



# Level 3 Diploma in Health and Social Care

Objective of the qualification:

- It should be available to everyone who is capable of reaching the required standards
- It should be free from any barriers that restrict access and progression
- It should give equal opportunities for all those wishing to access the qualifications.

# Contents

Entry Requirements	4
Progression	4
Level 3 Diploma in Health and Social Care	5
Unit Specifications	6
The Health and Social Care Sector	7
A Person Centred Approach to Health and Social Care	11
Academic and Research Skills for Health and Social Care	16
Communication Skills for Health and Social Care	20

## Entry Requirements

This qualification is designed for learners who are typically aged 16 and above.

The policy regarding access to our qualifications is that:

- they should be available to everyone who is capable of reaching the required standard
- they should be free from any barriers that restrict access and progression
- there should be equal opportunities for all those wishing to access the qualifications.

## Progression

On successful completion of a Level 3 Diploma in Health and Social Care there are a number of progression opportunities.

Learners may progress to:

- a level 4 qualification such as the Level 4 Extended Diploma in Health and Social Care
- a degree programme

### Level 3 Diploma in Health and Social Care

The Level 3 Diploma in Health and Social Care is a 60 credit qualification. Learners must complete the four mandatory units totalling 60 credits.

Unit Title	Level	Credit	GLH	Unit Code
<b>Mandatory Units</b>				
The Health and Social Care Sector	3	15	90	T/615/2001
A Person Centred Approach to Health and Social Care	3	15	90	H/615/1989
Academic and Research Skills for Health and Social Care	3	15	90	A/615/2002
Communication Skills for Health and Social Care	3	15	90	J/615/2004
<b>Total</b>		<b>60</b>	<b>360</b>	

The Total Qualification Time is 600 hours

## Unit Specifications

### Unit Format

Each unit is presented in a standard format. This format provides guidance on the requirements of the unit for learners, tutors, assessors and external verifiers. See also the guidance on page 6.

Each unit has the following sections:

### Unit Title

The unit title reflects the content of the unit. The title of each unit completed will appear on a learner's statement of results.

### Unit Aims

The unit aims section summarises the content of the unit.

### Unit Code

Each unit is assigned a unit code that appears with the unit title on the Ofqual Register of Regulated Qualifications.

### Level

All units and qualifications have a level assigned to them which represents the level of achievement. The level of each unit is informed by the level descriptors.

### Total Qualification Time (TQT)

TQT represents the total time required for a learner to complete a qualification. There is guidance on each unit as to the total time for each unit.

### Learning Outcomes

The learning outcomes set out what a learner is expected to know, understand or be able to do as the result of the learning process.

### Credit Value

The credit value is the number of credits that may be awarded to a learner for the successful achievement of the learning outcomes of a unit.

### Assessment Criteria

The assessment criteria describe the requirements a learner is expected to meet in order to demonstrate that the learning outcome has been achieved. Command verbs reflect the level of the qualification e.g. at level 4 you would see words such as analyse and evaluate

### Unit Indicative Content

The unit indicative content section provides details of the range of subject material for the programme of learning for the unit.

<b>The Health and Social Care Sector</b>			
<b>Unit aims</b>	To develop understanding of the structure of the health and social care sector, how legislation and codes of practice impact on provision and the importance of multi-disciplinary working		
<b>Unit level</b>	3		
<b>Unit code</b>	H/615/1989		
<b>GLH</b>	90		
<b>TQT</b>	150		
<b>Credit value</b>	15		
<b>Unit grading structure</b>	Pass/Merit/Distinction		
<b>Assessment guidance</b>	To achieve this unit, learners must achieve the learning outcomes and meet the standards specified by the assessment criteria for the unit. Additional assessment guidance is provided on the ATHE sample assignment brief		
<b>Learning outcomes. The learner will:</b>	<b>Assessment criteria. The learner can:</b>		
	<b>Pass</b>	<b>Merit</b>	<b>Distinction</b>
1. Understand the organisational structure of the health and social care sector	1.1 Explain the overall structure of the health and social care sector 1.2 Explain the role of health and care regulators and watchdogs 1.3 Explain the roles and responsibilities of staff in the structure of a named health and social care organisation	1M1 Explain the continuing professional development needed for progression through different career pathways	1D1 Evaluate the structure of a named organisation in the health and social care sector
2. Investigate how current legislation and professional codes of practice impact on health and social care provision	2.1 Explain how current legislation impacts on health and social care provision in a chosen setting 2.2 Explain how the UK's Care Certificate Standards can promote best	2M1 Explain the relationship between health values and care values	

