes. Candidates must not have access to the internet.</p> <p>Supervision: Once the task commences, candidates must be supervised throughout.</p> <p>Collaboration: This is an individual task. Group work is not allowed.</p> <p>Feedback: Candidates cannot be given feedback on the evidence produced until it has been marked</p>

Unit 3: Promoting the rights of individuals across the life span (Certificate and Diploma)		
Task	Evidence to be submitted	Controls to be applied
1	<p>Candidates are required to produce a podcast, a presentation or a video. (Maximum 5,000 words or a recording of no longer than 10 minutes)</p>	<p>Time: Approximately 20 hours</p> <p>Resources: Candidates may have access to ICT software and class notes. Candidates may have access to the internet.</p> <p>Supervision: Once the task commences, candidates must be supervised throughout.</p> <p>Collaboration: The task is an individual task. Group work is not allowed.</p> <p>Feedback: Candidates cannot be given feedback on the evidence produced until it has been marked.</p>

Unit 4: Understanding how the human body is affected by common conditions (Diploma only)		
Task	Evidence to be submitted	Controls to be applied
1	<p>Candidates are required to write an article and produce an infographic.(Maximum 3,000 words including the infographic)</p> <p>Candidates must not have access to the stimuli until the start of the assessment.</p>	<p>Time: Approximately 15 hours</p> <p>Resources: Candidates may have access to ICT software and class notes. Candidates must not have access to the internet.</p> <p>Supervision: Candidates must be supervised throughout.</p> <p>Collaboration: This is an individual task. Group work is not allowed.</p> <p>Feedback: Candidates cannot be given feedback on the evidence produced until it has been marked.</p>

Unit 6: Working in the health and social care sector (Diploma only)		
Task	Evidence to be submitted	Controls to be applied
1	Candidates are required to produce an investigation (maximum 5000 words)	<p>Time: Approximately 18 hours</p> <p>Resources: Candidates may have access to ICT software, research notes, sector engagement record and reflective diary produced during their sector engagement and work placement. Candidates may have access to the internet to undertake independent research prior to the task commencing. Once the task commences, candidates must not have access to the internet.</p> <p>Supervision: Candidates may undertake independent research unsupervised. Once the task commences, candidates must be supervised throughout.</p> <p>Collaboration: This is an individual task. Group work is not allowed.</p> <p>Feedback: Candidates cannot be given feedback on the evidence produced until it has been marked.</p>

Marking the assignments

Units 1, 3, 4 and 6 must be internally assessed and marked in line with the mark scheme provided with the assignments.

All assignments are externally moderated by WJEC. External moderation will be available in the summer series only.

Internal standardisation and moderation

Where there is more than one teacher in a centre, work from all teaching groups must be standardised internally. This is designed to ensure that the final assessment reflects a single agreed standard for all teaching groups involved at the centre.

Assessment grids and teacher annotations

When assessing the written evidence for each assessment, teachers should study the NEA mark grids and bands, which are designed to present a system that links the assessment objectives to marks and helps to discriminate clearly between varying levels of achievement.

Teachers are required to record separate marks for each section in the spaces provided on the mark sheet, to total the overall mark in the box provided and to make an overall summative comment.

Teacher annotations within the body of the written evidence, whilst not mandatory, are very useful to show where and why the marks have been awarded.

Examples of NEA will be issued by WJEC to help centres identify the quality of the work associated with various mark bands. These materials are intended for the use of internal assessors of NEA only and must not be shared with candidates.

Submission of marks and external moderation

Centres need to submit marks for NEA work online by a specified date in May of the year when the work is to be submitted for moderation. When the marks have been submitted to WJEC, the system will identify the sample of candidates whose work is selected for moderation.

Only the evidence from the candidates selected for the sample should be submitted. All other candidates' work must be retained at the centre. The coversheet must be signed by both the candidate and the teacher.

All candidates' work, not just the sample, must be authenticated internally by signing a coversheet.

Further details on the external moderation arrangements can be found in the most recent version of WJEC's Internal Assessment Guide, a copy of which can be found on the WJEC website (www.wjec.co.uk/exam-officers).

Centre feedback

Centres will receive detailed feedback from the moderation process in the form of an electronic report.

Resit arrangements

Candidates may resit each internally assessed unit once only. If a candidate chooses to resit a unit, they must undertake a new assignment based on the case studies released for the series in which the resit takes place. If a candidate chooses to resit Unit 6, they may use the same work experience placement as the basis for resitting Assignment 2. The resit must be completed within the same levels of control. Candidates cannot improve previously submitted work.

Marks for NEA may be carried forward for the life of the specification. If a candidate resits an NEA (rather than carrying forward the previous NEA mark), it is the higher mark that will count towards the overall grade.

If a candidate has been entered but is absent for a unit, the absence does not count as an attempt.

Grading, awarding and reporting

Unit Grades

Unit achievements are graded A - E. Unit results are reported on a uniform mark scale (UMS) with the following grade equivalences:

	Unit	Assessment	Total UMS	UMS grade boundaries				
				A	B	C	D	E
1	Principles of care and safe practice within outcome focused person-centred care	Internal	100	80	70	60	50	40
2	Factors affecting individuals' growth and development across the lifespan and how this impacts on outcomes, care and support needs	External	200	160	140	120	100	80
3	Promoting the rights of individuals across the lifespan	Internal	100	80	70	60	50	40
4	Understanding how the human body is affected by common conditions	Internal	80	64	56	48	40	32
5	Supporting individuals at risk to achieve their desired outcomes	External	200	160	140	120	100	80
6	Working in the health and social care sector	Internal	120	96	84	72	60	48

Grade descriptors

The following grade descriptors are provided to give a general indication of the standards of achievement likely to have been shown by learners awarded particular grades for assessment. The descriptors must be interpreted in relation to the content specified in the specification; they are not designed to define that content. The grade awarded will depend on the number of marks awarded; these are intended to give a general indication of standards. Shortcomings in some aspects of the assessments may be balanced by better performances in others.