	practice in the care sector		
3. Understand the importance of multi-disciplinary working in health and social care	<p>3.1 Explain the benefits and challenges of working in partnership with others in the health and social care sector</p> <p>3.2 Explain how the health sector and social care sector work together</p> <p>3.3 Describe examples of best practice of health and social care services working together</p>	3M1 Explain the role of learning and development in promoting multi-disciplinary work in the health and social care sector	3D1 Assess the potential consequences of health and social care services not working in partnership



## Indicative Content

### **LO1 Understand the organisational structure of the health and social care sector**

- Overarching organisations: Sector Skills Councils; Professional Bodies
- Key elements of health care provision: statutory, voluntary, private and informal provision; NHS; strategic health authorities; Primary Care Trusts; primary healthcare; NHS trusts; secondary healthcare; integrated care; mental health trusts; children's trusts.
- Key elements of social care provision: statutory, voluntary, private and informal provision; types of provision e.g. residential care, domiciliary care, day care, child care, safe guarding provision
- Lines of responsibility direct and dotted, span of control, hierarchical, matrix, project based structures
- Regulators e.g. Care Quality Commission, NHS Improvement, General Medical Council, Nursing and Midwifery Council, General Dental Council, Health and Care Professional Council; Health watchdogs e.g. Health Watch England, National institute for Health and Care Excellence
- The roles of staff in a named organisation e.g. doctors, nurses, social workers, youth workers, care managers, administrative staff, therapists, dieticians.
- Responsibilities: providing appropriate aids, following policies and procedures, diagnosing medical conditions and providing treatment, providing personal care, assessment, planning for care support and rehabilitation, helping individuals to express their needs, dealing with issues, understanding the implications of beliefs, cultures and preferences of users.
- Requirements may include education, qualifications, previous experience, knowledge base e.g. health and safety, human development, anatomy, physiology and health; personal skills and attributes

### **LO2 Investigate how current legislation and professional codes of practice impact on health and social care provision**

- Current legislation and policies: knowledge of current legislation; importance of adhering to legislation e.g. protection for carer and individuals, setting standards, consequences
- Care Certificate Standards: provides framework for workers, skills and knowledge required to do the job, sets standards to work to, used for entry and progression within job
- Health values: work together for patients, respect and dignity, commitment to quality of care, compassion, improving lives, everyone counts

### **LO3 Understand the importance of multi-disciplinary working in health and social care**

- Benefits of multi-disciplinary working: continuity of care, holistic care, effective and efficient use of resources
- Challenges e.g. finance and resource implications, communication, local and national differences
- Potential consequences: individual harm due to 'slipping through the net'; financial cost; inappropriate use of resources; legal implications
- Examples of good practice: Brighton and Hove's community engagement plan; Working together for Change (WtFC)
- Active Reading: reading aloud, paraphrase, summary, synthesis
- Partnership working: methods of working e.g. joint planning, working across all levels, working across communities, different teams engaging with each other as an integral part of working; case work, shared information, joint meetings, sharing best practice; coaching and mentoring; multi-disciplinary team
- Examples of good practice: centres of excellence; inspection reports
- Sources of best practice: inspection reports, centres of excellence, government reports e.g. Department of Health, Department for Communities and Local Government, Care Quality Commission, NHS England, local areas e.g. Torbay and South Devon NHS Foundation Trust