E grade descriptor

Learners demonstrate basic knowledge of a range of key principles, concepts, values and challenges issues that are relevant to health and social care. Learners apply limited knowledge and understanding of health and social care principles and contexts to sector-related issues. Learners collect information using given techniques and use a limited range of relevant information sources. They carry out some basic analysis of sector-related issues and problems. Learners evaluate evidence to draw basic conclusions about relevant sector-related issues. Learners use written communication which is adequate to convey meaning but which may be expressed in a non-specialist way.

C grade descriptor

Learners demonstrate clear knowledge of key principles, concepts, values and challenges that are relevant to health and social care and have gained a sound understanding of the principles and purpose of the sector and the contexts in which services are offered. Learners can apply knowledge, understanding and skills to a range of sector-related issues. Learners collect information independently and use a range of relevant information sources. They carry out some analysis of sector related issues and problems. Learners evaluate evidence to draw valid conclusions about relevant sector-related issues. Learners use written communication which conveys meaning with use of some specialist vocabulary.

A grade descriptor

Learners demonstrate a depth of knowledge of key concepts, values and issues that are relevant to health and social care that shows thorough understanding of the sector and the contexts in which services are offered. Learners apply knowledge, understanding and skills accurately and independently to a range of sector-related issues. Learners undertake research using a range of techniques and use a wide range of relevant information to analyse sector-related issues and problems. Learners evaluate evidence to draw valid conclusions and make reasoned judgements about sector-related issues. Learners use written communication which is well-structured and clearly expressed, with appropriate specialist vocabulary.

Grading the qualifications

The Level 3 Certificate in Health and Social Care: Principles and Contexts is graded as A* - E.

The Level 3 Certificate and Diploma in Health and Social Care: Principles and Contexts is graded as A*A* - EE.

The qualification grade will be based on the overall UMS mark and learner achievements in all units. To achieve a qualification grade, learners must achieve the minimum UMS required for the qualification grade.

Results not attaining the minimum standard for the award will be reported as U (unclassified).

The grade equivalencies for the Level 3 Certificate in Health and Social Care Principles and Contexts qualification are:

Grade	Max	A*	A	B	C	D	E
UMS	400	360	320	280	240	200	160

An A* grade will be awarded to Learners who achieve grade A overall and also achieve 90 per cent or more of the maximum uniform mark.

The grade equivalencies for the Level 3 Diploma in Health and Social Care Principles and Contexts qualification are:

Grade	Max	A*A*	A*A	AA	AB	BB	BC	CC	CD	DD	DE	EE
UMS	800	720	680	640	600	560	520	480	440	400	360	320

An A* grade will be awarded to Learners who achieve grade A overall and also achieve 90 per cent or more of the maximum uniform mark.

Post-results services

Following the publication of results for each examination series, WJEC offers a range of post-results services relating to reviews of marking and moderation and access to examination scripts. Information on post-results services can be found on the Consortium website.

Resits

Learners will be allowed one resit for each external examination with the higher grade contributing to the award of the qualification. Learners may resit the entire qualification multiple times.

Marks for NEA may be carried forward for the life of the specification. If a candidate resits an NEA unit (rather than carrying forward the previous NEA mark), it is the higher mark that will count towards the overall grade.

Appendix A Command Words

Level 3 Health and Social Care: Principles and Contexts; External Assessments		
AO	Command	Requirements of response
AO1	Define	Give the exact meaning of
	Describe	Provide characteristics/main features or a brief account
	Give	Provide/name/select/recognise brief facts or examples (from a given source or from recall)
	Identify	As for 'give'
	List	As for 'give'
	Name	As for 'give'
	Outline	Set out the main points/provide a brief description or main characteristics
	State	As for 'give'
	Suggest	Put forward an idea, reason or course of action
	Summarise	Select and present the main points (without detail)
AO	Command	Requirements of response
AO2	Apply	Use knowledge and understanding of a theory or concept and relate it to a specified context
	Calculate	Work out from given facts, figures or information
	Construct	Create a framework or argument
	Explain	Provide details and reasons for how and why something is the way it is
	Clarify	As for 'explain'
	Illustrate	Use a diagram or words to make clear how a concept or theory works in a particular context
	Interpret	Translate information provided into another form
	Show	As for 'illustrate'
	Use	Apply the information provided to a particular theory or concept
AO	Command	Requirements of response
AO3	Advise	Suggest a proposal or course of action based on supported reasons
	Analyse	Examine an issue in detail/how parts relate to whole, to explain and interpret
	Assess	Make an informed judgement
	Compare	Identify and comment on/explain similarities
	Consider	Review and respond to given information
	Contrast	Identify and comment on/explain differences
	Discuss	Examine an issue in detail in a structured way, taking into account different ideas
	Distinguish	Identify and explain the differences between ideas or topics
	Evaluate	Make a judgement by weighing up evidence to come to a conclusion
	Examine	Investigate closely, in detail
	Justify	Support a case with evidence/argument
	Recommend	Put forward a proposal based on reasons/evidence