<b>A Person Centred Approach to Health and Social Care</b>			
<b>Unit aims</b>	To develop an understanding of the importance of a person centred approach in the health and social care sector and how it is applied in practice in different health and social care settings,		
<b>Unit level</b>	3		
<b>Unit code</b>	T/615/2001		
<b>GLH</b>	90		
<b>TQT</b>	150		
<b>Credit value</b>	15		
<b>Unit grading structure</b>	Pass/Merit/Distinction		
<b>Assessment guidance</b>	To achieve this unit, learners must achieve the learning outcomes and meet the standards specified by the assessment criteria for the unit. Additional assessment guidance is provided on the ATHE sample assignment brief		
<b>Learning outcomes. The learner will:</b>	<b>Assessment criteria. The learner can:</b>		
	<b>Pass</b>	<b>Merit</b>	<b>Distinction</b>
1. Understand person-centred values within the health and social care sector	1.1 Explain the importance of person-centred values when working in health and social care 1.2 Describe how person-centred care has developed 1.3 Explain challenges associated with a person-centred approach		1D1 Recommend ways to overcome challenges associated with a person-centred approach
2. Understand equality, diversity and discrimination in relation to person-centred approaches	2.1 Explain the concepts of equality, diversity and discrimination in a health and social care context 2.2 Describe legislation on equality, diversity and discrimination that promotes a person-centred approach 2.3 Describe sources of information,		1D1 Assess the effectiveness of national initiatives in promoting anti-discriminatory practice in a health and social care context

	advice and support about equality, diversity and discrimination that is available for individuals using health and social care services		
3. Understand how person-centred care is applied in practice in health and social care settings	<p>3.1 Explain the skills and personal qualities needed to develop relationships with individuals in a health and social care setting.</p> <p>3.2 Explain how a health and social care worker can promote an individual's independence</p> <p>3.3 Describe situations where the health and social care worker can ensure the privacy and dignity of individuals</p>	3M1 Assess the ethical issues involved in applying a person centred approach	
4. Be able to review own person-centred skills	4.1 Review own person centred skills	4M1 Identify opportunities to enhance own strengths and address weaknesses in using person-centred skills	4D1 Create a plan to improve own person centred skills

## Indicative Content

### LO1 Understand person-centred values within the health and social care sector

- Terminology used for person-centred care e.g. patient-centred care, personalisation, relationship-centred care, mutuality
- Person-centred values:
  - individuality, independence, privacy, partnership, choice, dignity, respect, rights, compassionate
- Importance of person-centred values:
  - Individual e.g. maintain individuality, personal rights, empowering individuals, inclusion, participation in decision making about own care
  - Provision of services: improve quality and person's experience, help provide the care required, help individuals become more active in caring for themselves, reduce pressure on services
- Development of person-centred care
  - Use of terminology by Carl Rogers in the early 60s
  - Late 70s George Engel promoted a move from a medical to social model of health
  - 2000 NHS Plan highlighted need for personalisation and coordination
  - 2001 – 'patient centredness' included as an aim of health care quality
  - 2008 – Lord Darzi's report on High Quality Care for All
  - 2010 the Francis inquiries into failings in care
  - 2012 Health and Social Care Act imposes a legal duty for NHS England to involve patients in their own care
  - Vision 2020 Scotland focuses on self-management
  - Welsh White paper focuses on 'The Listening Organisation'
- Challenges:
  - Respecting individual choice when other options may be more appropriate for the interests of the person
    - Effective communication
  - Experience of staff and training provision
  - Historical perspective of institutional care including use of medical model of care i.e. focus on medical rather than social model of care
  - Organisational issues e.g. safety and financial targets, lack of co-ordination of services

### LO2 Understand equality, diversity and discrimination in relation to person-centred approaches

- Equality e.g. treated fairly, right to be respected as an individual, right to dignity, protected from harm, access to personal information, able to communicate in a form that is most appropriate for the individual, care provided meets their individual needs

- Diversity e.g. individual differences, valued
- Discrimination e.g. stereotyping, abuse, bullying, infringement of individual rights, prejudice, labelling
- Legislation e.g. Human Rights Act 1998, Disability Discrimination Act 2005, Data Protection Act 1998, Nursing and Residential Care Homes Regulations 1984 (amended 2002), Care Standards Act 2000, The Children Act 2004, Mental Capacity Act 2005, Age Discrimination Act 2006, Equality Act 2010), The Convention on the Rights of the Child 1989, The Children Act 2004, Race Relations (Amendment) Act 2000
- Sources of information e.g. medical practice web sites, policies e.g. access to records, confidentiality, equal opportunity policies
  - Advice e.g. social worker, health worker, medical practice
  - Initiatives e.g. policies and codes of practice, values of care, staff recruitment policies, learning and development of staff
  - Practical application e.g. patient admission questionnaire

### **LO3 Understand how person-centred care is applied in practice in health and social care settings**

- Effective communication skills e.g. appropriate use of volume, tone of voice, appropriate for individual needs e.g. hearing or visual difficulties, the 6 Cs, empathy, observation, listening, managing difficult situations, confidence, negotiation, clarifying and asking questions, sense of humour.
- Ways to support individuals
  - address them by name irrespective of levels of consciousness
  - present range of options
  - provide relevant information
  - provide opportunity to ask questions
  - talk with others
  - respect their decision
  - enable them to develop skills related to their decision e.g. if they develop skills in self-care and have appropriate equipment they may not need to make choices at this time
- Initiatives e.g. House of Care, Person and Family-Centred Care, Schwartz Rounds
- Appropriate environments to discuss personal and sensitive information e.g.

- the individual is dressed and covered appropriately to maintain dignity
- separate room or area to discuss personal issues
- use of screens to ensure privacy
- respecting an individual's personal space
- Meaning of the terms 'privacy' and 'dignity' within a health and social care context
- Opportunities to promote privacy and dignity:
  - Personal hygiene routines
  - Medical procedures
  - Daily routine e.g. support required at mealtimes
- Maintaining confidentiality of information including:
  - Personal information and history
  - Sexual orientation
  - Beliefs
  - Medical status
- Types of choices including:
  - day-to- day routines such as choice of food, clothing, what to do
  - long term choices e.g. where to live, support available, medical procedures
- Ethical considerations conflict of interests, balance between meeting needs and level of resources, promoting individual choice whilst minimising risk, confidentiality and sharing information.

#### **LO4 Be able to review own person-centred skills**

- Identify and explain strengths and weaknesses using personal reflection and feedback from others.
- Opportunities to enhance skills e.g. voluntary work to gain experience, training, qualifications, observing others, discussions with professionals
- Plan to build on identified strengths and address areas for development. Plan is realistic with stated actions, timescales and measures to assess progress. Methods to obtain feedback on progress.

<b>Academic and Research Skills for Health and Social Care</b>			
<b>Unit aims</b>	To develop academic and research skills and the language skills needed to be able to formally present academic research, both in writing and orally.		
<b>Unit level</b>	3		
<b>Unit code</b>	A/615/2002		
<b>GLH</b>	90		
<b>TQT</b>	150		
<b>Credit value</b>	15		
<b>Unit grading structure</b>	Pass/Merit/Distinction		
<b>Assessment guidance</b>	To achieve this unit, learners must achieve the learning outcomes and meet the standards specified by the assessment criteria for the unit. Additional assessment guidance is provided on the ATHE sample assignment brief		
<b>Learning outcomes. The learner will:</b>	<b>Assessment criteria. The learner can:</b>		
	<b>Pass</b>	<b>Merit</b>	<b>Distinction</b>
1. Be able to assess own academic competence in order to conduct research	1.1 Assess own academic strengths and weaknesses including English language skills 1.2 Set targets for improvement using the self-assessment	1M1 Develop a plan to show how targets will be achieved	
2. Know how to research information using primary and secondary methods	2.1 Describe the process for carrying out primary research from different sources 2.2 Outline the process for carrying out secondary research from different sources		2D1 Analyse with examples what constitutes good practice in primary and secondary research
3. Be able to take effective notes from a variety of sources	3.1 Collate key points of information from a variety of sources using active listening skills and reading strategies		



	3.2 Summarise the information using different techniques		
4. Be able to plan and draft a piece of research	4.1 Create a plan for research on a chosen topic in Health and Social Care 4.2 Draft a piece of research work using appropriate reference techniques	4M1 Use own review and feedback from tutor to improve draft work	
5. Be able to produce the final piece of academic work	5.1 Produce academic work to a professional standard using the existing draft	5M1 Present academic work orally at a professional standard to an audience	5D1 Present academic work at a professional standard to an audience and discuss the content of the work
6. Be able to reflect on own academic progress	6.1 Reflect on own academic progress including, development of academic skills including English language skills 6.2 Develop action plan for further improvement		

## Indicative Content

### LO1 Self-assessment of academic competency

- Academic competences: reading, writing, speaking, listening, reasoning,
- Self-assessment: Academic English ability (oral and written), academic competencies, personal skills and qualities, personal skills for academic work (time management, initiative, perseverance flexibility, responding positively to change and feedback); strengths and weaknesses.
- Targets: Specific, Measurable, Achievable, Realistic and Timed (SMART), short and long term
- Plan: for improvement (revisit and update at regular intervals), with targets, timescales, clarity of tasks

### LO2 Research methods

- Primary research: questionnaires (design of questionnaires, avoiding leading questions, gathering qualitative and quantitative data, issues of bias and analysis), focus groups (design of questions, timing; number of participants, balance of group); interviews (design of questions)
- Secondary research: desk research; making notes, recording sources; collating information, evaluation of sources, citation and reference lists

### LO3 Be able to take effective notes from a variety of sources

- Taking notes: use of acronyms, symbols and shorthand.
- Active Reading: reading aloud, paraphrase, summary, synthesis
- Active Listening skills: acknowledging, eye contact, body language, concentrating and understanding what is being said,
- Reviewing notes: re-reading, checking understanding, clarifying/expanding

### LO4 Be able to plan and draft a piece of research

- Create a plan: check understanding of the brief and, in particular, the use of action words, check deadline, plan research methods, schedule time, set SMART objectives, review plan
- Drafting work: avoiding plagiarism, referencing, personal organisation
- Reviewing: editing, proof reading

### LO5 Produce academic work\*

- Academic work of professional standard: written work that meets brief, good standard of English, demonstrates referencing skills, reviewed and edited
- Presenting work orally to professional standard: planning and preparation, use of technology; support materials/aids, use of verbal and non-verbal skills
- discuss content of work: with peers and supervisors/academic staff, demonstrate depth of knowledge

## LO6 Review work\*

- Academic progress: evaluate content of own work, own skills development, Academic English ability, academic competencies, personal skills and qualities, personal skills for academic work (time management, initiative, perseverance flexibility, responding positively, to change and feedback); strengths and weaknesses.
- Action plan: for academic development, for personal development

\* It is envisaged that the Academic and Research Skills unit would be assessed through the submission of a portfolio of work that demonstrates the preparation for an extended project on a topic in an aspect of health and social care for example, alongside the actual final piece of writing on the topic.

Examples may include:

- A review of health and social care services in the local community – how well does it meet the needs of the local population or specific population e.g. child care for working parents
- Health and social care issues in the local community e.g. impact of proposed closure of local care home
- Changes to care in the community over the last ten years
- A review of the effectiveness of a local or national health initiative
- Specific topics such as child carers, support available for those with dementia or life threatening illness
- Health promotion campaigns e.g. Mental health awareness week

<b>Communication Skills for Health and Social Care</b>			
<b>Unit aims</b>	To develop knowledge and understanding of communication in health and social care organisations and to develop personal communication skills		
<b>Unit level</b>	3		
<b>Unit code</b>	J/615/2004		
<b>GLH</b>	90		
<b>TQT</b>	150		
<b>Credit value</b>	15		
<b>Unit grading structure</b>	Pass/Merit/Distinction		
<b>Assessment guidance</b>	To achieve this unit, learners must achieve the learning outcomes and meet the standards specified by the assessment criteria for the unit. Additional assessment guidance is provided on the ATHE sample assignment brief. Learners will need to demonstrate their understanding by using examples from organisations in the health and social sector and complete work to show that they can communicate effectively to the specified standards.		
<b>Learning outcomes. The learner will:</b>	<b>Assessment criteria. The learner can:</b>		
	<b>Pass</b>	<b>Merit</b>	<b>Distinction</b>
1. Know how health and social care organisations communicate	1.1 Outline the principles of effective communication 1.2 Describe communication models, methods and systems used in health and social care organisations 1.3 Explain the benefits of both informal and formal communication systems 1.4 Explain how technology is used for different types of communication	1M1 Propose solutions to the barriers to effective communication in health and social care	1D1 Evaluate how different uses of technology can enhance and/or detract from good communication in health and social care organisations
2. Be able to interact orally with individuals in a health and social care setting	2.1 Use different styles and methods of oral communication to meet the needs of different individuals	2M1 Use appropriate methods including technology and other aids to present information orally	

	2.2 Demonstrate appropriate listening skills		2D1 Manage and facilitate a question and answer session to demonstrate subject knowledge and assess effectiveness of own oral communication skills
3. Be able to communicate information in writing	3.1 Explain the uses of different forms of written communication in a health care setting 3.2 Communicate information using appropriate written styles and methods	3M1 Use appropriate technology and supporting graphs, diagrams and/or artwork to support written communication	3D1 Evaluate examples of different forms of actual written communication found in health care settings

## Indicative Content

### LO1 How health and social care organisations communicate

- Communication models: sender, message, transmission of message, receiver, response from receiver.
- Communication systems: processes used to communicate e.g. Royal Mail for a letter, skype/webinars for remote meetings, packages such as Microsoft or Gmail for email
- Communication methods: Informal: nonverbal (gestures, postures, touch, use of time/space, dress/personal grooming; facial expressions and eye movement); verbal (oral, visual (posters, diagrams charts); face to face (meetings,) electronic use of technology (oral and written); vertical (upward and downward) horizontal; internal and external; formal oral and written (presentations, discussions, reports, memos, meetings, intranet)
- Principles of effective communication: clarity of language and message (non-ambiguous), choice of channel, timing, listening to response
- Use of technology: social media; email, web, webinars, presentation software, e.g., Powerpoint, Prezi
- Barriers to effective communication: filtering, language, poor listening, emotions, cultural diversity, inconsistent nonverbal cues, background noise, information overload, complexity, lack of trust, wrong choice of channel, personal conduct and appearance

### LO2 Present information orally

- Styles and methods of oral communication: conversation/dialogue, formal presentation, discussion groups, interviews; formal and informal; use of verbal and non-verbal communication to build rapport, adapting communication for different audiences
- Different audiences: colleagues, individuals, families, community groups
- Present information: plan formal presentation, use of technology, presentation aids and software (e.g. Powerpoint, Prezi), question and answer
- Respond to questions: demonstrate subject knowledge, use of language, use of verbal and non-verbal communication, adapting communication for audience

### LO3 Communicate information in writing

- Written styles and methods: formal/academic report, informal report, letters, emails; formal structure of materials (contents pages, footnotes, referencing, bibliography); use of software to enhance communication; use of images, graphs and tables to enhance communication completing patient records, writing for different audiences eg individuals and their families